

BS 30417:2025

**Provision of inclusive personal
protective equipment (PPE) – Guide**

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Foreword

Publishing information

This British Standard is published by BSI Standards Limited, under licence from The British Standards Institution, and came into effect on 30 September 2025. It was prepared by Technical Committee PH/23, *Horizontal topics for PPE*. A list of organizations represented on this committee can be obtained on request to the committee manager.

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As a guide, this British Standard takes the form of guidance and advisory recommendations. It is not to be quoted as if it were a specification or a code of practice.

Presentational conventions

The guidance in this document is presented in roman (i.e. upright) type. Any recommendations are expressed in sentences in which the principal auxiliary verb is “should”.

Additional commentary, explanation and general informative material is presented in smaller italic type.

Where words have alternative spellings, the preferred spelling of the *Shorter Oxford English Dictionary* is used (e.g. “organization” rather than “organisation”).

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Compliance with a British Standard cannot confer immunity from legal obligations.

In particular, attention is drawn to the following specific Acts and regulations:

- PPE Regulation 2016/425 [1];
- Personal Protective Equipment at Work Regulations 1992 [2];
- Personal Protective Equipment at Work Regulations (Northern Ireland) 1993 [3];
- Health and Safety at Work etc. Act 1974 [4];
- Health and Safety at Work (Northern Ireland) Order 1978 [5];
- Management of Health and Safety at Work Regulations 1999 [6];
- Management of Health and Safety at Work Regulations (Northern Ireland) 2000 [7].

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Introduction

Diverse workforces are important to the future of all organizations and are a huge asset to those which foster inclusive cultures.

Increasingly, manufacturers and employers are working to develop more inclusive offerings but, in the vast majority of cases, sex, gender, ethnic or cultural/religious considerations are not fully taken into account. This is even more challenging for people with disabilities or medical conditions, whose needs are not accommodated for by most PPE.

The current position is rendering many unable to join certain industries or job roles as a result, and is denying access to activities which are good for both physical and mental wellbeing. This British Standard is intended to encourage a move away from unisex and “one-size-fits-all” PPE.

The intention of this British Standard is to provide guidance to organizations and individuals involved in the purchasing, supply and use of PPE to ensure the needs and requirements of diverse workforces are accommodated through the development, availability and provision of inclusive PPE.

The intended application of this British Standard includes all working environments and professional activities completed in the context of both public and private sectors. This specifically applies where end-users are provided with items designed to protect them from, and within, their immediate surroundings, wider environment and interaction with others.

Particular attention is drawn to the guidance and recommendations for engagement and consultation with the whole workforce, ensuring representation from under-represented person(s) or marginalized communities, diverse social groups and the end-users requiring inclusive PPE.

This British Standard is intended to be an important step towards PPE that is inclusive and will play a role in supporting equity in the workplace.

It has been developed by a diverse team that includes end-users, health and safety professionals, manufacturers, distributors and those experienced in the application and development of PPE standards.

1 Scope

This British Standard provides guidance for the provision of inclusive personal protective equipment (PPE) across various industries and sectors. It encompasses the selection, purchasing process, training and maintenance related to inclusive PPE. This British Standard aims to promote accessibility and inclusivity in PPE provision, focusing on the safety, health and wellbeing of all individuals.

This British Standard provides guidance for selecting inclusive PPE, taking into account factors such as end-user diversity, safety, risk, discomfort, ergonomic designs and compatibility. It provides guidelines for inspecting, maintaining and replacing inclusive PPE to achieve ongoing effectiveness and end-user safety.

This British Standard covers the importance of providing training for PPE end-users to achieve proper usage, fit and maintenance of inclusive PPE, with a focus on accommodating diversity. It outlines procedures for selecting PPE suppliers, developing specifications and evaluating suppliers based on inclusivity criteria. It focuses solely on guidance for the purchasing and provision of inclusive PPE to promote accessibility and safety in, but not limited to, the workplace.

This British Standard is applicable to organizations and individuals involved in the purchasing, provision and use of inclusive PPE across all working environments. It addresses the needs of all end-users, promoting equitable access to safety equipment in, but not limited to, the workplace.

This British Standard does not cover the performance requirements or manufacturing specifications of inclusive PPE.

2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes provisions, or limits the application, of this document¹⁾. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

BS 30416, *Menstruation, menstrual health and menopause in the workplace – Guide*

BS EN ISO 11610, *Protective clothing – Vocabulary*

3 Terms and definitions

For the purposes of this document, the terms and definitions given in BS 30416, BS EN ISO 11610 and the following apply.

3.1 accessibility

degree to which PPE, facilities, and services are usable by and available to a diverse range of end-users, including those with disabilities, establishing equal access and opportunity for participation wherever PPE is required

3.2 compatibility

<in relation to the PPE> extent to which two or more combined items of PPE that are expected to form an ensemble or partial ensemble are suitable for use by all end-users in a manner that does not impact the requirements of the PPE or its safe and effective use

<in relation to the end-user> extent to which one or more items of PPE used in isolation or as an ensemble are suitable for use by all end-users in a manner that does not impact the requirements of the individual end-user (e.g. religious headwear, menstrual or disability requirements)

¹⁾ Documents that are referred to solely in an informative manner are listed in the Bibliography.

3.3 competent

suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions, to enable the required task(s) to be carried out correctly and safely

3.4 disability

mental or physical impairment, causing unfavourable effects both significant and long-term on a person's ability to function normally day-to-day

3.5 discomfort

detrimental physical, physiological and/or psychological impact on end-user health, safety and wellbeing

3.6 diversity

characteristics of differences and similarities between people

[SOURCE: BS ISO 30415:2021, 3.7, modified – notes to entry have been removed]

3.7 employer

person(s) ultimately responsible as the duty-holder for the provision and selection of PPE, where the PPE end-users include all forms of employment contract, such as direct end-user, self-employed, labour-only contract, third-party relationship and other employment arrangements

3.8 end-user

individual to whom inclusive PPE has been made available and who is wearing or using inclusive PPE

NOTE The end-user might or might not be responsible for the purchasing process.

3.9 equality

state of being equal, especially in status, rights, opportunities or outcomes

[SOURCE: BS ISO 30415:2021, 3.9]

3.10 equitable access

principle of achieving fair and impartial access to inclusive PPE and related resources, without discrimination or barriers based on individual characteristics or circumstances

3.11 ergonomic design

design of equipment, clothing and systems to optimize human safety, comfort and performance, and minimize the risk of discomfort, injury and fatigue

3.12 fit-for-form

sizing and suitability of PPE for all end-users based on anthropometric data relevant to the workforce and/or general population, encompassing data for body measurements for as broad a population as possible/relevant and addressing diverse population characteristics including gender, sex, disability, ethnicity and race

NOTE The resultant fit-for-form size range does not necessarily need to use male/masculine, female/feminine identifiers, but encourages a move away from unisex and "one-size-fits-all" that are traditionally associated with the male form.

3.13 gender

socially defined identities, characteristics and roles associated with individuals based on their sex, along with the societal and cultural interpretations of biological distinctions between sexes

3.14 inclusion

act of avoiding marginalization of any individual(s) and/or group(s) by introducing policy or standard practice of equal opportunities and resource access

3.15 inclusive personal protective equipment (PPE)

PPE that is designed, manufactured and selected to provide equality of access to, and provision of, correctly fitting PPE, accounting for end-users' diverse needs and providing the required levels of personal protection, without creating an obvious point of difference between end-users or inadvertently creating secondary risks or hazards

NOTE 1 The provision of inclusive PPE does not mean that all items of PPE can be used or worn by all end-users and encourages a move away from unisex and "one-size-fits-all". Inclusive PPE refers to a range of PPE items that collectively are able to be used or worn by all end-users, taking into account their individual diverse needs. Therefore, the employer might be required to purchase different items of PPE to accommodate all end-users.

NOTE 2 An obvious point of difference between end-users might include use of colour to indicate gender, disability or any other difference that is not a requirement for the protection and/or comfort of the end-user.

NOTE 3 Secondary risks or hazards might include trips, falls, snagging.

3.16 inclusivity

practice of acknowledging and accommodating diversity, abilities and preferences of all individuals, promoting equity, diversity and inclusion in the provision of PPE, and related services

3.17 maintenance

actions taken to preserve the effectiveness and usability of PPE, including inspection, cleaning, repair and replacement as necessary

3.18 marginalized community

groups of people faced with disadvantages of a socio-economic or political nature due to factors such as ethnicity, race, sex, social groupings, gender, disability, sexual orientation or religion

3.19 neurodiversity

all types of ways humans think, move, process and act

NOTE Collectively, includes all groups termed as neurotypical, neurodivergent or neurodegenerative.

[SOURCE: PAS 6463:2022, **3.1.21**, modified – note reworded]

3.20 sex

combination of biological and physiological traits, including but not limited to chromosomal make-up, reproductive anatomy, hormonal make-up and levels, hair-growth patterns, bone structure and body shape, including muscle and fat distribution

3.21 social groupings

groups of people recognized by law, self-identification or self-organization, who share a set of similar characteristics that are defined through demographic attributes or societal exclusion

NOTE People can identify with more than one characteristic, or social grouping, and might have intersecting identities. This could lead to experiences that are different to those experienced by the majority of a social grouping.

[SOURCE: BS 76005:2017 (withdrawn), **3.11**]

3.22 training

formal instruction and guidance provided to PPE end-users for the proper selection, fitting, usage and maintenance of inclusive PPE, with a focus on accommodating diversity and all abilities

3.23 under-represented person(s)

individual, population or community whose needs, contributions, or experiences are overlooked, undervalued, or not adequately represented or recognized in a specific context, even if they are not formally marginalized in every context

3.24 wellbeing

state of being comfortable, healthy and happy, encompassing physical, physiological, psychological and social aspects of life, which inclusive PPE aims to protect and promote

4 Selection and purchasing of inclusive PPE

COMMENTARY ON CLAUSE 4

Attention is drawn to the CE/UKCA marking and the declaration of conformity (DoC) during the selection stage.

4.1 General

Inclusive PPE should be continually reviewed by the employer so that it continues to meet the diverse requirements of the end-users. This includes, for example, if a new end-user has a specific requirement, an existing end-user has a changed requirement, or a specific task changes and generates new requirements. Periodic reviews should take into account new product developments as they enter the market.

4.2 Hazard identification and risk assessment (HIRA)

COMMENTARY ON 4.2

Hazard identification and risk assessment (HIRA) is a systematic approach used to identify potential hazards within the workplace and evaluate their corresponding risks.

Employers should conduct a comprehensive HIRA before selecting PPE products to achieve workplace health and safety, and efficiency.

This assessment should include factors such as the nature of work activities, the substances or agents present, environmental conditions and any specific hazards related to the tasks performed.

These assessments should be regularly reviewed and updated to account for changes in work processes or conditions.

4.3 Risk mitigation

Based on the results of the HIRA, employers should implement risk control measures to mitigate identified hazards.

Where elimination or substitution of hazards is not feasible, engineering controls, administrative controls and PPE should be taken into account as part of a hierarchy of controls.

PPE should be selected based on the HIRA when other control measures in place are inadequate or impracticable to reduce risk to a suitable and sufficient level.

4.4 Inclusive PPE selection

When selecting inclusive PPE, employers should assess the specific hazards present, as well as the requirements, needs and preferences of the end-users for whom the equipment is provided.

End-users of inclusive PPE should be consulted and involved in the initial selection, specification, and ongoing selection and use of PPE, to optimize individual safety and wellbeing.

PPE should be appropriate for the type and level of hazard, taking into account factors such as the severity of potential injury, exposure duration and frequency of exposure.

Inclusive PPE selection criteria should also include factors related to comfort, fit, durability and compatibility with other protective equipment or clothing.

4.5 Consultation with stakeholders

Involving end-users who are using the inclusive PPE can help identify practical issues and preferences that might affect the use and performance of the PPE and inform selection decisions.

Employers should consult with end-users of inclusive PPE or their representatives, including those with a range of diverse needs, during the selection process, so that their input is taken into account (see 4.4 and 7.5).

Consultation might also involve occupational health professionals, safety experts and suppliers of inclusive PPE to gather diverse perspectives and expertise.

4.6 Diversity and inclusivity

Employers should accommodate the diversity of their workforce when selecting inclusive PPE, including protected characteristics and other factors which might impact the individual end-users.

NOTE For details on protected characteristics, see the Equality Act 2010 [8].

PPE options should be provided to accommodate a range of body shapes, sizes and physical characteristics, so as to enable equitable access and protection for all end-users.

Employers should consult with a broad range of the workforce, including those from various under-represented groups, social groupings and marginalized community groups, to verify that any implications, such as age, gender, physical abilities, cultural backgrounds and religious practices, on the range of inclusive PPE is being addressed and offered.

Employers should be sensitive to cultural preferences regarding the design, style and colour of PPE to promote acceptance and compliance among diverse groups. Employers should take into account factors such as the inclusion or exclusion of specific colours or symbols that have a direct association with religious or cultural practices, and compatibility and adjustment relating to the wearing of religious or cultural attire requirements.

4.7 Specification development

Based on the requirements assessment, employers should develop specifications for the inclusive PPE to be procured.

Specifications should include requirements for performance, materials, design features, sizes, compatibility with other equipment or clothing, and conformance with relevant standards.

4.8 Supplier identification

Employers should identify potential suppliers of inclusive PPE who can meet the requirements (see 4.7) and provide products of the agreed quality and specification in a timely manner.

Supplier selection might involve researching industry suppliers, obtaining recommendations from colleagues or industry associations, or conducting a formal purchasing process, such as a tender or request for proposal (RFP).

4.9 Purchasing inclusive PPE

Employers' processes for purchasing inclusive PPE might include issuing requests for quotations (RFQs) or RFPs to identified suppliers, outlining the requirements for the inclusive PPE and inviting them to submit pricing and other relevant information.

Throughout the purchasing process, employers should maintain comprehensive documentation and records to support transparency, accountability and compliance.

Cost should not be the determining factor in the selection of inclusive PPE.

4.10 Trial and evaluation

Prior to finalizing inclusive PPE selection and purchasing decisions, employers should conduct trials or evaluations of different options to assess their suitability and performance in the specific work environment.

End-users, including those with diverse needs, should have the opportunity to test inclusive PPE under realistic conditions to evaluate factors such as comfort, mobility, visibility, ease of use and compatibility with other PPE items.

NOTE Further guidance is given in the manufacturer's user instructions.

Feedback gathered from trials should be used to inform final selection decisions and adjustments so that the chosen inclusive PPE meets the requirements of the end-users effectively.

4.11 Documentation of selection and purchasing processes

Employers should maintain records documenting the inclusive PPE selection process, including HIRA results, criteria used for selection, consultation activities, and any trial or evaluation outcomes.

These records serve as evidence of due diligence in the selection of inclusive PPE and provide a basis for future reviews and revisions to the inclusive PPE programme.

Documentation should be accessible for review by relevant stakeholders, such as regulatory authorities, health and safety representatives, and end-users of inclusive PPE.

Purchasing process documentation might include requirements assessments, specifications, RFQs/RFPs, supplier evaluations, contracts or purchase orders, delivery receipts, inspection reports and correspondence with suppliers.

NOTE 1 Evidence of compliance of inclusive PPE can be in the form of declarations of conformity, end-user information and other such documents that might be available, including product certificates and data sheets.

NOTE 2 Attention is drawn to the Data Protection Act [9], UK General Data Protection Regulation (UK GDPR) [10] and BS EN ISO/IEC 5259 series for record keeping and artificial intelligence (AI).

4.12 Quality assurance and compliance

Employers should implement quality assurance processes to verify that purchased inclusive PPE meets and continues to meet agreed requirements and standards.

This might involve conducting incoming inspections or testing of inclusive PPE upon receipt to verify compliance with specifications (see 4.7) and identify any defects or nonconformities.

Suppliers should be held accountable by the employers for delivering inclusive PPE that meets agreed upon quality standards, and corrective actions should be taken as necessary to address deficiencies.

5 Fitting and adjustment

COMMENTARY ON CLAUSE 5

The correct fitting and adjustments of items of PPE is necessary so that:

- *the item of PPE is fitted to, or donned by, the end-user in the manner described in the manufacturer's instructions;*
- *items of PPE are sized appropriately to fit-for-form while also allowing for any task-related movements;*
- *PPE ensembles, including those intended to protect against separate hazards, achieve both of the needs above so that no individual part of the ensemble impairs the protective performance of any other part; and*
- *the item, or ensemble of items, provides the intended level of protection without causing the end-user discomfort throughout the use period.*

Neither comfort nor protection can take precedence over the other.

5.1 Individual assessment

Fitting and adjustment of inclusive PPE should be tailored to each end-user's unique characteristics within the context of workplace activities, in order to achieve optimal comfort, functionality and protection.

Employers should conduct individual assessments to determine the specific requirements and preferences of each end-user, taking into account factors such as body size, shape, mobility, pregnancy, breastfeeding, menopause, medical conditions, disabilities, cultural or religious requirements.

5.2 Training and guidance

Before using inclusive PPE, end-users should receive comprehensive training on how to correctly fit, adjust and wear each type of equipment. Additional training might be required to include instructions for cleaning, repair, maintenance, correct use and storage after use.

Training should be delivered by competent person(s) and cover proper donning and doffing procedures, adjustment techniques and recognition of proper fit indicators. Training should be deemed to be completed only when both the trainer and trainee are satisfied.

NOTE A written record of both the trainer and trainee's confirmation that the training has been given and is fully understood can be useful.

5.3 Sizing and selection

Inclusive PPE should be available in a range of sizes and be selected by end-users on the basis of fit-for-form to accommodate diverse body types and preferences.

End-users should have the opportunity to select the appropriate size and fit of PPE that best meets their requirements, needs and preferences.

Sizing charts, fitting guides and samples of different sizes should be provided to assist end-users in making informed choices.

When reasonable, employers should take measures to source specific sizes and fits for the unique requirements and needs of end-users, such as, for example, women's size three safety boots or a hard hat to fit an end-user with a larger than average head.

5.4 Ongoing fitting

Fitting and adjustment of inclusive PPE should be an ongoing process that takes into account changes in the requirements and needs for inclusive PPE over time.

End-users should be encouraged to regularly reassess the fit of their PPE, for example during different stages of pregnancy, breastfeeding and menopause, and make adjustments as needed for continued effectiveness.

NOTE For more guidance on processes that support menopause and menstrual health in the workplace, see BS 30416.

Ongoing fitting might be particularly important for inclusive PPE worn over clothing or equipment that can vary in thickness or bulkiness, for example, due to changes in seasonal temperature variations.

5.5 Comfort and mobility

Proper fitting and adjustment of inclusive PPE should encourage wearability and operational compliance by prioritizing comfort (the elimination of discomfort) and mobility.

Inclusive PPE should seek to minimize, and if possible eliminate, movement restrictions or task-impedance, to maximize individual's comfort and safety when performing their duties.

Adjustments, within the capability of the item of PPE, should be made to minimize pressure points, chafing and discomfort, and ergonomic design features should be utilized to enhance comfort during prolonged use.

Adjustments should only be made in line with the manufacturer's instructions to avoid compromising the level of protection or compliance of the item of inclusive PPE.

A mechanism of reporting comfort and mobility issues back to the employer/manufacturer should be in place to confirm the most appropriate fitting PPE is supplied.

5.6 Accessibility

Employers should establish fitting and adjustment processes that are accessible to all end-users, including those with disabilities or special requirements.

Alternative methods or accommodations might be necessary to assist end-users who require assistance with donning, adjusting or doffing PPE.

Accessibility features, such as adjustable straps, fasteners and closures, should be incorporated into the design of inclusive PPE to facilitate independent use by end-users with diverse abilities.

5.7 Fit testing

For certain types of PPE, such as tight-fitting respiratory protective equipment (RPE) or hearing protection, fit testing is either necessary or recommended for a proper seal and adequate protection.

Fit testing procedures should be conducted by trained personnel using appropriate equipment and techniques in accordance with recognized standards and protocols.

End-users whose PPE fails fit testing should be provided with alternative options or adjustments to achieve a proper fit, and retesting should be conducted as necessary to verify effectiveness.

5.8 Regular monitoring of fit

Employers should establish procedures for monitoring the fit and condition of inclusive PPE over time to identify any issues or deficiencies that might arise.

NOTE 1 Items which might initially fit and be comfortable can quickly become uncomfortable or prohibitive when in use.

Regular inspections, self-checks or peer assessments can help maintain the proper fit and functionality of inclusive PPE.

NOTE 2 The frequency of the inspections depends on the needs of the different end-users, including periodic reviews and significant changes, such as during pregnancy and breastfeeding or following medical treatment.

End-users should be encouraged to report any discomfort, fit problems or changes in inclusive PPE performance to facilitate timely intervention and resolution.

5.9 Record keeping and documentation

Records should be maintained documenting the fitting and adjustment of inclusive PPE for each end-user, including details of sizing, adjustments made, training provided and any issues or concerns identified.

This information can serve as a reference for future fittings, assist with tracking individual PPE usage and support compliance with regulatory requirements and organizational policies.

Records should be kept confidential and accessible only to authorized personnel involved in inclusive PPE management and oversight.

NOTE Attention is drawn to the Data Protection Act [9], UK GDPR [10] and BS EN ISO/IEC 5259 series for record keeping and AI.

6 Maintenance and inspection

6.1 General

All maintenance and inspection procedures should be completed in line with the manufacturer's instructions. In the event of any doubt or confusion, the manufacturer should be consulted. Complex items of inclusive PPE might need to be returned to the manufacturer for maintenance and inspection. In cases where the manufacturer's instructions are generic to a whole range of PPE, the non-generic facets of particular items of PPE should be addressed.

6.2 Maintenance procedures

Employers should develop and implement standardized maintenance procedures for all types of inclusive PPE used in the workplace.

Employers should clearly outline steps for routine maintenance tasks, such as cleaning, disinfection, lubrication, adjustment, repair and storage, to maintain proper functioning and longevity of inclusive PPE.

Any non-routine maintenance should be carried out by competent specialists, such as the manufacturer.

6.3 Frequency of maintenance

Employers should establish guidelines for the frequency of maintenance activities based on factors such as manufacturer recommendations, regulatory requirements, usage patterns, environmental conditions and observed wear and tear.

Maintenance should only be carried out on the basis of either manufacturer's instructions or the results of inspection. Preventative maintenance should be undertaken in order to minimize the need for corrective maintenance.

NOTE Preventative maintenance is proactive to reduce risks and incidents of product failure. Corrective maintenance is reactive following incidents of product failure.

Employers should schedule regular maintenance intervals to prevent deterioration, degradation or malfunction of inclusive PPE and to confirm that it remains suitable for its intended use.

6.4 Inspection protocols

Employers should develop comprehensive inspection protocols to assess the condition, integrity and performance of inclusive PPE through visual examinations, functional tests and measurements.

Employers should specify inspection criteria, including signs of wear, damage, contamination, degradation or other defects that might compromise the effectiveness or safety of inclusive PPE. Inspection protocols should also take into account faults identified during previous pre- and post-use inspections.

6.5 Pre-use inspections

Employers should instruct end-users to conduct pre-use inspections of their PPE before each use to identify expiry, malfunction, or any visible signs of damage and/or deterioration.

Employers should provide guidance in accordance with the manufacturer's instructions on what to look for during pre-use inspections and instruct end-users on how to perform necessary checks so that their PPE is in good condition. The level of pre-use inspection checks should be enhanced, as necessary, for items of PPE that are used infrequently.

Where practicable, employers should implement procedures for end-users to also carry out pre-use inspection of a colleague's PPE.

The level of pre-use inspection checks should be enhanced, as necessary, for items of PPE that are used infrequently or items that have been identified as having a higher defect or degradation rate than expected.

End-users should report any damage, defects or concerns identified during the pre-use inspections to facilitate timely intervention and resolution. Any damage, defects or concerns identified during the pre-use inspections should be addressed prior to the commencement of tasks, with safe and suitable PPE alternatives or replacements obtained.

6.6 Post-use inspections

Employers should implement post-use inspection procedures to assess the condition of inclusive PPE after each use and identify any issues that might require maintenance, repair or replacement. Inspection criteria should also be based on faults found with PPE of similar properties and functions or items of PPE made from similar materials of construction.

End-users should report any damage, defects or concerns identified during post-use inspections to facilitate timely intervention and resolution.

Where practicable, employers should implement procedures for end-users to also carry out post-use inspection of a colleague's PPE.

6.7 Formal inspections

Employers should conduct formal inspections, announced and unannounced, of inclusive PPE on a periodic basis by designated personnel trained in inspection techniques and criteria. This should include PPE in circulation and use by the end-users, as well as any stock items.

NOTE The frequency of the inspections depends on the type of PPE, its use and the needs of the different end-users.

6.8 Testing and calibration

Employers should verify that testing and calibration of specialized PPE components or systems, such as RPE or fall protection systems, are performed by competent personnel using calibrated equipment.

This should be performed following manufacturer's instructions and industry standards for testing procedures, frequencies and tolerances to maintain the accuracy and reliability of inclusive PPE.

6.9 Record keeping for inspections

Employers should maintain accurate records of all maintenance and inspection activities conducted for each piece of inclusive PPE, including dates, findings, corrective actions taken, recommendations for improvement and personnel responsible for carrying out such activities. This can be achieved using electronic databases, logbooks, or tracking systems to document maintenance histories, inspection results and conformance to regulatory requirements.

6.10 Defect management

Employers should implement procedures for managing defects or deficiencies identified during maintenance and inspection activities, including documenting the nature and severity of defects, assessing associated risks, and implementing corrective actions.

Defective PPE that can pose a risk if used should be immediately decommissioned to prevent intentional or unintentional continued use. Procedures relating to the decommissioning of defective PPE should be followed.

Employers should establish protocols for reporting, recording, escalating and tracking defects in order for them to be addressed promptly and effectively to prevent recurrence.

6.11 Training and competency

Employers should provide training to equip end-users responsible for performing maintenance and inspection tasks on inclusive PPE with the necessary knowledge, skills and competencies to carry out their duties safely and effectively. Such training might be delivered by the manufacturer, supplier or other adequately trained person(s).

Employers should provide refresher training periodically to reinforce good practices, update end-users on changes in procedures or equipment, and address any emerging issues or challenges related to maintenance and inspection.

NOTE The frequency of the refresher training depends on the type of PPE, its use and the needs of the different end-users.

Employers should maintain records of inclusive PPE training activities, including attendance logs, training materials, assessments and competency evaluations.

7 Accessibility and accommodation

7.1 Inclusive design

Manufacturers should design inclusive PPE and associated user instructions, taking into account inclusivity, incorporating features and options that accommodate the diverse needs and requirements of all end-users.

Employers should prioritize offering a selection of inclusive PPE that offers adjustable sizing, flexible configurations and customizable components to accommodate a wide range of body types, abilities and preferences.

7.2 Requirements assessment

Employers should conduct thorough requirements and needs assessments to identify any barriers or challenges faced by end-users with diverse needs, or special requirements in accessing and using inclusive PPE.

The initial assessment should involve consultation with affected end-users, disability advocacy groups, occupational health professionals, PPE suppliers and manufacturers and other relevant stakeholders to gather insights and recommendations for accommodations.

7.3 Alternative options

Where inclusive PPE does not adequately meet the needs of end-users with disabilities or special requirements, employers should provide alternative options or accommodations to establish equitable access and protection.

This can include modified or specialized PPE designs, assistive devices, or adaptive technologies that address specific functional limitations or accessibility barriers. Any adaptation should be referred back to the manufacturer to make modifications necessary to maintain the protective qualities of the PPE.

7.4 Assistive devices and accessories

7.4.1 Design considerations

Employers and manufacturers should take into account the requirement for adaptability to enable end-users, regardless of disabilities, to have access to and use inclusive PPE.

Examples might include adaptive fasteners, strap extensions, ergonomic handles, cushioning pads or sensory aids that facilitate donning, adjustment and end-user comfort while wearing inclusive PPE.

7.4.2 Interaction with other devices

Employers and manufacturers should take into account the compatibility requirements where end-users are relying on other non-PPE devices, medical devices and/or accessories, to promote independence and dignity, without compromising accessibility and usability of inclusive PPE for end-users with disabilities.

7.5 Consultation and collaboration

Employers should engage in an interactive process with affected end-users to identify and implement appropriate accommodations based on individual requirements and needs, and job roles.

Employers should actively seek input and collaboration from affected end-users, disability advocacy groups, occupational health professionals and relevant experts throughout the process of identifying, implementing and evaluating accommodations.

Consultation efforts should be ongoing and participatory, involving open dialogue, feedback mechanisms, and opportunities for codesign and cocreation of inclusive solutions.

7.6 Monitoring and review

Employers should regularly monitor the effectiveness of inclusive PPE, soliciting feedback and conducting assessments, identifying any barriers and areas for improvement, and sharing lessons learned.

NOTE Lessons learned can be shared with the manufacturer, the supplier, other end-user groups, stakeholders and wider industry.

Inclusive PPE should be reviewed and adjusted as needed in response to changes in individual requirements, job duties or workplace conditions.

8 Longevity of inclusive PPE

8.1 Replacement planning

Employers should develop proactive plans for inclusive PPE to be replaced in a timely manner before it becomes ineffective or unsafe for use.

Replacement planning should take into account feedback from end-users and factors such as frequency of use, through life performance testing data and workplace conditions, which might impact the expected lifespan of specific inclusive PPE items issued to end-users.

Regular assessments and inspections of inclusive PPE should be conducted in order for the end-user's requirements to be appropriately met. In addition, end-users should identify signs of wear and tear, damage, degradation and contamination, which might indicate the need for replacement.

Manufacturer's instructions and end-user information should be followed (see 7.1).

8.2 Criteria for replacement

Employers should establish clear criteria for determining when inclusive PPE should be replaced based on factors such as end-user feedback on inclusive PPE performance and continued suitability, as well as standard criteria for replacing PPE, such as degradation, damage, deterioration, expiration of shelf life or changes in work conditions.

Criteria should be objective, measurable and consistent across all types of PPE to achieve uniformity and fairness in replacement decisions.

Where applicable, manufacturers' recommendations for replacement intervals or end-of-life criteria should be included as part of the decision-making process.

8.3 Availability of inclusive PPE

Employers should maintain and audit accurate records of inclusive PPE inventory levels, usage rates and replacement schedules to facilitate timely replenishment and replacement.

Regular communication between end-users, employers and suppliers of inclusive PPE should be undertaken to support any actions required to maintain availability of suitable inclusive PPE.

Regular stock audits and reconciliation should be conducted to identify discrepancies, prevent shortages and maintain consistent access to inclusive PPE.

8.4 Purchasing planning

Replacement of inclusive PPE should be integrated into the organization's purchasing planning processes to allocate sufficient funds, resources and lead times for timely replacement.

Purchasing plans should include factors such as budgetary constraints, supplier availability, lead times and seasonal variations in demand for certain types of PPE.

Strategic sourcing strategies, such as bulk purchasing, long-term contracts or framework agreements, can be employed to optimize purchasing efficiency and cost-effectiveness.

8.5 End-user involvement

End-users of inclusive PPE should be actively involved in the replacement planning process, providing input and feedback on the performance, comfort and suitability of inclusive PPE in their work environment.

End-user feedback can inform decisions regarding the selection of replacement inclusive PPE options, as well as improvements to purchasing processes, product specifications and supplier relationships.

Employers and manufacturers should consult with end-users or their representatives to enhance buy in, morale and compliance with replacement decisions, fostering a culture of safety and engagement in the workplace.

9 Documentation and record keeping

9.1 Documentation framework

Employers should establish a comprehensive documentation framework to capture all aspects of inclusive PPE management, including purchasing and selection, fitting, training, inspection, maintenance, through life performance, disposal and replacement. The documentation framework should include:

- a) standardized templates, forms and records to facilitate consistent documentation practices across the organization; and
- b) the rationale behind both the selection and non-selection of inclusive PPE, or purchase and non-purchase decisions, including factors such as end-user requirements and needs, cost, quality, compliance with standards and supplier reliability.

9.2 Record keeping

Employers should:

- a) keep detailed records of individual assessments, fitting sessions and adjustments made to inclusive PPE for each end-user, checking that records are kept confidential and accessible only to authorized personnel involved in inclusive PPE management and oversight; and
- b) provide mechanisms for end-users to access relevant documentation and information as needed for training, auditing and reporting purposes.

NOTE Attention is drawn to the Data Protection Act [9], UK GDPR [10] and BS EN ISO/IEC 5259 series for record keeping and AI.

10 Awareness and training

10.1 Communication and awareness

Employers should foster a culture of inclusivity and awareness, supporting end-users with a diverse range of requirements and needs, including the equity that inclusive PPE brings to support and enhance diversity and inclusion in the workplace.

Communication efforts should emphasize the importance of accommodating a diverse range of abilities, requirements and needs of end-users, promoting respect, dignity and equal opportunities for all.

Awareness campaigns, training sessions and informational resources can help raise awareness of diversity and encourage proactive efforts to support diversity in the workplace, including awareness of the importance of inclusive PPE.

10.2 Promoting inclusive PPE in the workforce

Employers should provide training to enable the end-users to identify their needs and requirements, and to promote inclusive PPE so that all end-users are aware of the range of available inclusive PPE.

Employers should support the end-user by collaborating with them to identify available inclusive PPE and to engage with the supplier or manufacturer, whenever possible, to meet their needs.

Employers should communicate regularly with the whole workforce so that individual end-users are aware of the availability of inclusive PPE and to highlight the procedure for requesting inclusive PPE.

Employers should include a programme of communication to confirm that all employees with direct reports are also aware, to enable end-users with specific requirements and needs to access inclusive PPE, and to promote a culture of inclusive PPE compliance and safety awareness among end-users.

10.3 Accessing inclusive PPE

Employers should communicate a clear procedure for end-users with specific requirements and needs to request and access inclusive PPE where the existing PPE provided does not meet their needs.

Employers should explain that end-users who require inclusive PPE and do not request it, or are not provided with it, might be at greater risk of injury or incident to themselves and the wider workforce as a result.

In addition, employers should develop a procedure for end-users of inclusive PPE to report any issues with ill-fitting PPE and a protocol for dealing with these issues.

10.4 Training requirements assessment

Employers should conduct a thorough assessment of training requirements to identify the specific knowledge, skills and competencies required for the effective use of inclusive PPE in the workplace, so that the inclusive PPE purchased both protects against the identified hazard and meets the end-user's requirements and needs.

Assessment of training requirements should take into account factors such as job roles, tasks performed, hazards present, and individual learning styles and abilities when determining training requirements.

10.5 Training programme development

Employers should develop comprehensive training programmes that address selection, use, care and maintenance of inclusive PPE, and conformance of the inclusive PPE to relevant regulatory requirements, industry standards and organizational policies.

Training programmes should address topics such as proper fitting and adjustment techniques, care and maintenance procedures, emergency response protocols and strategies for overcoming challenges related to individual specific factors, in accordance with the manufacturer's instructions.

End-users should receive tailored training and support specific to their needs to effectively use and maintain their PPE accommodations.

Employers should design training materials and resources to be accessible, engaging, and tailored to the requirements and needs of diverse audiences, incorporating a mix of instructional methods such as lectures, demonstrations, hands on exercises, videos and interactive simulations.

Employers should encourage those with direct reports to:

- a) actively participate in training sessions;
- b) be an example through following inclusive PPE protocols;
- c) regularly communicate on inclusive PPE; and
- d) recognize safe behaviours on the use or application of inclusive PPE.

10.6 Multilingual and accessible training

Employers should provide inclusive PPE training materials, resources and contents in multiple accessible formats to accommodate end-users' diverse learning needs, language(s), literacy levels and learning styles.

Accessibility considerations might include making available audio descriptions, captioning or any other formats as required based on individual end-user needs, such as disabilities, neurodiversity, neurodivergent traits, visual or hearing impairments.

10.7 Cultural sensitivity

Employers should incorporate cultural sensitivity and awareness into inclusive PPE training programmes to respect the beliefs, customs and practices of marginalized community groups in the workplace, while addressing cultural factors related to the use of inclusive PPE, such as preferences for specific types or styles of equipment, religious or cultural attire requirements and communication norms.

11 Variations and equivalency of inclusive PPE

11.1 Variation assessment

Employers should conduct a thorough assessment to evaluate proposed variations from established inclusive PPE guidelines, standards or procedures.

Employers should take into account factors such as the nature of the variation, potential impact on safety and health, and the feasibility of alternative approaches.

11.2 Risk analysis

Employers should perform a comprehensive risk analysis to determine the potential consequences of any proposed variation. This analysis should assess whether the proposed variation poses an acceptable level of risk to end-users, those working around them, the organization and the environment.

Manufacturers should be consulted so that the risk assessment includes any potential impact on the protective qualities and compliance of the inclusive PPE item(s).

11.3 Rationale for variations and equivalency of inclusive PPE

Employers should clearly document the rationale behind proposed variations, including the reasons for exploring alternative approaches, risk assessment findings, the time since the last review was carried out, changes in working practices and rationale for accepting any associated risks.

Employers should provide supporting evidence, data or expert opinions to substantiate the decision-making process and demonstrate due diligence in evaluating all relevant factors.

11.4 Equivalency assessment

Inclusive PPE should give the same level of protection as that required by the risk assessment. This should be regardless of whether other items of PPE used to protect against the same risk have higher (and therefore unnecessarily high) specific levels of performance.

Employers should evaluate whether the proposed variation leads to equivalent or better outcomes in terms of safety, effectiveness, efficiency or other relevant criteria when compared to established inclusive PPE guidelines or standards.

Employers should take into account the overall impact of the variation on risk reduction, operational efficiency and end-user satisfaction to determine equivalency.

11.5 Performance testing

COMMENTARY ON 11.5

Attention is drawn to the CE/UKCA marking and the DoC during the performance testing.

Employers should establish that any variation of inclusive PPE has been performance tested and approved by the manufacturer. Employers should compare the performance characteristics, functional capabilities and compatibility of the proposed variation with established benchmarks or reference standards against the minimum performance requirements for inclusive PPE.

11.6 Expert consultation

Employers should seek input and advice from subject matter experts, safety professionals, regulatory authorities, the manufacturer of the PPE and other stakeholders with relevant expertise to inform decision-making regarding variations and equivalency.

Employers should actively engage with external resources, such as industry associations, research organizations or specialized consultants, to access specialized knowledge and perspectives on specific inclusive PPE-related issues.

11.7 Pilot trials and monitoring

Employers should conduct pilot work trials to assess the practical implications of proposed variations in real-world settings and identify any unforeseen challenges or unintended consequences.

Trials should not be carried out in situations involving the actual live risk(s). All such trials should be carried out in a fail-safe manner to avoid any harm to the end-user, in case the PPE does not perform as expected.

NOTE There might be suitable formal whole-ensemble performance test methods and practical performance tests available at accredited test houses.

A diverse range of potential end-users (including those with unique needs) should be included as test subjects in pilot trials.

Feedback should be collated from those in trials, and both feedback and outcomes shared with stakeholders, including manufacturers.

11.8 Documentation and reporting

Employers should maintain detailed records documenting the rationale, analysis and outcomes of variation assessments, equivalency evaluations, and decision-making processes. These records should specifically include records pertaining to **11.1** to **11.8**.

Employers should document any variations approved, including the specific conditions, limitations, and controls implemented to manage associated risks, and verify that records are accessible for review, audit and accountability purposes.

NOTE Attention is drawn to the Data Protection Act [9], UK GDPR [10] and BS EN ISO/IEC 5259 series for record keeping and AI.

12 Feedback and continuous improvement

12.1 Continuous improvement culture

Employers should foster a culture of continuous improvement within the organization by encouraging innovation, open communication and feedback on the effectiveness of inclusive PPE, and lessons learned from experience.

Employers should recognize and reward end-users and teams that contribute to improvements in the inclusive PPE programme, and create opportunities for sharing success stories, good practices and lessons learned across the organization.

Employers should use insights gained from variation assessments and equivalency evaluations to inform continuous improvement efforts in inclusive PPE management practices, procedures and policies. Both positive and negative feedback should be proactively sought from end-users of inclusive PPE.

Employers should incorporate lessons learned from variations into future decision-making processes, update guidelines or standards as needed, and share good practices across the organization to enhance overall safety performance.

12.2 Feedback mechanisms

Employers should establish formal feedback mechanisms to gather input from end-users, supervisors and other stakeholders on their experiences, challenges and suggestions for improving the inclusive PPE programme.

Employers should encourage open communication, active participation and constructive dialogue through surveys, focus groups, suggestion boxes, safety committees and other channels for sharing feedback.

12.3 Future decision-making

In order to inform decision-making for the future provision of inclusive PPE, employers should:

- a) establish maintenance and inspection logs to track the condition, servicing and performance of inclusive PPE over time;
- b) document sizing information, adjustment techniques, training provided and any issues or concerns identified during the fitting process;
- c) engage with end-users of inclusive PPE for feedback;
- d) engage with suppliers and manufacturers to share feedback on inclusive PPE and to understand current offerings and innovation for inclusive PPE; and
- e) record and analyse details of any incidents or accidents involving inclusive PPE, including descriptions of the event, injuries sustained, inclusive PPE worn and other contributing factors.

Bibliography

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