

Doc 04

From: Redacted s40(2) (Redacted s40(2))

Sent: 23 March 2022 16:13

To: Redacted s40(2) (HSS - Redacted s40(2)); Redacted s40(2) (Public Health Wales - Microbiology); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Primary Care & Health Science)

Cc: Redacted s40(2) (HSS - DPH - Population Healthcare); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Planning Team); HSSG.TAC

Subject: RE: PPE briefing

Thanks Redacted s40(2), that is helpful, and agree that some of this may be due to interpretation. So for clarity, then when this page below is opened on the manual it will be amended to say main *routes* of transmission are: droplet/fomite/aerosols. I think omitting the other routes may stir up much unease and criticisms with many factions.

Happy to talk through if I have misunderstood.

Best Wishes

Redacted s40(2)

Redacted s40(2)

Prif Swyddog Nyrsio | Redacted s40(2)

Cyfarwyddwr Nyrs GIG Cymru | Redacted s40(2)

Swyddfa'r Prif Swyddog Nyrsio | Office of the Chief Nursing Officer

Cyfarwyddiaeth Nyrsio | Nursing Directorate

Llywodraeth Cymru | Welsh Government

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From: Redacted s40(2) (HSS - Redacted s40(2))

Sent: 23 March 2022 16:00

To: Redacted s40(2) (Public Health Wales - Microbiology); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Office of the Chief Nursing Officer); Redacted s40(2) (HSS - Primary Care & Health Science)

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Subject: RE: PPE briefing

Thank you, Redacted s40(2)

That is very clear and helpful

Redacted s40(2)

From: Redacted s40(2) (Public Health Wales - Microbiology)

Sent: 23 March 2022 15:34

To: Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Redacted s40(2)); Redacted s40(2) (HSS - Office of the Chief Nursing Officer); Redacted s40(2) (HSS - Primary Care & Health Science)

Cc: Redacted s40(2) (HSS - DPH - Population Healthcare); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Planning Team); HSSG.TAC

Subject: RE: PPE briefing

Thanks Redacted s40(2),

And thanks for the helpful conversation also.

An update in relation to further discussions between HSE and NHSE&I colleagues this morning.

HSE's position regarding the modes of transmission of SARS-CoV-2 has not changed.

The recommendations for PPE in relation to SARS CoV-2 management has not changed in either the current UK IPC Guidance (updated with clarifications 15th March) or in the NIPCM.

[COVID-19: infection prevention and control \(IPC\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/covid-19-infection-prevention-and-control)

This all relates to differing interpretations of words used in IPC guidance and then comparing and contrasting these with other words used elsewhere in official documents/websites.

We are all agreed that the reality is that virus transmission via the air is a continuum of possibilities including large particles (droplets) and small particles (aerosols). The longer someone spends in close proximity to an infectious person in a poorly ventilated setting, the greater the risk of virus transmission (via large and/or small particles). UK IPC Guidance and NIPCM guidance remains in line with WHO recommendations.

Suggested way forward for the NIPCM publication in England – shared in confidence:

- Ideally use terminology in our guidance that is consistent with (same as / similar to) that used by WHO.
- Be clear about use of risk assessments (hierarchy of controls).
- Be clear about empowering staff to be able to use enhanced RPE following application of the above.
- As always, educate, educate, educate HCWs.

We will also take the issue forward through our 4-Nations NIPCM discussions, which we are moving to as we aim to develop our wider IPC collaborations beyond COVID specific issues.

Happy to meet / discuss further if that would be helpful,

Conscious that e-mail not always the best way to clarify / answer all the questions.

With best wishes,

Redacted s40(2)

Redacted s40(2)

Redacted s40(2)

Symudol/Mobile: Redacted s40(2)

Epost/Email: Redacted s40(2)

From: Redacted s40(2)

Sent: 23 March 2022 13:50

To: Redacted s40(2); Redacted s40(2); Redacted s40(2)

Cc: Redacted s40(2); Redacted s40(2); Redacted s40(2); HSSG TAC; Redacted s40(2)

(Public Health Wales - Microbiology)

Subject: RE: PPE briefing

Redacted s40(2) apologies – having attended the meeting with 4 Nation CSAs and having had the CSA for HSE raise an issue which seemed to have a material impact on current NHS guidance, we thought it would be wise to let you know.

Redacted s40(2) – I have followed your links. The issue is present in the Welsh Guidance as highlighted below:

https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipce

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Disease : Coronavirus disease 2019 (COVID-19) (SARS Cov-2)

On the Mandatory NHSScotland Alert organism/Condition list : Yes

Notifiable

- Notifiable under Public Health (Scotland) Act 2008 : Yes
- The Advisory Committee on Dangerous Pathogens (ACDP) took the decision on 13th March 2020 that COVID-19 infection should NOT be classified as a HCID.

Main route of transmission : Droplet

Guidance and supporting materials

Scottish

Guidance and supporting materials

- See [HPS coronavirus \(COVID-19\) webpage](#) for all guidance and information to be used in Scotland.

And here:

https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/

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Droplet

A small drop of moisture, larger than airborne particle, that may contain infectious agents. Droplets can be released when a person talks, coughs or sneezes, and during some medical or patient care procedures such as open suctioning and cough induction by chest physiotherapy. It is thought that droplets can travel around 1 metre (3 feet).

Droplet transmission

The spread of infection from one person to another by droplets containing infectious agents.

So – I am sorry that I was not aware of the 4N cell, but it would be negligent of me not to raise with you that, to the best of our knowledge, and with a high level of confidence, droplet by the definition in the Welsh, and presumably Scottish, guidance is NOT the main route of transmission for COVID infection.

The evidence shown at this meeting of the Protect group, as at previous groups and as shown in TAG and SAGE papers, is that the transmission route can be by fomite, droplet or aerosol. In the case of droplets, the purely ballistic droplets (defined as travelling 1m in the guidance but measured as further in tests) are highly unlikely to be the primary source of transmission. Instead, a combination of different sizes of particles, including those that might have been droplets, are evaporating off or otherwise becoming light enough to remain airborne for at least 2-3m in most cases. Their size is smaller than that used to define a droplet, and standard droplet prevention is not likely to provide suitable infection prevention.

I will call **Redacted s40(2)** and put this through appropriate channels. I had not intended for it to be formal TAC advice, but simply a highlight that there seems to be a disconnect between the route of disease transmission in fact and in the guidance.

Best

Redacted s40(2)

From: Redacted s40(2)

Sent: 23 March 2022 11:04

To: Redacted s40(2) (HSS - Office of the Chief Nursing Officer); Redacted s40(2) (HSS - Primary Care & Health Science)

Cc: Redacted s40(2) (HSS - DPH - Population Healthcare); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Planning Team); HSSG.TAC; Redacted s40(2) (Public Health Wales - Microbiology)

Subject: RE: PPE briefing

I am not aware of new England advice either; I really don't understand where this is coming from and why it is cutting across the 4N approach that we have adopted through National IPC cell which is purposed to take an overview of all the evidence around transmission.

Redacted s40(2) / Redacted s40(2) – is this supposed to be formal TAC advice and, if so, has TAC considered either the cross Nation or operational implications?

Redacted s40(2)

From: Redacted s40(2) (HSS - Office of the Chief Nursing Officer)

Sent: 23 March 2022 10:21

To: Redacted s40(2) (HSS - Primary Care & Health Science); Redacted s40(2)

Cc: Redacted s40(2) (HSS - DPH - Population Healthcare); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (TAC - Technical Advisory Cell); Redacted s40(2) (HSS - Planning Team); HSSG.TAC

Subject: RE: PPE briefing

Should we meet to discuss this? I am unclear about what the new guidance on 30 March for England states with regards PPE, but clearly implications for PPE guidance for us too. I have asked Redacted s40(2), as chair of UK IPC cell to review and provide a view.

BW

Redacted s40(2)

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From: Redacted s40(2) (HSS - Primary Care & Health Science)
Sent: 23 March 2022 10:00
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Subject: PPE briefing

Good morning

I attach a briefing about concerns that PPE may not effectively filter out fine aerosols.

Cofion/Regards

Redacted s40(2)

Redacted s40(2)

Redacted s40(2)

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