



To:

Chief Executives NHS Scotland
Chairs NHS Scotland
Workforce Senior Leadership Group
HR Directors
National Staffside Representatives
Medical Directors
Nursing Directors
Employee Directors
Chief Officers (NHS Boards and Local
Authorities)
Local Authority Chief Executives
Chief Social Work Officers
Chief Officers H&SCP
Care Inspectorate H&SCP
Scottish Social Services Council (SSSC)
Scottish Care
Coalition of Care and Support
Funded Health and Social Care Partners
Directors of Public Health

2 April 2020

Colleagues

Revised PPE guidance

In response to the emerging epidemiology and evidence, urgent work has been under way to review the existing UK-wide Personal Protective Equipment (PPE) guidance and today the revised guidance will be published.

This guidance is issued jointly by the Department of Health and Social Care, Health Protection Scotland (HPS), Public Health Wales, Public Health Agency Northern Ireland, Public Health England (PHE) and NHS England as official guidance and is hosted on the PHE website.

The guidance can be accessed via the [COVID-19 section of the Health Protection Scotland \(HPS\) website](#). It outlines what PPE frontline health and social care workers should be wearing in different settings and scenarios. The guidance has had input from Royal Colleges and is endorsed by expert scientific groups.



The updates reflect the fact that COVID-19 is now widespread in the community, meaning clinicians and care workers are more likely to see people with the virus, some of who will not have symptoms yet.

The guidance itself recommends the safest level of PPE to protect health and social care workers and it specifies the type of PPE that should be worn in the various healthcare and social care settings where patients or residents could be cared for.

New tables have been added to the guidance, which clearly explain the PPE required for different common clinical and care scenarios. The first table relates to acute hospitals and the second and third are for primary care, outpatient and community care, ambulance staff, paramedics, first responders and pharmacy. There is an additional table that describes when to use PPE when caring for any patient or resident. This last section is important at a time when we are aware that there is sustained community transmission of COVID-19, and the likelihood of any patient or resident having COVID-19 without any of the recognised symptoms is raised.

Given the recognised sustained community transmission of COVID-19, the guidance importantly includes detailed advice around risk assessing use of PPE, including aprons, gowns, Fluid-Resistant Surgical Masks and eye protection, in a range of different clinical and care scenarios, including community settings, such as care homes and caring for individuals in their own homes. The guidance also asks that organisations themselves undertake risk assessments to ensure that they provide the correct PPE for the safety of their staff.

The guidance is also clear that, in line with agreement from the Health and Safety Executive, in certain circumstances, some PPE – particularly masks and eye protection - can be worn for a full session, and doesn't need to be changed between patients. This will ensure that health and social care workers can safely carry out their work; particularly when they are working in areas where there is a high risk of COVID-19 transmission such as Emergency Departments or intensive care units. The Health and Safety Executive has reviewed the guidance and agreed the appropriate sessional use of some PPE.

Importantly, in terms of shielding the extremely vulnerable in our society, the guidance advises that secondary, primary and community care workers should wear a surgical mask when providing care to any individuals in the extremely vulnerable group.

As outlined in earlier guidance, the highest risk of transmission of this virus occurs when it is aerosolised - therefore when carrying out aerosol generating procedures (AGPs) clinicians are required to wear a higher level of protective equipment. These are detailed in the guidance and subject to continual review based on emerging evidence by the UK National Emerging Respiratory Virus Threats Advisory Group. When aprons are used for non-aerosol generating procedures, it is vital that clinicians and social care workers thoroughly wash their forearms if there is a risk of exposure to droplets. This is consistent with the UK policy of bare below the elbows and evidence reviews on the risks of healthcare acquired infections.

Please be aware that we have tried to highlight some specific key updates, however, this letter does not cover all changes. As such, we urge you and your frontline staff to read the revised guidance in full on the COVID-19 pages of the HPS website.

Health Protection Scotland Posters

To provide absolute clarity on what these changes mean for health and social care staff working on the frontline, HPS has helpfully produced visual posters specifying what kind of

PPE should be worn in which setting or scenario. A poster has been produced for each of the following settings:

1. Healthcare settings: Caring for patients not suspected or known to have COVID-19
2. Community settings: Caring for patients or residents not suspected or known to have COVID-19
3. All health and social care settings: Caring for patients who are confirmed or suspected to have COVID-19
4. High risk acute areas: Caring for patients who are confirmed or suspected to have COVID-19

The posters have been made available on the COVID-19 section of the [HPS website](#) so that they can be printed and displayed in each of the respective settings.

Guidance with national standing

It is important to reiterate that in Scotland, guidance produced by HPS, PHE and the Scottish Government Health and Social Care Directorate (SGHSCD) has national standing. Royal Colleges and other professional organisations producing supplementary IPC guidance are encouraged to use the HPS guidance as a single source of information.

We are aware that some guidance has been produced which diverges from that published by HPS, particularly regarding what is and isn't classified as an Aerosol Generating Procedure (AGP). Again, I would like to take this opportunity to request that Health Protection Scotland's list of AGPs is used as the single source of information. This can be accessed via the [National Infection Prevention and Control Manual](#) and via the COVID-19 pages on the HPS website under 'Aerosol Generating Procedures'.

World Health Organisation (WHO) Guidance

This weekend (28-29 March), the WHO confirmed that UK guidance is consistent with WHO recommendations for protecting healthcare workers against COVID-19.

The HSE conducted a rapid review of the guidance which concluded that aprons offer a similar level of protection to gowns and that FFP2 respirators offer protection against COVID-19 and can therefore be used during high risk procedures, if FFP3 respirators are not available.

Secondly, WHO recommends full arm gowns when seeing any suspected or confirmed case of COVID-19. The UK guidance also recommends full arm gowns in high risk procedures and aprons for other procedures, which is consistent with the UK 'bare below the elbow' policy as part of our long-term strategy to reduce healthcare associated infections and effective hand hygiene.

COVID-19 is not airborne, it is droplet carried. We know the cross contamination from gowns for infection can be carried by the gown sleeves and the advice therefore is bare below the elbows and you scrub your hands, your wrists and your forearms.

PPE supply and distribution

We continue to work tirelessly with NHS National Services Scotland, Health and Social Care Partnerships, the social care sector, and with colleagues in other UK nations to procure and

distribute necessary supplies of the types and levels of PPE required to safeguard frontline health and social care workers.

We have introduced new measures to improve the distribution of PPE, including a single point of contact for all health boards to manage local PPE supply and distribution.

A helpline has also been set up for registered social care providers having problems accessing PPE, with extra staff to prepare orders for social care, additional delivery drivers, longer delivery hours and use of more external delivery companies to increase capacity. Work continues to source further PPE and ensure there is an appropriate supply for all our workforce.

The contacts are as follows:

NP NHS COVID - 19 enquiries: NSS.covid19resilience@nhs.net

NHS NSS social care PPE triage: **0300 303 3020**

The Scottish Government also has a new dedicated email address for staff, MSPs or members of the public to raise specific supply issues. This is covid-19-health-PPE@gov.scot. It will be monitored continuously and allow us to act to resolve any specific supply issues more quickly.

We ask senior leaders to deal with local concerns and escalate PPE local supply and guidance issues to NSS in the first instance.

We recognise that there are many unpaid carers who are providing care and support to friends and family members in the vulnerable groups and therefore may need PPE. We would like to reassure you that we are working with NHS NSS to quickly put in place a system to support unpaid carers to access PPE if they need it.

Leadership

Senior clinical and care leaders are asked to ensure that compliance with PPE is in line with the updated PPE guidance. We also ask that clinical leadership is provided to board procurement teams in this difficult time, to ensure local distribution is effectively managed to those areas which require it, and there is no over-ordering or stock piling at local level.

We welcome your support in ensuring the health and social care workforce is signposted to this vital information.

I trust that this information is helpful and, on behalf of the Scottish Government, I would like to thank you all for your tireless, essential and important work.



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Chief Nursing Officer



DR CATHERINE CALDERWOOD
Chief Medical Officer