

Dr Barry Jones MD FRCP  
Chair of CAPA (Covid Airborne Protection Alliance)

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Dear Barry,

Thank you for your letter dated 14 April and for forwarding me your letter to Susan Hopkins on this issue. I trust that she will answer your detailed questions relating to the science around transmission of SARS-Cov-2 and risks from biological agents.

On your question relating to staff use of respiratory protective equipment (RPE), the [UK IPC Guidance](#) published by UKHSA is clear that staff can use RPE such as FFP3 masks when caring for COVID-19 patients if a local risk assessment using the hierarchy of controls finds that an unacceptable risk of infection remains. This existing element of the guidance was further highlighted following a [review of the guidance](#) in December 2021 which was approved by all four UK Chief Medical and Nursing Officers and UKHSA.

In terms of data relating to staff and patient infection, data on the number of hospital patients with COVID-19 and staff absences due to COVID can be found at the following link: <https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-hospital-activity/>

Unfortunately, it is not possible to accurately state the exact number of patients and staff who have contracted COVID-19 within a healthcare setting rather than in the community, although the above link does provide data on the number of the reported COVID-19 diagnoses and admissions and the number of new hospital COVID-19 cases.

Finally, I want to assure you that the NHS remains vigilant regarding the threat posed by COVID-19 and we continue to test all patients on admission, day 3 and day 5-7 of their hospital stay, NHS staff are still testing twice-weekly test, we are cohorting COVID-19 cases and continue to recommend universal masking in all healthcare settings.

Best wishes,



Duncan Burton  
Deputy Chief Nursing Officer, Delivery and Transformation