



Gillian Higgins  
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Our Reference: 202200283746

28 April 2022

Dear Gillian Higgins,

Thank you for your email of 24 February 2022 on behalf of leaders of professional bodies, trade unions of health and care professions and experts, addressing the First Minister regarding healthcare workforce access to respiratory protective equipment (RPE). The First Minister has asked me to reply on her behalf as the issues you have raised are within my area of policy responsibility.

Please accept my apologies for the delay in responding to your email which falls below the standard of service we would normally expect to respond to correspondence.

I note that you have referenced UK Infection Prevention & Control (IPC) Guidance which I am unable to comment on as this is out with the remit of the Scottish Government, therefore would ask that you direct those particular concerns to the relevant bodies.

The [Scottish Winter \(21/22\) Respiratory Infections in Health and Care Settings Infection Prevention and Control \(IPC\) Addendum](#) was developed in collaboration with NHS boards to provide Scottish context to the UK IPC Winter Respiratory Guidance, to align with our Scottish National IPC Manual.

The addendum was agreed through consultation with NHS Boards and approved by the COVID-19 Nosocomial Review Group (CNRG) and recognises the likelihood of a surge in other respiratory viruses as well as COVID-19. NHS ARHAI Scotland continues to review all of the international evidence for the UK IPC Cell and advise on any required changes through the COVID-19 Nosocomial Review Group.

PPE guidance is developed by infection prevention and control (IPC) experts on a four-nation basis and they maintain that current evidence does not support a change to the current IPC guidance on

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respiratory protective equipment (RPE).

Additionally, the Health and Safety Executive has been consulted and they support the current UK IPC Cell Infection Prevention and Control for Seasonal Respiratory Infections in Health and Social Care settings for Winter 2021 to 2022 in terms of Personal Protective Equipment (PPE) and respiratory protective equipment (RPE) use and associated risk assessment in terms of the Hierarchy of Controls.

We know that PPE is critically important to mitigate against the risk of exposure, but it is important to highlight that in terms of the Hierarchy of Controls it is the last line of defence and sits alongside a number of other essential risk mitigations.

The evidence that the Scottish guidance is based on demonstrates that COVID-19 can be spread via the airborne route when performing aerosol generating procedures or in areas that are crowded, or in confined spaces or where there is close contact (the three C's).

The Scottish guidance mitigates for all of these scenarios by insisting on FFP3 use for AGPs in respiratory pathway (and in the non-respiratory pathway following a personal risk assessment) and for an environmental risk assessment to take place in the respiratory pathway to assess the risk of transmission as a result of the three C's detailed above.

However, we listened to feedback following the conditional recommendation within the WHO updated guidance (21 December 2021), and worked in partnership with representatives from the sector to review the language and information relating to FFP3 access within the guidance.

As a result of this review, we issued [DL\(2022\)10: Health and social care worker access to FFP3 masks, based on staff preference during the transition period](#), which follows the de-escalation of COVID-19 IPC control measures in health and social care settings to alleviate system pressures. This communication confirms that:

- There is no change in the IPC evidence, but rather is in response based on the individual staff member's perception of risk.
- An individual risk assessment, in line with current guidance, should be carried out by the line manager to consider staff member's overall health, safety, physical and psychological wellbeing, as well as personal views/concerns about risks.
- The purpose of the risk assessment is not to determine whether staff are allowed or denied an FFP3, rather it is to identify and consider any other concerns they may have.
- There are now three processes for staff accessing FFP3 masks, and staff and line managers should make themselves familiar with the processes, depending on the circumstance.

Thank you once again for taking the time to write to the First Minister with your concerns, and I hope the information is helpful in offering reassurance of the measures that are in place and that guidance is kept under review by the relevant expert group in light of new and emerging evidence.

Yours sincerely

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