



12 March 2021

Dear Professor Whitty, Dr McBride, Dr Smith and Dr Atherton

Urgent review of PPE and ventilation guidelines consistent with airborne transmission of COVID-19

We are writing on behalf of Royal Colleges, Professional Bodies and Trade Unions representing hundreds of thousands of front-line health and care staff to urge you meet with some representatives in our alliance to pursue an urgent review of guidance on the prevention and control of COVID-19 in health care settings. In particular, action is needed to provide health and care staff with the personal protective equipment (PPE) essential for the prevention of airborne transmission of COVID-19.

Contrary to current UK Infection prevention and Control (IPC) guidance, it is now widely accepted that COVID-19 is spread by airborne transmission; indeed, Public Health England's own recently updated guidance on ventilation¹ makes this very clear. To quote directly:

"When someone with COVID-19 breathes, speaks, coughs or sneezes, they release particles (droplets and aerosols) containing the virus that causes COVID-19. While larger droplets fall quickly to the ground, smaller droplets and aerosols containing the virus can remain suspended in the air. If someone breathes in virus particles that are suspended in the air, they can become infected with COVID-19. This is known as airborne transmission.

"In poorly ventilated rooms the amount of virus in the air can build up, increasing the risk of spreading COVID-19, especially if there are lots of infected people in the room."

The government also appears to recognise aerosol transmission in its updated operational guidance for schools² (ventilation section) page 21:

¹ <https://www.gov.uk/government/publications/covid-19-ventilation-of-indoor-spaces-to-stop-the-spread-of-coronavirus/ventilation-of-indoor-spaces-to-stop-the-spread-of-coronavirus-covid-19>

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/967139/Schools_coronavirus_operational_guidance.pdf

“Good ventilation reduces the concentration of the virus in the air, which reduces the risk from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied and enclosed area.”

Furthermore, Prof Calum Semple of SAGE stated on BBC News 8/3/21 that airborne transmission demands better ventilation. The UK is not alone. Other countries including the United States³ are coming to realise the importance of airborne transmission and the need for appropriate PPE.

Yet UK IPC advice remains that FFP3 PPE and equipment necessary to prevent airborne transmission is only necessary when undertaking “Aerosol Generating Procedures” in close proximity to patients. The recent report by the Royal College of Nursing⁴ clearly exposes the serious flaws in the recent Rapid Review on which current guidance is based, and the ongoing failure to update it in line with both evidence and frontline experience. This is just the latest in a growing number of reports⁵ and papers pointing out the inadequacy of UK guidelines designed to protect our patients and staff.

The insistence on surgical masks as adequate protection for HCPs is utterly irresponsible as such masks are not designated as PPE against airborne transmission.

This failure is putting health and care staff in danger. Tens of thousands have been absent from work due to COVID-19 at any one time. Hundreds have died. Even as cases fall and vaccine rollout continues, health and care staff will continue to be exposed to COVID-19 at high levels. There is still time to change this and provide our members with the protection they need.

To date, the failure of some to respond to many letters asking for changes to current guidance is not only professionally discourteous but unacceptable. The often-repeated response to the RCN report provided to the BBC by a spokesman for the Department of Health and Social Care said:

“The safety of NHS and social care staff has always been the top priority”

“We continue to work tirelessly to deliver PPE to protect those on the frontline.”

“The guidance on PPE is kept under close review”

These reassurances do not have the confidence of health and social care staff, who have been sorely let down by the insistence on COVID-19 being a less consequential infection (see David Osborn’s report⁵) and the denial of airborne transmission.

Rather than relying on yet more correspondence, or a lack of it, and given the seriousness of our joint concerns, we are now seeking a collective meeting with all nations represented to discuss these inconsistencies in government guidance and to identify immediate solutions in a spirit of collaboration during these unprecedented times.

Yours sincerely,

Dame Donna Kinnair DBE, Chief Executive and General Secretary, Royal College of Nursing

Professor Trish Greenhalgh OBE, Professor of Primary Care, University of Oxford

Dr Claudia Paoloni, President, HCSA

³ https://drive.google.com/file/d/1O5zd_JO-D98iY4DpzwVVfPQFoRIFHpQ5/view

⁴ <https://www.rcn.org.uk/professional-development/publications/rcn-independent-review-control-of-covid-19-in-health-care-settings-uk-pub-009-627>

⁵ <https://www.tridenthse.co.uk/covid-report.pdf>

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