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MEMORANDUM E (20) 175 (C)

FROM: Robin Swann MLA
MINISTER OF HEALTH

DATE: 23 July 2020

TO: EXECUTIVE COLLEAGUES

FINAL EXECUTIVE PAPER: WEARING OF FACE COVERINGS

1. Current Department of Health advice as agreed by the Executive is to strongly encourage members of the public to wear face coverings when in enclosed settings where social distancing cannot be maintained for limited periods of time, such as retail environments. The public message had been consistent for a number of weeks, with a strong recommendation that face coverings should be worn. The take up thus far is no greater than 10%, which is unlikely to have any significant impact on community transmission.
2. The current advice is that around 80% usage by the beginning of September is required before we enter the Autumn/Winter high risk period. This is in order to maximise the chance of keeping the virus within manageable levels, thereby mitigating the health consequences and to reduce the likelihood of a second lockdown with the associated economic and wider societal consequences.
3. The Executive agreed that wearing of face coverings should be mandatory on Public Transport from 10th July, subject to some exemptions. This mandatory position on public transport has shifted the take up there to over 70%. The Department has been advised through informal discussions with the PSNI that this has proceeded uneventfully.
4. Although community transmission of the virus is currently at a low level in NI, relaxations of restrictions around social distancing and the numbers of people who are allowed to gather together in a range of indoor settings establish an increasing context in which “superspreader” events and clusters are likely to emerge, and therefore the use of face coverings is likely to be particularly beneficial. As a consequence of the decisions previously taken by the Executive

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it is estimated that less than 5% of the general population in NI has been infected with SARS-COV-2. Up to 95% of the population therefore remains susceptible to infection and as a consequence any second wave or waves in the autumn and winter could be significant with potentially greater health, economic and wider societal impacts than in the first wave.

5. In addition, the decision to pause shielding means that an increasing number of the elderly and vulnerable, estimated to be in the region of 98,000 people, will be present in indoor environments from the beginning of August. Since the main benefit of face coverings is to protect others, from the wearer, more widespread uptake is particularly important at this time.
6. In light of evolving evidence and proposals to relax restrictions in relation to indoor interactions, I am recommending that the Executive take measures to ensure that there is widespread use of face coverings in all indoor settings where interactions with individuals from other households take place. This should include retail environments, healthcare environments and other enclosed indoor settings where it is not possible to consistently maintain social distancing of 2m or more. The same exemptions would apply as for public transport and for certain environments where eating and drinking or aerobic exercise is the primary purpose of attendance. In addition, there would be an exemption for employees and school pupils due to difficulty in wearing face coverings for prolonged periods of time and/or where there would be associated health and safety issues. Other environments and circumstances will be addressed in detailed FAQ to support engagement and education subject to the Executive's consideration and decision.

EVIDENCE TO DATE

7. I have continued to keep emerging evidence about the benefits of face coverings under review. In the absence of clinical trials demonstrating the quantifiable benefit in reducing transmission, indirect evidence (including laboratory experiments and ecological / epidemiological studies) increasingly is suggestive of significant potential overall benefit in reducing the transmission of the virus. Evidence supporting their potential effectiveness comes from analysis of: (1) the

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incidence of asymptomatic and pre-symptomatic transmission; (2) the role of respiratory droplets in transmission, which can travel as far as 1-2 meters; and (3) studies of the use of homemade and surgical masks to reduce droplet spread. Analysis suggests that their use could reduce onward transmission by asymptomatic and pre-symptomatic wearers if widely used in situations where physical distancing is not possible or predictable. If correctly used on this basis, face coverings, including homemade cloth masks, can contribute to reducing viral transmission. **Annex A and Annex B** contain two papers of interest outlining a summary of the scientific evidence.

8. As a consequence of the emerging evidence as of the end of June the wearing of face coverings is mandatory in more than 50 international countries and increasing, including more recently France, Italy, Germany, Scotland, England and the Republic of Ireland.
9. Wearing of face coverings provides a degree of protection from the spread of the virus via respiratory droplets produced by the wearer. There is limited protection to the wearer from droplets spread by other people. Impacts of face coverings on the spread of the virus are greatest when a high proportion of individuals use them on all appropriate occasions.
10. It is possible that use of face coverings may also have negative effects, providing a false sense of confidence that leads to less social distancing and less caution around hand and respiratory hygiene including an increased frequency of hand-to-face contact. There is therefore a need for strong public health messaging in this area. This would provide advice about how to obtain or make face coverings, how to put coverings on and take off safely, how to dispose of or launder coverings safely, and the limited protection offered by coverings and the importance of adhering to social distancing and other measures. It will be important for key influencers to lead by example in the appropriate use of face coverings.

POLICY OPTIONS TO INCREASE USE OF FACE COVERINGS

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11. As discussed above, the strong recommendation by the Executive to encourage the wearing of face coverings in indoor settings has had little impact to date. In contrast, the mandatory requirement for face coverings on public transport has resulted in around 70% use with limited pushback from consumers and with the support of staff groups. Informal evidence suggests a similar experience in Scotland following the recent mandatory introduction of face coverings in retail settings.
12. Nonetheless, I recognise that some sections of the public and industry are resistant to the idea of mandatory recommendations for face coverings. In these circumstances, there is a case for a concerted education and information campaign to increase the use of coverings. It would be important to work with retailers and other relevant industry bodies to ensure that they are clear in terms of our intentions in this area and will collaborate closely with us during the educational phase.
13. However it is considered this alone would not achieve the required level of compliance a view supported by experience locally on public transport and internationally in a range of settings. I am therefore proposing to make the use of face coverings mandatory from 1 August in the settings describe in paragraph 6 above.
14. Employees and school pupils would be exempt from wearing face coverings, as would children under 13 and for those who by virtue of age, disability or underlying health conditions cannot wear them for a variety of reasons. People would self-declare as being exempt, and there are no plans for medical assessments of this or need to produce proof of being exempt. The proposed public information campaign would make clear that there are valid reasons for such exemptions and that these must be respected.
15. It is not envisaged that shops and other settings would have a role in challenging customers. The focus would be on engaging, educating and supporting, and formal enforcement would be a last resort.

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16. It is recognised that for the general public the wearing of face coverings represents a major cultural shift. There are many strong views, both for and against, however the recent experience on public transport shows what can be done with an effective combination of public messaging and a legal requirement. The exemptions above are important therefore, and it is important that we avoid stigmatising those who need to avail of them.
17. Whilst consideration was given to a voluntary introduction of face coverings, I do not believe this will provide the necessary compliance. To delay regulation further, even by a month, would miss the opportunity to maximise the benefit in the intervening period, and this could provide crucial in avoiding a second wave in the autumn with the return of schools and universities and particularly as we proceed into winter pressures season, with seasonal influence other respiratory viruses and potentially other waves of COVID-19.

ENFORCEMENT

18. As indicated in paragraph 10 the early experience on public transport in NI and in Scotland in retail settings has been positive. Ultimately enforcement, where required, would be a matter for PSNI, as has been the case with the other restrictions/requirements, but it is likely that the emphasis would continue to be on the Fixed Penalty Notice (FPN) mechanism. It is proposed further engagement with industry representatives would take place to develop options for processes to be in place to enable staff to seek assistance where required.
19. Early informal engagement has taken place with ACC Alan Todd of PSNI, and they are supportive in principle of the approach and a role in enforcing these requirements. Such enforcement would as in the early days of the pandemic and take the form of visibility and engagement with the public in the context of other operational priorities. Subject to the Executive's agreement my officials will continue to work with PSNI in this regard.
20. Given the cultural shift and the need to educate the public on the reasons behind these requirements, as well as provide time for them to comply, it is intended to

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introduce an incremental and proportionate approach to enforcement with an emphasis on education and engagement in the first instance. PSNI would support this approach, and envisage visibility and engagement in the early weeks as the most favourable approach. The implementation date of any formal enforcement, such as the issuing of FPNs, would therefore be delayed until the 20th August to allow time for public engagement and building support.

CONSULTATION

21. A meeting was held with representatives from the retail sector, hospitality sector and personal services sectors. There were mixed views on whether mandatory face coverings would deter trade, or provide customers with more confidence and no evidence of impact. It was noted that it would provide additional protection to staff.
22. Concerns were noted around the potential for increased abuse for staff working in premises in which face coverings were required to be used, should this become mandatory, and strong views that enforcement of this should not be for staff to address enforcement. Questions were asked as to why this was not introduced earlier, and this was addressed as CSA provided background on the emerging evidence.
23. On the whole the representatives were more in favour of a public information campaign and voluntary approach; however, as outlined above I do not consider this will achieve the necessary compliance given evidence to date without a clear indication of our intention to make the use of coverings mandatory in the future if uptake through voluntary use is inadequate.
24. It is the view of the CSA and CMO that a delay in a decision to move to mandatory introduction will result in a delay in the maximum benefit in the suppression of community transmission of SAR-COV-2 as restrictions are relaxed and as behaviours change. It will also mean in a shorter timeframe for the significant societal cultural change required and the necessary sector adaptation required.

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25. The industry representatives asked that time is given to adequately prepare for any change. I believe the proposal to make their use mandatory from the 1st August, subject to the exceptions listed above, achieves this balance.

RECOMMENDATION

26. It is recommended that the Executive

- (1) support a policy of achieving a sufficient proportion of the population, as assessed by CSA and CMO, using face coverings in indoor settings with individuals from other households, subject to the exemptions allowed for public transport and additional exemptions outlined above;
- (2) agree to amend legislation to include the provision to provide for the mandatory use of face covering when in enclosed public settings where social distancing cannot be maintained for limited periods of time, such as retail environments, from 1 August; and to engage with the public until the 20th August to raise awareness of the benefit and to build public support; and
- (3) agree to a clear public information campaign to reinforce current messaging on hand and respiratory hygiene and to encourage use of face coverings to: protect others; prevent transmission; protect our economy and prevent a second wave.

**Robin Swann MLA
MINISTER OF HEALTH**

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Annex A

Delve Paper 1



Delve face
coverings.pdf

Annex B

Delve Paper 2



Delve face
coverings update.pc