

Message

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**From:** [NR] /O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=49934B1FB34744AE9EFEA44D958FE73A [NR]  
**Sent:** 27/02/2024 10:52:28 AM  
**To:** [Name Redacted]  
**Subject:** FW: review of IPC guidance and selection of respiratory protection  
**Importance:** High

Kind regards

[NR]  
Senior Legal Officer and Solicitor  
RCN Legal Services Directorate  
4<sup>th</sup> Floor, RCN HQ, 20 Cavendish Square London W1G 0RN

**Switch Board:** [Irrelevant & Sensitive]  
**Direct line:** [Irrelevant & Sensitive]  
**E-mail:** [NR]@rcn.org.uk

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**From:** Rose Gallagher <Rose.Gallagher@rcn.org.uk>  
**Sent:** Tuesday, February 27, 2024 10:10 AM  
**To:** [NR]@rcn.org.uk  
**Subject:** FW: review of IPC guidance and selection of respiratory protection  
**Importance:** High

To read

*Rose Gallagher MBE (she/her)*  
*Professional Lead Infection Prevention and Control/Nursing Sustainability Lead*  
*Royal College of Nursing*  
*20 Cavendish Square, London, W1G 0RN*  
*Direct line* [Irrelevant & Sensitive]  
*Twitter @gallagher\_rose*

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**From:** Rose Gallagher  
**Sent:** Monday, November 23, 2020 10:20 AM  
**To:** RITCHIE, Lisa (NHS ENGLAND & NHS IMPROVEMENT - T1520) <[lisaritchie@nhs.net](mailto:lisaritchie@nhs.net)>  
**Cc:** TRANKA, Sue (NHS ENGLAND & NHS IMPROVEMENT - T1520) <[s.tranka@nhs.net](mailto:s.tranka@nhs.net)>; Susan Masters <[Susan.Masters@rcn.org.uk](mailto:Susan.Masters@rcn.org.uk)>  
**Subject:** review of IPC guidance and selection of respiratory protection  
**Importance:** High

Hello Lisa, I wonder if you could clarify the situation below on language and whether any amendments to the IPC guidance are being planned for the near future to support the concerns below?

I am receiving a number of enquiries regarding the IPC guidance and recommendations for the different types of respiratory protection available at this time. I'm aware that the current UK IPC guidance supports the 3 pathway approaches however there are increasing questions regarding the effectiveness of FRSM's in 'green' and amber pathways where the presence of covid-19 cannot be excluded.

Having previously looked at the language used to describe 'aerosol' and airborne transmission back in September when CDC appeared to amend information on their website on implications for AGP's, we are now being asked about the effectiveness of FRSM's in all settings and whether FFP3/2 masks would better protect HCWs at this time of high transmission of SARS-CoV-2.

This question is now more pertinent given the publication of the Government video on opening windows in homes to reduce the risk of infection and the language used within this and implications for wider calls for the use of FFP3/2 masks.

The recent publication on the gov.uk website of the need for ventilation in homes

<https://www.gov.uk/government/news/new-film-shows-importance-of-ventilation-to-reduce-spread-of-covid-19> talks of infective particles remaining in the air for long periods. This infers airborne transmission based on the language used on the CDC website <https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-sars-cov-2.html>. This says '*Airborne transmission is infection spread through exposure to those virus-containing respiratory droplets comprised of smaller droplets and particles that can remain suspended in the air over long distances (usually greater than 6 feet) and time (typically hours)*'. This aligns with gov.uk language on 'particles' aligned to the recent video.

The UK IPC guidance and policy does not currently support any mention of airborne transmission however we seem to have conflicting language and advice. From a HCW perspective, who are members of the public, the advice applies to their homes as well as those home who they visit to deliver care. Questions are being asked regarding the risk of infection inside health and care environments where ventilation cannot be controlled (from an engineering or simple opening window perspective) where the concentration of 'particles' in the air will be higher due to the presence of patients with covid-19.

I would be really grateful if you could clarify the situation as soon as possible with regard to the IPC guidance and any updates, and the gov.uk video so I can support our members to understand the current position and rationale for the status of guidance.

With best wishes

Rose

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Professional Lead Infection Prevention and Control/AMR

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**Irrelevant & Sensitive**

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