



To:

Chief Executives NHS Scotland
Chairs NHS Scotland
Workforce Senior Leadership Group
HR Directors
National Staffside Representatives
Medical Directors
Nursing Directors
Employee Directors
Chief Officers (NHS Boards and Local Authorities)
Local Authority Chief Executives
Chief Social Work Officers
Chief Officers H&SCP
Care Inspectorate
Scottish Social Services Council (SSSC)
Scottish Care
Coalition of Care and Support Providers in Scotland
Funded Health and Social Care Partners
Directors of Public Health

14th August

Colleagues

Forthcoming UK IPC guidance for the remobilisation of health and care services

Work has been under way to develop new UK-wide Infection Prevention and Control (IPC) guidance as the UK moves to remobilise health and social care services. The guidance is due to be published next week and will be accessible via the COVID-19 section of the Health Protection Scotland (HPS) website. We will share the link with you once it becomes available.

This guidance will be issued jointly by the Department of Health and Social Care, Health Protection Scotland (HPS), Public Health Scotland (PHS), Public Health Wales, Public Health Agency Northern Ireland, Public Health England (PHE) and NHS England as official guidance and will be hosted on the PHE website. National stakeholder bodies such as the Academy of Royal Colleges and trade unions have been briefed on the new guidance and they will continue to be updated if the guidance changes.



Whilst parts of the UK remain in 'sustained community transmission' for COVID-19 infection, across the four countries the epidemiological data indicates that we are moving from a period of high community and hospital prevalence/incidence into a period of low prevalence/incidence with isolated outbreaks still being identified.

The guidance outlines key COVID-19 IPC measures such as the use of PPE, extended use of face masks and coverings, physical distancing, and outbreak management, as well as risk assessed patient care pathway scenarios to help guide the implementation of measures for safe and effective care. It is based on the best available global evidence using local and national prevalence to guide service restoration.

This guidance supersedes the existing COVID-19 UK Infection Prevention and Control guidance last updated on 18 June.

Key messages

The key messages are as follows:

- Infection prevention and control measures are critical to minimise the risk of transmission of COVID-19 and other infections in health and social care settings.
- Physical distancing, hand washing and wearing a mask remain the key elements for preventing the spread of COVID-19.
- As we move into a new phase of the COVID-19 response, this guidance supports the safe remobilisation of health and social care services.
- The guidance recommends the safest level of PPE to protect health and social care workers in line with contact and droplet precautions, or airborne precautions when an Aerosol Generating Procedure (AGP) is being undertaken. This guidance aligns with Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs) detailed in Chapter 1 and 2 of [the National Infection Prevention and Control Manual \(NIPCM\)](#) which has been implemented in Scotland since 2012.
- Sessional use of single use PPE items has been minimised and now **only** applies to [extended use of face masks for health and social care workers](#).
- Extended use of face masks/face coverings, in addition to physical distancing and hand hygiene for staff, patients and visitors respectively - within both clinical and non-clinical areas - to further reduce transmission risk. See further details in the final paragraph of this letter: 'Extended use of face masks in all health and social care settings'.
- Physical distancing of 2 metres is considered standard practice in all health and care settings.
- Management of patient flow within COVID-19 pathways: high risk, medium risk and low risk and includes the IPC precautions which should be used based on that risk (i.e. SICPs plus Type IIR face mask and TBPs).

The recommendations apply to all health and care settings (acute, primary care, social care and community care).

Standard IPC Precautions (SICPs)

SICPs are the basic infection prevention and control measures necessary to reduce the risk of transmitting infectious agents from both recognised and unrecognised sources of infection and are required across all COVID-19 pathways.

SICPs are detailed in [Chapter 1 of the NIPCM](#) which has been implemented in Scotland since 2012.

These precautions must be used by all staff, in all care settings, at all times and for all patients, to ensure the safety of patients, staff and visitors.

Physical distancing (2m)

Maintaining physical distancing of 2 metres is considered standard practice in all health and social care areas across the UK (unless when wearing PPE to provide clinical care).

To achieve physical distancing, healthcare services should implement measures to establish separation between care pathways; for example through the provision of separate entrances/exits or use of one-way entrance/exit systems, clear signage, and restricted access to communal areas.

Transmission Based Precautions (TBPs)

TBPs are additional measures required when caring for patients with COVID-19 and are based upon the route of transmission - contact, droplet, or airborne.

TBPs for each route of transmission (contact, droplet and airborne) are detailed in [Chapter 2 of the NIPCM](#) which has been implemented in Scotland since 2012.

NHS Scotland healthcare settings

In accordance with the key messages set out above, we expect NHS Scotland Boards to start implementing this UK-wide IPC remobilisation guidance once it has been published. We will share a link to the guidance with you once it becomes available.

We do however recognise that Boards will require some additional time to implement the COVID-19 risk pathways and ask that you work towards this, with support from National Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland (NSS) over the coming fortnight. Please note that the pathways detailed in the guidance are examples, based on the current policy in other areas of the UK. We therefore ask you to consider, with support from National ARHAI Scotland (NSS), how to implement the pathways in a way which is workable and effective within your local context as part of your own remobilisation plans.

Please note that the COVID-19 Nosocomial Review Group has also made recommendations in relation to patient admission testing in Scotland and this will be communicated to you as soon as a decision has been made.

Social care settings

As detailed above, the guidance applies to all health and social care settings. You will be aware that, in Scotland, we have published specific guidance for non-acute settings. Work is underway to update the existing non-acute guidance in Scotland to ensure that it aligns with the new UK remobilisation guidance (the key messages in the new guidance are outlined above). We expect the social care sector to start implementing the UK remobilisation guidance over the coming fortnight once the corresponding non-acute guidance in Scotland has been updated.

National ARHAI Scotland (NSS) has been closely involved in the development of the new UK IPC remobilisation guidance and is available to answer any queries in relation to implementation. National ARHAI Scotland (NSS) can be contacted at:
nss.hpsinfectioncontrol@nhs.net

In addition to this, National ARHAI Scotland (NSS) will be developing additional FAQs and infographics to support the health and social care sector to implement this guidance.

Extended use of face masks in all health and social care settings

You will be aware that the Scottish Government has already published guidance on [the extended use face masks in health and social care settings](#). The guidance and accompanying FAQ for staff will be updated to align with the UK IPC guidance for the remobilisation of health and care services once it is published. The guidance will be updated to include primary care and wider community care settings (including respite, day care and care at home), in addition to acute hospitals (including mental health, paediatrics and maternity), community hospitals, and care homes.

Please be aware that we have tried to highlight some specific key messages in this letter, however, it does not cover all changes. As such, we urge you and your frontline staff to read the full UK guidance document once it is published.

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