

Core brief

Daily COVID-19 update (1 April 2020, 3.45pm)

Topics in today's Core Brief:

- Advice on PPE
- Updated FAQs and Risk Assessment
- Use of Social Media
- HMRC Tax Scam Alert

Advice on PPE

In yesterday's Core Brief we issued the latest national COVID-19 [guidance for staff and managers published by the Scottish Government](#). All staff are required to read and comply with this guidance.

We continue to receive enquiries from colleagues about which PPE should be worn in which circumstances when caring for patients with suspected/confirmed COVID-19. FFP3 masks are NOT required for the care of all positive or suspected COVID-19 patients. They are required as part of the protective equipment used when performing aerosol generating procedures only.

The following graphic from Public Health England has been included in the Scottish Government guidance issued yesterday and makes clear which PPE should be used for different patients.

When to use a surgical face mask 	When to use an FFP3 respirator 
<p>In cohorted area (but no patient contact)</p> <p>For example: Cleaning the room, equipment cleaning, discharge patient room cleaning, etc</p> <p>PPE to be worn</p> <ul style="list-style-type: none"> • Surgical face mask (along with other designated PPE for cleaning) 	<p>When carrying out aerosol generating procedures (AGP) on a patient with possible or confirmed COVID-19</p> <p>In high risk areas where AGPs are being conducted (eg: ICU)</p> <p>The AGP list is:</p> <ul style="list-style-type: none"> • Intubation, extubation and related procedures such as manual ventilation and open suctioning • Tracheotomy/tracheostomy procedures (insertion/open suctioning/removal) • Bronchoscopy • Surgery and post-mortem procedures involving high-speed devices • Some dental procedures (such as high-speed drilling) • Non-Invasive Ventilation (NIV) such as Bi-level Positive Airway Pressure (BPAP) and Continuous Positive Airway Pressure ventilation (CPAP) • High-Frequency Oscillating Ventilation (HFOV) • High Flow Nasal Oxygen (HFNO), also called High Flow Nasal Cannula • Induction of sputum <p>PPE to be worn</p> <ul style="list-style-type: none"> • FFP3 respirator • Long sleeved disposable gown • Gloves • Disposable eye protection
<p>Close patient contact (within one metre)</p> <p>For example: Providing patient care, direct home care visit, diagnostic imaging, phlebotomy services, physiotherapy, etc</p> <p>PPE to be worn</p> <ul style="list-style-type: none"> • Surgical face mask • Apron • Gloves • Eye protection (if risk of contamination of eyes by splashes or droplets) 	<p>Always fit check the respirator</p>

In addition, within NHSGGC, we are continuing to recommend FFP3 for CPR 1st responders.

Colleagues have also asked for information on how long PPE can be used for and when they should be changed. The advice from the Infection Control and Prevention Team is:

- FFP3 respirators are single use/disposable and should be changed after each use. Other indications that a change in respirator is required include: if breathing becomes difficult; if the respirator becomes damaged; or if the respirator becomes obviously contaminated with body fluids such as respiratory secretions. FFP3 masks can be worn for a number of hours before they would need to be changed.
- Fluid resistant surgical masks can be worn until they are moist, damaged or contaminated with blood or body fluids.
- In ITU, cohorts masks can be worn for the duration staff are in the patient area.

Our Procurement Team is continuing to work closely with the Scottish Government, National Procurement and local suppliers to source PPE for staff. National Procurement have advised that on the basis of their predictions of national requirements, they have sufficient quantities available. They have encouraged all Boards to continue to use stock appropriately. We would also ask staff to consider how they are using PPE and to follow the guidance, including advice on the length of time PPE should be worn, in order that stock can be preserved and allocated to those who need it.

Updated FAQs and Risk Assessment

We have updated the FAQs and Risk Assessment Form which includes further clarity on asthma. [Click here for further information.](#)

Use of Social Media

We reminded all colleagues about the guidance on personal use last week but we have been asked to issue a further message on social media to protect you and your colleagues and to safeguard patients.

Please be aware that even in a close group of friends such posts can enter the public domain.

- Do not post **information relating to patients**, either groups of patients or individuals. We don't want to cause upset or give the impression of compromising confidentiality.
- Do not post information relating to **care pathways**. Taken out of context these can be misunderstood very easily.
- Do not post information relating to **hospital access**. This can compromise security.

HMRC Tax Avoidance Scam

Counter Fraud Services have issued an intelligence alert about a tax scam which is targeting returning NHS workers under the COVID-19 scheme. [Click here for further information.](#)

Please keep up-to-date with the latest guidance on our dedicated web pages at: www.nhsggc.org.uk/covid19. If you have any questions about the current situation please check the [FAQs](#) first. If you have any further questions, please email: staff.covid19@ggc.scot.nhs.uk

Staff are reminded to make sure their [personal contact details are up to date on eESS](#).

**It is important to share Core Brief with colleagues who do not have access to a computer.
A full archive of printable PDFs are available on [StaffNet](#)**