

Theme 5: Investigation of the strategic elements of the handling of the pandemic relating to the supply, distribution, and use of Personal Protective Equipment

By the Usher Network for COVID-19 Evidence Reviews (UNCOVER), Usher Institute, University of Edinburgh



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Disclaimer

This rapid review has not been peer-reviewed and we have not conducted quality assessment of the included studies. Many of the included studies are pre-print publications or reports and therefore not peer-reviewed either. This review should not replace individual clinical judgement and the sources cited should be checked. The views expressed represent those of the authors and are not a substitute for professional medical advice.

Disclaimer:

This report was commissioned by the Scottish Covid-19 Inquiry as introductory scoping research. It was written to assist the inquiry with its planning process about the shape and direction of its investigation, and is published in the interests of transparency. The inquiry is grateful to the author[s] for their work. The inquiry is an independent body, and will be carrying out its own investigations to fulfil its terms of reference. The introductory research represents the views of those who wrote it, and nothing in it is binding on the inquiry. The introductory research is one of many sources which will be considered by the inquiry during the course of its investigation.

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Executive summary

In accordance with the terms of reference for Portfolio 1, this report focuses on theme 5: **The supply, distribution and use of Personal Protective Equipment (PPE)**. The specific scope of the report is to provide information about the key events, key people and key documentation to assist the Scottish Inquiry with their investigation.

A detailed analysis is presented, including the sources of information, the key events, the main findings and a list of the main questions or remaining issues, is presented separately. In addition, a detailed appendix table with the key information for each key event extracted is included.

The key sub-themes that emerged for this theme include: 5.1 PPE production, supply, distribution, and availability in health care settings; 5.2 The type of PPE in health and social care settings; and 5.3 Advice and regulations for community facemask or face covering use.

The potential questions for the Inquiry to consider are:

5.1.1 Recommended improvements in PPE identified as part of pandemic preparedness exercises were not fully implemented.

5.1.2 Is it possible to understand what the stockpile level need calculation was based on in the two preparedness exercises?

5.1.3 Has there been an audit exercise to assess the main reasons why the PPE levels were less than required?

5.1.4 Did the understanding and hence definition of aerosol generating procedures drift over time? Did the need for FFP3 depended on understanding of the extent to which COVID spread by aerosols [versus droplets]?

5.1.5 If the NHS NSS had been able to buy PPE at the same prices as applied in 2019, it would have spent £37.4 million less on PPE stock in the first five months of the pandemic. How could government have acted to control price?

5.1.6 The fragility of supply chains and procurement systems/regulation in circumstances of significant demand and the challenges of engaging private sector with little history of health care work.

5.1.7 At points during April 2020, PPE stocks held centrally were very low as the stock was rapidly distributed to NHS boards. What was the impact of this?

5.1.8 The process of awarding government contracts (which led to led to inequities in access to PPE early in the pandemic, including the lack of PPE for frontline and essential keyworkers such as social care staff and retail workers). How access to PPE was determined fairly (impact on equalities)?

5.1.9 NHS NSS established new arrangements to provide PPE to primary and social care early in the pandemic, because their supplies failed.

5.1.10 PPE availability and supply issues in care homes and other settings.

5.1.11 A parliamentary public spending watchdog has concluded that the UK government wasted hundreds of millions of pounds of taxpayers' money on poor quality and unusable PPE while leaving frontline workers insufficiently protected from Covid-19. How has this affected Scotland?

5.1.12 Inequities in access to PPE for some frontline workers – e.g. retail, social care, different health care roles (impact on equalities). Was prioritisation of PPE provision considered within an ethics framework?

5.1.13 A harm of the pandemic is the massive increase in use of disposal PPE and its great impact on waste, use and disposal of plastics. What actions were/are being taken to mitigate this? Are there any alternatives to disposable PPE considered?

5.2.1 PPE availability issues for healthcare workers in the early stages of the pandemic. How did prioritization occur and how fairly was this done?

5.2.2 PPE availability issues for social care workers in the early stages of the pandemic. How did prioritization occur and how fairly was this done?

5.2.3 Type of PPE for health and social care workers (at the start of the pandemic and then again in 2021).

5.2.4 Timing of first PPE guidance for health and social care workers (02/04/2020).

5.2.5 PPE guidance for social care homes was initially included with guidance for health care workers and these two were separated on 23/06/2021.

5.2.6 Variation among hospital trusts on implementation of infection prevention control guidelines.

5.3.1 Conflicting messages and confusing guidance around PPE in the early stages of the pandemic. What did this mean for building trust in government policy? Use of ethical arguments to support messaging – solidarity, altruism, individual vs population. Was there any community consultation on communication?

5.3.2 Use of face masks in secondary schools from 31/08/2020 to 28/02/2022.

5.3.3 The fit of masks for ethnic minorities and women (impact on equalities).

5.3.4 Issues in relation to the use of masks for people that rely on lip reading (impact on equalities).




5.3.5 Issues in relation to people being subject to hate crimes or refused access to shops when exempted before the issue of exemption cards (impact on equalities).


5.3.6 What was the impact on those trying to enforce mask wearing (including shop assistants, bus drivers)?

Introduction

Theme 5 of Portfolio 1 relates to the investigation of the strategic elements of the handling of the pandemic relating to the **supply, distribution and use of Personal Protective Equipment (PPE)**. PPE can include gloves, gowns and different types of masks or other items, which protect the face and eyes. It is used to protect the user from health and safety risks. The different types of masks/ face coverings are presented in **Table 5.1**.

Table 5.1 Different types of masks/ face coverings

Type of Mask	Description	Image
A face covering or simple face mask	<p>A face covering can be a covering of any type, except a face shield, that covers the mouth and nose. This includes transparent face coverings. It is recommended that face coverings are made of cloth or other textiles, should be two or three, layers thick in line with WHO recommendations and fit snugly around the mouth, nose and chin while allowing the user to breathe easily.</p>	 <p>https://brooklynsurvival.com/product/neoprene-simple-face-mask/</p>
Surgical or medical grade masks	<p>They consist of thin disposable tissue and fleece. If the wearer of the mask coughs or sneezes most of the droplets from the mouth, throat and nose get caught in the mask. Surgical or medical medical-grade masks were worn during COVID-19 across health and social care settings when providing direct patient care, entering an area where direct care is undertaken, and when cleaning rooms and equipment.</p>	 <p>https://www.sja.org.uk/first-aid-supplies/personal-protection/face-eyes-and-ear-protection/pack-of-50-type-1-surgical-face-masks/</p>
FFP/ FFP1	<p>FFP masks are available either as disposable masks, usually made of strong pressed cellulose with a filter element and an exhalation valve, or as plastic masks in which a suitable filter is then inserted. The FFP1 is the most basic of FFP masks. They are usually used to protect during DIY tasks such as sanding.</p>	 <p>https://streetsolutionsuk.co.uk/blogs/news/what-is-the-difference-between-ffp1-ffp2-and-ffp3-face-masks</p>

<p>FFP2/N95/KN95</p>	<p>The FFP2 mask offers more protection than the FFP1. It is the EU equivalent of the US N95 standard and recommended by the World Health Organisation during the outbreaks of SARS and avian flu. It offers protection from deleterious substances in the air such as lead dust, as well as aerosols, smoke, it is therefore a popular mask in mining and metal industries.</p>	 <p>https://streetsolutionsuk.co.uk/blogs/news/what-is-the-difference-between-ffp1-ffp2-and-ffp3-face-masks</p>
<p>FFP3/N99/EN149/P3</p>	<p>The FFP3 offers the highest protection from breathing in hazardous substances in the environment. The mask can protect from a variety of toxins, such as asbestos, bacteria, viruses. They must be fit tested to ensure a good seal between the wearer's face and mask. During COVID-19, they were used during aerosol-generating procedures (AGPs) and within Intensive Care Units (ICUs).</p>	 <p>https://streetsolutionsuk.co.uk/blogs/news/what-is-the-difference-between-ffp1-ffp2-and-ffp3-face-masks</p>

The main aim of this scoping review was to identify the key decisions or key milestones and the key players for issues specific to Theme 5. We include relevant documentation that describes these events and if available academic peer-reviewed or pre-print literature. In addition to the key issues that were highlighted by the public inquiry, we include additional issues identified by this scoping review. We discuss the impact of these issues on equalities. Finally, we suggest a prioritisation for the investigation of specific events using pre-defined criteria.

Findings

Key events together with dates, key players, and relevant documentation concerning PPE issues are presented in **Appendix Table 5.1**. From reviewing the timeline three key sub-themes emerged:

- 5.1) PPE production, supply, distribution, and availability in health and social care settings, which was primarily relevant to the initial months of the pandemic (March 2020 – June 2020)
- 5.2) Use of PPE and type of PPE in health and social care settings.
- 5.3) The advice and subsequently regulations for community face mask or covering use (including the type of face masks, use in specific places e.g. indoor settings and from specific populations e.g. pupils)

Below we describe each subtheme separately by presenting the main events, key issues, and potential areas for investigation.

Sub-theme 5.1: PPE production, supply, distribution, and availability in health care settings Before the pandemic

The arrangements for obtaining and distributing PPE before the pandemic are presented in **Figure 5.1**. The [PPE Audit report](#), published in 2021, concluded that pre-pandemic demand for PPE was significantly lower and the national pandemic stockpile (which at that point did not include care homes or primary health care settings) was not enough to meet the extraordinary demands of the COVID-19 pandemic. An [NHS in Scotland Audit report](#), published in 2020 found that although the Scottish Government conducted two pandemic preparedness exercises ([Exercise Silver Swan](#) in 2015 for a flu pandemic and [Exercise Iris in 2018](#), which was a table top exercise held in March 2018 to assess NHS Scotland’s response to a suspected outbreak of Middle Eastern Respiratory Syndrome), that identified access to, and training in the use of PPE as areas for improvement, did not fully implement the recommendations from these preparedness exercises.

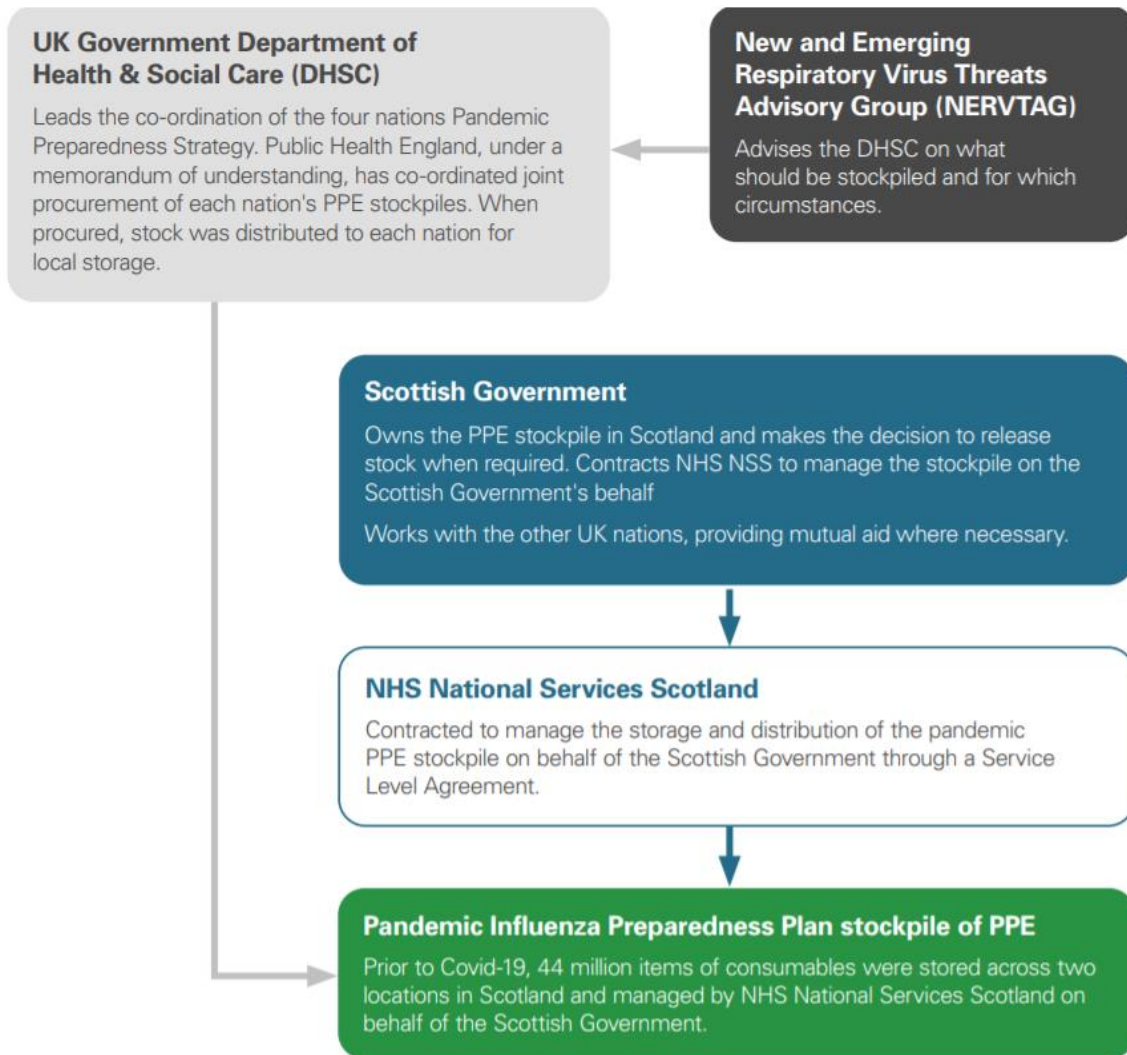


Figure 5.1 Management of the PPE stockpile, [PPE Audit report](#)

During the pandemic

Worldwide demand for PPE increased dramatically and at points in April 2020 centrally held stocks were very low. In the early stages of the pandemic, organisations representing the frontline workforce raised concerns with the Scottish Government about both the availability and suitability of PPE provided to those working in health and social care. Concerns included PPE availability issues and whether the guidance on what PPE to use adequately protected healthcare workers. In April 2020, a [survey](#) on the use and availability of PPE by the Scottish members of the Royal College of Nursing showed that 25% of respondents working in high-risk environments reported that they had not had their mask fit tested and 47% reported being asked to re-use single-use PPE. Similarly, a British Medical Association (BMA) [survey](#) of its Scottish members, carried out at the end of April 2020, found that 29% of respondents who carried out AGPs reported shortages of full-face visors and 13% reported shortages of FFP3 masks. Of those working with possible or confirmed COVID-19 patients but not carrying out AGP, availability of eye protection was the main concern, with 24% reporting shortages.

On 24/01/2020 PPE was distributed to GPs from the pandemic stockpile. In March and April 2020 the following key events took place that highlights the issues concerning PPE availability. On 19 March, a call convened, initially daily, between the Scottish Government, NHS Scotland, and government organisations to develop Scottish PPE manufacturing and the NHS NSS set up a social care helpline to triage urgent requests. On 22 March a letter from the Minister for Trade, Innovation and Public Finance was sent to Scottish companies appealing for support with the provision of PPE. On the 23rd of March, The NHS supply chain set up an external mailbox to receive offers from companies and on the 27th of March, a Single Point of Contact group was established as a forum to address PPE issues at the NHS Health Board level. On the 30th of March, a delivery of 8 weeks' worth of PPE was sent to all GP surgeries in Scotland.

By April 2020, centrally held PPE stocks were very low, with NHS NSS holding less than a day's worth of stock of long sleeve gowns and a few days' of other key items in its warehouses. On 1 April the Scottish Government set up a PPE helpline mailbox for health and social care staff to report PPE issues and on 17 April an online portal was established for NHS boards to report PPE supply issues. On 18 April NHS NSS distributed one week's supply of PPE to all care homes in Scotland and on 18 April a charter flight from China carrying essential PPE and NHS supplies landed in Scotland. On 27 April Local PPE hubs were established to supply social care providers with PPE where normal supply routes have failed. The hubs were run by local Health and Social Care Partnerships. On 28 April the Health and Sport Committee holds a session on COVID-19 where issues related to lack of PPE were discussed.

Over the summer of 2020 the situation around PPE availability improved since COVID-19 cases fell, orders arrived, and NHS NSS increased the level of centrally held PPE stock. More PPE is now made in Scotland, and Government reports that 88% of PPE (excluding gloves) is now made in Scotland. This has stabilised the supply chain. On 4 June the Scottish Government published [a report on Personal Protective Equipment supplies](#), which presents how the Scottish Government supports the front line services and has built a more self-sufficient supply system during the coronavirus pandemic. On 16 July the Scottish Affairs Committee published an [interim report on](#)

[intergovernmental working](#) where they investigated what additional measures the UK and Scottish Governments could have taken to ensure that Scottish key workers would have been able to gain access to PPE.

On 28 October 2020, the Scottish Government published its [PPE Action Plan](#), with the aim of ensuring that PPE of the right quality gets to the people who need it. The Plan's scope includes health, social care, other workplaces and settings where COVID-19 could put people at risk.

It is worth noting that NHS NSS' remit was extended to include social care and primary health care. At the start of the pandemic, primary care and social care providers, who would normally source PPE from private supply chains, found that their usual suppliers were unable to provide the increased levels of PPE needed. The Scottish Government expanded NHS NSS' remit to provide PPE to primary care providers and social care settings (including care homes and care-at-home services) which were unable to access PPE through their usual routes. On 19/01/2021 The Cabinet Secretary for Health and Sport wrote to the Convener regarding the extension of PPE support arrangements for primary care and social care providers, which was extended up to 30/06/2021.

Additional sources for the Inquiry to review

The Inquiry team may also want to review [parliamentary questions concerning PPE](#) and [additional audit reports](#) (including the NHS National Services Scotland Annual Audit reports and NHS Annual Audit reports for each Health Board separately). They may also need to consult the [PPE Audit report](#) on issues in relation to: a) how the Scottish Government worked with partners to address PPE supply challenges early in the pandemic and later on to develop a Scottish PPE supply chain; b) the approach to modelling demand for PPE and how that has developed over the course of the pandemic; c) the amount and cost of PPE bought; d) how the NHS NSS used emergency procurement regulations to directly award PPE contracts without competition e) how the Scottish Government is working with partners to develop longer-term plans for the procurement and supply of PPE. A PPE Audit report for 2021 is due to be released by Audit Scotland early in 2022.

Potential questions for the Inquiry to consider

The key issues that emerged from the scoping review in relation to sub-theme 1 include:

- 5.1.1 Recommended improvements in PPE identified as part of pandemic preparedness exercises were not fully implemented.
- 5.1.2 Is it possible to understand what the stockpile level need calculation was based on in the two preparedness exercises?
- 5.1.3 Has there been an audit exercise to assess the main reasons why the PPE levels were less than required?
- 5.1.4 Did the understanding and hence definition of AGP drift over time? Did the need for FFP3 depended on understanding of the extent to which COVID spread by aerosols [versus droplets]?

- 5.1.5 If the NHS NSS had been able to buy PPE at the same prices as applied in 2019, it would have spent £37.4 million less on PPE stock in the first five months of the pandemic. How could government have acted to control price?
- 5.1.6 The fragility of supply chains and procurement systems/regulation in circumstances of significant demand and the challenges of engaging private sector with little history of health care work.
- 5.1.7 At points during April 2020, PPE stocks held centrally were very low as the stock was rapidly distributed to NHS boards. What was the impact of this?
- 5.1.8 The process of awarding government contracts (which led to led to inequities in access to PPE early in the pandemic, including the lack of PPE for frontline and essential keyworkers such as social care staff and retail workers). How access to PPE was determined fairly (impact on equalities)?
- 5.1.9 NHS NSS established new arrangements to provide PPE to primary and social care early in the pandemic, because their supplies failed.
- 5.1.10 PPE availability and supply issues in care homes and other settings
- 5.1.11 A [parliamentary public spending watchdog](#) has concluded that the UK government wasted hundreds of millions of pounds of taxpayers' money on poor quality and unusable PPE while leaving frontline workers insufficiently protected from COVID-19. How has this affected Scotland?
- 5.1.12 Inequities in access to PPE for some frontline workers – e.g. retail, social care, different health care roles (impact on equalities). Was prioritisation of PPE provision considered within an ethics framework?
- 5.1.13 A harm of the pandemic is the massive increase in use of disposal PPE and its great impact on waste, use and disposal of plastics. What actions were/are being taken to mitigate this? Are there any alternatives to disposable PPE considered?

Sub-theme 5.2: Type of PPE in health and social care settings

Timeline

In January 2020, the four nations' public health high consequence infectious disease (HCID) group made an interim recommendation to classify COVID-19 as a HCID. But on 19 March 2020, COVID-19 was [no longer classified as a HCID in the UK](#), affecting the type of PPE required (i.e. full-body PPE was no longer required). Since then, FFP3 masks, which provide a high degree of filtration, were used during AGPs and within Intensive Care Units (ICUs), whereas surgical or medical-grade masks, were worn across health and social care settings when providing direct patient care, entering an area where direct care is undertaken and cleaning rooms and equipment. On [26/03/2020](#), SAGE discussed a Health and Safety Executive report that found no material difference between the N95 and FFP2 respirator masks. Both provide protection as long as the wearer is face-fit tested and on [31/03/2020](#) NHS England provided some research options to SAGE on nosocomial transmission and potential interventions, noting that ongoing work on PPE guidance is also linked to this. On [2/04/2020](#), Health Protection Scotland published its first guidance on what PPE frontline health and social care workers should be wearing in different settings and scenarios. The guidance had input from Royal Colleges and was endorsed by expert scientific groups, by the Scottish Government, COSLA, and SJC Unions. However, on [16/4/2020](#)

the SAGE Nosocomial Working Group has identified marked variation among hospital trusts on implementation of infection prevention control (IPC) guidelines. Following a [survey](#) in April 2020, on the use and availability of PPE by the Scottish members of the Royal College of Nursing which showed that 47% of members reported being asked to re-use single-use PPE, the Chief Nursing Officer issued a letter on [26/05/2020](#) to all NHS boards clarifying that single-use PPE should not be re-used. On [4/06/2020](#), SAGE endorsed the paper on mask-wearing to reduce transmission in hospitals and agreed that similar consideration should be given to care homes so that coordinated and consistent advice can be given and on [11/06/2020](#) this was also discussed by the Scottish Government COVID-19 Advisory Group. A [Coronavirus \(COVID-19\) guidance on the extended use of face masks and face coverings in hospitals, primary care, and wider community care](#) for Scotland, was published in July 2020 and updated on 18/09/2020, 23/09/2020, 2/10/2020, 20/10/2020, 9/11/2020, 7/06/2021, 23/06/2021, 5/07/2021, 8/10/2021, 3/12/2021. Initial versions of this guidance included advice for care homes, but on 23/06/2021 the guidance for care homes was separated to [form the COVID-19 - information and guidance for care home settings \(adults and older people\)](#).

In [February](#) and [March 2021](#), both the Scottish Government COVID-19 Advisory Group and SAGE had discussions about PPE related to mask type being used for health workers internationally. They concluded that decisions on policies on mask usage for health care workers lie within the NHS. Given the limited available evidence, it was not known what impact greater use of FFP3 masks would have on overall levels of transmission in health care workers. This was discussed again at the SAGE meeting on [22/07/2021](#), where the group considered whether it needed to review advice on the use of PPE in healthcare settings and at the Scottish Government COVID-19 Advisory Group on [5/08/2021](#), where they discussed if wider use of FFP3 masks was warranted.

Additional sources for the Inquiry to review

The Inquiry team may also want to review parliamentary questions concerning [PPE](#). The Inquiry may want to review all the minutes of the [COVID-19 Nosocomial Review Group](#) meetings since in most of their meetings they discussed issues around the use of face coverings in health and social settings. The main points were also discussed in the Scottish Government COVID-19 Advisory Group and are included in the timeline. The Inquiry may want to review the [Coronavirus \(COVID-19\): guidance on the extended use of face masks and face coverings in hospitals, primary care, and wider community care](#).

In considering ethical issues, the Inquiry might benefit from the work of the [UK Pandemic Ethics Accelerator](#).

Potential questions for the Inquiry to consider

The key issues that emerged from the scoping review in relation to sub-theme 2 include (some were also highlighted by the public inquiry):

- 5.2.1 PPE availability issues for healthcare workers in the early stages of the pandemic. PPE availability issues for healthcare workers in the early stages of the pandemic. How did prioritization occur and how fairly was this done?

- 5.2.2 PPE availability issues for social care workers in the early stages of the pandemic. PPE availability issues for healthcare workers in the early stages of the pandemic. How did prioritization occur and how fairly was this done?
- 5.2.3 Type of PPE for health and social care workers (at the start of the pandemic and then again in 2021).
- 5.2.4 Timing of first PPE guidance for health and social care workers (02/04/2020).
- 5.2.5 PPE guidance for social care homes was initially included with guidance for health care workers and these two were separated on 23/06/2021.
- 5.2.6 Variation among hospital trusts on implementation of infection prevention control guidelines.

Sub-theme 5.3: Advice and regulations for community face mask use

Non-pharmaceutical interventions have been shown to be beneficial to reduce transmission of infections transmitted through contact, droplets, and aerosols [1]. However, early in the pandemic there was limited evidence around the usefulness of face masks in reducing transmission of SARS-COV-2 in the community and the majority of the evidence was from Influenza studies [2]. In June 2020 a systematic review and meta-analysis including studies mainly on MERS, SARS and in health-care settings (but with a few studies on COVID-19) concluded that the use of face masks was protective for both health-care workers and people in the community exposed to infection [3]. In a more recent systematic review and meta-analysis, an overall pooled analysis showed a 53% reduction in COVID-19 incidence with mask wearing although heterogeneity between studies was substantial [1]. More systematic literature reviews can be found in the section Relevant evidence syntheses. A randomised controlled trial found that the recommendation to wear surgical masks in addition to other existing public health measures did not reduce the SARS-CoV-2 infection rate among wearers by more than 50% [4]. This trial was conducted in Denmark in a community with modest infection rates, some degree of social distancing, and uncommon general mask use. Finally, a recent randomised controlled trial indicated that mask wearing achieved a 9.3% reduction in seroprevalence of symptomatic SARS-CoV-2 infection and an 11.9% reduction in the prevalence of COVID-19-like symptoms [5].

Conflicting messages and confusing guidance around community use of face masks or coverings in the early stages of the pandemic

The first main issue for sub-theme 3 relates to conflicting messages and confusing guidance around community use of face masks or coverings in the early stages of the pandemic. The first time that the use of face masks for the general public was discussed in SAGE was on [4/02/2020](#), when the New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) advised that there is limited to no evidence of the benefits of the general public wearing face masks as a preventative measure. In a series of meetings in April 2020 ([7/04/2020](#), [9/04/2020](#), [14/04/2020](#)) SAGE and NERVTAG concluded again that increased use of masks would have a minimal effect (in terms of preventing the uninfected general population from becoming infected), based on a review of the available evidence and based on a [WHO report](#). However, on [21/04/2020](#), SAGE advised that, on balance, there is enough evidence to support the recommendation of

community use of cloth face masks, for short periods in enclosed spaces where social distancing is not possible. Following that, on [28/04/2020](#) the Scottish Government recommended for the first time that people cover their faces while in some public places such as shops and on public transport. The Scottish Government COVID-19 Advisory Group discussed the use of face coverings in enclosed public settings noting that this has been made mandatory in some other countries on [4/6/2020](#) and [11/06/2020](#). On 22/06/2020 face-coverings became compulsory for the first time on public transport in Scotland, with exemptions made for children under five and people with certain medical conditions. This was followed by becoming compulsory in shops on 10/07/2020, then in libraries, museums, and places of worship on 8/08/2020, by secondary school pupils in school corridors, communal areas, and on school buses on 31/08/2020 (use of face masks or coverings in schools will be discussed in the section below), in certain settings for Opening Higher Education and Further Education on 1/09/2020, in pubs, restaurants, and cafes when not eating on 10/09/2020. Since then the community use of face masks or coverings has been part of the wider NPIs restrictions employed by the Scottish Government depending on the state of the pandemic. [In February 2022 community use of face masks or coverings remains compulsory in Scotland](#) in shops, bars, restaurants, cafes and nightclubs, churches and other places of worship, public transport, including stations and bus stops, at work (including tradespeople working in people's homes) and in secondary schools.

Use of face masks or coverings in secondary schools

The second main issue for sub-theme 3 relates to the use of face masks or coverings in secondary schools. The first time the Scottish Government COVID-19 Advisory Group members discussed wearing face coverings in schools was on [28/07/2020](#). On [24/08/2020](#) the Scottish Government COVID-19 Advisory Group received an update from the Chair of the Education & Children subgroup on face coverings in schools and on Higher and Further Education. From 31/08/2020, school pupils in secondary schools were required to wear face masks or coverings in school corridors, communal areas, and on school buses. Secondary schools remained closed from the Christmas 2020 holidays until 19/04/2021. On 6/4/2021, First Minister Nicola Sturgeon confirmed that all secondary school pupils would return full time to the classroom after the Easter holidays (19/04/2021), but they must wear face coverings throughout the school. Since then and until 28/02/2022, this restriction has remained in place. On [17/08/2021](#), Education Secretary Shirley-Anne Somerville said that face coverings in classrooms would be scrapped "as soon as possible", on [14/10/2021](#) the Scottish Government COVID-19 Advisory Group heard that there had been challenging discussions in the last few meetings on appropriate reductions in mitigations such as face coverings at desks, restrictions on assemblies and parental engagement. On [19/10/2021](#) the Scottish Government decided against lifting the requirement for face coverings to be worn in secondary schools, saying it would allow more time for 12–15 year-olds to be vaccinated. In most of their meetings of the Advisory Sub-group on Education and Children's Issues, the use of face coverings in educational settings were discussed and the Sub-group minutes can be accessed [here](#). From 28/02/2022, secondary school pupils in Scotland will not

need to wear face coverings in classrooms, but they will have continue wearing them in school corridors, communal areas, and on school buses.

Additional sources for the Inquiry to review

The Inquiry team may also want to review parliamentary questions in relation to [PPE](#) and [face coverings](#), and [the minutes of the Advisory Sub-Group on Education and Children's Issues meetings](#).

In considering ethical issues, the Inquiry might benefit from the work of the [UK Pandemic Ethics Accelerator](#).

Potential questions for the Inquiry to consider

The key issues that emerged from the scoping review in relation to sub-theme 3 include (some were also highlighted by the public inquiry):

- 5.3.1 Conflicting messages and confusing guidance around PPE in the early stages of the pandemic. What did this mean for building trust in government policy? Use of ethical arguments to support messaging – solidarity, altruism, individual vs population. Was there any community consultation on communication?
- 5.3.2 Use of face masks in secondary schools from 31/08/2020 to 28/02/2022
- 5.3.3 The fit of masks for ethnic minorities and women (impact on equalities)
- 5.3.4 Issues in relation to the use of masks for people that rely on lip reading (impact on equalities)
- 5.3.5 Issues in relation to people being subject to hate crimes or refused access to shops when exempted before the issue of exemption cards (impact on equalities)
- 5.3.6 What was the impact on those trying to enforce mask wearing (including shop assistants, bus drivers)?

References

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Appendix

Methods

Sources

We used the following sources to identify the key events or decisions, key players and key documents for theme 5, by using the following keywords: “Personal Protective Equipment”, PPE, coverings, masks, “face coverings”, “face masks”.

- 1) A [timeline](#) by the Scottish Parliament Information Centre that focuses on Scotland’s response to the Coronavirus (COVID-19) pandemic and includes all major developments. The timeline runs from 31/12/2019 and was last accessed on 11/02/2022.
- 2) Three timelines of the COVID-19 pandemic in Scotland for [2020](#), [2021](#), and [2022](#) by Wikipedia, last accessed on 11/02/2022.
- 3) Two audit reports from Audit Scotland. Audit Scotland is an independent organisation that produces local and national reports about the performance and financial management of Scotland's public bodies. The [first audit report](#) was about the NHS in Scotland in 2020 and was published in February 2021. The [second audit report](#) was about COVID-19 Personal Protective equipment and was published in June 2021.
- 4) [Minutes and papers](#) from the Scientific Advisory Group for Emergencies (SAGE) meetings.
- 5) [Minutes and papers](#) from the Scottish Government COVID-19 Advisory Group.
- 6) Reports and Correspondence of the [Health & Sport Committee](#).
- 7) To source academic literature on relevant topics we searched the [COVID-END inventory of “best evidence syntheses”](#), which presents the current state of evidence for COVID-19 related issues to support decision-makers.

Data extraction and event prioritisation

For each identified event we extracted the following information: Date, a summary of a key event, sub-theme, key players (including bodies and/ or people), relevant reports, or other documents (including news items, guidelines, parliamentary documents, audit reports), and relevant research papers and publications (including preprints).

Decisions or milestones that need to be prioritised for investigation (including investigation of their timing) by the Inquiry team were characterised as key. We used the following definitions. A key decision is a decision directly relevant to Scotland and a decision taken by the Scottish government and a decision that had the potential to impact the course of the pandemic and its direct or indirect consequences. A key milestone is a key event that marks an important point in the progress of the pandemic or a key decision taken outside Scotland that had a potential impact on the course of the pandemic in Scotland and its direct or indirect consequences.

Appendix Table 5.1: Key events with dates, type, main body/ persons involved, and relevant reports for Theme 5.				
The key issues that were highlighted by the public inquiry included: PPE issues in care homes, availability, and supply of PPE across other settings, conflicting messages and confusing guidance around PPE in the early stages of the pandemic, fragility of supply chains and procurement systems/regulation in circumstances of significant demand, the process of awarding government contracts (which led to led to inequities in access to PPE early in the pandemic, including the lack of PPE for frontline and essential keyworkers such as social care staff and retail workers).				
Additional issues identified by UNCOVER: Fit of masks for ethnic minorities and women; issues in relation to the use of masks for people that rely on lip reading				
Impact on equalities: Inequities in access to PPE for some frontline workers – e.g. retail, social care, different health care roles; fit of masks for ethnic minorities and women; issues in relation to the use of masks for people that rely on lip reading; issues in relation to people being subject of hate crimes or refused access to shops when exempted prior to the issue of exemption cards				
Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
January 2020 The 4 nations public health high consequence infectious disease (HCID) group made an interim recommendation in January 2020 to classify COVID-19 as an HCID	PPE use in healthcare settings	4 nations public health high consequence infectious disease; Advisory Committee on Dangerous Pathogens	https://www.gov.uk/guidance/high-consequence-infectious-diseases-hcid#status-of-COVID-19	
24/01/2020 PPE distributed to GPs from pandemic stockpile	Distribution of PPE	Scottish government	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	
Key milestone 04/2/2020 Use of face masks for the general public is discussed for the first time in SAGE	Community face mask/ covering use	SAGE, New and Emerging Respiratory Virus Threats Advisory Group	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-4-february-2020/sage-4-minutes-coronavirus-covid-19-response-4-february-2020	1) SAGE heard that NERVTAG advises that there is limited to no evidence of the benefits of the general public wearing facemasks as a preventative measure. 2) Facemasks and other personal protective equipment in the community is only advised for health and social care workers visiting individuals who may be infectious. 3) There is some evidence that wearing of face masks by symptomatic individuals may reduce transmission to other people, and therefore NERVTAG also recommends that symptomatic people should be encouraged to wear a surgical face mask, providing that it can be tolerated.

<p>Key decision 19/03/2020 COVID-19 no longer classified as a High Consequence Infectious Disease in the UK, affecting the type of PPE required *</p>	PPE use in healthcare settings		<p>https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf</p> <p>Living review on the Epidemiology of and Risk Factors for Coronavirus Infection in Health Care Workers: https://www.acpjournals.org/doi/full/10.7326/M21-4294</p> <p>https://www.gov.uk/guidance/high-consequence-infectious-diseases-hcid#status-of-COVID-19</p>	*High consequence infectious diseases such as Ebola and SARs have a high case fatality rate and require full body PPE. Source: Audit Scotland
<p>19/03/2020 Call convened, initially daily, between the SG, NHS in Scotland and government organisations to develop Scottish PPE manufacturing</p>	PPE manufacturing in Scotland	SG, NHS in Scotland and government organisations	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
<p>19/03/2020 NHS NSS sets up social care helpline to triage urgent requests for PPE</p>	Distribution of PPE	NHS NSS	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
<p>22/03/2020 Letter from the Minister for Trade, Innovation and Public Finance to Scottish companies appealing for support with provision of PPE</p>	PPE provision	Minister for Trade, Innovation and Public Finance	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
<p>23/03/2020 NHS supply chain external mailbox set up to receive offers from companies</p>	PPE provision	NHS NSS	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
<p>26/03/2020 SAGE discussed an HSE report about the</p>	PPE use in healthcare settings	SAGE, Health and Safety Executive (HSE)	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-26-march-	HSE found no material difference between the N95 and FFP2 respirator masks. Both provide protection as long as the wearer is

difference of N95 and FFP2 respirator masks.			2020/sage-19-minutes-coronavirus-COVID-19-response-26-march-2020 HSE report on difference between N95 and FFP2 (Couldn't find it)	face-fit tested. Choice of masks needs to risk-assessment driven. Further advice for NHS and PHE on overall PPE will be completed within 24 hours.
30/03/2020 Single Point of Contact group established as a forum to address PPE issues at NHS board-level	PPE issues	NHS Health boards	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
Key milestone 30/03/2020 Eight weeks' supply of PPE was delivered to GPs in Scotland during the week of 30 March.	Distribution of PPE	Scottish government	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
31/03/2020 SAGE committee discussed COVID-19 and nosocomial transmission	PPE use in healthcare settings	SAGE, NHS England	https://www.gov.uk/government/publications/sage-minutes-coronavirus-COVID-19-response-31-march-2020/sage-21-minutes-coronavirus-COVID-19-response-31-march-2020 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892032/S0091_Nosocomial_Transmission_of_Coronavirus.pdf	NHS England provided some research options on nosocomial transmission and potential interventions, noting that ongoing work on PPE guidance is also linked to this. Nosocomial (hospital acquired) transmission can affect HCWs and/or patients. It can take place between HCWs, HCWs to and from patients, and between patients; the scale of these are unknown. It is either caused by exposure of HCWs before they are protected with Personal Protective Equipment (PPE) or due to incorrect wearing of it and lapses in Infection Prevention and Control (IPC) practices. Effective IPC has been challenging in recent weeks with high rates of staff absence amongst cleaning staff. There has been reported confusion over the use of PPE as well as shortages of some critical items.

<p>Key milestone April 2020 Centrally held PPE stocks were very low at points during April 2020 as stock was rapidly distributed to NHS boards:</p>	Availability of PPE	Scottish government	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland 0.3 days' worth of stock of long sleeve gowns 1 day of FFP3 masks 2 days of visors.
<p>01/04/2020 Scottish Government sets up PPE helpline mailbox for health and social care staff to report PPE issues</p>	PPE issues	Scottish government	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	Source: Audit Scotland
<p>Key decision 02/04/2020 The Cabinet Secretary for Health and Sport wrote to the Convener to inform the Committee of revised PPE guidance has been published from Health Protection Scotland.</p>	PPE use in health and social care settings	Jeane Freeman, Lewis Macdonald, Health Protection Scotland, Department of Health and Social Care, Public Health Wales, Public Health Agency Northern Ireland, Public Health England and NHS England	https://archive2021.parliament.scot/S5_HealthandSportCommittee/General%20Documents/20200302_HS_Ltr_IN_CabSecHS.pdf	The guidance outlined what PPE frontline health and social care workers should be wearing in different settings and scenarios. The guidance had input from Royal Colleges and was endorsed by expert scientific groups.
<p>07/04/2020 SAGE discussion on whether increased use of face masks will have an effect on infection</p>	Community face mask or covering use	SAGE, NERVTAG	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-7-april-2020/sage-23-minutes-coronavirus-covid-19-response-7-april-2020	NERVTAG concluded that increased use of masks would have minimal effect (in terms of preventing the uninfected general population from becoming infected), based on a review of the available evidence. Questions were raised about whether this would change if it were found that individuals have high levels of pre-symptomatic and asymptomatic infectiousness (in which case could masks reduce early pre-symptomatic spread).
<p>09/4/2020 SAGE discussion on whether increased use of face masks will have an effect on infection</p>	Community face mask or covering use	SAGE, NERVTAG	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-9-april-2020/sage-24-minutes-coronavirus-covid-19-response-9-april-2020	WHO has concluded there is currently no conclusive evidence that facemasks are beneficial for community use.

			https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/890039/s0117-rapid-review-face-masks-070420-sage24.pdf https://apps.who.int/iris/bitstream/handle/10665/331693/WHO-2019-nCov-IPC_Masks-2020.3-eng.pdf	SAGE will review a NERVTAG paper on facemasks at its next meeting, covering their value in limiting spread from pre-symptomatic and asymptomatic cases and what potential research studies might be commissioned.
09/04/2020 Joint statement and guidance issued by the Scottish Government, COSLA and SJC Unions on PPE use in social care	Use of PPE	Scottish Government, Health Protection Scotland, COSLA and SJC Unions; The guidance had input from Royal Colleges and is endorsed by expert scientific groups, as well as the Chief Medical Officers and Chief Nursing Officers in the UK.	Protecting the social care workforce - gov.scot (www.gov.scot) Guidance published on 2 April 2020: https://www.gov.scot/news/protecting-our-frontline-staff/	The Scottish Government with COSLA and the SJC Unions have agreed today that the guidance jointly published by the Department of Health and Social Care, Health Protection Scotland (HPS), Public Health Wales, Public Health Agency Northern Ireland, Public Health England (PHE) and NHS England on 2 April 2020 is the official and fully comprehensive guidance on the matter of the use of PPE in the context of COVID19.
Key decision 14/04/2020 SAGE concludes that evidence does not currently support use of face masks to protect the wearer in the general population.	Community face mask or covering use	SAGE, NERVTAG	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-14-april-2020/sage-25-minutes-coronavirus-covid-19-response-14-april-2020 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/890043/S0127-nervtag-face-mask-use-in-the-community-130420-sage25.pdf	Evidence does not currently support use of face masks to protect the wearer in the general population. Overall, the evidence that masks could prevent spread is weak, but probably marginally in favour of a small effect. Circumstances where there may be benefits included enclosed environments with poor ventilation, and around vulnerable people. Conversely, there are unlikely to be any significant benefits in use of masks outdoors. There are communication considerations around any change in advice on masks.

<p>16/4/2020 SAGE agreed that any additional advice on community face mask use is for the purposes of consideration as part of releasing social distancing measures and not relevant to the current situation.</p>	<p>Community face mask or covering use</p>	<p>SAGE</p>	<p>https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-16-april-2020/sage-26-minutes-coronavirus-covid-19-response-16-april-2020#nosocomial-infection</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/890233/s0150-wearing-facemasks-community-setting-options-evidence-160420-sage26.pdf</p>	<p>SAGE will produce revised advice on masks in the week starting 20 April. Advice will then need to be integrated with other considerations, such as availability.</p>
<p>16/4/2020 The SAGE Nosocomial Working Group has identified marked variation among hospital trusts on implementation of infection prevention control (IPC) guidelines.</p>	<p>PPE use in hospitals</p>	<p>SAGE Nosocomial Working Group, Hospital trusts</p>	<p>https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-16-april-2020/sage-26-minutes-coronavirus-covid-19-response-16-april-2020#nosocomial-infection</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892034/S0140_Hospital_Onset_COVID-19_IPC_evidence_from_recent_survey_and_next_steps.pdf</p>	<p>The Nosocomial Working Group has identified marked variation among hospital trusts on implementation of infection prevention control (IPC) guidelines. IPC policy will be updated and circulated, as will guidelines on cleaning and on use of face masks.</p>
<p>17/04/2020 Online portal established for NHS boards to report PPE supply issues</p>	<p>PPE issues</p>	<p>Scottish government, NHS Health boards</p>	<p>https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf</p>	<p>Source: Audit Scotland</p>
<p>18/04/2020 NHS NSS distributes one week's supply of PPE to all care homes in Scotland</p>	<p>PPE distribution</p>	<p>NHS NSS</p>	<p>https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf</p>	<p>Source: Audit Scotland</p>

<p>18/04/2020 A charter flight from China carrying essential personal protective equipment (PPE) and NHS supplies has landed in Scotland</p>	PPE provision		https://www.gov.scot/news/delivery-of-critical-nhs-supplies/	
<p>Key decision 21/4/2020 SAGE advises that, on balance, there is enough evidence to support recommendation of community use of cloth face masks, for short periods in enclosed spaces where social distancing is not possible.</p>	Community face masks or coverings use	SAGE, CMO	https://www.gov.uk/government/publications/sage-minutes-coronavirus-covid-19-response-21-april-2020/sage-27-minutes-coronavirus-covid-19-response-21-april-2020 https://www.gov.uk/government/publications/spi-b-the-use-of-facemasks-in-a-community-setting-20-april-2020 https://www.gov.uk/government/publications/delve-report-on-face-masks-for-the-general-public-21-april-2020 https://www.gov.uk/government/publications/potential-impact-of-face-covering-on-the-transmissibility-of-sars-cov-2-in-the-uk-20-april-2020	<p>Main conclusions: On balance, there is evidence to recommend the use of cloth masks in certain higher-risk settings as a precautionary measure where masks could be at least partially effective.</p> <p>SAGE secretariat to summarise SAGE advice today on public use of cloth face masks for CMO to submit to ministers alongside policy and operations advice.</p>
<p>Key decision 27/04/2020 Local PPE hubs established to supply social care providers with PPE where normal supply routes have failed.</p>	PPE distribution	The hubs are run by local Health and Social Care Partnerships (HSCPs).	Extending PPE access to all social care providers - gov.scot (www.gov.scot)	Scottish Government announces that Local Hubs will distribute PPE supplies to the whole of the social care sector where normal supply routes have not been successful. These hubs will extend their provision to include all social care providers, and unpaid or family carers and personal assistants.
<p>28/04/2020 Health and Sport Committee Session 5 on</p>	PPE issues	Health and Sport Committee	https://archive2021.parliament.scot/parliamentarybusiness/report.aspx?r=12617&mode=pdf	

COVID-19 where issues related to lack of PPE were discussed				
<p>Key decision 28/04/2020 The Scottish Government recommends people cover their faces while in some public places such as shops and on public transport.</p>	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-52457324	<p>First time Scottish government recommends the use of face coverings.</p> <p>“First Minister Nicola Sturgeon said there could be "some benefit" in wearing a cloth face covering in places where social distancing was difficult.”</p>
<p>Key milestone Late April 2020 In a survey of Scottish members carried out by the British Medical Association (BMA)</p>	PPE availability	BMA, NHS NSS, Scottish Government	<p>BMA Scotland COVID-19 Tracker Survey Results, BMA Scotland, May 2020.</p> <p>https://www.audit-scotland.gov.uk/uploads/docs/report/2021/nr_210117_nhs_overview.pdf</p> <p>https://www.acpjournals.org/doi/full/10.7326/M21-4294</p>	The survey reported that some doctors did not have access to correct and sufficient PPE. This was highlighted as the most concerning issue for 16 per cent of respondents. 16 Those working in high risk areas reported shortages of a number of items of PPE, including fullface visors (29 per cent) and long-sleeved disposable gowns (16 per cent).
<p>Key milestone April 2020 The Royal College of Nursing (RCN) surveyed its members in Scotland.</p>	PPE availability	RCN, NHS NSS, Scottish government	<p>RCN publishes results of member survey about PPE, RCN website, https://www.rcn.org.uk/news-and-events/news/ppe-survey-results-18-april-2020</p> <p>https://www.audit-scotland.gov.uk/uploads/docs/report/2021/nr_210117_nhs_overview.pdf</p> <p>https://www.acpjournals.org/doi/full/10.7326/M21-4294</p>	In April 2020 the RCN survey found that, of those respondents working in high-risk environments, 25 per cent had not had their mask fit tested and 47 per cent were asked to reuse single-use equipment.
<p>07/05/2020 Health and Sport Committee Session 5 on COVID-19 scrutiny where</p>	PPE issues	Health and Sport Committee	https://archive2021.parliament.scot/parliamentarybusiness/report.aspx?r=12632&mode=pdf	

issues related to lack of PPE were discussed				
09/05/2020 Scottish Government announces more Personal Protective Equipment (PPE) will be manufactured in Scotland following the establishment of a new NHS Scotland supply chain.	PPE production	NHS Scotland, Trade Ministry, Scottish Enterprise, Scottish Manufacturing Advisory Service, Scottish-based companies (Forfar-based Don & Low for the base material required, Redwood TTM Ltd and Keela, who are based in Wigan and Glenrothes to make the sterile gowns, Keela will also work with manufacturers Transcal and Endura, both based in Livingston, to deliver these Scottish supplies.	Keela Redwood TTM Ltd Transcal Endura Increase in PPE production - gov.scot (www.gov.scot)	
13/05/2020 Following the Cabinet Secretary for Health and Sport's evidence session regarding PPE (Personal Protective Equipment) on 7 May 2020, the Convener issued a letter seeking further information and clarification on a number of points	PPE availability	Lewis Macdonald, Jeane Freeman	https://archive2021.parliament.scot/S5_HealthandSportCommittee/Inquiries/20200513_Ltr_OUT_to_CabSecH_S_re_PPE.pdf	
19/05/2020 SAGE endorsed the Environmental and Modelling Group papers on disinfection technologies and on risk	Community face mask or covering use	SAGE, Environmental and Modelling Group	https://www.gov.uk/government/publications/sage-37-minutes-coronavirus-COVID-19-response-19-may-2020/sage-37-minutes-coronavirus-COVID-19-response-19-may-2020	

mitigation on public transport (including face coverings).			https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/904663/S0441_EMG_-_Evidence_for_transmission_of_SARS-COV-2_on_ground_public_transport.pdf	
26/05/2020 The Chief Nursing Officer issued a letter to all NHS boards clarifying that single-use PPE should not be re-used.	PPE use in health care settings	Chief Nursing Officer	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	
04/06/2020 SAGE endorsed the paper on mask wearing to reduce transmission in hospitals, and agreed that similar consideration should be given to care homes so that coordinated and consistent advice can be given.	PPE use in hospitals and care homes	SAGE Nosocomial group	https://www.gov.uk/government/publications/sage-40-minutes-coronavirus-COVID-19-response-4-june-2020/sage-40-minutes-coronavirus-COVID-19-response-4-june-2020 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/895818/S0485_EMG_SARS-CoV-2_in_the_hospital_environment.pdf	
04/06/2020 Scottish Government publish a report on Personal Protective Equipment supplies.	PPE availability	Scottish government, Economic Development Directorate	https://www.gov.scot/publications/coronavirus-COVID-19-report-on-personal-protective-equipment-supplies-2/	
04/06/2020 Scottish Government COVID-19 Advisory Group discussed face coverings in enclosed public settings	Community face mask or covering use	Scottish Government COVID-19 Advisory Group	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-4-june-2020/	

noting that this has been made mandatory in some other countries.				
11/06/2020 Scottish Government COVID-19 Advisory Group: Discussions on the use of face coverings in health and social care, and community settings continued.	Community face mask use and use of face masks in health and social care settings	Scottish Government COVID-19 Advisory Group	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-11-june-2020/	
17/06/2020 Health and Sport Committee Session 5 on COVID-19 scrutiny, resilience and emergency planning, where issues related to lack of PPE were discussed	PPE issues	Health and Sport Committee	https://archive2021.parliament.scot/parliamentarybusiness/report.aspx?r=12704&mode=pdf	
Key decision 22/06/2020 Face coverings become compulsory on public transport, with exemptions made for children under five and people with certain medical conditions	Community face mask use	Scottish government, Transport Secretary Michael Matheson	https://www.gov.scot/news/face-coverings-mandatory-on-public-transport-from-22-june/	
25/06/2020 The Convener issued a letter to the Cabinet Secretary for Health and Sport seeking further information following the evidence session on 17	PPE issues	Jeane Freeman, Lewis Macdonald	https://archive2021.parliament.scot/S5_HealthandSportCommittee/General%20Documents/20200625_Ltr_OJT_CabSecHS.pdf https://archive2021.parliament.scot/S5_HealthandSportCommittee/General%20Documents/20200625_Ltr_OJT_CabSecHS.pdf	

<p>June on resilience, including on issues in relation to PPE</p> <p>And the Convener received a response to the above letter on 28/07/2020</p>			ral%20Documents/20200728_Ltr_IN_CabSecHS_Resilience.pdf	
<p>July 2020 Coronavirus (COVID-19): guidance on the extended use of face masks and face coverings in hospitals, primary care and wider community care is published</p>	PPE use in health and social care settings	Chief Nursing Officer Directorate, Health Protection Scotland, Scottish government	https://www.gov.scot/publications/coronavirus-COVID-19-interim-guidance-on-the-extended-use-of-face-masks-in-hospitals-and-care-homes/pages/new-additional-guidance---hospital-staff/	Updated on 18/09/2020, 23/09/2020, 2/10/2020, 20/10/2020, 9/11/2020, 7/06/2021, 23/06/2021, 5/07/2021, 8/10/2021, 3/12/2021
<p>Key decision 10/07/2020 Face coverings become compulsory in shops</p>	Community face mask or covering use	Scottish government	https://www.gov.scot/publications/coronavirus-COVID-19-update-first-ministers-speech-10-july-2020/	
<p>16/07/2020 Coronavirus and Scotland: Interim report on intergovernmental working 2020 published where PPE issues are discussed</p>	PPE issues	Scottish Affairs Committee	https://committees.parliament.uk/publications/2039/documents/19573/default/	What more could the UK and Scottish Government do to ensure that Scottish key workers have been able to gain access to personal protective equipment
<p>23/07/2020 SAGE endorsed the EMG paper on airborne transmission, noting its findings around the limitations of face shields/visors and on the</p>	Community face mask or covering use	SAGE	https://www.gov.uk/government/publications/sage-48-minutes-coronavirus-COVID-19-response-23-july-2020/sage-48-minutes-coronavirus-COVID-19-response-23-july-2020	

importance of good ventilation.			https://www.gov.uk/government/publications/nervtagemg-role-of-aerosol-transmission-in-COVID-19-22-july-2020/nervtag-and-emg-role-of-aerosol-transmission-in-COVID-19-22-july-2020	
28/07/2020 Scottish Government COVID-19 Advisory Group members briefly discussed wearing face coverings in schools	Community face mask or covering use	Scottish Government COVID-19 Advisory Group; Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children’s Issues	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-28-july-2020/ https://www.gov.scot/binaries/content/documents/govscot/publications/factsheet/2020/11/COVID-19-advisory-group-evidence-papers-july-2020/documents/managing-COVID-19-in-australian-and-israel-schools-lessons-for-scotland-23-july-2020/managing-COVID-19-in-australian-and-israel-schools-lessons-for-scotland-23-july-2020/govscot%3Adocument/Managing%2BCOVID-19%2Bin%2BAustralian%2Band%2BIsrael%2BSchools-%2BLessons%2Bfor%2BScotland%2B%252823%2BJuly%2B2020%2529.pdf https://www.gov.scot/binaries/content/documents/govscot/publications/factsheet/2020/11/COVID-19-advisory-group-evidence-papers-july-2020/documents/insights-from-u-s--on-re-opening-universities-and-higher-education-23-july-2020/insights-from-u-s--on-re-opening-universities-and-higher-education-23-july-	Group members briefly discussed Group members briefly discussed wearing face coverings in schools, noting their support for the advice from the subgroup on Education and Children’s issues which states that “Face coverings are not required for most children (those clinically advised to wear a covering would be an exception). Adults in schools do not need to wear face coverings as long as they can retain two metre distancing. Where adults cannot keep two metre distance, are interacting face-to-face and for about 15 minutes or more, face coverings should be worn.”

			2020/govscot%3Adocument/Insights%2Bfrom%2BU.S.%2Bon%2Bre-opening%2Buniversities%2Band%2BHigher%2BEducation%2B%252823%2BJuly%2B2020%2529.pdf	
<p>Key decision 08/08/2020</p> <p>The list of places where the wearing of face coverings is required extends to also include libraries, museums and places of worship (in addition to shops and public transport)</p>	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-53697673	
<p>24/08/2020</p> <p>The Scottish Government COVID-19 Advisory Group received an update from the Chair of the Education & Children subgroup on face coverings in schools and on Higher and Further Education</p>	Community face mask or covering use	Scottish Government COVID-19 Advisory Group; Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	<p>https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-24-august-2020/</p> <p>https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-schools-and-childcare-reopening</p> <p>https://apps.who.int/iris/handle/10665/333919</p>	The group received an update from the Chair of the Education & Children subgroup on face coverings in schools and on Higher and Further Education (HE/FE). The group had a discussion around the wearing of face coverings by secondary school pupils and agreed that face coverings were just one instrument of a risk minimisation strategy. The chair noted the range of views in relation to the wearing of face coverings in schools and the group agreed that the advice should be kept under review as the effects of reopening schools become clearer.
<p>Key decision 31/08/2020</p> <p>The Scottish Government announces that secondary school pupils will be required to wear face coverings in school</p>	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	<p>https://education.gov.scot/improvement/learning-resources/face-coverings-information-for-secondary-practitioners/</p> <p>https://www.bbc.co.uk/news/uk-scotland-53900825</p>	

corridors, communal areas and on school buses				
01/09/2020 Use of face coverings in certain settings for Opening Higher Education and Further Education settings in Autumn is recommended	Community face mask or covering use	SAGE	https://www.gov.uk/government/publications/sage-54-minutes-coronavirus-COVID-19-response-1-september-2020/sage-54-minutes-coronavirus-COVID-19-response-1-september-2020	Face coverings will have greatest benefits where people are in close proximity or are in the same shared space for a period of time, especially where ventilation is poor or there is activity that could produce enhanced aerosols.
10/09/2020 Customers in pubs, restaurants and cafes will be required to wear face coverings when not eating.	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-54093110	
17/09/2020 SAGE discusses use of face coverings for extended periods	Community face mask or covering use	SAGE	https://www.gov.uk/government/publications/sage-57-record-of-meeting-on-COVID-19-17-september-2020/sage-57-minutes-coronavirus-COVID-19-response-17-september-2020 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/923607/s0760-4a-duration-wearing-face-coverings-170920.pdf	Use of face coverings should be considered in situations where they may be required for longer periods, though tolerability and equity need to be considered. Levels of adherence to guidance around when and how to use face coverings are likely to be a more significant factor in effectiveness than the duration of wearing. SAGE secretariat to circulate paper 'Duration of wearing face coverings' to relevant departments, including DHSC, CO, BEIS, DfT, DfE, MHCLG, DCMS, HSE, PHE, and Devolved Administrations by 17 September 2020
13/10/2020 The Cabinet Secretary for Health and Sport wrote to the Convener on 13 October 2020 regarding Scottish Government's plans for a physical and digital exemption card for	Community face mask or covering use	Lewis Macdonald, Jeane Freeman	https://archive2021.parliament.scot/angiestest/20201013_Lttr_IN_CABSE_C_to_Convener_r.e_Exemption_Cards.pdf	

people who are exempt under the regulations from wearing face coverings.				
19/10/2020 New rules are announced for face coverings, requiring them to be worn in workplace canteens from Monday 19 October, but they will no longer be required at wedding ceremonies	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-scotland-politics-54562795	
Key milestone 28/10/2020 Scottish Government publishes its PPE Action Plan	PPE planning	Cabinet Secretary for Health and Social Care	https://www.gov.scot/publications/personal-protective-equipment-ppe-covid-19-scotlands-action-plan/	Scotland's COVID-19 Personal Protective Equipment (PPE) Plan will help ensure that the right PPE of the right quality gets to the people who need it at the right time. The Plan's scope includes health, social care and other workplaces and settings where COVID-19 could put people at risk.
30/10/2020 Senior pupils and their teachers are being advised by the Scottish Government to wear face coverings in classrooms, if they are in the new level three and four restriction areas	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.bbc.co.uk/news/uk-scotland-54748253	
16/11/2020 The Education sub-group considered the use of face coverings	Community face mask or covering use	Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.gov.scot/publications/scottish-government-covid-19-advisory-group-minutes-16-november-2020/	
02/12/2020 The group noted that PPE, IPC measures, testing and	PPE use in care homes	Scottish Government COVID-19 Advisory Group	https://www.gov.scot/publications/scottish-government-covid-19-	

guidance had much improved in care homes			advisory-group-minutes-3-december-2020/	
14/01/2021 SAGE endorsed the paper 'Application of physical distancing and fabric face coverings in mitigating the B117 variant SARS-CoV-2 virus in public, workplace and community'.	Community face mask or covering use	SAGE	https://www.gov.uk/government/publications/sage-76-minutes-coronavirus-COVID-19-response-14-january-2021/sage-76-minutes-coronavirus-COVID-19-response-14-january-2021 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1008199/S1029-EMG-face-coverings-distancing-13-jan.pdf	
19/01/2021 The Cabinet Secretary for Health and Sport wrote to the Convener on 19 January 2021 regarding the extension of Personal Protective Equipment (PPE) support arrangements for primary care and social care providers.	PPE supply	Lewis Macdonald, Jeane Freeman	https://archive2021.parliament.scot/S5_HealthandSportCommittee/Inquiries/20210119_Ltr_IN_from_CabSecHS_re_Extension_of_PPE_Hubs.pdf	
18/02/2021 Scottish Government COVID-19 Advisory Group looked at mitigations and the need to be stricter in secondary schools on distancing and masks	Community face mask or covering use	Scottish Government COVID-19 Advisory Group; Scottish Government COVID-19 Advisory Group Education and Children sub-group	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-18-february-2021/	The Education and Children sub-group had looked at mitigations and the need to be stricter in secondary schools on distancing and masks, including issues of practicality in relation to access to masks.
18/02/2021 Scottish Government COVID-19 Advisory Group	PPE use in health care settings	Scottish Government COVID-19 Advisory Group; Scottish Government	https://www.gov.scot/publications/scottish-government-COVID-19-	On-going debate about PPE related to mask type being used for HCWs internationally

discussed the type of PPE that is needed in health care settings		COVID-19 Advisory Group Nosocomial sub-group	advisory-group-minutes-18-february-2021/	CNRG had considered recent aerosol science publications and noted the need for clinical research in this area to further inform risk management. It was noted that there was a need for a study that repeats the non-inferiority trial work done for SARS re FRSM vs FFP3 masks and this was being developed by colleagues in Canada.
03/03/21 The Scottish Government advisory group recommends that all secondary pupils should wear face coverings when they return to the classroom later in the month.	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.gov.scot/publications/coronavirus-COVID-19-advisory-sub-group-on-education-and-childrens-issues---phased-return-to-in-person-learning-in-schools-and-elc-settings--next-steps/ https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-4-march-2021/	
11/03/2021 and 25/03/2021 SAGE discusses the use of masks in healthcare settings And 18/03/2021 Scottish Government COVID-19 Advisory Group; Scottish Government COVID-19 Advisory Group Nosocomial sub-group	PPE use in healthcare settings	SAGE, Scottish Government COVID-19 Advisory Group; Scottish Government COVID-19 Advisory Group Nosocomial sub-group	https://www.gov.uk/government/publications/sage-83-minutes-coronavirus-COVID-19-response-11-march-2021/sage-83-minutes-coronavirus-COVID-19-response-11-march-2021#masks-in-healthcare-settings https://www.gov.uk/government/publications/sage-84-minutes-coronavirus-COVID-19-response-25-march-2021/sage-84-minutes-coronavirus-COVID-19-response-25-march-2021#face-masks-in-healthcare-settings	Decisions on policies on mask usage for HCWs lie within the NHS. Given the limited available evidence, it is not known what impact greater use of FFP3 masks would have on overall levels of transmission in HCWs (though the limitations of the evidence should not be taken to show an absence of effect). UK IPC guidance and that issued by WHO both recommend that HCWs routinely wear face masks while COVID-19 is endemic, and that FFP3 and similar types of respirator masks are recommended for use where aerosol generating procedures (AGPs) are in place for a suspected or confirmed COVID-19 patient.

			https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/979441/S1169_Facemasks_for_health_care_workers.pdf https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-18-march-2021/	
06/04/2021 First Minister Nicola Sturgeon confirms that all secondary school pupils will return full time to the classroom after the Easter holidays (19/04/2021). They will no longer need to follow social distancing rules, but must wear face coverings throughout the school	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.bbc.co.uk/news/uk-scotland-56649985	
22/04/2021 SAGE discusses the effectiveness of NPIs including face masks	PPE use	SAGE	https://www.gov.uk/government/publications/sage-87-minutes-coronavirus-COVID-19-response-22-april-2021/sage-87-minutes-coronavirus-COVID-19-response-22-april-2021 https://www.gov.uk/government/publications/spi-b-sustaining-behaviours-to-reduce-sars-cov-2-transmission-30-april-2021	
Key decision 23/06/2021	PPE use in care homes	Public Health Scotland, ARHAI Scotland	https://publichealthscotland.scot/publications/COVID-19-information-and-guidance-for-care-home-	

Coronavirus (COVID-19): guidance on the extended use of face masks and face coverings in care homes has been made into separate guidance.			settings-adults-and-older-people/COVID-19-information-and-guidance-for-care-home-settings-adults-and-older-people-version-27/	
30/06/2021 Provision of PPE to primary and social care due to come to an end	PPE provision	Scottish government	https://www.audit-scotland.gov.uk/uploads/docs/report/2021/briefing_210617_ppe.pdf	
22/07/2021 SAGE discusses the findings of human challenge studies	PPE use	SAGE	https://www.gov.uk/government/publications/sage-94-minutes-coronavirus-COVID-19-response-22-july-2020/sage-94-minutes-coronavirus-COVID-19-response-22-july-2021 https://www.gov.uk/government/publications/nervtag-extraordinary-nervtag-COVID-19-meeting-on-human-challenge-studies-9-july-2021	Nose shedding correlated better than throat shedding with detection of infectious virus on face masks, on surfaces and in the air. This suggests that nose shedding may be more important for transmission than throat shedding. This reinforces the importance of face coverings covering both the mouth and the nose. HOCl group consider whether it needs to review advice on the use of PPE in healthcare settings.
05/08/2021 The Cabinet Secretary for Health and Social Care participated in the Scottish Government COVID-19 Advisory Group	Community face mask or covering use	The Cabinet Secretary for Health and Social Care; Scottish Government COVID-19 Advisory Group	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-5-august-2021-2/	The group considered the role that NPIs are continuing to play domestically, alongside the pressures Scotland and other countries face. Leading issues include the use of masks, how long to require these for, who should use them, and what settings they should continue to be used in.
05/08/2021 Scottish Government COVID-19 Advisory Group and Nosocomial sub-group discussed a paper about the use of FFP3 equipment in healthcare settings	PPE use in healthcare settings	Scottish Government COVID-19 Advisory Group and Nosocomial sub-group	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-5-august-2021-2/ Paper under discussion couldn't be found	Paper 1 – this considered whether wider use of FFP3 masks is warranted. The nosocomial infection risk is currently very low and the CNRG endorsed the current guidance. The subgroup also noted a systematic review on this topic by an Australian group of researchers and there has also been work on this area by the

				Norwegian Defence establishment. The group noted the concerns that some healthcare staff may have with regards to the level of PPE used, even when patients are deemed to be very low risk.
09/08/2021 Face masks can be removed for drinking, dancing and dining in a hospitality setting; Children under the age of 12 are no longer legally required to wear face coverings in public places.	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-58114122 https://www.bbc.co.uk/news/uk-scotland-58118237	
17/8/2021 As schools in Scotland begin to return for the new academic year, Education Secretary Shirley-Anne Somerville says that face coverings in classrooms will be scrapped "as soon as possible"	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.bbc.co.uk/news/uk-scotland-58228512	
09/09/2021 SAGE noted that European comparators with similar levels of vaccination have maintained more interventions (masks, vaccine certification, work from home) than the UK and are seeing their epidemics decline.	Community face mask or covering use	SAGE	https://www.gov.uk/government/publications/sage-95-minutes-coronavirus-COVID-19-response-9-september-2021/sage-95-minutes-coronavirus-COVID-19-response-9-september-2021	
14/10/2021 SAGE received an update on monitoring of and	PPE use in healthcare settings	SAGE	https://www.gov.uk/government/publications/sage-96-minutes-coronavirus-COVID-19-response-14-october-2021/sage-96-minutes-	SAGE received an update on monitoring of and measures to prevent nosocomial infection, including vaccination and testing of healthcare workers, and risk assessments

measures to prevent nosocomial infection			coronavirus-COVID-19-response-14-october-2021	for both COVID-19 and other respiratory illnesses. SAGE noted the importance of consistent testing of healthcare workers across the NHS and care sector, and a continued focus on use of ventilation and facemasks. A renewed emphasis on measures to reduce infection spread in hospital is advised.
<p>14/10/2021 SAGE discussed the impact of potential Plan B mitigations considering the impact of the Delta variant and the behavioural response to reimposition of measures.</p>	Community face mask or covering use	SAGE	<p>https://www.gov.uk/government/publications/sage-96-minutes-coronavirus-COVID-19-response-14-october-2021/sage-96-minutes-coronavirus-COVID-19-response-14-october-2021</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1027586/S1393_SPI-B_SPI-M_EMG_Considerations_for_potential_impact_of_Plan_B_measures_13_October_2021.pdf</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1027840/S1394_SPI-B_Behavioural_considerations_for_maintaining_or_reintroducing_behavioural_interventions_and_introducing_new_measures_in_Autumn_2021.pdf</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1036475/S1395_EMG-Nervtag_Update_on_Transmission_and_Environmental_and_Behavioural</p>	<p>There has been a decrease in self-reported precautionary behaviours such as wearing a face covering.</p> <p>Face coverings are expected to have some effect to reduce transmission through all routes by partially reducing emission of and exposure to aerosols and droplets carrying the virus, reducing transmission risk at both close proximity (even for short periods of time) and over longer range. Effectiveness is dependent on the quality of the covering, the fit and ensuring both the nose and mouth are covered. Mandating face coverings in some settings is likely to also have benefits for reducing transmission of other respiratory viruses.</p>

			Mitigation Strategies including in the context of Delta.pdf https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1033268/Respiratory_Evidence_Panel_Evidence_Overview.pdf	
14/10/2021 Scottish Government COVID-19 Advisory Group; Update on use of face masks in schools.	Community face mask or covering use	Scottish Government COVID-19 Advisory Group; Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children’s Issues	https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-14-october-2021/	The group heard that there had been challenging discussions in last few meetings on appropriate reductions in mitigations such as face coverings at desks, restrictions on assemblies and parental engagement.
19/10/2021 The Scottish Government decides against lifting the requirement for face coverings to be worn in secondary schools, saying it will allow more time for 12–15-year-olds to be vaccinated.	Community face mask or covering use	Education secretary, Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children’s Issues	https://www.bbc.co.uk/news/uk-scotland-58966726	
19/11/2021 Scottish Government COVID-19 Advisory Group; Update on use of face masks in schools.	Community face mask or covering use	Scottish Government COVID-19 Advisory Group; Scottish government, Coronavirus (COVID 19): Advisory Sub-Group on Education and Children’s Issues		On face coverings in schools – direct comparisons with England are difficult to make. There is good public health rationale for the use of mask wearing as a mitigation in these settings. The subgroup also takes into consideration the wider harms from this mitigation. The possible use of clear masks was raised, particularly for use in early learning settings. The Chair subgroup noted this and commented that this may be considered by the subgroup in future discussions.

<p>07/12/2021 SAGE suggests that well-fitting masks and distancing or reduced density of people in indoor environments may be even more important with the emergence of Omicron</p> <p>And 09/12/2021 Scottish Government COVID-19 Advisory Group</p>	<p>Community face mask or covering use</p>	<p>SAGE; Scottish Government COVID-19 Advisory Group</p>	<p>https://www.gov.uk/government/publications/sage-98-minutes-coronavirus-COVID-19-response-7-december-2021/sage-98-minutes-coronavirus-COVID-19-response-7-december-2021</p> <p>https://www.gov.scot/publications/scottish-government-COVID-19-advisory-group-minutes-9-december-2021/</p>	<p>Some international reports of ‘superspreading’ events (some of which include Omicron) also suggest a greater role for airborne transmission than has previously been the case, as it is less likely that Omicron could have spread to as many people as it has at those events by other routes (low confidence). This means that measures to reduce airborne spread such as ventilation, well-fitting masks and distancing or reduced density of people in indoor environments may be even more important.</p>
<p>16/12/2021 SAGE discusses response measures in the context of Omicron, including the use of face masks</p> <p>And 17/12/2021 Scottish Government COVID-19 Advisory Group</p>	<p>Community face mask or covering use</p>	<p>SAGE; Scottish Government COVID-19 Advisory Group</p>	<p>https://www.gov.uk/government/publications/sage-99-minutes-coronavirus-COVID-19-response-16-december-2021/sage-99-minutes-coronavirus-COVID-19-response-16-december-2021</p> <p>https://www.gov.uk/government/publications/emg-and-spi-b-non-pharmaceutical-interventions-npis-in-the-context-of-omicron-15-december-2021/emg-and-spi-b-non-pharmaceutical-interventions-npis-in-the-context-of-omicron-15-december-2021</p> <p>https://www.gov.scot/publications/scottish-government-coronavirus-COVID-19-advisory-group-minutes-17-december-2021/</p>	<p>Mitigations for Omicron are similar to Delta, including use of well-fitting and well-made face coverings.</p> <p>If testing is not possible, physical distancing, wearing of face-coverings, and environmental interventions may need to increase further to compensate.</p> <p>Consistency of messaging will be important to ensure that people understand the importance of mitigations and are able to apply guidance (such as on use of face coverings or physical distancing) consistently in a range of environments.</p> <p>Cabinet Office C-19 Taskforce to outline the need for any further advice including on any specific packages of interventions.</p>
<p>28/01/2022 Adults are no longer required to wear face coverings if taking part in</p>	<p>Community face mask or covering use</p>	<p>Scottish government</p>	<p>https://www.bbc.co.uk/news/uk-scotland-60159431</p>	

organised activities with children under the age of five				
01/02/2022 First Minister Nicola Sturgeon told MSPs that a decision on whether older pupils would continue to have to wear face masks in schools would be considered again next week.	Community face mask or covering use	Scottish government	https://www.bbc.co.uk/news/uk-scotland-scotland-politics-60217960	
10/02/2022 Secondary school pupils in Scotland will not need to wear face coverings in classrooms from 28 February.	Community face mask or covering use	Scottish government; Coronavirus (COVID 19): Advisory Sub-Group on Education and Children's Issues	https://www.bbc.co.uk/news/uk-scotland-60334763	

Relevant evidence syntheses

The Inquiry may want to review the following systematic or rapid reviews in relation to **use of PPE in health and social care settings**:

- 1) Chou R, Dana T, Jungbauer R. Masks for Prevention of Respiratory Virus Infections, Including SARS-CoV-2, in Health Care and Community Settings. *Ann Intern Med.* 2021 Sep;174(9):W68. doi: 10.7326/L21-0393
- 2) Verbeek JH, et al. Personal protective equipment for preventing highly infectious diseases due to exposure to contaminated body fluids in healthcare staff. *Cochrane Database of Systematic Reviews.*
- 3) Chou R, et al. Epidemiology of and Risk Factors for Coronavirus Infection in Health Care Workers. *Annals of Internal Medicine,* January 2022
- 4) Kumar D & Spry C. Face shields in pre-hospital settings: Clinical effectiveness and guidelines. Ottawa: Canadian Agency for Drugs and Technologies in Health (CADTH). 2020
- 5) Zorko DJ, Gertsman S, O'Hearn K, et al. DECONTAMINATION INTERVENTIONS FOR THE REUSE OF SURGICAL MASK PERSONAL PROTECTIVE EQUIPMENT: A SYSTEMATIC REVIEW [published online ahead of print, 2020 Jul 9]. *J Hosp Infect.* 2020;S0195-6701(20)30337-6. doi:10.1016/j.jhin.2020.07.007
- 6) Jones P, Roberts S, Hotu C, Kamona S. What proportion of healthcare worker masks carry virus? A systematic review [published online ahead of print, 2020 Jun 24]. *Emerg Med Australas.* 2020;10.1111/1742-6723.13581. doi:10.1111/1742-6723.13581
- 7) Kim MS, Seong D, Li H, Chun SK, Park Y, Lee M, et al. Comparative efficacy of N95, surgical, medical, and non-medical facemasks in protection of respiratory virus infection: A living systematic review and network meta-analysis (preprint). *The Lancet.* 2021.

The Inquiry may want to review the following systematic or rapid reviews in relation to **community face mask use**:

- 1) Chou R, Dana T, Jungbauer R. Masks for Prevention of Respiratory Virus Infections, Including SARS-CoV-2, in Health Care and Community Settings. *Ann Intern Med.* 2021 Sep;174(9):W68. doi: 10.7326/L21-0393
- 2) Talic S et al. Effectiveness of public health measures in reducing the incidence of COVID-19, SARS-CoV-2 transmission, and COVID-19 mortality: systematic review and meta-analysis. *BMJ* 2021 Nov 17;375:e068302. doi: 10.1136/bmj-2021-068302.
- 3) MacIntyre CR & Chughtai AA. A rapid systematic review of the efficacy of face masks and respirators against coronaviruses and other respiratory transmissible viruses for the community, healthcare workers and sick patients. *Int J Nurs Stud.* 2020;108:103629.
- 4) Chu DK, Akl EA, Duda S, et al. Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and COVID-19: a systematic review and meta-analysis [published online ahead of print, 2020 Jun 1]. *Lancet.* 2020;S0140-6736(20)31142-9. doi:10.1016/S0140-6736(20)31142-9

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