

Dstl Scientists are helping to conquer the spread of COVID-19

- Only go outside for food, health reasons or work (but only if you cannot work from home)
- If you go out, stay 2 metres (6ft) away from other people at all times
- Wash your hands as soon as you get home

Do not meet others, even friends or family.

You can spread the virus even if you don't have symptoms.

New personal protective equipment (PPE) guidance for NHS teams

The UK Government and NHS leaders from a range of medical and nursing royal colleges have [published new guidance about personal protective equipment \(PPE\)](#) for NHS teams who are likely to come into contact with patients with coronavirus. The guidance has been agreed by the 4 Chief Medical Officers, Chief Nursing Officers and Chief Dental Officers in the UK and is applicable in all parts of the UK.

The updated guidance reflects the fact that coronavirus is now widespread in the community, meaning clinicians are more likely to see patients with the virus, some of whom may have minimal or no symptoms. The guidance is based on the best scientific evidence and the World Health Organization ([WHO](#)) [have confirmed it is consistent with what it recommends](#) in circumstances and settings with the highest risk of transmission.

The guidance recommends the safest level of personal protective equipment (PPE) to protect NHS healthcare workers and specifies the type of PPE that should be worn in the various healthcare settings where patients are cared for. We know that some frontline teams will be anxious about whether they have had the right PPE and we can reassure them that they have and will continue to do so going forward. This guidance will protect stock levels from unnecessary use and support staff to use the right equipment.

The guidance advises:

- any clinician working in a hospital, primary care or community care setting within 2 metres of a suspected or confirmed coronavirus COVID-19 patient should wear an apron, gloves, surgical mask and eye protection, based on the risk

- in some circumstances PPE, particularly masks and eye protection which is there to protect the health and care worker can be worn for an entire session and doesn't need to be changed between patients, as long as it is safe to do so
- more detail on what PPE to use in different clinical scenarios as well as community settings, such as care homes and caring for individuals in their own homes
- when carrying out aerosol generating procedures (AGPs) clinicians should wear a higher level of protective equipment, these are listed out in the guidance
- use of aprons rather than gowns for non-AGPs, including advice on thoroughly washing forearms if there is a risk of exposure to droplets, consistent with the UK policy of bare below the elbows and evidence reviews on the risks of healthcare acquired infections. There is enough supply of all safe PPE being recommended
- WHO recommends the use of FFP2 masks but the UK has gone further and recommends the use of FFP3 masks. However, we are clear that FFP2 have been approved by the WHO and can be used safely if needed. There is good stock of FFP3 masks in the UK

Dr Yvonne Doyle, Medical Director for Public Health England said:

Protecting our NHS colleagues on the frontline is vitally important. This updated guidance provides a greater degree of clarity so that NHS clinicians caring for patients feel confident in the PPE they need to wear. Our standards are amongst the highest in the world and in line with what WHO recommends in circumstances and settings with the highest risk of transmission.

Professor Chris Whitty, Chief Medical Officer for England said:

It is absolutely right that frontline staff have the appropriate PPE so they are safe and can have the confidence they need to do their jobs.

Public Health England has updated their advice to provide additional clarity for staff. This was done with the support of a wide range of professional groups and it has my full support. NHS England and the government are working hard to secure the supply lines in this challenging period so staff have the appropriate equipment.

The Academy of Medical Royal Colleges, Royal College of Nursing and Royal College of Midwives have played a lead role in developing the guidance with member organisations providing practical input into the advice.

Professor Carrie MacEwen, Chair, Academy of Medical Royal Colleges said:

This is the combined result of experts in infection control working with front line clinicians to provide the best guidance on the protection and safety of all healthcare staff, in any circumstances, based on scientific evidence; while taking into account the real-life clinical circumstances faced by staff and the concerns they have raised about their own, and their patients', safety.

Ruth May, Chief Nursing Officer said:

It's vital our staff are safe and ensure they feel safe and confident that they are being properly protected, as they look after increasing numbers of people during this global health pandemic, which will put health services across the world under pressure. This new guidance should give each and every member of staff the confidence that they are wearing the right level of equipment to keep them safe as they care for our loved ones.

Fran Leddra and Mark Harvey, joint-Chief Social Worker for Adults (England) said:

It's so important for social workers and social care staff to feel safe working and serving their communities. The social care sector is vital in helping our NHS colleagues to respond to the challenges this pandemic is posing and this new guidance will give the information and reassurance people need to keep them safe as they care for the people we love at the most difficult time.

Andrew Goddard, President of the Royal College of Physicians said:

Today's updated guidance provides what clinicians have been asking for – a single set of recommendations which cover all NHS settings. We know that there has been a lot of confusion and concern over the past few weeks. I hope that this guidance will both reassure clinicians that they are being listened to, and give them the confidence that they are safe when caring for COVID-19 patients.

Sara Gorton, UNISON head of health said:

Any uncertainty about what equipment to wear and when causes unnecessarily anxiety. Staff need clear guidance and to know the risks have been assessed. Unions will work with trusts to make sure this crucial information reaches every single member of staff, so they know they are properly protected when they care for us.

Dr Katherine Henderson President of the Royal College of Emergency Medicine said:

We are pleased our concerns have been listened to and the inherent risk to the frontline recognised. It is essential that healthcare workers are protected so we can treat patients with confidence – this guidance helps us to do that.

Professor Jim McManus, Director of Public Health, Hertfordshire County Council said:

Keeping residents and staff in social care settings including home care safe from COVID-19 is extremely important and its vital that social care staff and volunteers feel safe when they are providing support to people. This guidance will be welcomed by frontline social care staff.

In the past 2 weeks the NHS Supply Chain have delivered 397 million pieces of PPE equipment including, FFP3 masks, surgical masks and other PPE equipment to NHS trusts and 58,000 healthcare settings including GPs, pharmacies and community providers.

Yesterday NHS Supply Chain delivered more than 5 million aprons, 1 million FFP3 face masks, 6 million surgical masks and 21 million gloves to the NHS. In total over 45.5 million units of PPE were delivered to 280 trusts and providers.

The [WHO](#) has confirmed that the UK's guidance is consistent with the highest levels of protection in the world for the procedures with the highest risk of transmission.

The Health and Safety Executive conducted a rapid review of the guidance which concluded that aprons offer a similar level of protection to gowns and that FFP2 respirators offer protection against COVID-19 and can therefore be used during high risk procedures, if FFP3 respirators are not available.

The [WHO confirmed that UK guidance is consistent with WHO recommendations](#) for protecting healthcare workers against COVID-19. The WHO said: Based on the available evidence, including the recent publications mentioned above, WHO continues to recommend droplet and contact precautions for those people caring for COVID-19 patients. WHO continues to recommend airborne precautions for circumstances and settings in which aerosol generating procedures and support treatment are performed, according to risk assessment. These recommendations are consistent with other national and international guidelines, including those developed by the European Society of Intensive Care Medicine and Society of Critical Care Medicine and those currently used in Australia, Canada, and United Kingdom.

The UK guidance has some marginal differences from WHO guidance, these are:

the UK recommends FFP3 respirators for use during higher risk procedures however does state that FFP2 can be used if FFP3 are not available, following a rapid HSE review. Secondly WHO recommends full arm gowns when seeing any suspected or confirmed case of COVID-19. The UK guidance also recommends full arm gowns in high risk procedures and aprons for other procedures, which is consistent with the UK 'bare below the elbow' policy as part of our long-term strategy to reduce healthcare associated infections and effective hand hygiene.

COVID-19 is not airborne, it is transmitted through droplets and surfaces We advise gowns for the highest risk procedures and areas where aerosol generating procedures that are likely to transmit respiratory viruses are likely to be performed. Health Protection Scotland have conducted and provided an evidence base for [Standard Infection Prevention and Control Precautions](#) and this forms the basis of this guidance. The advice therefore is bare below the elbows and you scrub your hands, your wrists and your forearms.

Government announces new 10 year Public Sector Geospatial Agreement with Ordnance Survey

Geospatial data, which is data linked to location, underpins Britain's public services such as emergency planning, building our homes, protecting our environment, supporting our transport and helping our security services to keep us safe. Today the Geospatial Commission has announced it is increasing the location data available to the public sector across England and Wales.

Any public sector organisations ranging from health and emergency services, town, parish, and community councils through to central government departments can sign up via [Ordnance Survey](#) to use the data, free at the point of use. Known as the Public Sector Geospatial Agreement, it will be delivered by the national mapping agency, Ordnance Survey and will start from 1 April 2020.

Director of the Geospatial Commission, Thalia Baldwin, said

"The Geospatial Commission was created in 2018 to make sure the UK maximises the opportunity location data presents for society, the economy and the environment. The new agreement meets our commitment to improve access to Ordnance Survey's core data to start-ups, businesses and innovators.

It means that the public and private sectors will have improved access to the accurate and detailed mapping data they rely on today to support even more innovative, efficient and effective delivery of public services."

Chief Executive of Ordnance Survey, Steve Blair, added

“We’re looking forward to delivering the new agreement and continuing to put OS data at the centre of decision making across the public and private sector. With this long-term investment, we can make our world-leading geospatial data even easier to access, use and share. It will enable us to capture and manage new levels of data which will support emerging markets, customers and innovation.

“Across Great Britain OS is helping to deliver value to thousands of customers, and I am looking forward to seeing how they will work with the new data to support their business and service delivery. I will be keeping an especially close eye on how new customers and start-ups innovate with the data to generate real economic value for Great Britain.”

From the 1 July 2020 businesses will be able to access, free up to a threshold, OS MasterMap data through a series of Application Programming Interfaces (APIs).

For further information, please see the [Ordnance Survey PSGA home page](#)

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[Geospatial Commission to release core identifiers under Open Government Licence](#)

Just like everyone has a national insurance number and every vehicle a number plate, every address has a Unique Property Reference Number and every street has its own Unique Street Reference Number. They are the golden thread of the UK’s world leading addressing system.

To recognise their importance, the [Open Standards Board](#) has mandated that they will now be the standard way of referencing and sharing information about properties and streets across government to improve services and outcomes for citizens such as helping to improve fraud detection, creating better waste collection routes, more accurate insurance quotes and house buying processes.

Minister for Housing Rt Hon Christopher Pincher said:

“I am delighted by today’s announcement and encouraged by the new opportunities this presents to digitally transform public services and boost our economy.

“This is the most powerful boost for the UK PropTech sector in a generation, unlocking new levels of digital innovation on a national scale. Open identifiers are crucial for tech entrepreneurs and wider industry – they will enable housing developers to find sites that have the most potential, helping deliver much-needed new homes across the country.

“This is an important milestone in the Government’s commitment to maximising the value of geospatial data.”

Further information can be found in the latest [blog from the Government Digital Service](#)

This announcement follows on from the Geospatial Commission’s [announcement today](#) that it is to fund a 10 year Public Sector Geospatial Agreement.

Image Credit: K303/Shutterstock.com

[Important information for British nationals departing India](#)

On 24 March, Prime Minister Modi announced a three week lockdown across India from midnight on 25 March. Strict restrictions on movement are now in place unless for an essential purpose.

We are working with the Indian authorities and airlines to support British nationals who want to leave India and [return to the UK](#).

Once flights have been confirmed, travellers should leave plenty of time to get to the airport as movement may be more difficult than normal. You should make sure you are able to show authorities:

- proof of a booked flight (a boarding pass if possible)
- your passport
- a (printed, if possible) copy of the [British movement letter](#) (PDF, 330KB, 1 page) issued by the British High Commission confirming that you should be allowed to travel

This English letter has also been translated into the main Indian regional languages:

- West Bengal – [British movement letter Bengali](#) (PDF, 819KB, 1 page)
- Gujarat – [British movement letter Gujarati](#) (PDF, 625KB, 1 page)
- Bihar, Chhattisgarh, Delhi, Haryana, Himachal Pradesh, Jharkhand, Madhya Pradesh, Rajasthan, Uttarakhand, Uttar Pradesh – [British movement letter Hindi](#) (PDF, 859KB, 1 page)
- Karnataka – [British movement letter Kannada](#) (PDF, 976KB, 1 page)

- Kerala – [British movement letter Malayalam](#) (PDF, 879KB, 1 page)
- Maharashtra – [British movement letter Marathi](#) (PDF, 1.45MB, 1 page)
- Punjab – [British movement letter Punjabi](#) (PDF, 689KB, 1 page)
- Tamil Nadu – [British movement letter Tamil](#) (PDF, 403KB, 1 page)
- Andhra Pradesh – [British movement letter Telugu](#) (PDF, 635KB, 1 page)

For Goa, and other states not listed, we recommend using the English letter above.