

Refere	Category	Question	Answer	Link	Attachment
1	Ventilation	Is duct cleaning required to be able to recover Covid-19 care spaces to non-Covid-19 care spaces?	No it is not. Maintenance and filter changes should only be undertaken in line with PPMs and with appropriate PPE, with the objective of limiting exposure to Covid-19 Patients and the risk of contact point spreading of disease.		
2	Ventilation	Should HEPA filters be treated as infectious waste?	HEPA filters would only be in the extract system for an infectious disease unit. They would be treated as infectious waste. HEPA filters on air supply side are unaffected.		
3	Ventilation	Is negative pressure required for Covid-19 patient treatment?	No it is not. Negative pressure and positive pressure reduce viral load through air changes and dilution. Negative pressure specifically removes the viral load, from the point of generation (particularly important where aerosol generating procedures are taking place). There should a risk assessment based approach for the allocation of patients to rooms, especially where aerosol generating procedures may be undertaken.		
4	Ventilation	Can the Covid-19 virus become airborne?	Studies indicate that aerosol propagation of the virus is possible in the case of prolonged exposure to high concentrations of the aerosols in a relatively closed environment. This is specific to aerosol generating procedures. Social distancing supports a disease transmission risk reduction associated with Covid-19 particle distribution		

5	Ventilation	What benefit does negative pressure offer for accommodating COVID-19 positive patients?	<p>Negative pressure and positive pressure reduce viral load through air changes and dilution. Negative pressure specifically removes the viral load, from the point of generation (particularly important where aerosol generating procedures are taking place).</p> <p>There should a risk assessment based approach for the allocation of patients to rooms, especially where aerosol generating procedures may be undertaken.</p>		
6	Ventilation	Should negative pressure be used in spaces that require positive pressure relationships (such as Operating Theatres, procedure rooms, etc.) when a COVID-19 patient needs to be treated in such spaces?	<p>No. This should be addressed the same as with a TB patient in the Operating Theatre. Basic recommendations are:</p> <ul style="list-style-type: none"> <li>• Do not operate on Covid-19 confirmed patients with aerosol generating procedures in Barn Theatres.</li> <li>• In procedure room, where doors can be left open, they should be kept closed throughout the procedure</li> <li>• Terminal Cleaning should be performed after sufficient number of air changes has removed potentially infectious particles through dilution.</li> </ul> <p>Further advice should be sought from clinical workstreams, working with public health, to identify the actual number of air changes, or room resting time, required following and specific</p>		
7	Ventilation	should I make operating theatres and procedure rooms neutral/negative pressure	No. The risk of harm from other infection outweighs the Covid-19 Risk. See FAQ6		
8	Ventilation	What is the best way to create negative pressure in a patient room?	<p>Do not make temporary, or switchable adjustments to existing systems, especially for a single room (air pressure hierarchy is required, including robing/de-robing rooms. For new installations follow HTM 03-01)</p> <p>There should a risk assessment based approach for the allocation of patients to rooms, especially where aerosol generating procedures may be undertaken.</p>		
9	Ventilation	Is there a risk of Covid-19 transmission from air handling plant external exhaust?	No there is not. Distance travelled and dilution will effectively eliminate this route of transmission.		

10	Heatwave Planning	Can I use fans in Covid-19/Covid-19 suspect area?	<p>Fans, as such, are not an problem in these environments, not withstanding the CAS E&amp;F Alert 11/01/19 on fans. In fact, were there is poor air circulation within a volume, it may be beneficial to move air towards windows and mechanical extract.</p> <p>Fans should not be directed towards doors, driving air into other rooms.</p> <p>Fans will not cool staff wearing water repellent PPE, so they will be of limited practical value in ITU settings, and are therefore not advised.</p> <p>PPMs on the maintenance, and cleaning of fans and their blades should continue, with frequency based on risk</p>		
11	Heatwave Planning	Can I use split air conditioning in Covid-19/Covid-19 suspect area?	<p>Split-air conditioning, were there is poor air circulation within a volume, may be beneficial to mix air such that is benefits from air changes provided by mechanical extract.</p> <p>Split-air conditioning will cool staff wearing water repellent PPE.</p>		
12	Ventilation	Should I turn off or turn down air handling systems, especially where it is positive pressure?	<p>No, do not turn off or turn down air handling systems.</p> <p>Air Changes will dilute and thereby reduce bio-load. It is good irrespective of whether it is positive or negative pressure.</p> <p>An air pressure change in one space will directly impact all its adjacent spaces and can only be done following a full impact assessment.</p>		

13	Ventilation	Do air scrubbers work and should I use them?	<p>There is some research evidence to support the efficacy of Air Scrubber type technologies e.g. HEPA, UV, Ionisers; but this research is not in relation to Covid-19.</p> <p>There is some debate on the subject. Air Scrubber type technologies are considered to be most effective at the point of aerosol generation. So achieving this requires placement immediately adjacent to patients, yet many of these technologies are not advised for use near or with humans present.</p> <p>Where a clinical space has very low air changes, or none, and it is not practical to increase dilution effectively, then Air Scrubber type technologies are considered to offer some benefit, e.g. they may reduce time to wait for dilution between patient occupation / use of space. However the CAS E&amp;F Alert 11/01/19 on fans still applies.</p>		
14	Heatwave Planning	Can I use portable air conditioning in Covid-19/Covid-19 suspect area?	<p>Portable air conditioning, as such, is not an problem in these environments. In fact, where there is poor air circulation within a volume, it may be beneficial to move air towards mechanical extract</p> <p>Portable air conditioning should not be directed towards doors, driving air into other rooms, nor should its pipework impede fire doors</p> <p>Portable air conditioning should be used with the advice of your Water Safety Group (HTM 04) cognisant of the risk of legionella. PPMs should be conducted on the device, including daily emptying of the reservoir, that is recorded.</p> <p>Do not use portable air conditioning that incorporates</p>		

15	Social Distancing	has anyone installed any perspex screens in their MIU or reception area's to increase staff safety. If so could you advise as to what was installed and if any hearing systems were installed to improve hearing the conversations with patients that might be difficult to hear with additional barriers	portable induction loops c.£100 each and can be taken from a reception in to a clinic room (pre C-19) - this kind of thing: <a href="https://www.actiononhearingloss.org.uk/shop/listening-devices/pl13-ezee-loop/">https://www.actiononhearingloss.org.uk/shop/listening-devices/pl13-ezee-loop/</a>		
16	Social Distancing	Is there any guidance on social distancing in healthcare settings	Not specifically, however there are social distancing guidelines in workspaces from open.gov. posted on the hub. Follow link.	<a href="https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19">https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19</a>	
17	Social Distancing	Do you recommend reopening cafes and shops as we move into the 2nd Phase of response?	We recommend the continued use of social distancing, as found in commercial shops outside of Healthcare.  We do not recommend the re-opening of cafes to the public, at this stage (28/05/2020)		
18	Oxygen	What have we learnt from Oxygen Supply Incidents	We have noted a disconnect between clinical teams, drawing on oxygen supply, and the Estates teams that manage the oxygen. Historically Trusts normally operate around 30% of their VIE capacity. The Covid-19 patient demand has on occasions exceeded 100% of capacity. This has tested both Clinicians and Estates teams understanding of managing Bulk Oxygen, resulting in the issueing of two CAS Alerts: NHSE/I - EFA 2020/001 and NHSE/I - EFA 2020/002.  We recommend the consideration of the following during a 2nd surge:  Clinicians notify the Estates helpdesk of any patient bed where a patient is put on high flow NIC/CPAP Track is kept of the number of patients on O, O+ and V treatment to establish the impact on total oxygen demand Any, non ITU ward, where there are more than ten O patients or one O+ patient daily O2 concentration levels in the air are monitored. Follow the guidance from your Bulk Oxygen supplier on maximising VIE capability, which can be found with the NHSE/I - EFA 2020/002	<a href="https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103013">https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103013</a>  <a href="https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103020">https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103020</a>	

19	Social Distancing	How do you socially isolate in a lift	Floor signage for passengers to face the walls of the car. See p2 Offices and Contact Centres in Gov. guidance.	<a href="https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19">https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19</a>	
20	Social Distancing	Are you removing surplus furniture to facilitate social distancing, or are you putting tape across it?	Removing furniture, where possible, if it does not damage floor finishes. Fixed multi-seat furniture is taped to prevent use. See p15 Offices and Contact Centres in Gov. guidance.	<a href="https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19">https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19</a>	
21	Social Distancing	Is there national signage for Covid-19 zone segregation, 2m spacing and one way systems?	The NHSE & NHSI Estates team are in the process of developing templates, with CHP, NHSPS and Trusts that will be available to download and get printed from their local suppliers or off a national framework supplier. Hopefully we will have this completed by the 5th June.		
22	Vacuum Systems	Is there any NHSI / NHS Estates / PHE policy or guidance re additional antiviral filtering of suction lines connected to the central vacuum system, perhaps specific to the COVID-19 outbreak?	There is a cut off in the suction controller that should stop liquids being aspirated into the pipe line. There is a Bio-hazard filter incorporated into the final pipeline to plant connection and there is a documented procedure for removal and disposal of said Bio-hazard filter as per 9.28 of HTM 02-01 part A.		
23	Social Distancing	In developing plans for resuming paused clinical activity how are trusts managing functions that need to cross between 'green' (confirmed no covid) and 'red'/'blue' confirmed covid/suspect covid?	Where possible ensure that functions do not cross, such as ensuring cleaning teams are allocated to one zone; and that equipment remains in that zone.  Functions like materials management, catering, specialist maintenance, pathology, pharmacy and others all will inevitably cross between zones. The important consideration is that you have plans for separation and decontamination including signage, transition space, equipment and materials to facilitate the effectiveness of that barrier. This could be drop boxes so that materials and supplier transition (after decontamination), but people do not.		
24	Standard Operating Procedures	Where do I find Standard Operating Procedures for Cleaning	Standard operating procedures for all Estates and Facilities Tasks, in line with PHE guidelines have been developed for healthcare environments, at several levels of Covid-19	<a href="#">Standard Operating Procedures</a>	

25	Social Distancing	To ensure social distancing in six-bed bays are you reducing occupancy or creating barriers?	<p>A number of trust have reported that they are reducing six and five-bed bays to four bed bays.</p> <p>Other trusts are installing partitions between bed bays. However it is important to note that barriers that prevent the recirculation of air and its dilution through air changes is problematic, so only install physical barriers consistent of the impact of airflow.</p>		
26	Social Distancing	In developing plans for resuming paused clinical activity how are trusts structuring their plans for social distancing?	<p>East Suffolk and North Essex NHS Foundation Trust have divided their Social Distancing Guidance in to four categories:</p> <ol style="list-style-type: none"> <li>1) Outpatient Areas</li> <li>2) Inpatient Areas</li> <li>3) Office Accommodation</li> <li>4) General Areas</li> </ol>		