

Príomhoifigeach Cliniciúil Oifig an Phríomhoifigigh Cliniciúil

Ospidéal Dr Steevens, Lána Steevens Baile Átha Cliath 8, D08 W2A8

Chief Clinical Officer Office of the Chief Clinical Officer

Dr Steevens Hospital, Steevens Lane t 01 635 2000 Dublin 8, D08 W2A8

www.hse.ie @hselive

- e cco@hse.ie

BY EMAIL ONLY

Deputy Paul Murphy Dáil Éireann Leinster House Kildare Street Dublin 2

26th September 2023

PQ38624/23-Deputy Paul Murphy-To ask the Minister for Health further to Parliamentary Question No. 701 of 11 July 2023, if he will elaborate on his Department's statement that masks in healthcare settings were being worn in 'various incorrect and ineffectual manners' and risks with inappropriate use offset any purported benefits of universal use; specifically, what incorrect and ineffectual manners are being referred to, what risks inappropriate use carried, how these were weighed up to the benefits of universal masking, how widespread of an issue inappropriate use was, for an outline of any efforts that were made to correct this behaviour; and if he will make a statement on the matter.

Dear Deputy Murphy,

Thank you for your representation.

Use of masks is one component of a layered IPC approach and their use alone is not an effective barrier to transmission. Masks worn incorrectly poses IPC risks to the wearer and to those when the wearer comes into contact.

- Masks worn for prolonged periods pose a risk of loss of utility of effectiveness over time as the mask can loosen or become contaminated, this then poses a risk to wearer when removed if done in unthinking manner, or to others if not discarded safely. This also applies when masks are worn within clinical areas and then continue to be worn (same mask) outside of clinical areas as they may become contaminated.
- When masks are worn for a period of time in or outside of healthcare buildings, and then taken off (doffed) and placed in pockets of clothing, and then put back on (donned) when returning to healthcare buildings poses risks of loss of effectiveness over time. Masks loosens, surfaces become abraded, they can also become contaminated with dirt, debris, dust as well as with potentially infectious microorganisms.
- Masks worn incorrectly, namely under the chin or over only the nose, or loosely slung rather than closely fitting can also be ineffective either to protect wearer or to protect those with whom wearer comes into contact.



It is anticipated that the removal of general, non-specific recommendation or requirement for use of masks in healthcare settings would lead to the appropriate IPC recommended use at the times most appropriate to afford the most protection to wearer, patients and to those with whom the wearer will come into contact.

The extent of inappropriate use was based on collation of observations from clinical colleagues in healthcare settings and from observations of use outside clinical settings. Formal data were not available beyond these observations.

AMRIC guidance on appropriate use of PPE and other AMRIC IPC guidance and education webinars are published to www.hpsc.ie. AMRIC eLearning programmes are published to HSEland including AMRIC training of donning and doffing of PPE. All AMRIC training and education materials are made widely available to all clinical staff in all healthcare settings.

I hope this provides you with some assistance.

Yours sincerely

Sharon Hayden General Manager

Office of the Chief Clinical Officer