

# notes & actions

## NATIONAL HEATING & VENTILATION ADVISORY GROUP

Tuesday 10<sup>th</sup> September 2024 @ 14.00 am on MS TEAMS

### Present:

[REDACTED]	[REDACTED]	NHS Lanarkshire
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS NSS BST
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Golden Jubilee
[REDACTED]	[REDACTED]	NHS Highland
[REDACTED]	(Chair)	NHS Dumfries & Galloway
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Dumfries & Galloway
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Lanarkshire
[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Scotland Assure

### Apologies:

[REDACTED]	[REDACTED]	NHS Scotland Assure
[REDACTED]	[REDACTED]	NHS Grampian
[REDACTED]	[REDACTED]	NHS Scotland Assure

### 1. Welcome/Apologies

[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]

### 2. Discussion on updates to SHTM 03-01

- The SHTM 03-01 comments tracker was shared and summarised.
- A discussion took place about SHTM 03-01 Part A, clause 8.35, in relation to the use of HEPA filters in lay up preps and whether the guidance goes into too much detail in relation to instruments / 'opening of sterile barrier' etc.. Consider whether this should be covering only ventilation, or whether there should be a mention about instruments within theatres etc.



Chair  
Chief Executive  
Director  
Keith Redpath  
Mary Morgan  
Julie Critchley

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service

- It was discussed by the group that the guidance should focus on ventilation, as going into detail about clinical matters such as instrumentation in theatres and preparation areas could introduce additional risks and there is variation across hospitals.
- It was also discussed that the way theatres are being used is changing, and it would be best to consider local practices.
- [REDACTED] to update the guidance on design decisions to reflect that the focus of the group should be on ventilation, and that clinical colleagues should be consulted to provide clinical input on other aspects such as instruments etc.
- [REDACTED] also to update the guidance to reflect that designs should align with SOPs.
- There was some discussion on SHTM 03-01 Part A table 2 and the two options for ventilation strategy to service endoscopy rooms. It was noted that there is in some cases the need to contain smells, so a negative pressure is required, there is also the risk where there is suspected TB – requiring a negative pressure. There is, however, the potential for 'semi-invasive' procedures with scopes, where potentially a positive pressure would be appropriate. [REDACTED] and [REDACTED] raised the point that for certain procedures, the theatre would need to be used, as there could be a risk of contamination and cross contamination. This is also due to there being a possibility of biopsy needing done for diagnosis.
- [REDACTED] to review the detail in the guidance about endoscopy rooms, procedures and clarify the two options presented. Again, this should refer to local clinical requirements and SOPs.
- JAG document on endoscopy was discussed which covers the schedule of accommodation for theatres and endoscopy rooms, which details how contamination can be avoided, and potential risks can be averted.

# action log

2023-07-18/12.1	[REDACTED] [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED] [REDACTED]
2023-04-25/5.1	[REDACTED] [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED] [REDACTED] [REDACTED] [REDACTED]