

Independent High Risk AGP Panel
8th Meeting on 25th November 2020, 11:30-13:30
Microsoft Teams Teleconference

Welcome, introductions and apologies

1. The Chair welcomed the panel members and briefly thanked the co-opted experts Simon Parker, Alexandra Freeman and Adam Boise for their contribution to the systematic review workstream. It was noted that James Tysome has accepted an invitation from the Chief Medical Officer (CMO) to serve as a full member of the Independent High Risk AGP Panel.
2. The attendees were Jacqui Reilly (Chair), Nick Murch, David Jenkins, David Farren Gail Carson, Mel Burden, Cariad Evans, Martin Llewelyn, Alexandra Freeman, Shaun Fitzgerald, Jordan Charlesworth (Secretariat) and Kerry Broom (Secretariat).
3. Apologies were received from James Tysome, Jennie Wilson, Adam Boise, Ema Swingwood and Viviana Finistrella (Secretariat).

Review and approval of minutes and actions

4. The minutes were agreed as factually correct with no further comments. Actions from the previous meeting were updated.

Update on the systematic review (SR) by the associated subgroup

5. The Chair noted that the draft panel outputs have been finalised - with panel comments actioned. It was noted that the Chair had been asked to present these outputs at a recent senior clinicians meeting, attended by the 4 UK CMOs.
6. GC highlighted that the systematic review protocol has been updated to reflect changes to the search strategy. As the protocol cannot be post registered on PROSPERO given the rapid nature of the work, it was suggested that it be published on the [Open Science Foundation](#) platform, linked to the panel webpage.

Update on International Scoping Review

7. GC updated on the international scoping report. This work demonstrates that the UK list is broadly similar to others internationally – with the exception of nebulisation and CPR. Some disparities may relate to differences in language and descriptions of procedures. It was noted that a summary paragraph based on the findings of this international work was incorporated into the summary of advice document.

Discussion of next steps, including request from the UK IPC Cell to consider the extant AGP list

8. The Chair noted that the UK Infection Prevention & Control (IPC) cell has asked whether the panel plans to review the extant AGP list. The panel broadly agreed that an independent review of the extant list of AGPs would be helpful, and would require further consideration of who would perform this and the resource requirements.

JR and GC updated on previous meetings with the NIHR AGP clinical research task & finish group, chaired by Mark Hull. This group aims to bring together clinical aerobiology research projects in the healthcare setting and to provide recommendations on future research. This group aims to establish a standardised research protocol for use across centres.

AOB

9. DJ highlighted information on ultra-thin trans-nasal endoscopes, which aim to mitigate aerosol production. It was noted this is currently being considered by the IPC cell and there was no request for AGP panel input to date.

10. DJ also raised the existence of differences between the lists of procedures considered to be AGPs in healthcare settings and in education/social care settings. The Chair agreed to raise this disparity with the UK IPC cell.