



2021-0041742POSoS

Rt Hon Nadhim Zahawi MP
Secretary of State

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By email: Sue.Bigg@neu.org.uk

Dear Kevin, Mary, Geoff, Avril, Jon, Paul, Patrick, Jim & Daisy, 31st October 2021

Thank you for your letter of 17 September regarding the department's guidance on the use of CO₂ monitors. I would also like to acknowledge your letters of 17 August and 1 July, addressed to the former Secretary of State. This letter should be considered as a response to all three.

I am pleased that you welcomed the earlier decision, announced on 21 August, that CO₂ monitors would be provided to state-funded education settings, including early years, schools, and further education providers. As you know, the benefits of improved ventilation extend beyond the COVID-19 pandemic. Studies have shown that good ventilation is associated with improved health, better concentration, higher levels of satisfaction with an environment, lower rates of absence from schools and work, better quality of sleep and reduced exposure to a wide range of air pollutants. Further information is available at: tinyurl.com/2fk9ucdh.

I am absolutely committed to rolling these monitors out as quickly as possible. The first deliveries began on 6 September, and deliveries will continue throughout the autumn term. This will support schools to quickly identify where ventilation may need to be improved.

I understand you have raised concerns about the CO₂ monitor guidance, and I will respond to each of your most recent questions in turn.

I can confirm that we consulted informally with The Chartered Institution of Building Services Engineers (CIBSE) on this project and have a CIBSE chartered engineer working in the department to support us.

Our operational guidance, available directly to settings via our ventilation document sharing platform, advises education settings on how to use the new CO₂ monitors. This guidance was reviewed by both Public Health England (PHE) and the Health and Safety Executive (HSE). The guidance also includes direct links to more detailed advice from PHE, HSE, and my department on how to improve ventilation in settings. In response to your feedback, we are now adding a link in the guidance to the CIBSE guidance so that settings can find the relevant guidance on this area in one place.

You asked whether or not we fully reflected the HSE and SAGE guidance in the department's own guidance. We took into account the principles described both in the SAGE paper you reference, as well as the more recent SAGE paper on the use of CO₂ monitors. Further information is available at: tinyurl.com/3JbfdzcJ.

These papers state that ventilation rates recommended in UK building standards and industry guidance are likely to be adequate in most settings: this is generally a supply of outdoor air of around 10 l/s/person, which will result in CO₂ concentrations of around 800-1000 parts per million (ppm). Where ventilation rates lead to higher than 1500 ppm CO₂, the SAGE papers recommend that steps should be taken to improve ventilation as a priority. In situations where there is likely to be higher aerosol generation (such as people singing or exercising) the papers recommend maintaining CO₂ levels below 800 ppm. This is why our guidance states that a consistent value over 800 ppm should be seen as an early indicator to increase ventilation.

However, it is important to note there are many factors that can affect the reading from a CO₂ monitor. As we make clear in our guidance, while CO₂ measurements are a useful proxy for ventilation, they do not give direct information about infection risk. For these reasons the values given in guidance should not be seen as absolute thresholds but rather as rough guides to understand how well ventilated a room is, prompt action where needed, and enable a good balance between ventilation and thermal comfort in colder weather.

You also asked whether there are circumstances in which a class should be relocated. Our guidance is clear that where CO₂ monitor readings are consistently higher than 1500 ppm CO₂ concentration in an occupied space, settings should take action to improve ventilation. This does not mean that they need to stop using the room. In most cases, we expect the solution to improve ventilation to be relatively minor, such as opening a window or repairing mechanical ventilation systems.

Poorly ventilated spaces should be identified as part of each setting's risk assessment. The law requires employers, including education and childcare settings, to make sure there is an adequate supply of fresh air (ventilation) in enclosed areas of the workplace, and it is a matter for individual settings to ensure that they comply with their health and safety obligations. This has not changed during the pandemic, and HSE provides more information on this, available at: tinyurl.com/YPusaa33.

As all settings and classrooms are different, it is up to schools to assess risk and determine the best course of action, taking into account the full circumstances of the space under consideration and its use. We have made this clear in the additional section in the 'how to' guidance on risk assessment.

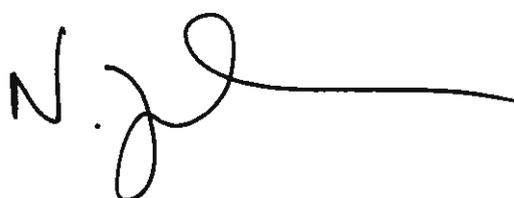
I know that you are also calling for the provision of appropriate air cleaning devices. Air cleaning devices can help to remove virus and other harmful particles from the air, and this may be helpful if education settings need time to fix an issue with ventilation. This is something I am carefully considering, and I have asked officials to closely monitor the impact of the CO₂ monitor programme as it is rolled out.

Finally, I understand that you are calling for the re-introduction of face coverings in secondary schools. Since moving to step 4, our aim is to balance the risks associated with COVID-19 whilst moving to a 'steady state' that minimises both the burden of implementing control measures on staff and parents and the impact those measures have on young people's educational experience. Face coverings have not been recommended nationally in schools and education settings. In the event of an outbreak, schools may wish to seek additional public health advice if they are concerned about transmission. The advice public health professionals give will take into account a range of factors reflecting the school's particular situation and the local circumstances, not just case numbers. Where there are COVID cases in schools, directors of public health can advise some temporary, proportionate additional measures including the use of face masks.

As you know, throughout the pandemic we have worked closely with the Department of Health and Social Care and PHE to minimise transmission of COVID-19. Working across government, we will continue to review these infection prevention measures, which are informed by the latest scientific evidence, and update the guidance accordingly.

Thank you for writing on this important matter.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'N. Zahawi', with a long horizontal line extending to the right.

Rt Hon Nadhim Zahawi MP
Secretary of State for Education