

By email Personal Data

Our ref: 16/12/21/js/2009

25 February 2022

Dear Name Redacted

Re: Freedom of Information requests

Thank you for your request received on 16 December 2021 addressed to Public Health England (PHE) and the UK Health Security Agency (UKHSA).

It may be helpful if I explain that on 1 October 2021, PHE transferred its health protection functions into UKHSA and its health improvement / healthcare public health functions into the Office for Health Improvement and Disparities (OHID), NHS England and NHS Improvement (NHSE/I) and NHS Digital. NHS Test and Trace functions also became part of UKHSA.

In accordance with Section 1(1)(a) of the Freedom of Information Act 2000 (the Act), I can confirm that UKHSA partially holds the information you have specified.

Request

By this letter I make requests of you under the Freedom of Information Act 2000 ("FOIA") for information relating to and arising out of Exercise Alice as further set out below.

Request 1: For each of the 12 actions identified in Appendix A of the Alice Report, please provide: (a) whether the Action was completed, (b) the title and date (month/year) of the document(s) which were directly produced as a result of that Action, (c) whether you hold copies of those documents.

Request 2: If you hold the relevant documents outlined in Request 1, then please disclose them.

Response

In accordance with Section 1(1)(a) of the Act, I can confirm that UKHSA partially holds the information you have specified.

Exercise Alice was a multi-agency exercise and a number of the proposed actions were not within PHE's remit.

PHE published a range of guidance on investigating Middle East respiratory syndrome coronavirus (MERS-CoV), public health management of suspected UK cases and advice to travellers. The guidance is available at: https://www.gov.uk/government/collections/middle-east-respiratory-syndrome-coronavirus-mers-cov-clinical-management-and-guidance

Appendix A Actions

- 1. MERS-CoV PPE Video not within PHE's remit.
- 2. Develop a protocol to enable the arrangement and conduct of timely clinical trials for new or experimental treatments not within PHE's remit.
- 3. Develop a set of guidelines to prioritise treatments when there are limited stocks/does available not within PHE's remit.
- 4. **Develop a serology assay procedure to include a plan for a process to scale up capacity** – procedure was developed and used during the management of the imported case in August 2018. Laboratory procedures for scaling up capacity have been well rehearsed across a range of outbreaks.
- 5. Produce a briefing paper on the South Korea outbreak with details on the cases and consider the direct application to the UK including port of entry screening – port of entry screening has been found to be of minimal use across a number of outbreaks and has been widely studied. The details of individual cases have not been released apart from the index case. The protocols developed following Exercise Alice were tested in the response to the importation of a case in August 2018 which was successfully managed.
- 6. Produce and extensive summary of the EVD lessons identified with a section on applicability to MERS-CoV the generic incident management lessons identified from the EVD response were incorporated into subsequent developments of PHE's incident response procedures. UKHSA's response procedures have been built from those used by PHE. As the methods of transmission for VHF and airborne diseases like MERS-CoV differ, specific guidance for these are separate.
- 7. Produce an options plan using extant evidence and cost benefits for quarantine vs self-isolation for a range of contact types including symptomatic, asymptomatic, and high-risk groups – this background research has been used to develop the current guidance. Any decisions about making this enforceable were outside the remit of PHE.
- 8. Develop a plan for the process of community sampling in a MERS-CoV outbreak – guidance has been produced and is available at: <u>https://www.gov.uk/government/collections/middle-east-respiratory-</u> syndrome-coronavirus-mers-cov-clinical-management-and-guidance

Sample processing will take place in the routine manner, adjusted for scale. As part of any incident response, this scale will be determined and then appropriately resourced in conjunction with other responding agencies.

This is also contained in The First Few Hundred (FF100) Enhanced Case and Contact Protocol which is also available at the above link.

- 9. Develop a live tool or system to collect data from MERS-CoV contacts – there are a range of systems that were employed by PHE and continue to be employed by UKHSA for gathering data from contacts across a range of outbreaks and are chosen based on the scale of the outbreak. They are causative organism agnostic to avoid duplication or processes.
- 10. Research, review and identify good practice for definitions of close/high-risk contacts and recommend a definition for MERS-CoV – this is contained in guidance available at: <u>https://www.gov.uk/government/collections/middle-east-respiratory-</u> <u>syndrome-coronavirus-mers-cov-clinical-management-and-guidance</u>
- 11. **Prepare a FAQ for close/high-risk contacts** FAQs for those undergoing active and passive post contact surveillance have been produced and are available at: <u>https://www.gov.uk/government/collections/middle-east-respiratory-</u> syndrome-coronavirus-mers-cov-clinical-management-and-guidance
- 12. Produce a briefing paper that considers a range of communication options to interface with NHS staff to gain staff engagement not within PHE's remit.

If you have any queries regarding the information that has been supplied to you, please refer your query to the Information Rights Team in writing in the first instance. If you remain dissatisfied and would like to request an internal review, then please contact us at the address above or by emailing <u>InformationRights@UKHSA.gov.uk</u>.

Please note that you have the right to an independent review by the Information Commissioner's Office (ICO) if a query cannot be resolved through the UKHSA internal review procedure.

The ICO can be contacted by calling the ICO's helpline on **I&S** visiting the ICO's website at <u>www.ico.org.uk</u> or writing to the ICO at Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely,

Information Rights Team