

Minutes of the NERVTAG COVID-19 Ninth Meeting: 13 March 2020

Date & Location:	11:00 – 12:30, 13 March 2020 Via telecon only
In attendance:	<p>Peter Horby (Chair), Camille Tsang (Secretariat), Emma Petty (Temporary Secretariat)</p> <p>NERVTAG Members: Peter Openshaw (PO), Ben Killingley (BK) Calum Semple (CSm), Wei Shen Lim (WSL), Robert Dingwall (RD), John Edmunds (JE), Jim McMenamin (JMM), Wendy Barclay (WB)</p> <p>PHE Observers: Gavin Dabrera (GD), Maria Zambon (MZ),</p> <p>DHSC Observers: Jonathan Van-Tam (JVT), Ursula Wells (UW), Sadia Dorsani (SD), Bethan Loveless (BL)</p> <p>SAGE: Catherine Yule (CY)</p> <p>NHSE: Chloe Sellwood (CSw)</p> <p>APHA: Ian Brown (IB)</p> <p>HPS: Lisa Ritchie (LR)</p> <p>DFID: Cathy Roth(CR)</p>
Apologies:	Neil Ferguson, Andrew Hayward, Cariad Evans, James Rubin Cheryl Cavanagh, Mary Ramsay, Martyn Underdown, David Connell, Kevin Rooney,

Contents

1	Introductions	3
2	Adaption of the pandemic flu IPC guidance into COVID-19 version	3
3	The potential for reinfection with SARS-CoV-2	5
4	AOB and Next Meeting	8

- 2.5 JVT noted that the guidance was needed to help relieve pressure points on the NHS in England such as decontamination of ambulances. Under the HCID specification, it takes 3 hours and guidance is required for a simpler and faster method.

Action: JVT & LR to update IPC guidance document

Action: NERVTAG to review and approve IPC guidance via correspondence if required

- 2.6 Members discussed the recommendations for certain aerosol-generating procedures, including non-invasive ventilation (NIV) and high-flow nasal oxygen (HFNO).
- 2.7 JVT clarified that NIV and HFNO are still AGPs in the guidance and noted that the guidance would define what precautions to take to ensure that the procedures were undertaken safely. It is not a clinical management guidance to specify which procedures should be used.
- 2.8 JVT explained that given current reasonable worst case scenario planning, there may be no other option but to use NIV, the issue is how to use this safely. There are also concerns regarding oxygen supplies and there would not be any clinical superiority for HFNO over other NIVs. [This was previously advised by the NERVTAG NIV and nosocomial transmission subcommittee]
- 2.9 Members noted that the guidance is recommending the use of fluid resistant surgical masks (FRSM) outside of AGP hotspots as per pandemic flu as opposed to the HCID recommendations of FFP3 respirators.
- 2.10 DHSC noted that they are moving towards FRSM over FFP3 and members discussed the argument for the reclassification of COVID-19 from a high consequence infectious disease (HCID) by the Advisory Committee on Dangerous Pathogens (ACDP). JVT agreed to discuss this issue with Professor Tom Evans (ACDP Chair) with the recommendation from NERVTAG that classification as an HCID needs to be urgently reconsidered by ACDP.
- 2.11 JMM provided an update where JVT had spoken with Professor Tom Evans, Chair of ACDP who advised that the HCID status was discussed at the ACDP meeting and the committee were unanimous in supporting the declassification of COVID-19 as a HCID.