

Novel Coronavirus Outbreak (M) (3)

CABINET OFFICE BRIEFING ROOMS

Novel Coronavirus Outbreak (M) (3)

Meeting on Wednesday, 5th February 2020

Irrelevant & Sensitive

70 Whitehall at 16:45

MINUTES

PRESENT

The Rt Hon Matt Hancock MP
Secretary of State for Health and Social Care
In the CHAIR

The Rt Hon Alok Sharma MP
Secretary of State for the Department for
International Development

The Rt Hon Robert Jenrick MP
Secretary of State for Housing, Communities
and Local Government

The Rt Hon Rishi Sunak MP
Chief Secretary to the Treasury

The Rt Hon Alister Jack MP
Secretary of State for the Scotland Office

The Rt Hon Brandon Lewis MP
Minister of State for Security and Deputy for
EU Exit and No Deal Preparation at the Home
Office

Andrew Stephenson MP
Minister of State at the Foreign and
Commonwealth Office and the Department for
International Development

Jo Churchill MP
Parliamentary Under Secretary of State at the
Department of Health and Social Care

The Rt Hon Baroness Vere
Parliamentary Undersecretary of State at the
Department for Transport

Rebecca Pow MP
Parliamentary Under Secretary of State at the
Department for Environment, Food and Rural
Affairs

The Rt Hon Nick Gibb
Minister of State for School Standards at the
Department for Education

Lucy Frazer QC MP
Minister of State at the Ministry of Justice

The Rt Hon Robin Walker
Parliamentary Undersecretary of State at the
Northern Ireland Office

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Justin Tomlinson MP
Minister of State for Disabled People, Health
and Work at the Department for Work and
Pensions

David Davies
Parliamentary Under-Secretary of State for
Wales

DIALLED IN

Jeane Freeman MSP
Scottish Government

Robin Swann MLA
Northern Ireland Executive

Vaughan Gething AM
Welsh Government

OFFICIALS

Chris Wormald
Permanent Secretary, Department of Health and
Social Care

Katharine Hammond
Director, Civil Contingencies Secretariat

Emma Reed
Director, Department for Health and Social Care

Kate Thomas
Head of Strategic Communications, Department
of Health and Social Care Communications

Imran Shafi
No.10

Alex Aiken
Director, Government Communications

Sir Ed Lister
No.10

Emma Moore
Chief Operating Officer, Border Force

Major General Charlie Stickland
Ministry of Defence

Meena Rawlings
Director General, Foreign and Commonwealth
Office

Simon Stevens
Chief Executive, NHS England

Yvonne Doyle
Director, Public Health England

Patrick Vallance
Government Chief Scientific Advisor

Keith Willet
NHS England

Chris Whitty
Government Chief Medical Officer

Nic Hailey
Director General, Foreign and Commonwealth
Office

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Dr Catherine Calderwood
Chief Medical Officer (Scotland)

Frank Atherton
Chief Medical Officer (Wales)

Michael McBride
Chief Medical Officer (Northern Ireland)

SECRETARIAT

Natasha Grant

Roger Clarke

NR

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The Cabinet Office circulated the following papers to inform the Committee's discussion:

1. 2020040 - Planning priorities CoV – FINAL
2. 20200205-Novel Co-V_CRIP_5_FINAL

Novel Coronavirus Outbreak

Item 1: Current Situation Update

1. The CHAIR invited the Government Chief Medical Officer (CMO) to give a situation update. The CMO said that novel coronavirus case numbers in South East Asia were rising quickly and that this trend was likely to continue. That the overall figure for people infected with novel coronavirus in China was likely to be higher than had been reported as the Chinese authorities had implemented a strict case definition, which meant that they were only testing people who had a connection to the Hubei province or have recently been exposed to someone who has visited the Hubei province.
2. Continuing the CMO said that (emerging scientific evidence from international cases suggested):
 - On average, individuals who had died as a result of the novel coronavirus had spent between seven to ten days in hospital before dying - the longest recorded period between symptom onset and death had been 41 days.
 - The two most high-risk groups appeared to be the elderly and those with pre-existing illnesses.
 - As yet there had been no recorded cases of children dying and therefore they were presumed to be at low risk from the virus.
 - The fatality rate estimate remained at 2-3 per cent.
3. The CHAIR invited the Minister of State at the Foreign and Commonwealth Office to give an update on assisted departures. The MINISTER OF STATE AT THE FOREIGN AND COMMONWEALTH OFFICE said that the UK's second assisted departure flight was expected to depart Wuhan on the 7 February carrying Foreign and Commonwealth Office staff, Irrelevant & Sensitive medical staff and 127 British nationals/dependents. Seats had been offered to other European nationals but the details and numbers of European Nationals had yet to be confirmed.
4. The CHAIR invited the Permanent Secretary for the Department of Health and Social Care to confirm the arrangements for the isolation of British nationals and their dependents upon arrival in the UK. The PERMANENT SECRETARY FOR THE DEPARTMENT OF HEALTH AND SOCIAL CARE said the Department of Health and Social Care had been exploring three commercial residential locations; Oxford, Milton Keynes, or Stratford. The Department of Health and Social Care expected to finalise plans by the end of the day and inform relevant departments accordingly.
5. Summing up the CHAIR highlighted that there were no legal powers in place to force nationals into isolation. However, all passengers on the flight were required to sign contracts before boarding, stating that if they did not comply with the isolation plans they would be liable to pay costs for their repatriations.

Item 2: Options for limiting transmission

6. The CHAIR invited the CMO to summarise the latest scientific advice on limiting the transmission of the novel coronavirus into the UK. The CMO said that the latest advice from the Scientific Advisory Group for Emergencies (SAGE) estimated that if the UK reduced imported infections by 50 per cent, it was expected that the the onset of any epidemic in the UK by would be delayed by about five days; if this was increased to 75 per cent it would be delayed by ten days; to 90 per cent 15 days and 95 per cent plus delayed for potentially a month.

7. In discussion the following points were made:
 - It would be very difficult to track and stop everyone who had visited China recently - given the large number of indirect routes into the UK from China.
 - The most effective way of tracking passengers would be to introduce landing cards asking for a declaration of recent travel to China.
 - Two out of the three (weekly) return flights to Wuhan were still operating and that the Chinese Civil Aviation Administration had written to the UK to ask for these flights to continue to operate as normal.
 - Airport workers were reporting increased anxiety.
8. Summing up the CHAIR said that the communications strategy for managing new arrivals from China to the UK must be handled sensitively to avoid dishonest or incorrect self reporting. That the committee had agreed that the UK would not close the borders for arrivals from China but that all measures would be kept under review.

Item 3: Planning for a Reasonable Worst Case Scenario

9. The DIRECTOR OF THE CIVIL CONTINGENCIES SECRETARIAT set out the planning priorities in the slides describing the work underway to develop planning assumptions for the pandemic flu reasonable worst case scenario.
10. In discussion the following points were made:
 - The committee agreed the need for a clear communications strategy for engaging with trusted partners that summarised why HMG was reviewing reasonable worst case planning assumptions in light of the risk from the novel coronavirus.
 - The committee agreed that work should continue to move forward with plans for creating an emergency bill to support the UK's response.
 - The Devolved Administrations had commenced work with Local Resilience Forum equivalents to review their pandemic influenza plans.
11. Summing up the CHAIR said it was appropriate for all departments to privately engage with 'trusted partners' on the reasonable worst case scenario planning assumptions - however this should be in line with a communications strategy led by the Cabinet Office Communications Team. On 12 February there would be a Ministerial table-top exercise designed to increase ministerial understanding of the decisions that may need to be taken in a reasonable worst case scenario.

Item 4: Communications strategy

12. The CHAIR invited both the Cabinet Office Communications Team and Department for Health and Social Care Communications Team to explain the communications strategy for novel coronavirus. The DIRECTOR FOR CABINET OFFICE COMMUNICATIONS said that the current strategy was to reassure the public by using a science-led approach. Proactively issuing positive messaging and preparedness information to reassure the public, including the reuse of the influenza 'Catch it, Kill it, Bin it' campaign.
13. Summing up the CHAIR noted anecdotal evidence of the Chinese community experiencing a spike in discrimination reiterating the importance of relevant departments working together closely to explore any community tensions and develop strategies to mitigate this.

ANNEX 1 - ACTIONS

Novel Coronavirus (M)(20)(3)

CABINET OFFICE BRIEFING ROOMS

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05 February 2020, 16:45

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ACTIONS

1. FOREIGN AND COMMONWEALTH OFFICE to share the 'contracts' signed by those in supported isolation with DEPARTMENT OF HEALTH AND SOCIAL CARE, by close today (5 February).
2. DEPARTMENT OF HEALTH AND SOCIAL CARE to collaborate with relevant government departments, local authorities and Devolved Administrations on a communications plan regarding the 2nd UK assisted departure flight, once location of the supported self-isolation facility had been confirmed.
3. FOREIGN AND COMMONWEALTH OFFICE to provide early indication of the demographics (e.g. unaccompanied children) of people on the 2nd UK assisted departure flight to DEPARTMENT OF HEALTH AND SOCIAL CARE, to ensure appropriate plans for their reception in the UK can be put in place.
4. FOREIGN AND COMMONWEALTH OFFICE and DEPARTMENT FOR INTERNATIONAL DEVELOPMENT to convene a cross-government group to consider implications of further international spread.
5. HOME OFFICE to consider collection of further information on incoming arrivals from affected regions, supported by DEPARTMENT OF HEALTH AND SOCIAL CARE and DEPARTMENT FOR TRANSPORT.
6. PUBLIC HEALTH ENGLAND to prepare and provide public health communications for staff at all ports, similar to that provided to Border Force.
7. ALL DEPARTMENTS to rapidly advance planning for the reasonable worst case scenario, centrally coordinated by the Civil Contingencies Secretariat.

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8. ALL DEPARTMENTS to include trusted partners in Critical National Infrastructure in reasonable worst case scenario planning, in line with the agreed Cabinet Office communications plan.
9. ALL DEPARTMENTS and DEVOLVED ADMINISTRATIONS to finalise policy inputs into proposed legislative instrument, including trigger points.
10. DEVOLVED ADMINISTRATIONS to be invited to upcoming ministerial exercise.
11. NATIONAL SECURITY COMMUNICATIONS TEAM to coordinate communication strategy across all departments and devolved administrations, to ensure communications relating to the outbreak are aligned.

Decisions

1. COBR agreed not to impose further travel restrictions. This decision will be kept under review.

Cabinet Office

05 February 2020