#### Novel Coronavirus Outbreak (M) (2)

#### **CABINET OFFICE BRIEFING ROOMS**

**Novel Coronavirus Outbreak (M) (2)** 

Meeting on Wednesday, 29th January 2020

Irrelevant & Sensitive

70 Whitehall at 16:30

**MINUTES** 

PRESENT

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

The Rt Hon Dominic Raab Secretary of State for the Foreign and Commonwealth Office The Rt Hon Ben Wallace Secretary of State for the Ministry of Defence

The Rt Hon Alok Sharma Secretary of State for the Department for International Development The Rt Hon Therese Coffey Secretary of State for the Department for Work and Pensions

The Rt Hon Simon Hart Secretary of State for Wales

The Rt Hon Jake Berry Minister of State for the Northern Powerhouse and Local Growth at the Ministry of Housing, Communities and Local Government

The Rt Hon Brandon Lewis Minister of State for Security and Deputy for EU Exit and No Deal Preparation at the Home Office The Rt Hon Baroness Vere Parliamentary Undersecretary of State at the Department for Transport

The Rt Hon Lucy Frazer Minister of State at the Ministry of Justice The Rt Hon Nick Gibb Minister of State for School Standards at the Department for Education

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

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Lord Duncan

Parliamentary Undersecretary of State at the Department of Business, Energy and Industrial

Strategy

Rebecca Pow

Parliamentary Under Secretary of State at the Department for Environment, Food, and Rural

**Affairs** 

Jo Churchill

Parliamentary Undersecretary of State at the Department of Health and Social Care

DIALLED IN

Jeane Freeman MSP Scottish Government Robin Swann MLA Northern Ireland Executive

Vaughan Gething AM Welsh Government

**OFFICIALS** 

Chris Wormald

Permanent Secretary, DHSC

Sir Patrick Vallance

Government Chief Scientific Advisor

Chris Whitty

Government Chief Medical Officer

Sir Simon Stevens

Chief Executive, NHS England

Katharine Hammond

Director, Civil Contingencies Secretariat

Emma Reed

Director, Department of Health and Social Care

Name Redacted

Department of Health and Social Care

Clare Lombardelli

Her Majesty's Treasury

Alex Aiken

Director, Government Communications

Max Blain

Head of News, Department of Health and Social

Care Communications

Catherine Bennion

Ministry for Housing, Communities and Local

Government

Emma Moore

Border Force

Air Commodore Name Redacted

Ministry of Defence

NR

No.10

Nick Phin

Public Health England

Charlotte Watts

Department for International Development

Giles Smith

Department for Digital, Culture, Media and

Sport

NR

Foreign and Commonwealth Office

Nic Hailey Foreign and Commonwealth Office

## OFFICIALS DIALLED IN

Frank Atherton Chief Medical Officer - Welsh Governme		l McBride Iedical Officer - Northern Ireland ve
NR Northern Ireland Executive		
SECRETARIAT  Natasha Grant		
	NR	

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

1. 200129 - Wuhan Co-V - COBR (M) CRIP 2 FINAL

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#### **Novel Coronavirus Outbreak**

#### **Item 1: Current Situation Update**

- The CHAIR invited the Government Chief Medical Officer (CMO) and Public Health England to update on the global situation and on the latest UK risk assessment. The CMO said there had been 132 fatalities in China, there was evidence of human to human transmission and Germany had four confirmed cases.
- 2. The CHAIR invited the Government Chief Scientific Advisor (GCSA) to give a readout of the meeting of the Scientific Advisory Group for Emergencies (SAGE) held on 28 January. The GCSA said that the incubation period was an average of five days, there was limited evidence of asymptomatic transmission and it was estimated that one person could infect two to three people. The peak of the epidemic was expected to be in three months time in China.
- 3. The CMO said that the UK planning assumptions were based on the reasonable worst case scenario. There were two scenarios to be considered. The first was that the spread was confined within China, the second was that the spread was not limited to China and there would be a pandemic like scenario, with the UK impacted. The second scenario was plausible but it may take weeks to months.
- 4. The CMO said the Reasonable Worst Case Scenario (RWCS) was similar to the RWCS for pandemic influenza. That there was a 10 per cent likelihood of the RWCS happening but this figure had not been agreed by SAGE.
- 5. In discussion the following points were made:
  - Compared with seasonal influenza in Europe, the novel virus had a significantly higher
    mortality rate than the 2009 Swine Flu and seasonal influenza but likely lower than
    Spanish Flu. It would be clear within three weeks whether the Chinese were on top of the
    situation.
- 6. The CHAIR concluded that HMG should prepare for the RWCS, which was similar to the pandemic influenza RWCS, and that there should be a ministerial tabletop exercise in the following fortnight.

#### **Item 2: Assisted Departure Plans**

- 7. The CHAIR invited the Foreign and Commonwealth Office to update on the current situation. The FOREIGN SECRETARY said that 111 British nationals were registered and 73 foreign nationals had requested assistance in China. The arrival airport was still to be confirmed. There were two ongoing issues: 1) HMG needed confirmation from the Chinese Government for British Nationals to leave 2) the aircraft charter may not hold their end of the deal.
- 8. The CHAIR turned to the Chief Executive of NHS England for an update on accommodation once in the UK. The CHIEF EXECUTIVE OF NHS ENGLAND said that Wirral hospital was the best option and was also close to the Royal Liverpool hospital. That there would be a site inspection the following day. The expectation was that foreign nationals (who utilised the assisted departure flight) would not remain in the UK after their isolation period.
- 9. In discussion the following points were made:
  - The possibility of press intrusion if the location became public.
  - Returning British Nationals would be made aware of the accommodation plans the following morning.
  - It was prudent to have a backup facility to accommodate people.

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- That on transport arrangements from landing to Wirral hospital, the current plan was to
  fly to a military base before on to the Wirral. One challenge was that both Russian and
  Chinese diplomatic clearance was needed due to the flight path, but that it seemed likely
  Russia would clear this in the following two to four days.
- What was the legal basis for quarantine, how the risk assessment of people who had visited China was reached and whether the residency of those affected was known?
- Three Irish passport holders had registered for the flight and that they would go to the same facility as British Nationals.
- The Ministry of Housing, Communities and Local Government were working with Local Resilence Forums to ensure there was accommodation were there to be an influx of returning British nationals.
- The length of quarantine was two weeks and there were no schools nearby to Arrowe Park in the Wirral.
- 10. In summing up the CHAIR said that the legal briefing would be shared with the committee and that repatriation of all British Nationals in China would not be possible due to the large number. Repatriation of British Nationals was a reserved matter, the residency of those affected was unknown. It was important to get Arrowe Park ready in order to let those in Wuhan know the arrangements and that the Department for Digital, Media, Culture and Sport could stop looking for alternative accommodation.

### Item 3: Reasonable Worst Case Scenario Planning

- 11. The CHAIR turned to the Director of the Civil Contingencies Secretariat, for an update on the proposed next steps. The DIRECTOR OF THE CIVIL CONTINGENCIES SECRETARIAT said that the objectives and next steps were as set out in the slide pack.
- 12. In discussion the following points were made:
  - That HMG should be clear that the Government continuously plans for a pandemic and that the Government is continuing to do normal business and stressed the importance of the RWCS assumptions not being made public.
  - The virus was an international issue and the Department for International Development crisis response team had been stood up.
  - It was noted that all Local Resilence Forums already had planning assumptions for pandemic influenza.
  - That there were seven direct flights a week in addition to indirect routes from China. The Chinese strategy was to try to contain the virus to Wuhan and that if advice was given to stop all flights from China, travel would take place via alternative routes.
  - That once the repatriation flight departed no staff from **I&S** or the Foreign and Commonwealth Office would be left in Wuhan.
  - The risk to the UK comes from China losing control of the situation, rather than flights and
    that there may be communications issues if the Government continued to say the risk to
    the public was low and there were confirmed cases.
  - The risk was higher to British Nationals in Wuhan as its health system was under strain so those with other health conditions may not be able to get help.
  - There were tested pandemic plans in place for prisons.
  - If there was a change to the risk to the UK, then Border Force staff needed to be equipped with the correct PPE.
  - All the genetic evidence showed there was one clear source of the virus but there was no evidence of transmission through food or animals.
- 13. Summing up the CHAIR stated that any change to the risk assessment to the UK would be a decision for the CMO.

#### Item 4: Communications and Parliamentary Handling

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- 14. The CHAIR turned to the Department of Health and Social Care Communications, to set out the communications plan. The HEAD OF NEWS AT THE DEPARTMENT OF HEALTH AND SOCIAL CARE said the plan was focused on media handling which could be escalated as appropriate, for example if the first case is announced. Focus groups had been set up and the communications approach was in line with the 'triggers' plan.
- 15. In discussion the following points were made:
  - That families should not be split up if they are supported with assisted departure from Wuhan.
  - That health advice had been sent to universities but not yet (despite there being roughly 10,000 Chinese nationals in independent schools) to schools.
- 16. Summing up the CHAIR said that it was clear that public trust was needed, there should be a clear communications plan and that communications should be led by the Department of Health and Social Care with No.10 input as needed. The CMO should also lead communications where possible. The CHAIR said that no more detail should be given on the accommodation location for the Wuhan returnees on the assisted departure flight.

## **Item 5: Next Steps**

17. The CHAIR said that a change to the risk to the UK to moderate (from low) would need to be cleared by No.10.

**ANNEX 1 - ACTIONS** 

Novel Coronavirus Outbreak (M) (20)(2)

CABINET OFFICE Irrelevant & Sensitive

**Novel Coronavirus Outbreak** 

COBR (Ministerial)(2)

16:30 - 17:30, Wednesday 29 January 2020

Teleconference

## ACTIONS

- 1. NHS ENGLAND to confirm with the FOREIGN AND COMMONWEALTH OFFICE when details of the isolation facility can be shared with UK Nationals in China.
- 2. HOME OFFICE to support NHS ENGLAND to assure the security of Arrowe Park Hospital.
- 3. The DEPARTMENT OF HEALTH AND SOCIAL CARE to share with the DEVOLVED ADMINISTRATIONS the legal advice regarding options for isolating passengers from the chartered flight.
- 4. The FOREIGN AND COMMONWEALTH OFFICE, with the NORTHERN IRELAND EXECUTIVE, to agree the arrangements for individuals returning from China on Irish passports.
- 5. The MINISTRY OF HOUSING, COMMUNITIES AND LOCAL GOVERNMENT to engage with the relevant Local Resilience Forum for Arrowe Park Hospital to ensure appropriate local plans are in place.
- 6. The MINISTRY OF HOUSING, COMMUNITIES AND LOCAL GOVERNMENT to engage all Local Resilience Forums to ensure they are reviewing their pandemic flu plans based on the National Security Risk Assessment scenarios and assumptions.
- PUBLIC HEALTH ENGLAND to develop and run a Ministerial table top exercise within the
  fortnight to consider the range of decisions that may be required in the event of a reasonable
  worst case scenario.

**Cabinet Office** 

29 January 2020