

CHAIR'S BRIEF – SAGE meeting #7 on Wuhan Coronavirus (COVID-19)

Logistics

- 13 February 2020, 1130 – 12:40
- 10 Victoria Street, Web-Helix

Meeting objectives

- Review SPI-M advice on measures to limit spread
- Understand how behavioural science principles can inform HMG policy

Handling

- You should take a firm approach to who speaks at SAGE – and explain at the start of each meeting that you are only expecting to hear from participants whose names you read out. Anyone else needs to table a question or comment via Whatsapp.
- The WHO have named this disease as COVID-19, and we will now be adopting this terminology.
- We are intending to move to a battle rhythm of 2 SAGE meetings a week, at fixed time slots on Tuesday and Thursday mornings, to align with cross government activity. This will support cross Government planning and we have the flexibility to cancel the Thursday meeting if it is not needed.

Annexes

Annex A: Annotated agenda

Annex B: Attendees

Annex C: Situation update

Annex D: papers:

SPI-M paper on interventions to limit spread

SPI-M paper on school closures

Copied to GO-S SLT, GO-S Resilience, NR

OFFICIAL-SENSITIVE

	<ul style="list-style-type: none"> • Ask SPI-M to summarise measures it has reviewed to limit spread • What would be the impact of closing schools in different outbreak scenarios? • What triggers would prompt discussion as to whether schools should close? • What measures could be used to limit spread in the workplace? • What is the optimal time to implement these measures during an epidemic? <p>Commission: SPI-M to model the impact of measures to limit spread in the workplace, including what is the optimal time to implement these measures.</p> <ul style="list-style-type: none"> • Could restrictions on public gatherings and transport hubs manage virus spread in UK? If so, what is the optimal time to impose such measures? • Can a combination of measures delay spread of WN-CoV in the UK by 1 month? 	Graham Medley
1200	<p>4. Risk in prisons</p> <p><i>Handling: We have been asked to focus on prisons, but you should ask the participants to consider how similar principles could apply to similar institutions, such as care homes.</i></p> <ul style="list-style-type: none"> • What is the risk of the virus spreading in prisons? • What can be done to minimise further spread? 	Peter Horby, Neil Ferguson, John Edmunds
1210	<p>5. Behavioural Science</p> <p><i>Handling: There are likely to be many detailed questions that require behavioural science input, such as around handling of excess deaths and burial practises. We suggest that SAGE considers the detailed questions at a later date</i></p> <ul style="list-style-type: none"> • How do the public behave when there is a perceived risk of a forthcoming epidemic? • How do the public behave during an epidemic? • What causes a change in public behaviour during epidemic? For example, if HMG advice on isolation changes. • How might different UK social groups behave in the event of a UK epidemic? • What public behaviours should be encouraged during an epidemic? • How do we optimise these public behaviours during an epidemic? • How will the public behave if different sectors are receiving different public health messaging? 	James Rubin, Brooke Rodgers, Laura de Moliere
1230	<p>6. Summary and next steps</p> <ul style="list-style-type: none"> • SAGE Secretariat to summarise actions 	GCSA

ANNEX B – Attendees

Name	Organisation	Role	Location	Confirmed
Patrick Vallance	GO-Science	GCSA	Person	Y
Chris Whitty	DHSC	CMO	Person	Y
Jonathan Van Tam	DHSC	Deputy CMO	Person	Y
Charlotte Watts	DFID	CSA	Person	Y
Kavitha Kishen	DFT	Deputy CSA	Person	Y
John Aston	HO	CSA	Person	Y
Alaster Smith	DfE	deputy CSA	Phone	Y
Peter Horby	Oxford	Chair of NERVTAG	Person	Y
Maria Zambon	PHE	NERVTAG	Phone	Y
Graham Medley	LSHTM	Chair of SPI-M	Person	Y
Neil Ferguson	Imperial	NERVTAG and SPI-M	Person	Y
John Edmunds	LSHTM	NERVTAG and SPI-M	Person	Y
Jeremy Farrar	Wellcome	CEO	Phone	Tentative
Sharon Peacock	PHE	Director of national infections service	Person	Y
Andrew Rambaut	Edinburgh	Virology	Phone	Tentative
Brooke Rogers	KCL	Behavioural Science	Person	Y
James Rubin	Kings	Behavioural Science	Person	Y
Laura de Moliere	CO	Head of Behavioural Science	Person	Y
Meera Chand	PHE	Epidemiologist	Person	Y
Gavin Dabrera	PHE	Epidemiologist	Person	Y
Kate Thomas	DHSC	Comms	-	-
Rupert Bailie	MOJ	HMPPS	Person	Y

ANNEX C – Situation update (at 12 February 2020)

Country	Confirmed cases	Overnight change	Fatalities	Overnight change	Country	Confirmed cases	Overnight change	Fatalities	Overnight change
Mainland China	44,653	+2015	1113	+97	United Arab Emirates	8	0	0	0
Cases on cruise ships (Japan)	175*	+40	0	0	United Kingdom	8	0	0	0
Singapore	47	+2	0	0	Canada	7	0	0	0
Hong Kong SAR	49	+7	1	0	India	3	0	0	0
Thailand	33	+1	0	0	Italy	3	0	0	0
Republic of Korea	28	0	0	0	Philippines	3	0	1	0
Japan	28	+2	0	0	Russia	2	0	0	0
Malaysia	18	0	0	0	Spain	2†	0	0	0
Taiwan	18	0	0	0	Belgium	1	0	0	0
Australia	15	0	0	0	Cambodia	1	0	0	0
Viet Nam	15	0	0	0	Finland	1	0	0	0
Germany	16	+2	0	0	Nepal	1	0	0	0
United States of America	13	0	0	0	Sri Lanka	1	0	0	0
France	11†	0	0	0	Sweden	1	0	0	0
Macau SAR	10	0	0	0	Total	45,171	+2,069	1,115	+97