

Meeting 40: Held on 4 June:

Summary

- SAGE highlighted the importance of cluster tracing – including location tracing, understanding of environmental factors and backwards contact tracing to the TTI programme.
- There is an increased risk from COVID-19 to BAME groups, which should be urgently investigated through social science research and biomedical research, and mitigated by policy makers.
- SAGE continues to advise at least 2m separation where possible, given the significant reduction in risk compared to shorter distances. Mitigations are available in some situations, and the principles of mitigation have been clearly identified

Situation update

- SAGE agreed the latest R estimates: 0.7-0.9 for the UK; 0.7-1.0 for England; 0.6-0.8 for Scotland; 0.7-0.9 for Wales; 0.7-1.0 for Northern Ireland.
- CO-CIN (COVID-19 Clinical Information Network) data suggest it is highly likely that a significant proportion of total transmission is derived from hospitals or care homes. Nosocomial (disease originating in hospital) infection is responsible for an increasing proportion of cases and accounts for why R remains close to 1. The majority of cases currently coming into hospital may be linked to nosocomial spread.
- R will start to tend towards one, which means confidence intervals will include values greater than one. This will present a communications challenge in which it will be important to also emphasise incidence levels.
- ONS and the King's College London Zoe app are reporting lower incidence (7-8,000 per day) than modelled estimates, where models are converging around an estimated 35,000 infections per day; more work is needed to reconcile model outputs with ONS data and understand the discrepancies. The ONS data is seen as more direct.
- Potentially one third to one half of hospital admissions labelled as COVID-19 admissions are readmissions or not acute COVID-19 disease: it is necessary to understand how the NHS is recording these patients to know whether its data is distorting modelling work.
- SAGE endorsed the SPI-M (Scientific Pandemic Influenza Group on Modelling) paper on clusters and highlighted the importance of cluster tracing – including location tracing, understanding of environmental factors and backwards contact tracing – to the TTI programme. This has already been discussed with the TTI programme and will be reiterated.
- SAGE reiterated the importance of robust TTI to prevent rising incidence of infection.
- PHE has received advice on a generation time study from John Edmunds and will confirm whether it has capacity to lead this investigation and, if not, which organisation will.
- SAGE approved the latest excess deaths paper (to inform the reasonable worst case scenario) for use by Cabinet Office.

