## OFFICIAL SENSITIVE

- 2.2 Chris Jones confirmed the worst case scenario has been shared with health boards in Wales. The figures are much higher than expected and if they are accurate then our bed capacity would be out-stripped, so would need to think about triaging in the future, doing the best for our population.
- 2.3 There is no significant change in public advice. However, the case definition for Covid-19 has changed on the Public Health Wales website to now include those who have flu-like symptoms to be tested. Chris Jones was unsure how this has changed, without any appropriate guidance in support of being circulated and would be chasing this up.
- 2.4 Andrew Goodall outlined the meetings he has this week to ensure we are prepared to respond. He confirmed that whatever we are trying to do in Wales, the CMOs make sure there is a consistent approach. He stressed the importance of gaining some consistency in relation to managing the various sources of information. Andrew Goodall added that if there is a change to critical care there will be a shift as to who is prioritised and is likely to be those who stands to gain the most. The Chair added that when we ramp up to the numbers expected we need to ensure relationships are strong with CMOs but also need to be tied into NHS England. Andrew Goodall confirmed Chief Executives come together for frequent calls. The Chair welcomed this but asked that if there are any difficulties then to let her know so she can take up with Chris Wormald. Chris Jones confirmed the Welsh Health Minister is keen to make decisions and has agreed to measures to free up professionals' time to ensure the NHS is in a better place.
- 2.5 Des Clifford asked whether there would be difficulties in patients from Wales being treated in hospitals in England. Andrew Goodall confirmed there shouldn't be a problem as the 4 countries have been, and continue to, work very closely together.
- 2.6 Peter Kennedy suggested we need to be thinking about our business continuity arrangements not just in the health sector but across our departments.

## ECC(W)

- 2.7 Reg Kilpatrick referred to Whitehall discussions on flexible working and what business may need to stop. He stressed that although we must look at our business continuity arrangements, flexible working will not be the only solution. Ministers must also need to consider what it means for them.
- 2.8 In terms of the ECC(W), it has been very active with a busy COBR cycle, generating a lot of work. It has helped to fine tune how the resilience and health teams work using the very best use of expertise, setting up systems to ensure that we are working effectively.
- 2.9 Gary Haggaty referred to the structure being put in place to ramp up operations from tomorrow morning. There will be 2 8-hour shifts running (8am-4pm and 11am-7pm), providing ad hoc cover over the weekends. This is the current arrangement but will need to be revisited to balance response commitments.