

National Incident Management Team – 20th October 2020

A meeting of the National Incident Management team was convened this morning following a request through CMO by Gold Command for the National IMT view on extension of duration / geography of current measures which are due to expire on 26th October. AN agreement from the NIMT is sought about current measures that are due to expire on 26th October - are we supportive of continuation of those measures for a further week?

Over the course of the weekend we were faced with difficulties with the drying up of samples performed by the Lighthouse Lab. Although case numbers had begun to increase we did have a data gap (in particular for samples from Sunday 18th October). Total new positive cases today – 1456.

Ayrshire & Arran	116
Borders	11
Dumfries & Galloway	16
Fife	46
Forth Valley	45
Grampian	54
GG&C	500
Highland	12
Lanarkshire	393
Lothian	198
Orkney	1
Shetland	1
Tayside	63
Eileanan Siar (Western Isles)	0

NR

asked - Are current measures adequate and are people complying?

Should we continue with restrictions or should we go further?

The tiers being discussed in the background will reflect the many prior pieces of advice or recommendations made by NIMT; e.g. following the Friday 16/10/20 the NIMT submitted additional advice/recommendations. Anything we come up with today can be fed into that process directed through the CMO and Outbreak Management Teams in Scottish Government.

In response to the question from AL "Are we seeing continued cases where there is evidence that the measures in place are not addressing the transmission events we continue to see, or new evidence of things that we not covered by current measures" the following points were noted from NHS Boards -

- In university spread there could possibly be a lot of non-compliance. Going forward it might be worth thinking of universities as a separate issue rather than community issue. There is concern about ventilation in hospitality and workplaces and locally they are in desperate need of support. Ventilation seems to be a significant area that hospitality venues will have difficulty complying with
 - Response - Agreement with settings point but ventilation is going to be much more complex and will be considered elsewhere within SG discussion
- Travel restrictions and voluntary travel restrictions – Lothian had a well-publicised supporter bus trip from Dalkeith to Carlisle that the weekend that despite restrictions still travelled.
- Variation in compliance and understanding why people are not complying
- The guidance has to be much simpler and much more enabling applied to compliance across the piece before we move to enforcement
- An appeal for tighter, simpler restrictions
- Ensure other areas listed in guidance have not gone through loophole net
- Care homes are seeing people coming to work with symptoms - managers not understanding isolation compliance and the lack of robust financial support for staff is causing considerable concern
- Travel across the UK is a continuing issue - being debated at ministerial level
- Variation in compliance. Simpler, tighter information is on restrictions is something that we hope people will be able to understand
- Based on experience of conversations, the penny is not dropping about travelling
- Local bus company reporting that citizens are refusing to wear masks when they are coming onto buses
- In workplaces there is confusion over self-isolation and when that starts – some getting mixed messages about isolation when waiting for test results – pressure from Managers to go back to work whilst waiting for the results
- Continuation of reinforcement is required, backed up by packages to support the most financially burdened

- Current levels of incidence of COVID we are seeing that transmission can't be controlled by our current measures
- Don't know whether people are compliant with current restrictions. This is an important question to address as it informs a decision on future actions and recommendations; if we don't know the answer to that it is very difficult to say whether additional measures are required or just reinforcing current messages.
- Using international comparison at the current levels of COVID19 in the community and at the current rates of positivity, Scotland may be at levels at which it would be very unusual for these other countries not to have more significant restrictions in place in comparison to those in Scotland (This evidence was not presented in the meeting). The suggestion made was there is a need to ensure we simplify ongoing messages at corporate and individual level, and a recognition that this will take some time. Recognising this e.g. for refining how we do our CT, it could be simpler to have tighter restrictions.

DC suggested that there were two principle questions to address; Where to aim for and, what we needed to answer these guided by data. David Goldberg is in discussion with PHE about undertaking a case control study that would involve our T&P data and perhaps that might give us some further information about where to aim, and have a bearing on when. Important to consider this in coming weeks. Talking about travel, it would be good at a later meeting to come back and hear from Matt Holden about what the WGS in general is showing about the contribution of travel to the initial cases.

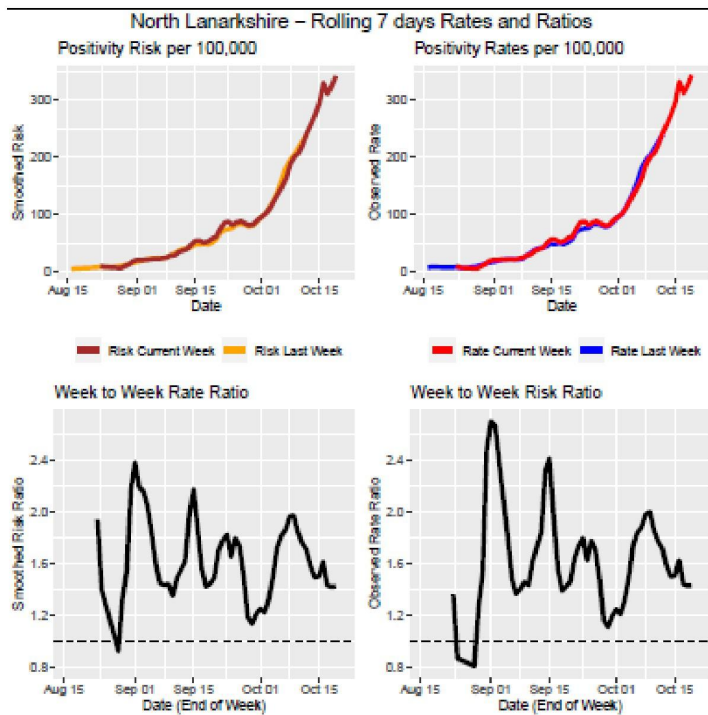
A consensus of the group was there was a need to focus on vulnerable/high risk groups; this could also involve advice that travel for high risk groups should be restricted.

One of the outputs produced on weekly basis from EAVE cohort has revealed that an increasing proportion of cases have multi-morbidity within the general practice population - analysed led by Chris Robertson.

CMO team will be approached about how PH professional can be more involved in ongoing discussion to assist in the targeting of such vulnerable individuals – JMcM agreed to raise with CMO team.

Tiers/Levels in the future

Re the Tiers and levels being announced the NIMT will be asked to consider in due course.



Chris Robertson produces Trends and positivity by NHSB by local authority and looks at the incidence ratio about whether there is or is not a particular trends that we are seeing by each location.

The rate per 100,000 in North Lanarkshire is exceeding what we were seeing in Glasgow City.

Such data are presented as examples of the beginning of having a more detailed data that would facilitate discussion with relevant NHS boards in advance of a meeting.

NIMT request for view on the current measures

Glasgow – seems very reasonable we would extend these measures as our rates are not coming down and more are going into hospital and ICU.

Lanarkshire – I think there is a glimmer of light to where the data is going, maybe in other areas as well. Some evidence that measures are working. Another week will flatten off where we are, and what do we do after that? A week is too short of an extension (but may make more sense and be supported if continued into further weeks by Tier/Levels discussion).

Ayrshire & Arran - supportive of a further week and agreed with Lanarkshire comments and review of what happens next.

Forth Valley – we would definitely support continuing the measures for another week. We are not really seeing a big impact yet or any improvement.

Tayside – fascinating data presented and in Dundee we are not seeing any reduction in numbers. I would expect a tiered structure announced here later this week.

Lothian – in favour of current restrictions, if not extending them.

The consensus view from central belt that for a consideration of the rate there is evidence from Dundee city about the challenge. For Angus there is also a consideration there but the acknowledged this may be quite a complex picture.

Other Boards with a viewpoint of a continuation of a further week -

Borders – the only other thing would be helpful to get views of local authorities on this issue. If colleagues wish to continue with these restrictions, there might be caveats. Are staff getting 100% of their salaries reimbursed? Is there an end point to this? We would use the opportunity to shield the elderly – average age of death from COVID is 83. Health Service infection rates should be used. Hospitality and tourism is being destroyed, 1000s of redundancies in the low paid communities and we would welcome greater clarity on how these measures are taken.

JMcM - there is a plan in place from SG colleagues to involve Local authorities. Impact on jobs and households is really important, any extension of any financial package is important to PH to reduce impact.

AMcI – when SG publishes its strategic approach the issue of support and engagement, decision making and transparency will be at the heart of what is set out.

Highland – Argyll & Bute is very affected by what is happening in Glasgow and then obviously remote Highland as well. Yes, we would be in favour of restrictions being extended. A tightening of travel restriction would be welcome – we would like to see message tightened. Very supportive of tiered approach.

Orkney – support of restrictions being extended. We are concerned about the travel issue.

Western Isles – PH want to be included in the restrictions but understand that a different perspective locally may be evident from LA members. We are in support of an extension.

Shetland – agree with other islands. Issue is travel off island to central belt.

Lothian – oil and gas workers few months ago - it was the difference in the link between private testing for O&G workers in UK and how that was linked into public health system. In Norway they have sight of those tests and tested and it made me think there is a more sophisticated way for island colleagues to have access to that data. If there is something about workplaces about people travelling to islands, would that be helpful?

Grampian – the pdf file is really helpful and the South Lanarkshire data in particular. I do think keep eye on severe consequences of this infection. Economic consequences for communities – the public health voice has to be around welfare around people losing their livelihoods.

Fife – agree that none of us should be complacent. Support measures for a further week. Keen to see output from current measures to inform our discussions going forward.

Scottish Government - impact assessment - a lot of work going on around all of this and will be communicated at a future meeting.

D&G – no representative. JMcM will contact directly

The NIMT consensus was supportive of continuation of the Central Belt and National measures being extended for a further week beyond 26th October.

Summary

Unanimous support of the NIMT for extension of recommendations already in place either in or out with the Central belt. Supported by colleagues here that includes a mixture of Directors of Public Health and Health Board teams. The PH view of the Island boards in support of this recommendation is important to highlight as there is a clear single PH voice on this.

The proviso is that the NIMT must be able to look at and consider the tiers or levels that are to be made available to understand how these apply to management of incidents in future. The NIMT looks forward to working with Scottish Government colleagues on the metrics on start, stop or continue any of the measures that might be summarised in those tiers and we look forward to seeing them.

We have had a clear articulation that there are some important distinctions we would like to make that the general population at large, also need to be aware there are key things that need to continue to be reinforced so that compliance is what it should be including reinforcement of messaging on self-isolation. Additional consideration is required to ensure that there is appropriate financial/welfare support to allow index cases and contacts to self-isolate. If they are addressed within the tiers about travel, it will be important for us to consider and that that will be subject to further discussion at future meetings.

We look forward to further information available from the late provision of information on newly sampled individuals – reference the data gap from Saturday and Sunday, that might allow us to say are the measure currently in place having the effect they should.

A number of items flagged up about ventilation – we can have a role in shaping discussion on this but will inevitably be for other groups to consider.

Additionally Tim Paterson and others have offered to make some contributions to any sub groups looking at what we have in place for the most vulnerable

We are getting into territory that the views of COSLA might be important, and we will invite a representative from these to future meetings.

The next meeting of NIMT is Friday 23rd October, at 3.30pm.