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Sent: 17/09/2020 8:18:18 PM
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Subject: FW: Stocktake - follow up with CMO AG:

Gregor/Richard/Elinor/Andrew

Cc: colleagues in attendance who I think might be at Gold command tomorrow

We've not long finished the extraordinary session of the C19 Advisory Group and a selection of clinical and policy colleagues. There's a set of papers prepared for the meeting which have been circulated and we'll collate final versions early next week, along with a an agreed note for the full list. We owe a big thanks to colleagues who led the discussion and advisory group members who produced papers with days. There was a lot of good information in the 'chat bar' which we'll capture. We were too time constrained to do the topics full justice but there was real benefit, I thought, to a wider session. I'd bite off far less next time.

With thanks to Gery (and Elinor) key points were:

State of the Pandemic (and international comparators)

- Currently heading fast in wrong direction. Mark Woolhouse confirmed Roger's modelling: as expected a second wave in November and a need to be aware of projections for spring when making decisions now. Chris R spoke to the EAVE data: many of the new positives in 18-39 age group and seeing increases now in 40-64 range: 65+ may be increasing slowly. As end Aug/Sep 60% testing positive in no risk category at all; 15% positive (slightly increasing now) – suggests a different hospitalisations profile from what we saw in March/April.
- The first lockdown was blunt and failed in some instances to protect the vulnerable – but lessons learnt (e.g. use of PPE within care homes) and advances in science will inform handling of second wave and way forward. The routemap needs to move to more tailored set of interventions.
- **Group will examine differing perspectives on Borders and importation and produce further advice** (impact on R might be negligible but absolute incidence pressures services)
- Continual learning v important – **Devi will produce paper for the group on international comparisons on 2nd waves with a 'four harms' perspective.**

Adherence

- Compliance messaging must avoid blame. Key issue – adherence with self-isolation is low 19% and particularly concerning; much more so than incidences around individual clusters. AG will consider Stephen Reicher's paper & SAGE paper on package of 'incentives' to support self-isolation. Stephen's paper is scheduled for discussion at Advisory Group meeting on Monday. Support for '4 Es' approach – Engage, Explain, Encourage, Enforce

Testing

- There are four key questions: the stratification of risk, speed, demand and scale. We need consistent messaging so people can see the logic which shouldn't be distorted by the operational issues. New methods promising but a distraction in the short term until technology can deliver against immediate need to at least test the symptomatic. We need to encourage people to subscribe to the reasons we test and have consistent communication so people can see the logic not the operational issues.
- Mass testing was discussed – a range of views but with less opposition than might have been assumed: but need to walk before we can run. The group will return to this.

Next Steps

- Jason and Gregor spoke to the value of continuing to expand the discussion into the wider societal harms.

Finally – a comment. I think a big part of the value of this session was continuing to socialise what the group can and can't do – I think the need to produce evidence and think about the four harms is going to have to pervade across the SG's collection of data and policy making.

Daniel Kleinberg

I am currently working from home with my family so am working flexibly. Please ring mobile if immediate.

Daniel Kleinberg

COVID Public Health Directorate

Scottish Government, Health and Social Care Directorate

T: **Irrelevant & Sensitive**



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From: Kleinberg D (Daniel)

Sent: 17 September 2020 15:36

To: 'Andrew.Morris@hdruk.ac.uk' <Andrew.Morris@hdruk.ac.uk>

Subject: FW: Stocktake - follow up with CMO AG

These are the latest papers. We're expecting all topic leads to attend and to have prepared.

You had indicated that you wanted to take adherence ahead of testing. We've not re-ordered that in the meeting papers but it would give you this running order:

Topic	SG / CMO AG leads	Material
Introduction	Andrew M/Richard F	Meeting asked for by CMO and Richard, FM explicitly asked for group's views and is likely to re-engage following Gold command

		meeting tomorrow and developments in the coming days.
State of the Pandemic (and international comparators)	Roger Halliday/Chris Robertson and Mark Woolhouse and Devi Sridhar	HSCA stocktake report (attached) and Roger's epidemic report (to follow)
Adherence	Lesley Sheppard and Stephen Reicher	Stephen Reicher's paper to follow, Pauline Aylesbury's document attached
Testing	John Nicholson (policy) and Christine McLaughlin/ possibly David Crossman for CMO AG	Testing Strategy https://www.gov.scot/publications/coronavirus-covid-19-scotlands-testing-strategy-adapting-pandemic/
Countermeasures	CMO	

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