18/08/2020, 15:31 - Messages and calls are end-to-end encrypted. No one outside of this chat, not even WhatsApp, can read or listen to them. Tap to learn more.

18/08/2020, 15:31 - Gregor Smith: What's phone number? He just made a very helpful and telling contribution in Aberdeen SGoRR. I want to say thanks.

18/08/2020, 16:20 - Jim McMenamin: Hi Gregor. Delighted to hear that. (Na) number is (Irrelevant) 05/11/2020, 22:55 - Gregor Smith: CMOs met urgently tonight - the CV variant in mink has documented cases in humans now, some with no links to contact with mink. Variant been shown to have less sensitivity to neutralising Ab from recovered sera. Worries about implications for spike protein vaccines. Removal of travel exemption immediately, nervtag risk assessment tomorrow, possible travel ban and assessment of whether isolation of cases with danish travel hx in HCD units.

05/11/2020, 23:23 - Jim McMenamin: understood. will pick up with the team on the morning 06/11/2020, 18:37 - Gregor Smith: Ok sounds like no call needed so far. Gregor interested in updates over weekend on your poss DK case as weekend progresses We are recommending management in IDU.

06/11/2020, 18:39 - Gregor Smith: From JVT. CAS alert being drawn up in relation to management of all admissions assoc with DK travel in isolation

06/11/2020, 18:40 - Jim McMenamin: Thanks. I am on call this weekend so will be in the office 13/01/2021, 12:03 - Gregor Smith: Managed to get some stuff on Brazilian variant - this may already be familiar to you:

13/01/2021, 12:04 - Gregor Smith: There's not a whole lot we know yet the constellation of mutations is concerning. It has both 501Y (in the UK & SA variants) and 484K (in the SA variant).

484K in particular seems to reduce the efficacy of neutralization by convalescent serum in one study, and was one of the mutations that led to complete escape from convalescent serum in another study. 13/01/2021, 12:04 - Gregor Smith: So this may be causing a distinct advantage in populations were a high % of people have been infected, as then the ability to reinfect would be a big advantage. And we know SA & BR both have had big outbreaks

13/01/2021, 12:05 - Gregor Smith: The impact this will have on vaccines is not yet known. Importantly not all convalescent plasma was escaped, so it matters where you've made antibodies too. I've heard scientists in SA are testing the variant against serum from those who've had the vaccine now. The hope is that if vaccines ellicit a more comprehensive and stronger response, then they might protect against this variant, too.

13/01/2021, 12:05 - Gregor Smith: There are at least two clusters of 484K in Brazil - one that we've konwn about for a couple of weeks now - a larger one. And then the one that has 501Y + 484K that was only identified (first with some Japanese samples) a few days ago, with the larger report that came out yesterday.

13/01/2021, 12:05 - Gregor Smith: Both are concerning but certainly the combo of 501Y + 484K doesn't bode well, given the other variants with 501Y circulating at the moment...

13/01/2021, 12:06 - Jim McMenamin: Thanks

13/01/2021, 12:06 - Gregor Smith: On the agenda for COVID O tomorrow too.

13/01/2021, 12:08 - Jim McMenamin: We are expecting first look data from PHE for JCVI tomorrow on what will be called vaccine effect rather than vaccine effectiveness as only a single dose. Chris may have data from a Scotland very soon too. I will let you know later whether the vaccination data being imported into the analysis has gone okay or not

13/01/2021, 12:09 - Gregor Smith: Thanks

21/01/2021, 16:55 - Jim McMenamin: Gregor. It has emerged today there is a problem about timeliness about Lighthouse samples and sequencing. this needs very rapidly fixed so there is a solution in place for Monday (for weeks 52 and 01 England did 11695 to Scotlands 7!!!!). R u content for me to say anything about this is this meeting

21/01/2021, 16:57 - Gregor Smith: Yes - but that's a problem!!!!

21/01/2021, 17:03 - Jim McMenamin: I only became aware of it 30.mins ago! sent a rocket to the Sanger team telling them we need it sorted to avoid this being a problem with political dimension. I will copy to you

26/01/2021, 16:37 - Jim McMenamin: Gregor have you seen a pre-release version of the shielding evaluation report that has been shared today prior 2 publication tomorrow with the SG shielding policy team?

26/01/2021, 17:14 - Gregor Smith: No - doesn't mean to say it's not in my box though - anything to watch

26/01/2021, 17:20 - Jim McMenamin: The key findings as are as follows:

1% of the shielding group had a confirmed COVID-19 diagnosis; 0.3% of the shielding group died with COVID-19.

- · Shielding correctly targeted individuals at higher risk but others, also at higher risk, were not
- Shielding correctly targeted individuals at higher risk but others, also at higher risk, were not included.
- Shielding guidance changed people's behaviour but some would also have 'shielded' without the guidance.
- · Shielding support addressed real need but the support could not address all needs.
- There is not enough evidence to answer the question whether shielding resulted in fewer infections.
- · A repeat of shielding, in its initial form, is not recommended.
- · Future approaches need to consider more fully: personal choice, the multifaceted nature of risk, hospital-onset infections.

26/01/2021, 17:21 - Jim McMenamin: I have had no sight of it til today but got it around 4pm

26/01/2021, 17:21 - Gregor Smith: Thanks Jim

26/01/2021, 17:22 - Jim McMenamin: I have asked Nick Phin if he has seen it. he will catch up with me after the David Crossman meeting 5 til 6

02/02/2021, 15:01 - Jim McMenamin: closest I have ever heard to you almost saying "as sure as sh@t"

02/02/2021, 15:15 - Gregor Smith: 3

02/02/2021, 15:15 - Gregor Smith: It'll come.
03/02/2021, 15:15 - Gregor Smith: Nam from Nam in Wales in relation to their SA variant:

Update; given the small numbers we have we are probably going down a route of intense epidemiological investigation and targeted testing with mass testing in reserve if indicated; this feels more of a graduated and proportionate response. PHW is developing an SOP and can reach out to your teams if any interest in joint design.

03/02/2021, 15:16 - Jim McMenamin: Thanks Gregor. meeting Niamh after 5 to discuss further 20/02/2021, 17:52 - Jim McMenamin: Gregor how much do the SG COVID comms and Immunisation teams already know? I was going to brief Syed and ask his advice

20/02/2021, 17:54 - Gregor Smith: About the vaccine effect stuff? I've had no direct conversation with them but have alerted directors.

20/02/2021, 18:08 - Jim McMenamin: Yes that's right. I will brief Syed and ask him what else he needs for internal IMM briefing

20/02/2021, 18:11 - Gregor Smith: Thanks Jim.

20/02/2021, 18:40 - Gregor Smith: What do you know about N gene dropout cases? Anna D just been in touch. We have 140 in Glasgow.

20/02/2021, 18:43 - Jim McMenamin: nothing and Nick didn't mention this in the quick catch up I had...I can email him and can you share Name email?

20/02/2021, 18:44 - Gregor Smith: It was a quick message via Name. I'll find out more.

20/02/2021, 19:04 - Gregor Smith: It was a call today. 6 cases found in sw in nhs samples with n gene drop out and someone has said they are similar to 140 samples in Scotland but she can't find where this statement came from. **Na** is speaking to **Name** at GGC tomorrow so will see if there's anything he can find out from nhs labs. Otherwise it's just misinformation.

20/02/2021, 19:04 - Jim McMenamin: okay thanks

20/02/2021, 19:09 - Gregor Smith: Seems a bit bizarre

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04/03/2021, 17:53 - Jim McMenamin: radio interview on BBC Scotland will likely cause
waves- listen in to 17.10. She was speaking in personal capacity against our advice after quicker than
anticipated prepublication article availability. CNOD team aware
04/03/2021, 17:54 - Gregor Smith: Nosocomial work?
04/03/2021, 17:54 - Jim McMenamin: David Goldberg attempting to corral things
04/03/2021, 17:54 - Jim McMenamin: yes
04/03/2021, 17:54 - Gregor Smith: 😡
05/03/2021, 14:50 - Jim McMenamin: Just that they found the last P1
05/03/2021, 14:50 - Jim McMenamin: in England
05/03/2021, 14:55 - Gregor Smith:
05/03/2021, 14:55 - Gregor Smith: Not sure where Nan got his 5 from.
05/03/2021, 14:59 - Jim McMenamin: 3 plus the 2 low risk ones from earlier that I just detailed 😊
05/03/2021, 14:59 - Jim McMenamin: I will get the third low risk positive case details to you
25/03/2021, 09:14 - Jim McMenamin: AZO vaccine thrombotic/ITP events association from interim
EAVE analysis. Got a minute to talk it over?
25/03/2021, 09:15 - Gregor Smith: I'll buzz you 👍
23/04/2021, 11:07 - Jim McMenamin: Well said 🚣
13/05/2021, 15:03 - Jim McMenamin: I will head off to SGORR for 3.30 by leaving early from this SAGE
meeting
13/05/2021, 15:11 - Gregor Smith: No probs
13/05/2021, 15:13 - Jim McMenamin: In light of what Patrick said re leaks are you comfortable with me
offering edited version of Susan's update to SGORR?
13/05/2021, 15:22 - Gregor Smith: Not yet...
13/05/2021, 15:29 - Jim McMenamin: Okay
21/05/2021, 18:28 - Jim McMenamin: Gregor - are we sure the packs of 7 LFD being provided recently
are affected - xiamen Biotime Biotechnology Co Ltd
21/05/2021, 18:31 - Gregor Smith: The ones that were mentioned were Innova. Just been on a call with
John Nicholson and he said they were pretty much all we had.
21/05/2021, 18:36 - Jim McMenamin: I am confused - this is a different manufacturer - I had asked NR
    NR in an email but I don't have a number for him. Would Christine or someone know?
21/05/2021, 18:46 - Gregor Smith: John Nicholson will know - I'll link you?
21/05/2021, 18:48 - Jim McMenamin: Fab - just spoke to Chris - he can't see a way round the issue
without offering PCR testing instead of LFD if our kit is affected
22/05/2021, 09:56 - Gregor Smith: What's your thoughts on the report that came through from Jenny?
JVT phoned me - he thinks she's gone defensive and protective of HSA position. There's a "dissonance"
between them. Is it worth bringing Kate Templeton or someone into the discussion and assessment in
Scotland?
22/05/2021, 10:14 - Jim McMenamin: Name R is the PHS virologist on this weekend - I will
confidentially sound him out
22/05/2021, 10:14 - Gregor Smith: Thanks
24/05/2021, 10:24 - Gregor Smith: is going to try FM again to see if we can reset the timeframes
for daily data. She might be more likely to agree now we're in post-election period and have had the
resent issues.
24/05/2021, 10:24 - Jim McMenamin: Thanks and appreciated
26/05/2021, 10:43 - Jim McMenamin: I have GGCs own daily analysis but can confuse as time censoring
points usually different rates though trend stuff is fine. City rate slowly increase but EDR falling. East Ren
rate falling. Ren increasing and EDR around 3 -Name acting on this and will update tomorrow
26/05/2021, 10:56 - Gregor Smith: I think we need similar timepoints but that's useful intelligence
26/05/2021, 20:24 - Gregor Smith: Thanks for getting all that data through today - really helpful in a
difficult but mature conversation. She feels she's run out of road with public and restrictions- we'll
probably get away with maintaining current levels this week but short of any disasters, or rapid rise in
really sick people, I suspect next week will be different. Depending on what the data shows again
tomorrow, we're probably going to have to interrogate detailed response of all VOC areas and ensure
comparable response to Glasgow City.
26/05/2021, 20:26 - Gregor Smith: On another note - when you say hazard ratio 2.3 with 1617.2 -
compared to what?
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26/05/2021, 20:30 - Jim McMenamin: Compared to 1117
26/05/2021, 21:00 - Gregor Smith: So... just so I'm getting this right... in unvaccinated, HR is 2.3?
26/05/2021, 21:31 - Jim McMenamin: Had pizza and can think now ©. The hazard ratio considers the
B1.1.7 (or rather its proxy SGTF) as the comparison group and assigns it as the baseline for comparison.
So the S-gene positive cases have an increased risk of hospitalisation 2.3 times that of SGTF cases.
Textbook definition would be "It is a regression method for survival data, provides an estimate of the
hazard ratio and its confidence interval. The hazard ratio is an estimate of the ratio of the hazard rate in
the treated versus the control group. The hazard rate is the probability that if the event in guestion has
not already occurred, it will occur in the next time interval, divided by the length of that interval. The time
interval is made very short, so that in effect the hazard rate represents an instantaneous rate. An
assumption of proportional hazards regression is that the hazard ratio is constant over time. "
26/05/2021, 21:48 - Gregor Smith: Thanks Jim. Hope it was pepperoni. I've got such a craving now.
26/05/2021, 21:51 - Jim McMenamin: < Media omitted>
26/05/2021, 21:52 - Gregor Smith: 🥳
26/05/2021, 21:53 - Jim McMenamin: NR made the dough...If I don't say that I will be killed as only once
in a blue moon do I make anything 😩
26/05/2021, 21:54 - Gregor Smith: Have to be honest - one of the pleasures of lockdown was discovering
home made pizza. You can't get a garden oven for love nor money now.
26/05/2021, 21:55 - Jim McMenamin: True 👍 😊
29/05/2021, 10:28 - Jim McMenamin: Just 2 be clear the 121 hospital cases are over last 7 days...i am
trying to let Nick deal with routine stuff today and tomorrow
29/05/2021, 10:30 - Gregor Smith: Get some downtime. We all need it.
31/05/2021, 13:46 - Gregor Smith: It's an excellent note from a difficult conversation- thanks.
31/05/2021, 15:47 - Jim McMenamin: 👍
04/06/2021, 12:18 - Gregor Smith: How you feeling about things today? Rate of increase is quite
spectacular just now. You off this weekend?
04/06/2021, 13:01 - Jim McMenamin: Nervous about case numbers but not overly as treasured by
COCIN data I have set you. David Goldberg on this weekend 👍
04/06/2021, 13:09 - Gregor Smith: Excellent. Enjoy a break
04/06/2021, 13:11 - Jim McMenamin: Mmhhh need to get there and probably stuff to review or write too
04/06/2021, 13:18 - Gregor Smith: COCIN data is good!!
10/06/2021, 21:27 - Gregor Smith: Thanks for joining us on CMO call tomorrow morning Jim. It was set
up at short notice to try to bottom out what the data is telling us on hospitalisations and severity of
disease. Going over our data from RAPID and EAVE would be really helpful.
10/06/2021, 21:29 - Jim McMenamin: I will send you some of the material Kim presented today at NIMT
re LoS too
10/06/2021, 21:29 - Gregor Smith: Thanks Jim.
10/06/2021, 21:35 - Jim McMenamin: Done
17/06/2021, 13:57 - Jim McMenamin: Do you have time for a quick chat 're CO-CIN following the NIMT
today? If so when would suit?
17/06/2021, 13:59 - Gregor Smith: Yeah. RF NS and I about to have a conversation about Contact
tracing. When are you free?
17/06/2021, 14:11 - Jim McMenamin: 3.30 to 16.00 and 16.30 onwards 😊
17/06/2021, 14:30 - Gregor Smith: Will aim for 330 - lots of urgent action on CT this afternoon
17/06/2021, 14:37 - Jim McMenamin: Fab
17/06/2021, 15:35 - Jim McMenamin: Just ring when you are free
18/06/2021, 09:53 - Gregor Smith: What would happen if we overlaid on a chart experience or
projections for 3rd wave with the last bad flu season? Would that give us a reference point?
18/06/2021, 10:07 - Jim McMenamin: Assume you mean just hospitalisations. Could do but usually those
coincide with a poorly matched wild type versus what's covered in the vaccine. ICU activity would be 300
or so at max. Hosp data available too and deaths either as excess or NRS pattern. I have sent you
something as a starter on ICU cases
21/06/2021, 10:25 - Gregor Smith: I'm going to be late for NIMT today. FM looking for a chat. Do we
have any idea when we'll get latest hospital data through?
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21/06/2021, 10:42 - Jim McMenamin: There is usually however the board management data sent to FM
office on Monday morning I thibk by 11 without age break down
22/06/2021, 09:53 - Gregor Smith: There was a comment about Testing rates been highest in UK - have
you or Kim got the data on this you can send me?
22/06/2021, 09:57 - Jim McMenamin: Kim about to send this to us
22/06/2021, 09:59 - Gregor Smith: Thanks Jim
22/06/2021, 10:09 - Jim McMenamin: Is with you now
22/06/2021, 10:10 - Gregor Smith:
07/07/2021, 09:16 - Gregor Smith: On a call with cab sec just now - any sense of where our numbers are
going today?
07/07/2021, 09:17 - Jim McMenamin: Just sent you a first few sentences in the main WhatsApp
07/07/2021, 09:18 - Gregor Smith: Brilliant - thanks. Not as bad as last week... at least...
26/08/2021, 17:45 - Jim McMenamin: Anything you need my team to tee-up for tomorrow?
26/08/2021, 17:52 - Gregor Smith: A job?? Jason and I just had one of those really difficult meetings with
26/08/2021, 17:52 - Jim McMenamin: Feck
26/08/2021, 18:15 - Gregor Smith: Have you heard anything about Gabe? Didn't realise John was dep
DPH.
26/08/2021, 18:16 - Jim McMenamin: No. People are being really tight lipped any time I have asked
27/08/2021, 08:51 - Jim McMenamin: Got a minute? 6835 cases today (lighthouse pressure of large
number of samples - 713 cases (10%) from Tues 24th, bulk of specimens from Wednesday 25th - 5922
samples - and only 1% from Thursday - 91 cases. 14.2% positive. Only 4 deaths. Now we are passed the
lag period of the start of the week RAPID data shows increase to 371 cases (18th to 24th). Small
increase in ICU to 66 but HDU stable at 14.
27/08/2021, 08:58 - Jim McMenamin: Lothian almost doubled on yesterday 1217 c.f. 652 the day before
and sim prop increase for FF, FV & Highland. Other big boards increase of smaller proportional change
of around a third (Lan.) to a quarter (GGC, TY, AA)
27/08/2021, 09:00 - Gregor Smith: Buzz you in 2 mins
27/08/2021, 13:12 - Gregor Smith: Any change in doubling times? I'm worried that in a weeks time.. or
less... it's even more scary
27/08/2021, 13:16 - Jim McMenamin: Asking but intuitively it must have reduced
27/08/2021, 13:21 - Gregor Smith: 13000 next Friday? Can you imagine...? Crossing 10 before then....
Fuck!!!
03/09/2021, 12:07 - Gregor Smith: < Media omitted>
03/09/2021, 12:08 - Jim McMenamin: I don't even get that far. Rebooting
03/09/2021, 12:09 - Jim McMenamin: Hope that solves it
03/09/2021, 12:10 - Jim McMenamin: It may be a VPN ISSUE so.have come off the ntwork
03/09/2021, 12:12 - Jim McMenamin: In now
03/09/2021, 12:12 - Gregor Smith: 3
03/09/2021, 12:13 - Jim McMenamin: Are UK last or second up this time?
03/09/2021, 12:13 - Gregor Smith: We were originally first, but Tom, Jenny and yourself were all having
same problem. Suspect we'll be after Israel now.
03/09/2021, 19:01 - Gregor Smith: Hope you're getting some time off this weekend. As always, I'm
eternally grateful for all your support and everything you do. Thank you.
03/09/2021, 19:08 - Jim McMenamin: Nah. Incident Director this weekend but off next weekend (David's
turn then). Thanks for that. Nick has us teeing up the epi analysis for your meeting on Monday. How you
get some time off too.
                                             Irrelevant & Sensitive
      Irrelevant & Sensitive
03/09/2021, 19:09 - Jim McMenamin: *Hope rather than how
03/09/2021, 19:10 - Gregor Smith: Sounds good to me! I'm off for most of next week. Irrelevant & Sensitive
Irrelevant & Sensitive
03/09/2021, 19:15 - Jim McMenamin: <Media omitted>
03/09/2021, 19:16 - Gregor Smith: 30 30 40
04/09/2021, 09:50 - Gregor Smith: 6152 cases... 12.9%... I'm liking this slow down.... Liking it a lot...
06/09/2021, 16:38 - Gregor Smith: Jim - speaking to FM at 6. Do you have any info on case data
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21/06/2021, 10:31 - Jim McMenamin: Tuesday morning by around 9 we have some of the weekend data

reconciled to date of sample from 31/8? When is there confidence up to? 06/09/2021, 16:43 - Jim McMenamin: Up to and including the 1st September - resenting Kim's data on this to you now 10/09/2021, 08:12 - Gregor Smith: Morning Jim- what was the updated doubling time yesterday? 10/09/2021, 08:28 - Jim McMenamin: Lengthened considerably. 10/09/2021, 08:29 - Jim McMenamin: <Media omitted> 10/09/2021, 08:30 - Jim McMenamin: Part of the slide pack from Kim from NIMT yesterday 10/09/2021, 08:31 - Jim McMenamin: The increase in cases yesterday will likely mean it begins to shorten once more 10/09/2021, 08:38 - Jim McMenamin: Yesterday's NIMT was sombre - COVID adding to pressure. A view by some was not much more needed as additional pressure before system breaks - esp Hosp & NHS24 10/09/2021, 08:39 - Jim McMenamin: Hence COP26 in person attendance in spotlight 10/09/2021, 08:51 - Gregor Smith: It all feels a little ominous just now. I'm putting together a carefully constructed note which basically says uk alert level stays at 3 after cmo call this morning, but it's inevitable we'll move to 4 and we need some action. 10/09/2021, 08:52 - Gregor Smith: Are we still seeing rise in > 60 admissions? 10/09/2021, 08:52 - Gregor Smith: < Media omitted> 10/09/2021, 08:58 - Jim McMenamin: Slow week on week increase by proportion 10/09/2021, 08:58 - Jim McMenamin: Looks fab 😁 10/09/2021, 08:59 - Gregor Smith: Nothing but me and two sheep 🐠 12/09/2021, 15:26 - Gregor Smith: Happy to talk through the EAVE data with you. Expecting a decision on boost this week, most likely Thursday. 12/09/2021, 16:02 - Jim McMenamin: Chris is running more analysis this evening. I can fill you in on the current understanding we have either today or wait til he has ran the stuff and tee up a meeting for tomorrow afternoon. 12/09/2021, 16:04 - Gregor Smith: Sure - that sounds good. Can I check whether that's 4m *AFTER 2nd dose +14d* that you're seeing the 40% VE against hospitalisations? That's pretty stark... 14/09/2021, 09:23 - Gregor Smith: Morning Jim - any data for today yet? 14/09/2021, 09:23 - Jim McMenamin: Just sent 14/09/2021, 09:26 - Gregor Smith: Thanks 🙏 16/09/2021, 11:31 - Gregor Smith: She needs a new slide on VE after your paper... 😱 😱 16/09/2021, 11:38 - Jim McMenamin: It's worse now...i will fill you in later but likely cohort effect for frailest being first vaccinated 20+ weeks & & & 16/09/2021, 12:08 - Gregor Smith: Aziz sent through the abstract too. Looks awful. Makes me wonder if boost should start at 16s rather than 6m for AZ. 16/09/2021, 13:19 - Gregor Smith: We're going to have a very small cast list GOLD O tomorrow morning stocktake - are you able to say much about the VE stuff at this stage? I can ask Mel to very discretely run a model on the abstract data. 16/09/2021, 15:16 - Jim McMenamin: Sure Gregor 16/09/2021, 15:19 - Gregor Smith: Ok. I'll get Ken to send an invite. 20/09/2021, 12:15 - Gregor Smith: I wonder how much of that 40-49 year old vaccinated age group is virus finding the sweet spot between AZ and behaviour.... 20/09/2021, 12:52 - Jim McMenamin: I will send you something in a minute that Kim's team have been looking at 20/09/2021, 12:58 - Gregor Smith: 21/09/2021, 07:48 - Gregor Smith: Cabinets been brought forward to 9am. I know it's unlikely we'll have any case data by then but if you get any indication can you drop me a message. Even just cases / deaths. But don't worry if nothing - that's what I've prepared them for. 21/09/2021, 07:49 - Jim McMenamin: 👍 21/09/2021, 08:56 - Jim McMenamin: Small delay. Initial data being checked but similar number to yesterday. Deaths not come through so appearing as zero - checking 21/09/2021, 08:56 - Gregor Smith: Thanks Jim. 21/09/2021, 09:02 - Jim McMenamin: 2870 cases 21/09/2021, 09:09 - Jim McMenamin: <Media omitted>

21/09/2021, 09:10 - Jim McMenamin: No data reporting delay on cases. Deaths down

21/09/2021, 09:16 - Gregor Smith: Thanks - much appreciated

22/09/2021, 14:32 - Gregor Smith: I'm going to be travelling to London tomorrow during NIMT. Cover very thin on the ground. Unless tomorrow brings any shocks happy to cancel Monday's meeting or to catch up post-NIMT tomorrow / Fri to take a decision.

22/09/2021, 14:38 - Jim McMenamin: Great. I can email tomorrow post NIMT then speak if convenient

01/10/2021, 12:37 - Gregor Smith: Did you manage to get in? I like those Israeli plots

01/10/2021, 12:38 - Jim McMenamin: Yes got in at end of PHE/UKHSA presentation

06/10/2021, 14:46 - Gregor Smith: Are there any age groups we're seeing increasing cases in on 7 day data?

06/10/2021, 15:03 - Jim McMenamin: No Gregor. Remember the three day lag though on date of symptoms

06/10/2021, 15:06 - Gregor Smith: 👍 just wanted to check there weren't any hidden trends within overall picture

08/10/2021, 21:26 - Gregor Smith: Have sent you some info from Susan via Jenny on this south-west LFD story just in case you haven't had it from other sources.

08/10/2021, 21:36 - Jim McMenamin: Have not received anything yet but happy to read it

08/10/2021, 22:29 - Gregor Smith: Sorry - went to nhs.net account

08/10/2021, 22:32 - Jim McMenamin: Received now. Thanks.

12/10/2021, 10:34 - Jim McMenamin: About schools and face masks - one important additional consideration is if we are trying to keep kids in school and reduce impact on their education then have we factored in potential additional benefits of continuing current school measures for other viruses? Thinking specifically about flu - vaccine delivery progressing but might be late November early December before complete. If this is in the mix should this be a factor?

12/10/2021, 11:09 - Gregor Smith: I think it should be. I'm annoyed the advice was signed off yesterday.

12/10/2021, 14:06 - Gregor Smith: Do you know whether Kim is going to be able to get me anything?

12/10/2021, 14:07 - Jim McMenamin: I am writing it just now and adding a little to submission from Diane

12/10/2021, 14:22 - Jim McMenamin: Both emails with you now

12/10/2021, 14:24 - Gregor Smith: Thanks Jim

12/10/2021, 15:10 - Gregor Smith: Super helpful data. Thank you. Why do we take holidays??? 🤪

12/10/2021, 15:10 - Jim McMenamin: 204

22/10/2021, 09:55 - Jim McMenamin: Just sent the proportion figures to you - is disproportionately more at the moment in GGC 35% c.f expected 25%

22/10/2021, 09:57 - Gregor Smith: Thanks Jim

22/10/2021, 10:18 - Gregor Smith: Can we infer a prevalence from that data for ay4.2 or even a % of detections for all sequences in Glasgow?

22/10/2021, 11:17 - Jim McMenamin: Data with you now

22/10/2021, 11:19 - Jim McMenamin: Tab 3

22/10/2021, 11:22 - Gregor Smith: Perfect

25/10/2021, 13:00 - Gregor Smith: Looks like quite a steep rise in icu admissions over last 7 days compared to previous 7 days. How's the EAVE data looking? Are we still seeing broadly a 3% conversion rate to hospitals or is that climbing now too?

25/10/2021, 14:14 - Jim McMenamin: I have asked the team

25/10/2021, 14:15 - Jim McMenamin: I am.having IT issues so can't easily check direct...

25/10/2021, 14:20 - Gregor Smith: Thanks Jim

26/10/2021, 11:00 - Gregor Smith: Any joy with conversion rate data?

26/10/2021, 11:02 - Jim McMenamin: Chasing (Erin had asked too)...

26/10/2021, 11:22 - Gregor Smith: Cheers Jim. Cab Sec now looking for it too.

26/10/2021, 11:46 - Jim McMenamin: Spoke to Chris Robertson - he should be able to rerun this evening - was waiting for updated RAPID data to be provided for EAVE analysis.

26/10/2021, 11:58 - Gregor Smith: Brilliant - could be really useful for SGoRR M tomorrow lunchtime....

27/10/2021, 11:24 - Gregor Smith: Can you send me that updated ay4.2 epi sheet you showed on screen yesterday?

27/10/2021, 11:26 - Jim McMenamin: Done 👍

03/11/2021, 08:38 - Jim McMenamin: Heads up. Big increase in cases reported today to 3495 cases. I understand there was some problem with data flow to PHS DDI team and will know more at 9.30. This is despite 95% of cases the previous day being reported within 48 hours of specimen.

03/11/2021, 08:40 - Gregor Smith: Thanks Jim - be interested to know what the issue was - will speak to

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Christine.
03/11/2021, 10:11 - Gregor Smith: Anything significant from the 930?
03/11/2021, 10:27 - Jim McMenamin: No clear single reason so seems genuine increase against
backdrop of larger Wednesday test reporting. Increase seen in most NHS boards. Tags in CMS for
COP26 not expected to be significant contributor nor Pillar 1 delay from yesterday that we were
expecting to come through today.
03/11/2021, 10:28 - Gregor Smith: Thanks Jim... I'll relay the bad news...
03/11/2021, 10:30 - Jim McMenamin: It may be one off and is still bugging me as doesn't feel right so I
am still digging into it. If I fond more I will come back to you...
03/11/2021, 10:30 - Gregor Smith: Thanks Jim.
04/11/2021, 10:53 - Gregor Smith: J Nam trying to be too clever with the slides and data she's drawing
inferences from.
04/11/2021, 10:53 - Jim McMenamin: I will have a chat with her after the meeting...
04/11/2021, 10:54 - Gregor Smith: It's a good presentation. But interpretation may just need softened.
05/11/2021, 11:05 - Jim McMenamin: NIMT advice with you just before 11. Advice on retention of
measures plus consider vent, home working Christmas parties etc
05/11/2021, 11:05 - Gregor Smith: 4444
11/11/2021, 15:21 - Gregor Smith: We're pretty isolated now and just being left to mop up as best we
can....
11/11/2021, 15:22 - Jim McMenamin: 😣
12/11/2021, 17:39 - Gregor Smith: Don't know what kind of a week you've had but it's been grim at this
end!!! Got your note about symptoms, can chat through in slower time next week. Suspect weekend will
see give of activity. As always, been very grateful for all the support you've given this week. Thank you.
12/11/2021, 17:42 - Jim McMenamin: Grim is the word. Happy to catch up next week. On tomorrow and
David on Sunday. Hope you get some downtime!
12/11/2021, 17:49 - Gregor Smith:
15/11/2021, 10:46 - Jim McMenamin: I've got a favour to ask...I am gathering testimony and preparing
slideset/picture book celebration contributions of Name incredible contribution to health
protection and environmental public health. I hoped to include any kind words you might have to say.
Would you consider contribution? I will email you a current slide set which summarises what some of the
vexed issues He dealt with. He may or may not be well enough to have peers later attend a Teams
meeting to present to him to which we would be delighted to invite you without pressure on you to attend.
What do you think? 🤔
15/11/2021, 11:02 - Gregor Smith: I'd love to - Namhas contributed so much over many years. It's right
we celebrate his contribution
15/11/2021, 11:03 - Jim McMenamin: Fab 👍 😁
25/11/2021, 17:07 - Jim McMenamin: Eurosurveillance just published...phew!
25/11/2021, 17:12 - Gregor Smith: Great stuff. Urgent action tonight on South Africa. It sounds pretty
horrible.
25/11/2021, 17:20 - Jim McMenamin: 😣...
08/12/2021, 11:38 - Jim McMenamin: Chris has generated first estimate of VE in symptomatic SGTF and
may present it in SPI-M...very imprecise as so few end points but VE for SGTF 60+% c.f. 94+ (high
precision) for Delta in the same period. Would you like to cover later today or early evening?
08/12/2021, 11:38 - Jim McMenamin: We don't have enough for hospitalisation
08/12/2021, 11:41 - Gregor Smith: Thanks - should we wait until firms up? Not disastrous...
08/12/2021, 11:50 - Jim McMenamin: Agree not disastrous but need to have validation - though have not
seen any English data yet
08/12/2021, 17:47 - Jim McMenamin: Is Rachel going to invite us in to the meeting we are on hold
08/12/2021, 21:12 - Jim McMenamin: I have emailed the VE estimates and a draft of summary lines
08/12/2021, 21:17 - Gregor Smith: Brilliant- thanks Jim. Helluva day...
08/12/2021, 21:22 - Jim McMenamin: Aziz and Chris have approved the summary too.
10/12/2021, 11:17 - Jim McMenamin: Hope Presser goes okay. Anything else you need before it?
10/12/2021, 11:18 - Gregor Smith: Thanks Jim. I'm fixed I think.
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10/12/2021, 17:56 - Jim McMenamin: Got a minute to talk over a bit of likely but being checked bad

10/12/2021, 11:19 - Jim McMenamin: 👍

news re Vaccine Effect for 3rd dose?

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10/12/2021, 17:57 - Jim McMenamin: It is still only in symptomatic infection only
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10/12/2021, 18:10 - Gregor Smith: Yeah - of course

10/12/2021, 18:11 - Jim McMenamin: In 5 mins?

10/12/2021, 18:12 - Gregor Smith:

11/12/2021, 11:10 - Gregor Smith: 832 new confirmed / possible cases today?

11/12/2021, 12:12 - Jim McMenamin: Sorry just saw this as was in scheduled UKHSA meet with Gill too. Yes. SGTF at 18%. 11 new confirmed. working with UKHSA re hosp case definition re hospitalised with and hospitalised for Omicron. Meeting Chris at 4.30 re VE 3rd dose discussion with Josie too. SNBTS Edin issue post Christmas party led to nightshift work with exception approach - in CMO main inbox rather than your named one. I am on all weekend if any issues arise

11/12/2021, 12:38 - Gregor Smith: Thanks Jim. Likely CMO meeting this weekend. May move to L4 in advance of Monday pm now.

11/12/2021, 12:40 - Jim McMenamin: Oh. Okay

11/12/2021, 18:38 - Gregor Smith: Looks like English strategy is going to be to throw everything at boosters. So if there was anything significant on 3Rd dose VE... it's gonna become critical. Separately we'll meet to raise alert level to 4 on Mon at 815.

11/12/2021, 19:09 - Jim McMenamin: So far we don't see any issue with the data that could explain why the proportion of SGTF in unvaccinated cases is only a little higher than the 3rd dose recipients in either all cases or symptomatic alone - PHS need to check all of this through carefully. This could be unadjusted confounding as these first cases are different in some way. There maybe some suggestion of a reducing proportion of cases being vaccinated with three doses but its early days. Let's say this doesn't find anything much and we end up with 30% VE...that's low but on a population level may have significant impact against these symptomatic infections and can be plugged into models to say with this scenario what do we see...however it doesn't get round the critical thing which we don't have - what is the VE against hospitalisation and death. So far we are not seeing anything much here even though reinfection in SGTF is around 5.8% in our case series. Susan Hopkins also not seeing much in hosp cases in England so far either. The modelled output needs scenario's that address this as if say 50% to 90% less likely to be hospitalised but 5 to 10 times the cases for example what does this do? Hope that makes sense and happy to talk over...

11/12/2021, 19:22 - Gregor Smith: Makes sense Jlm. Early days and so much being placed on VE and disease severity. Thank you.

11/12/2021, 19:26 - Jim McMenamin: 👍

11/12/2021, 19:30 - Gregor Smith: I take it you'd prefer more time to work on this before we surface it with CMOs. That's fine - just wanted to check.

11/12/2021, 19:41 - Jim McMenamin: Yes that's right but even now qualify any statement on VE on symptomatic infection as England data may be optimistic end of estimate, Ferguson a little less and us likely lower still...

12/12/2021, 11:44 - Gregor Smith: Is there a sit rep produced today? How many cases omicron do we have in hospital and what do we know about them?

12/12/2021, 11:52 - Jim McMenamin: I have resent this - headlines are SGTF now 20% of cases with further 38 confirmed cases and 356 poss so total of 3181. No change in hospitalisation number 12/12/2021, 11:52 - Gregor Smith: Thanks Jim

12/12/2021, 12:03 - Jim McMenamin: Just took a call from UKHS weekend incident director looking for update to brief Susan Hopkins on hosp cases before a meeting with Sajid Javid which has been pulled forward to 2pm from 5pm

12/12/2021, 12:15 - Gregor Smith: Interesting... he's gathering evidence. Gove and Javid are being marginalised in cabinet.

12/12/2021, 17:39 - Jim McMenamin: I have been through the listed hospital cases and will email a summary of these within the next 30 minutes. Equal split of Admitted For and With 6 each and 3 NK. 12/12/2021, 17:39 - Gregor Smith: Thanks Jim. That's really helpful

12/12/2021, 17:43 - Jim McMenamin: Of the 15, 1 died and 10 discharged so far Inc the HDU managed case. Some of the 15 possible cases happend so early in November that dependent on the case definition for UK they may drop off

12/12/2021, 18:10 - Gregor Smith: When's our earliest confirmed case? And still now links established to COP?

12/12/2021, 18:45 - Jim McMenamin: Sorry for delayed response. I don't have direct access to the

database so have asked. Just sent the summary

12/12/2021, 18:45 - Jim McMenamin: No COP link established to date

12/12/2021, 20:06 - Jim McMenamin: Susan Hopkins asking whether we can publish hospitalisation in UK Omicron SITREP? They are describing hosp outbreaks now...

12/12/2021, 20:46 - Gregor Smith: I'm fine with it - checked with cab sec and he's fine too.

12/12/2021, 20:46 - Jim McMenamin: Great

15/12/2021, 18:05 - Jim McMenamin: Do you have to talk for 10mins this evening after 6.30?

15/12/2021, 18:06 - Gregor Smith: Yeah - on cobra just now. Will let you know when I'm off and just buzz. Will be travelling back from Edinburgh

15/12/2021, 18:16 - Jim McMenamin: Okay. Just give me a ring when your free

15/12/2021, 21:54 - Gregor Smith: Jim - the VE data. Is it 60% VE for booster against SGTF or 60% compared to two dose against delta. I wasn't understanding the point you made in the email.

15/12/2021, 22:00 - Jim McMenamin: It's a relative vaccine effectiveness of 60% against SGTF when compared to two doses at 20+ weeks - a new benchmark as the unvaccinated as so unusual now that we need to compare to this. A bit like in seasonal flu when we compare the vaccine effect but the controls have had natural infection or previous seasonal flu vaccine

15/12/2021, 22:06 - Gregor Smith: Ok - got you now!

17/12/2021, 09:13 - Jim McMenamin: SGTF 51.4%. 4336 cases today with Lighthouse throughput reducing - reduction to 84% of samples in last 48 hrs and overall drop for combined sample volumes of 47k today c.f. 60+k the day before

21/12/2021, 08:44 - Gregor Smith: Keep hearing about data that shows booster waning at 10w but no one can actually show me it - have you seen anything?

21/12/2021, 08:46 - Jim McMenamin: Diane has some screenshots of what UKHSA presented at the end of last week with very very wide confidence intervals. I will dig them out

21/12/2021, 08:54 - Jim McMenamin: Just checked the wide confidence intervals were slides on 2 dose VE IN 12 to 17 years. There are no slides I have beyond week 8 for UKHSA third dose with around 55% VE at that point

21/12/2021, 09:17 - Jim McMenamin: SGTF at 62.9% today. Total volume of samples reduced by approx 10k c.f yesterday giving 5242 and 14.9% positive. I don't have the Omicron SITREP update re hospitalisation yet.

21/12/2021, 09:19 - Gregor Smith: Thanks Jim

21/12/2021, 09:59 - Jim McMenamin: Tracked down a slide presented at JCVI from UKHSA- emailed this potential waning but wider CI

21/12/2021, 18:18 - Jim McMenamin: Update on EAVE Nambeen in touch re small increase in number of hosp cases (to 18 in total) which are 0.36 of expected but he assured me have a tight confidence interval. He is keen to proceed to choreograph sharing (CMO's, SAGE/JCVI/VTG) and to rapidly publish (he is talking about a science media centre facilitated event as early as tomorrow afternoon). Do you have a view re this as comms will be critical ++ on this. The challenge is when will we have sufficient confidence and when is the right time...

21/12/2021, 18:39 - Gregor Smith: Just spoken with him - it's encouraging news. I think he should surface it if he has confidence in it.

21/12/2021, 18:45 - Jim McMenamin: Okay 👍

22/12/2021, 10:13 - Jim McMenamin: In meet with Nam and Nick just now. Are you supportive of the plan that Aziz has about having a Science Media Centre event at 16.15 today? It is the media conference that we are talking about and "why ruin Christmas/New Year" question will be posed. Do you want to join our call - we are meeting just now

22/12/2021, 10:15 - Gregor Smith: Can do - is it a teams link?

22/12/2021, 10:16 - Jim McMenamin: Yes will call you in

22/12/2021, 10:17 - Jim McMenamin: It should be ringing

22/12/2021, 10:17 - Gregor Smith: Nothing...

22/12/2021, 10:18 - Gregor Smith: You using the nes address?

22/12/2021, 10:18 - Gregor Smith: Ping me an email or calendar request with the link?

22/12/2021, 16:25 - Gregor Smith: Good luck

23/12/2021, 16:11 - Jim McMenamin: Thanks for the kind words earlier. You and your team deserve just as much praise for the interface across all the many faces of government 200. In tomorrow so inevitably will speak then 2

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23/12/2021, 16:17 - Gregor Smith: Thanks Jim
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29/12/2021, 08:37 - Jim McMenamin: Horrible figures this morning...15849 new cases today. Positivity at 28.9%. Same pattern of maj of cases in under 40 especially 20 to 39 years

29/12/2021, 08:38 - Jim McMenamin: Remember lag in death reporting for almost all boards and that hosp and ICu data lagged too

29/12/2021, 08:43 - Gregor Smith: Yikes...

30/12/2021, 09:46 - Jim McMenamin: Followup to Name: email. Good that the 80:20 split is identical to UKHSA. We seem to be settling on clinical audit rather than Case/Control or other methodology as 1. Already in place in Grampian so may have some data and 2. Can use this approach in at least GGC built using assets we have. There is a trickier bit re an unasked question on hospital onset cases i.e. health care/visitor associated cases and outbreaks but we will work with ARHAI on this. Happy to chat through 30/12/2021, 10:00 - Gregor Smith: Thanks Jim - I wondered whether a day of care type audit might end up being the most pragmatic and quickest way. Can I check what email you're referring to? Last email I've got from David is 24/12

30/12/2021, 10:03 - Jim McMenamin: Ah. David just about to send - had late comment from Nick 30/12/2021, 11:40 - Jim McMenamin: Have you seen the dynamic audit output from Nam in the chat? This partially addresses your question but not some of the detail...

30/12/2021, 11:41 - Gregor Smith: No - will take a look

30/12/2021, 13:10 - Jim McMenamin: I have convened the team to look at the hosp stuff from 2.30. Do you have any time between now and then to discuss - Corri's stuff takes us so far but we might be best placed to get the detailed severity stuff on oxygen/CPAP etc from CO-Cin team as a parallel

30/12/2021, 13:23 - Gregor Smith: Of course - phone or teams?

30/12/2021, 13:26 - Jim McMenamin: Teams request just sent for 13.30...

31/12/2021, 10:10 - Jim McMenamin: Thanks for the positive email - I have more detail from GGC this morning about when they could share line listing for clinical review - Tuesday evening proposed. Happy to chat when/if convenient ©

31/12/2021, 10:14 - Gregor Smith: That would be fab - getting it in time for cabinet Wednesday morning would be ideal. Encourage news from on London situation- admissions not as great as anticipated and shorter LoS. Clinicians saying it's like a different disease. Caveats around age group though. They also seem pretty confident London has peaked, though I'm left wondering how much that's confounded by dispersal of young population for holidays.

31/12/2021, 10:47 - Jim McMenamin: Interesting - not sure about the peaking claim if they dispersed 31/12/2021, 10:49 - Gregor Smith: I see real cases may be much higher today - Martin thinks may be above 20k? Affected by TAT.

31/12/2021, 22:41 - Jim McMenamin: Holy sh@t...I know a Sir! Congrats and incredibly well deserved. Really chuffed for you! 😊 😊 😊

31/12/2021, 22:44 - Gregor Smith: Thanks Jim. All a bit surreal and embarrassing o

31/12/2021, 23:35 - Jim McMenamin: So happy that Syed rewarded too! Delighted for him 😊 😊 😊

31/12/2021, 23:36 - Gregor Smith: Yeah. He's over the moon.

02/01/2022, 13:58 - Jim McMenamin: Gregor free now if that's helpful...

02/01/2022, 14:10 - Gregor Smith: Superb - buzz you at 230?

02/01/2022, 14:11 - Jim McMenamin: Great

03/01/2022, 14:54 - Gregor Smith: Are we likely to get anything on LoS out of Glasgow? Know there was some debate around this.

03/01/2022, 14:58 - Jim McMenamin: No Gregor - RAPID was taken as the vehicle to get this. I also checked with Kenny Baillee on Hogmanay and he said he may have COCIN data early New Year 03/01/2022, 15:04 - Gregor Smith: Thanks Jim. Michael in NI was asking Chris and I. Everyone is desperate for the same info - and everyone is coming up against the same issues.

03/01/2022, 15:45 - Jim McMenamin: del

05/01/2022, 11:48 - Gregor Smith: SGoRR M has been scheduled for 1030 tomorrow- sorry, I'll need to join late.

05/01/2022, 11:49 - Jim McMenamin: Okay 👍

05/01/2022, 18:12 - Gregor Smith: Hope you've managed to keep your head above the waterline today.

05/01/2022, 18:15 - Jim McMenamin: Yes thanks. **Na** busy compiling hospitalisation stuff now so we have draft for the morning for sign off. It has been and remains tricky as most recent cases don't have SGene or ASP immediately available

06/01/2022, 09:30 - Gregor Smith: Any thoughts on the odd number today?

06/01/2022, 09:33 - Jim McMenamin: Cautious but downward trend in both cases and percentage positivity. Reduced number of tests but not that much - 57k in report today c.f. 69k yesterday

06/01/2022, 09:37 - Gregor Smith: It almost feels it's just running out of steam....

06/01/2022, 09:41 - Jim McMenamin: Would be nice - interested in JCVI feedback re waning 3rd dose effect - should be covered in the CDC/Israel/UKHSA meet too by Mary and Meera

06/01/2022, 10:04 - Gregor Smith: Do we have any data on trajectory of >60s you can ping me?

06/01/2022, 10:15 - Jim McMenamin: < Media omitted>

06/01/2022, 10:19 - Jim McMenamin: Over last 4 weeks proportion ot total increased from 36% to 44% with biggest increase in those over 80 years and new hospital cases increased overall by 80% over these 4 week s

06/01/2022, 10:22 - Jim McMenamin: < Media omitted>

21/01/2022, 11:56 - Jim McMenamin: < Media omitted>

21/01/2022, 11:59 - Gregor Smith: Gregor Smith updated the message timer. New messages will

disappear from this chat 24 hours after they're sent, except when kept. Tap to change.

01/04/2022, 16:52 - Gregor Smith: Missed video call

28/03/2023, 13:10 - Disappearing messages now support keeping messages in the chat. Tap to learn more.