

Message

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Subject: NIMT FULL advice following meeting on 9th December 2021

Dear Gregor, Penelope, and Ken,

Further to the SUMMARY advice offered on 9th December 2021 please find below the fuller advice note from NIMT;

Summary

The NIMT noted the recent increase in cases over the previous week, but steady slow reduction in hospital cases and deaths.

The proxy laboratory measure for the Omicron Variant provided by S-Gen Target Failure is proving very helpful and this will be used to provide early indication of impact in the population over coming weeks as cases accrue. There is however serious concern expressed re the emergence and now increasing detection of the Omicron Variant and its proxy marker S-Gen Target Failure (SGTF) in Scottish cases with no direct travel link. When combined with exponential increase in SGTF cases (in excess of 13% of cases today) this has strengthened the evidence of sustained community transmission (in contrast the situation in England may lag behind our experience by at least a few days). Data indicative of transmission advantage of Omicron versus immune escape as potential hypothesis continue to be collated but their relative contribution remain unclear. Early information on protection from third dose against symptomatic infection shows reduced protection compared with the Delta Variant. Whilst we seek to maximise the utility of UK data it remains unclear what this may mean in terms of complication rate and hence hospitalisation and death in a well vaccinated Scottish population. Scenario data using the best available data is indicative of significant increases in cases and subsequent impact on the NHS in hospitalisation and possibly deaths but is itself subject to significant uncertainty. The NIMT supported the acceleration of vaccine offer to support those most clinically at risk which may offset some of the risk in particular for the offer of third dose. However NIMT were worried about two key issues;

- 1. Pre-Christmas day "Christmas Parties" (i.e. not including Christmas day itself)** - the effect of pre-Christmas day "Christmas – parties" which has already generated significant NHS and Education incidents and resulting NHS service pressure (e.g. due to high clinical attack rates in these staff and self-isolation requirement) in NHS Lanarkshire. There is an opportunity to act prior to the peak in "Christmas party" activity as if representative of future incidents these parties could cause significant impact on NHS Services. From a Public Health harm 1 perspective advice was to discourage all such parties (PHS recognises). Failing this advice NIMT asked that consideration be given to an appeal to HSCW staff to avoid/defer such parties. The substitute of asking individuals to be as safe as possible through a combination of LFD test before attendance and other measures was deemed a distant third to the public health benefit that would otherwise follow from the first or second.
- 2. T&P CMS: Contact Tracing – Request to amend.** In light of the exponential increase in SGTF and modelled capacity a proposal was for;
 - a. SMS - move with immediate effect to use SMS for all COVID 19 contacts and implement from Saturday 11 December and in addition (this is to allow changes to be developed on Friday 10th December with implementation on Saturday 11th December as modelling predicts 50% of all cases may be SGTF by Monday 13/12/21)

b. Isolation - all adult household contacts of all cases isolate for 10 days irrespective of vaccination status or PCR test result to allow fully vaccinated close contacts (non-household) to end isolation on receipt of a negative PCR test and modify the existing delta policy on under 18s to require siblings, including under 5s, in a household with a confirmed case to isolate for the full 10 days irrespective of PCR test results or vaccination status.

1. UPDATE – Intelligence and surveillance –

Cases – The NIMT noted the recent increase in cases over the previous week, but steady slow reduction in hospital cases and deaths. The proxy laboratory measure for the Omicron Variant provided by S-Gen Target Failure is proving very helpful and this will be used to provide early indication of impact in the population over coming weeks as cases accrue. There is however serious concern expressed re the emergence and now increasing detection of the Omicron Variant and its proxy marker S-Gen Target Failure (SGTF) in Scottish cases with no direct travel link. When combined with exponential increase in SGTF cases (in excess of 13% of cases today) this has strengthened the evidence of sustained community transmission (in contrast the situation in England may lag behind our experience by at least a few days). **It is anticipated that SGTF cases may become dominant in the following week should this exponential increase continue.** Data indicative of transmission advantage of Omicron versus immune escape as potential hypothesis continue to be collated but their relative contribution remain unclear. Early information on protection from third dose against symptomatic infection shows reduced protection compared with the Delta Variant. Whilst we seek to maximise the utility of UK data it remains unclear what this may mean in terms of complication rate and hence hospitalisation and death in a well vaccinated Scottish population.

Daily case numbers continue to be affected by robotic failure in the Glasgow Lighthouse which is delaying processing of samples. 7 day case rate had increased once more to 357/100000 this week (as compared to the peak, observed on 6th September, of 824/100,000). Considerable uncertainties exist on whether this will further increase as a consequence of Omicron as above.

a. **Incidents/outbreaks in community & NHS settings.** NIMT heard of **Multiple outbreaks –** The summary above re Omicron specific incidents related to Christmas parties is of great concern all the more so because peak party season is not yet with us. A specific concern on the observed impact of these parties affecting NHS Service provision was a salutary experience for all NHS boards with respect to HSCW. However further impact on LA Education and staffing of other critical infrastructure groups was already being described or anticipated. Initial experience of these documents are being separately reported. This led to the offer of advice in respect of Pre-Christmas “Christmas Parties” as in the summary above.

b. **Primary care –** Continuing pressures in Primary care have been previously noted.

c. **NHS24 –** No issue was aired in the NIMT.

d. **Hospital –** Despite concerns re Omicron the trend in reductions in new admissions to hospital and bed occupancy continue to be observed across most NHS boards. Acknowledging that complications may take 7 to 10 days to arise following infection it is too early to say whether the exponential increase in Omicron will yet translate into significant hospital. However, hospitals are still operating at a high risk level, particularly related to non COVID related illness.

e. **Deaths -** The downward trend continues in deaths.

f. **Care Homes –** No issues relating to care homes were raised.

g. **Immunisation –** Countering waning vaccine effect through 3rd dose - Booster or third doses have now been received by more than 80% of eligible patients over the age of 65 years (PHS dashboard data) with uptake continuing to increase in other groups too. It is too early to say what the effect of vaccines have on Omicron but early observation of incidents in Scotland is of high clinical attack rates in double vaccinated individuals and also to some degree in those who have received three doses.

h. **Harm – Impact rather than cases –** The NIMT focus on impact remains of paramount importance. The increase in incidence in most NHS Boards in the context of the exponential increase in SGTF has generated significant concern. However there remains for the moment a slow downward trend in hospitalisation and ICU/HDU cases and reduction in deaths. There is then considerable uncertainties re future incidence in case and how this will translate into hospital cases and bed occupancy in a well vaccinated population. NIMT have previously noted the increasing incidence in some EU countries. NIMT view was that the time was now right to make specific recommendation on Pre-Christmas “Christmas parties” as above.

2. **PH residual issues further to FM announcement of measures beyond level 0 for the period from 9th August 2021.**

- a. **Update - Test and Protect** – In light of the experience to date, the exponential increase in cases and contacts observed to date and what is expected in the coming week there was significant concern expressed about how to manage call handling capacity. In addition the uncertainties re impact of Omicron on transmission risk strongly supported a request to change the T&P isolation recommendations. This led to the advice covered in the summary above of all adult household contacts of all cases isolate for 10 days irrespective of vaccination status or PCR test result to allow fully vaccinated close contacts (non-household) to end isolation on receipt of a negative PCR test and modify the existing delta policy on under 18s to require siblings, including under 5s, in a household with a confirmed case to isolate for the full 10 days irrespective of PCR test results or vaccination status.
- b. **Communication** – Updates were presented to NIMT
- i. **Update - National communication exercise** – Omicron issues are now dominating media coverage. NIMT were joined in their deliberations by SG Communication and Marketing team to hear first-hand the issues re Pre-Christmas “Christmas parties” as documented above
- ii. **Retail, Hospitality, and Transport** – No update was provided. The NIMT heard previously of continued significant concern in most retail, hospitality and transport environments. There remains little evidence of re-institution of measures to protect the general public in supermarkets or other retail settings.
- iii. **Schools** – NIMT previously noted the Ministerial announcement on retention of social distancing and use of face masks within the school environment; at least in the short term a cautious approach should be taken.
- iv. **Update - Modelling** – R which reflects the situation in previous rather than the current week, has remained relatively stable at between 0.9 and 1.1. Current modelling output for cases, hospital cases and ICU cases appears to follow central estimates for the next weeks **but thereafter there is considerable uncertainty as a consequence of the Omicron Variant.**
3. **Update - NIMT & Omicron IMT meeting frequency.** NIMT, now moved to a single meeting each Thursday, is functioning well. **The Scottish Omicron Incident Management Team is meeting daily and reports to the NIMT.**
4. **Update - Winter respiratory pathogens** – NIMT had previously noted the recent increase of earlier than expected RSV cases but in the most recent week activity returned to a low level; similar observations apply to Rhinovirus. Influenza cases are being reported at low levels. Recent high and increasing rates of human metapneumovirus, particularly in very young persons, continue to be noted.
5. **Update- Other pathogens** – An unprecedented number of detections of Highly Pathogenic Avian Influenza H5N1 cases mainly in migratory birds in Scotland and the rest of the UK had led to a PHS led National IMT which is **meeting weekly.** Continuing concerns have been expressed re communication of the risks associated with the handling of dead birds. Four nation governmental discussions regarding this matter are ongoing.

Best wishes
Jim

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