30-7-20

2.30 dFM Intro

① Minutes 22-7
27-7

Agreed? (Yes)

② COVID update.

DOH R = 0.3.5/1
10.6 pos tests - past week unchanged
New pos cases increase to 7.23 per 1000 over past 14 days
Not translating into hospital admissions
Younger age group - don't end up in hospital - complacency
17 days - zero deaths in DOH hgs
Care homes - 5 being supported.
NISRA - excess deaths - working through report - complete info by Sept
Self isolation - advice CMO - from 7 days to 10 days.
Confidential - Luxembourg - significant increase
4 Nations agree - Luxembourg into red category.
47 flights per day Lux - UK.
Positivity rate in Lux - [ ] (increase).

7 -> 10 days.

CMO Apologies for short timeline
Media coverage.
Extend self isolation - confirmed tests. Infections - before symptoms + after.
Limited evidence
COVID - low / real poss of infecting - ≈ 10 days.
Relaxation of other measures - balance by extending isolation time.

CSA + J - not insignificant - moving to double figures weekly.
Redouble efforts to keep rises in check.

(3) Actions

dFM Circulated

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(4) Border - Green / Amber / Red

DOH Requests for specific info re countries - SBC - ask to share in confidence - risk of people making own decisions on travel

DFI — Different countries / different methodologies – how factored in?

DOH — Can get update.

JMK — Asked for methodology, how decisions made
Engage[m] forum yesterday.
Lot of issues
Last wk – Spain – impact for people coming back. Workforce issues for employers + workers, insurance issues.
Clearly – in society – international travel.
Face value – privileged info.
Creates anomaly re decision making
Green list – conservative in DOT.
Scotland – refused to clear Spain from start – they have info we don't?
Making decisions based on point prevalence – GB Govt making decisions for all, different derivation here.
Any sense of our point prevalence relative to p.p. used to draft green/amber/red?
How do we advise people on hols/travel

DOH — JCB – conversation @ 1.00pm

re Luxembourg.
Made clear - system of GPs getting data + then telling DHs - change of process - all see at same time.
More than point prev.
Cumulative no of cases,
Positivity rate - increase in testing - cd flag up concerns.
Country data on mortality.
Have raised concerns re initial decision-making process.
Scotland barred Spain, then said "safe", then re-barred.
Working from same data as us

dFM Point prevalence.
Working on their data

DOH JBC data.
We have asked [ ]
5.63 to 7.23
UK as a whole [ ] per 100,0

dFM Average rate

DOH We are above average.

CMO Set up from scratch.
Fluid situation.
Changes rapidly
When rapid changes happen,

timely info / decision.
Timely response to emergent risk.
Earlier involvem in decision making.
Important that mins are satisfied with methodology
CSA + I - best interpretation for advice to Mins
Cornwall - 2 per 100,000
Luxemboreg 117 " "
Spain [ ]
Basis for decisions - various parts of UK
Absolute risk - travellers from countries

CSA Methodology
CMO + I - sight of figs, data
- % of positivity rate of tests.
Increasing cases, increasing % of pos cases.
Lower limit + upper limit - point prevalence.
P.P. for NI overlaps with PP for UK as a whole - can't say it less here than UK.
P.P. higher than ROI - again, overlap
Keep under review.
Not sufficient for [ ] - SAGE is looking - offshore islands.

SMK Accept points made. Yesterday's

meeting - reflection of society view.
At a point - option of designing own bespoke view of international travel / lists.
Use of data - contact tracing.
Travel locator use - E, S+W / here
Travel locator forms.
BIC - serious discussion - 5 admins across these islands - joined up approach.
Policy issues - NSMC - DOH - MOU to be strengthened.
Travellers come into Sth, travel North - no sharing of info.
Bespoke approach to lists, advice
BIC - travel locator forms
NSMC - MOU.

DOH MOU - CMO / Stephen / Ronan - after NSMC.
BIC - matter for FM/dFM.

FM BIC - CTA respected across British Isles - different to Travel Locator Forms - need conversation re that. Have sent letter re CTA.

DOF BIC - address both issues CTA, travel from outside

Islands.
Travel – other countries beyond our influence.
Vagueness re international travel.
Clear data to make decisions.
DOH, CMO, CSA – big area for concern – travellers coming in.
Local population – international more woolly.

dFM Work towards getting data

DOH Paper – ask JRC.

FM [redacted] say we shd make own decisions – v difficult – we are 4-nations [redacted] ?

DOF Point Prev here
Scotland took own decision
Not to prevent travelling into here, but what we do when people arrive.

dFM Paper noted? (Yes)

Soft Play

dFM Sp note.

dFM Agree Recomm? (Yes)

Vulnerable Children

DoH. Rec'd input from DE, DFE, DfC
- will update paper + come back.

Pensions

Irrelevant & Sensitive

Childcare Restrictions

DoH Lift restrictions - make easier for childcare sector
DFI - clarity re mitigations
- will be included in guidance

DE Welcome paper
- match up supply/demand.
- freeing up economy
- removing barriers
progressing
move towards freeing up
childcare / child minding

Family help.
Child safety - danger - artificially holding back - creates informal situation.
Welcome.

dFM Noted?
(Yes)

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dFM to DE - plan for schools for next week's Exec?
x

DE Yes
not with both CMO, CSA.

FM Ad Hoc

Mins attending?

DE ~~Not there~~ Not next week - but can if there is a need.
Zoom from Spain.

NSMC Plenary

FM Actions Sp note.

Agree paper? (Yes)

Paramilitary Activity

Irrelevant & Sensitive

~~PA~~ AOR

FM None

Next meeting 6-8.