

4-5-20

|       |      |     |
|-------|------|-----|
| FM    | HOGS | DOH |
| DAERA | dFM  | DE  |
| JML   | JMK  | DFE |
| DEI   | DOJ  | DOF |

① FM Intro  
FM Minutes

Agreed? (yes)

② COVID-19 Report

DOH Not a lot of change since Fri  
Dashboarded  
69 Care homes - C-19 cases  
lot of work going on  
"Safe Home" project - staff staying 7  
days at a time - but TU require  
further negotiation before agree<sup>u</sup>.  
N/S + E/W  
SHARRIS - ROI <sup>Google</sup> ~~ROI~~ / Apple  
Tracking App - important to work  
together  
DOJ - speech therapists  
- rec'd letter from College of  
Speech Th - looking at issues,  
also PPE  
DOJ - Blood Plasma trials - people  
who have survived COVID.  
Blood Transfusion Service -  
no request to use NI blood.

NI needs plasma - anti-bodies.  
NHS blood transfusion - same level of concern as national service.

DOJ

Helpful.

Assumed NI was part of plasma trial - we are, but not called on to collect plasma. Available to us to use?

Data App - problem - UK going for centralized system of data collection.  
Irish Govt - same as Germany/France - hold own data, allow access.

Most of Europe - non-centralized data

GB/UK - centralized.

2 separate systems - will cause diffs. No idea why opted for separate approaches.

Can cause problems for travel overseas.

Worth raising with UK Govt.

DOH

Plasma - just because we haven't provided samples won't keep us out of using any resulting [ ].

App - weren't aware UK/ROI had different approach to App.

Public confidence

Speaking to Health mins in GB later



We haven't seen anything concrete, no firm decisions.

AFM Decentralized app - more take up, we shd go that route  
Whether DOH taking forward.

Meeting with ROI DOH / 2 CMOs - when?

Any views re patients re Cystic Fibrosis - any facilities? Specialist service.

DOH Comm raised CF last week.  
Centralized service reduced - CF more susceptible to COVID. Will re-engage a.s.a.p. No COVID outbreaks in NI hospitals relating to specialist services.  
Re-engage<sup>in</sup> within next month.

# App - my preference - decentralized - depends on skills - discussing with Chief Digital Officer. DOH QB - trials in Isle of Wight.

[ Third Sector Resilience ]

AFC Update.

③

Action Log

④

SIT REP

HOCS

Traffic

[

]

-PSNI

- people driving to parks

④⑤

Traffic Data.

AFM

Paper circulated.

DFI

Why are people travelling?

Volume of traffic does not give reason  
Mobile phone data.

As an Exec, - need evidence base

Why dept gets lot of Qs - we say we  
are analysing.

We need a speed message a.s.a.p.

HOCS

Exec decided it wd not publish for  
fear of [perverse] incentive.

PSNI - warned re enforcing more  
rigorously

If we publish figs showing more  
traffic, more people will decide to  
also go out.

DFI

Always knew looking at traffic  
wd not give reasons

Need to understand before we decide  
to relax regs



HOCS Haven't seen mobile phone data

DFI When?

HOCS Don't know - ONS providing.

Stewart In hand.

Traffic data - can't give us more reasons.

ONS - opp to draw on info from mobile cos.

Getting under way - no timeframe - couple of days/weeks.

DOJ

Getting more contact from people in tourist areas - incoming visitors, more traffic increases, harder to police. Need more info - where next re relaxation.

Uppe n/Ard Rd - much busier, lot of this work-related.

Rush-hour / rest of day - 12% increase = gridlock.

Traffic can flow steadily...

dfm

HOCS - will come back to this, keep on agenda.

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Decision making - C/virus.

dfm

Expectation that Exec will publish

Roadmap.

HOCS - some initial work.

HOCS

Next review before 9 May. Discuss this Thurs. Increasing expectation Exec will move forward.

Irish Govt - roadmap last Fri

GB - this week.

Key challenge - set out issues to be considered, tests to be applied.

Challenge - set out timetable, phases  
Precise steps

Welcome - steer from Wines - what they wd like to see.

dfm

led by measures(?). Take Ministers' views.

DOF

Useful to have discussion, important that people have sense of light at end of tunnel.

W/E, good weather

Have to be done in measured way  
Mitigate as well as we can against increase in virus.

How to put in place social distancing?

Necessary - testing/tracing in place.

If behaviour + control of virus are positive, can take next steps.

Need broader community testing.



DOI

Agree - need clear strategy. All at once or, not revealing at end of each 3 weeks.

Staged approach - set out what public shd do, how we will support financially - guidance

Communication is critical - people anxious re lack of clarity.

Uncertainty.

Give clarity at each stage.

Community testing/tracing.

Masks - jury is out. Give consideration re public transport - drivers died in London.

Face protection.

Co-ordination E/W + N/S.

Difficult - border.

Fuelough scheme. Complicated situation in xII.

ROI - v clear info; wd prefer to have stages / test: allow to see in, see impact before next stage - JotH said - it takes time for changes to reflect in cases etc.

End point - what wd look like?  
eg prisoners being transported for remand hearing - virtual system better;  
home-working - benefits for child.

care.

More flexible working arrange<sup>ment</sup> -  
child-care issues better, environ<sup>ment</sup>  
impact, less traffic.

DFI

Agree - need strategic, phased  
approach; led by medical +  
scientific advice; + unions.

Communication v important  
Need clear position re masks.

~~First~~ Social distancing

New normal - can't fail to learn  
lessons.

Meeting on Wed - CMO / CSO.

Have to bring public with us.

SWK

Doc from Dublin on Fri - roadmap  
sets base against which we will  
be measured.

Also str from London.

Str o/view with tactical plans.

Avoid piecemeal approach.

3-week reviews / reviews within subsets  
- to ~~adv~~ advise on how plans are  
working

Education - back to school, college.

3-month trajectory - May, June,  
July

Sub-sectors within that - HCS +  
officials.

Best medical / scientific advice



Community testing/tracing.  
Need agility to reimpose restrictions if we don't achieve progress, or if cases/infections rise.

Messaging - contractual approach.  
Govt - responsibility to bring forward  
str - but need to hear from other  
walks of life how this will be taken  
forward - churches, sport bodies,  
GAA, rugby; need to be clear ~~to~~ how  
they can provide social distancing/  
delivering public health.

Masks / face coverings - need to  
consider.

CMO / CSO view on temperature  
testing - becoming an increasing  
phenomenon. Confidence building

DFE

Agree with a lot. Communities have  
done a lot to keep virus at bay - don't  
want to go back.

Paper on safer working - lot of  
anxiety/fear. People afraid to go  
back into work/life - success of  
'stay at home' message. Sent letter  
yesterday.

DFI

No time to review  
Consider on Wed, or later tonight.

DFE

Was told by officials paper had  
been viewed by DDF officials, who  
were content.

V urgent.  
Lot of businesses contacting me.  
Can't wait to Thurs.

Clear by urgent procedure.

Tackles issues people have raised  
- small businesses 1-9 employees,  
also some provision for later,  
if not today, urgent decision  
request.

Social enterprises, charities

DDF

I wasn't aware [ ].

DDF asked re group scheme,  
recognize risk

- give him direction? Required  
to be outlined in paper.

Exec agree<sup>wn</sup> to him direction.

DFM

More work to be done

- urgent procedure.  
before Thurs.

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DFC

Exec Thurs

ONS - housing reclassification.  
- on agenda for Thurs.

dFM

If cleared, will put on agenda.

Thurs instead of Wed, as lot of  
work to be done.

DFI

We need to get sight of paper  
a.s.a.p - HCS to circulate  
before Thurs (Reviewing paper).

DOH

Time for Thurs?

dFM

Will let people know

DOH

Due to meet Committee on  
Thurs am.

dFM

Will let people know later  
today - start 9.00/9.30 Thurs

Blank lined paper with a vertical margin line on the left and four binder holes on the right.