

21-5-20

10-10 dFM Intro

① Minutes

dFM Agreed? (yes)

② COVID update

DH. Circulated daily update.
Shared - print-out of dashboard
(public facing)
Detailed info
Not widely picked up by media.
Yesterday - 18 ICU patients,
[] ICU beds,
Numbers moving in right direction
Useful for mins. to see dash-
board - broken down by Trust,
bed occupancy
Steady decline in ICU patients.
Further drafts at back
- NI figures compared to
international.
NHSRA graphs.
Over last 5 days - compared
against other countries.
Info I use to update Exe.

Regulations - amend^{ed} last Thurs.
Done.

3 review under way - due next Thurs 28th.

Impacts of relaxations to date.

RPeng. wrote to PSecs - any issues for review - by E I, we need notice to review, amend wording, drafting etc - get into rhythm.

Still working in care homes - WOS, going in right direction.

③ Action log

dFM

Note

④ Sit Rep.

HACS

CCG met this a.m.

All actions closed

Close down CCG.

Sit Rep will continue

Hub scaling down

PSNI - will not enforce Reg 5 as previous - relaxation.

Will monitor, + intervene if large groups gather.

Sit Rep - strong focus on data relating to behaviour - traffic etc. Impact of relaxation

in other countries.

⑤ Updated Testing Str

Dot

living doc, review quite often.
More detailed as we move forward.

CWO + CSO here

Scientific data

Tables - T6 - demonstrates
different platforms for testing

Ransch cut back supply at start -
more suppliers, not so susceptible.

CWO

Lot of detail

Comprehensive + diverse range of
testing.

Antigen, antibody.

Strands of testing.

Work - testing str [],
testing plans

Significant additional demands for
testing in coming time - new
rhythm.

From outset - realized limitations

Ransch reagents.

[]

Platforms, test reagents

Centralized approach - rest of UK,
plugged into that.

Increase demand next few months
- care home staff + residents;

Track/Trace; ongoing testing of healthcare staff.

[Apps? I coming onstream imminently

Immunity tests

Other elements requiring testing

- surveillance - GPs, antenatal, admissions to hospital, elective work - before allowing into hospital.

Contact tracing - started Mon; broaden access to test to everyone with COVID symptoms.

Challenges, Technology.

Science - origin, different countries, how entered countries from overseas.

dfm

V comprehensive paper

JMK

TKS, excellent paper, fills in key areas - esp. population surveillance.

Flexibility on application

3.3/3.4/.5/.6

Focus on care homes - necessity of keeping policy under review. Genomic (?)

To develop scale of testing / contact tracing - huge capacity issue - step up

/step down - flexibility.

Permanent surveillance going forward

How will we get capacity to upscale as required

Messaging issue

Intelligence / surveillance - data received will influence messaging.

PSNI this am - behaviour changing.

EIS - we need to look at messaging in line with feedback re behaviours.

DH

Messaging - due to move regs on 28th. Need to move message as well - wider conversation, EIS.

San - modelling - how many people needed for contact tracing.

CMO

Modelling - need to be agile to increase tracing as required.

More manageable - small no of cases.

As measures relax, upward pressure on NHS.

Wider population access to testing - any symptoms.

Quick turnaround required -

hospital admission, care home, will use in-house NHS capacity - quick response.

Wider community surveillance -

zero-prevalence. Turn-around

time = 48/72 hrs. Winter -
will need to reduce time for turn-
around.

like riding 2 horses - expand
capacity with partners here (universit^{et}
+ align with NHS.

~~Shirley~~ Young - Relatively low risk -
amend of regs this week. But
public going further in relaxation
than intended - impact of
behavioural in 3 weeks.

- No of new cases } modelling
- No of contacts. }

New cases - about 18 p/day

Modelling new cases = 200

- lot of people not testing / no
symptoms.

Expect no of cases cd emerge -
not more cases, but more testing.
Messaging re self-isolation for all
contacts - for 14 days. Behavioural
lockdown.

Full normal soc - contacts = 30 p
day; lockdown - contacts = 3.

Contacts will rise as lockdown
proceeds.

DFI

2 I tests per day - HS2
If required - use HOT centres
again.

Surveillance - based on sampling,
Care homes, GPs.

Most people don't present at either.
People in wider population - how to
reach?

Second surge?

Communication?

6 people out doors? Children on bikes
Family - 2 adults + 4 children - can
they meet other families?

Messaging - children / schools.

Young Modelling = mathematical.

No of people - hospital admissions,
can estimate no in community.

ONS - survey - Random - England
Swabbing everyone over 2 in
Random Range of households - can
estimate no of cases in population.

Currently + 200 cases per day
estimate - NI using England
calculations - hope ONS will
operate in NI.

Problem - asymptomatic people in
population.

Self-isolation - 14 days. V difficult
to manage - people cd be asked
multiple times, may not report
symptoms. Behavioural issues.

Science uncertain - children often
have milder symptoms, but small

proportion - inflammatory disease, cd die.

But seem less likely to spread disease - under age 11; once they become adolescents, more likely to pass on.

Impact on school opening.

DFI Second surge?

1 Young Depends on what happens with relaxations - UK worst case scenario - $R = 1.7$ - v rapid increase, wd require full restrictions to be re-imposed, wave same as 1st surge.
Can't model 2nd wave until R becomes clearer.

DOF Contact tracing - NICS staff.
Plans re tracing?
Increase in R no - easing of restrictions - limits what we can do re further relaxations
Messaging - need to be still careful, bank hol w/e
Messaging from today.

DOH officials have engaged with DOF re NICS staff.
DFC - support package, DFE

+ [DOF] also engaged - companies, self-employed etc.
Next support package.

CMO Individual [I
Upward pressure cumulatively of relaxation measures.
Cautionary approach.
Won't know impact for several weeks.

DAERA. Impacts now + in Autumn
Need conversation.
If decide not to send children back to school - will put pressure on us in long term.

CMO Risk, lower risk - children, transfer rate.
Public health perspective - Autumn, further increase in transmission - impact on school return.
Impact greater on children in lower socio-economic groups - health inequalities - diffs with home-schooling, access to technology.
Look at - Autumn, planning.
Happy to work with DE, Minister Weir on that.

dfm Note Update / Testing doc?

(M/Es)

Education Restart

DE

Detailed responses in Annex of doc.

How to move from response to recovery.

Public health concern.

Education.

Broader economic impact.

Mitigation measures - support e-learning.

Extent to which children are not at school - great educational impact - socio-economic issues.

Science guidance.

Exec approach - strategy - in line with step approach.

lot of uncertainty.

Ed - calendar-led.

Useful to give target dates,

based on science/medicine.

Education / school [participation]

Child care.

Schools closed except for children of key workers - v low numbers.

Vulnerable children missing school.

No radical change this academic year.

Further work - vulnerable children.

Need to see phased reopening of schools,
required preparation.

Between now + end of summer -
engage^m

Reference grp.

6 strands of work

Unions

Stakeholders

Early Learning Communities.

Q+A with pupils.

Job of work - summer.

Schemes for vulnerable children,
key worker children, keep teenagers
away from criminal elements.

Summer schemes - social distancing
etc.

Have in place

Some educational, some medical -
cross-departmental work (eg
school transport - DFI).

Gen phased return - end of summer.

Clarity - no general resumption now.

Main phased return - Sept.

Other jurisdictions

- 3 cohorts of children

- transition year

- GCSE / A level

Good argue^m - bring them back
earlier - August.

Schools - certain level of [] 7.

Concentration on 1/2 years - good

opportunity to [].

Return to school in Sept - mix of classroom + remote learning.

Social distancing.

Range of issues to be scoped out.

Differential nature - primary v post primary.

Digital learning - not consistent across board.

V young children not as vulnerable - uncertainty.

Concentration of on belief - young children not as [contagious].

Want eventually to get back to normal - considerable distance away.

DM

Restart - needs to be planned.

Will come plan to work with stakeholders.

DE

Work with unions - complementary to DE approach.

PPE needs.

Distancing - staggered arrival times.

Some want everyone back tomorrow
Some want no-one back until vaccine available to all.

DAERA

August best. Some schools v

good re working with children, some schools not good.

Support for children not equal.

Message - clarity re early August.
- early alert.

DE

Response - variable.

Every school - link officer

Increase level of consistency across schools

Good levels of support - some went the extra mile, some disappointing.
Some angry parents, some v pleased

level of mitigation.

DFI

Commend paper, approach

Grounded in science, medical advice.

Pressures on parents - working from home, home-schooling.

Mental health issue.

Schools - allow people to get out to work.

Engaging with employers?

DE

Key role - child care, given level of priority to key workers.

Rephrasing

Different models - need some level of mix of classes, make compatible with families. eg 3 days at school

3 at home - need to align nos of children in each day.

Remote learning.

Blended process

May be easier from parental point of view.

Mental health - major challenge across depts.

Wider societal issue - won't know until closer to recovery - scale will be known later, will all have to respond.

DOF

Timely paper. Need to consult immediately, before summer.

Co-design, much easier for schools to adapt

V challenging.

Anxiety levels higher

What's workable for staff, unions, parents.

DAERA - early start

Supports needed -

Need to ensure all networks of support available.

Border - schools Nth/Sth -

understand what is happening in Sth - consistency.

DE

Balance to be struck

Mid-Aug, get some key years

in.

Bring some in earlier than others.
There will be unanticipated teething problems.

Engage^m already begun.

Unlikely anyone going away for hols.

Inescapable pressures - financial

Some school principles - need more money, more staff etc.

Need to be clear - no pot of gold, how to do things with existing staff, existing budgets.

Working from home - same amt of work.

Don't want to mislead - magic solution.

Happy to work with Joe (ROI Min)
- clear cut distinctions.

England - 1 June.

Wales - poss July

NI - Sept (Aug)

ROI - education - no supports for key workers; no access to schools, no free food for children etc.

Regular contact with ROI, also other jurisdictions in UK.

AFM

Spoke to Taoiseach - ROI wd like to engage, learn from what we have done.

DE

Happy to engage with ROI.
May have new Govt / new mind in
Stn.

DOJ

Tks - Youth services
Schools - identifying vulnerable
young people.
Important to have contact with
Youth service.

Home

May be increase in sharing
experiences of children when
schools return - teachers shd be
prepared.

Restoration of youth services.
Collaborative approach good -
staff - teachers, caretakers,
cleaners - involve in discussion.
Childcare issues

Home-working - not practicable
to also home-school.

Family contact needed - picking up
children from school etc.

Uniforms - financial stresses of
families; children only at school
a few days a week. DE encourage
schools to relax ~~school~~ uniform
policy.

DE

Work over summer months -
Youth service, vulnerable young

people.

Summer schemes - level of permissibility
Uniforms - we wd like to be as flexible
as poss - schools can be prescriptive.

But uniform creates level playing field
for clothes children wear - some can't
afford high-end clothes - social inequality
light touch approach to uniforms.

Uniform allowance - nos eligible will
increase.

FM

TKS for paper - lot of correspondence.
Assembly.

Need clarity for parents, public,

ChO / CSO advice good

Children - not back this academic
year; summer activities; some
years poss back in August.

Teachers usually go back end Aug
for planning.

ROI - spoke with Taoiseach - they
acknowledge we got it right -
vulnerable, key workers, free school
meals.

Work with DE - childcare - allow
people to get to work.

Key workers - children back to school
for economic reasons.

DE

State^m - wide range of issues -
detail re way forward - caveat -

medical / scientific advice.

Indicate our planned approach.

Childcare - free up people to go back to work.

Businesses can adapt - social distancing - may not be financially viable for childcare settings.

Financial support for sector

dfm

Detailed conversation re childcare needed.

DfE

Economy - schools / economy go hand in hand.

Move into blended approach in Autumn, stay as we are now - big impact on economy.

Childcare - big issue.

V concerned re education.

Unemployment - huge issue,

Childcare v important.

Further / Higher ed - DfE to liaise with my dept - need coherence on this.

Agree with Science - but be aware of impact on jobs.

DE

Depts + interaction across UK.

Impact on curriculum.

NI - no solo run.

UK conversation - feeds into academic []

Approaches - families.

Family - want to work, grandparents can't do.

Public confidence.

Some resistance in schools.

Lot of families - choosing to keep children at home.

Messaging - system is safe.

Some parents will want children off school until all COVID is gone.

DOH

Moving from pre-school to P1 - lost pre bit of children.

Split week for schools - 6-day week, Sat mornings.

Student teachers.

DE

Nothing ruled out.

Cost implications.

Issues re how weeks are restructured.

Post-primary - subject-led. Poss fortnightly rotation.

Learn from other countries - eg Germany - small groups 'cocooning'.

Educational aspect, medical aspect.

Collectively - aware of how money is spent.

Funding restrictions.

CFM Note paper?

Yes

⑥ Ad Hoc Comm

FM Sp Note

DPE Need paper re Economic Paper
discussed - otherwise no point.

FM Sp Note.

⑦ BREXIT

Irrelevant & Sensitive

Irrelevant & Sensitive

Carbon Pricing

Irrelevant & Sensitive

Aq + Fisheries Support.

Irrelevant & Sensitive

Article 5.3

Irrelevant & Sensitive

⑧ Parental Bereave^{ment} Leave.

Irrelevant & Sensitive

Note of Urgent Decision

Noted ? (Yes)

AOB

DOJ HI Abuse.

Irrelevant & Sensitive

Economic Recovery

DFE

Disappointed re Economic Recovery
not on agenda.
Strategic view alongside medical/
scientific advice.
Next week agenda?
Many people anxious for considerations

Tourism / Hotels / Caravans

DFE

UK + ROI - tentative dates
for reopening
Hotels taking bookings - warming
up mkt.
Severe impact on hotel owners
here - competition.
Need to start talking re
Work Safe message.
Businesses don't want to move
too fast + have to reverse.
Dublin hotels - big campaigns
in GB

AFM

Economic Recovery v important

Some concerns - have written
work on that in coming days.
Tourism / Hospitality.
1st paper - take bookings
for future - look at again.
Can't commit re dates.

DFE - Stressing urgency re this .
Need strong, safe messaging re
economy.
Happy to discuss
Strategic approach to reopening/
repositioning economy

Bwide

Irrelevant & Sensitive