

**Official Sensitive – COVID 19 CORE GROUP**  
**Not for publication**

**COVID 19 – Core Group meeting:- Wednesday 11<sup>th</sup> March 2020 (08:30)**

**Present -**

**Ministers:** First Minister; Vaughan Gething; Julie James; Ken Skates; Kirsty Williams; Julie Morgan and Dafydd Elis Thomas.

**Officials:** Des Clifford; Andrew Goodall; Frank Atherton; Rob Orford; Reg Kilpatrick; Toby Mason; [Name Redacted]; Carys Evans; Will Whiteley; Huw Morris; Neil Surman; Garry Haggaty Joe Trott, [Name Redacted] Christopher Morgan.

**Special Advisers:** Jane Runeckles; Madeleine Brindley; Claire Jenkins; Sara Faye; Tom Woodward; Andrew Johnson.

1. The First Minister advised the group that there were a number of questions that Ministers would need to consider and invited the Chief Medical Officer to provide an update on the spread of the virus.
2. There were now 15 cases in Wales, with some community transmission taking place. The policy across the UK was still containment, but it would be for COBR, which was meeting that afternoon to decide whether to move towards the delay phase.
3. Given the spread of the virus and number of fatalities in Italy, there would be a need to continue to prepare for the reasonable worst case (RWC). In terms of mitigation, the science currently did not support banning mass gatherings and if behavioural interventions were too stringent it risked pushing the epidemic into the next period of NHS winter pressures.
4. Three delay options were being considered: self-isolation of individuals infected for seven days after symptoms developed; household quarantine for up to 14 days after the last person becomes symptomatic; and the cocooning of the elderly and vulnerable.
5. Under the RWC, planned and unplanned daily hospital admissions at the peak of the epidemic would be three times higher than average and the demand for invasive ventilation would be considerably higher than current full capacity.
6. The Chief Scientific Adviser for Health informed the group that under the RWC, the number of people with the virus would peak in around 10 to 14 weeks. There were likely to be 1.6 million symptomatic people in Wales and, without behavioural interventions, most cases would occur in a nine week period.
7. Ministers noted that NHS Wales was preparing for an epidemic and intensive care units were being mobilised. Nevertheless, the scale of the challenge was huge and there would be a need to continue to work with NHS England, particularly in relation to cross-border services and procurement.

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8. There would be a need to consider the consequences of cancelling route hospital and GP appointment and explore whether oxygen could be provided to the sick at home. Some thought should also be given to providing ventilation facilities in local hospitals, particularly in rural areas. It was suggested that protective clothing earmarked for health and social care professionals could also be made available for volunteers. Further thought would need to be given as to whether 'cocooning' the elderly should be advised, as this could lead to further isolation and increased loneliness.
9. Ministers agreed that there would be a need for further discussions about the policy on mass gatherings, such as sporting and cultural events. The science suggested that such bans would reduce mortality rates by 2%, but there was a need to consider the social impact, the size of events, and whether they were outdoor or enclosed. There were also questions about mass transport hubs. However, it would be difficult to justify not cancelling events, particularly when the Government was advising households to go into quarantine.
10. Whatever the decision, it would need to be applied consistently and the sooner that venues were advised the less costs would be incurred. There was some concern about whether insurance policies recognised COVID 19.
11. Government messaging to the public and delivery partners, such as Local Government and the third sector, would need to be clear, concise and simplistic.
12. Ministers agreed that there was a need to address the questions that had been raised as soon as possible.
13. The Director of Local Government informed the Group that the ECC(W) was now working two shifts and processing a great deal of information from Whitehall.
14. In terms of Local Government, data on RWC and social isolation measures had been shared with Chief Executives and there would be powers of direction for authorities in the proposed emergency legislation. Furthermore, a meeting of Local Authority leaders was planned for the following day. Work was continuing with the Local Resilience Fora and a strategic co-ordinating group was being set up. It would be important for Local Government to operationalise its planning for excess deaths.
15. Ministers agreed that, in addition to maintaining dialogue with Local Authorities, there would be a need to engage with town and community councils and voluntary services, such as the WCVA.
16. There was a need to avoid the premature closure of schools and it was reported that Qualifications Wales had plans in place to manage forthcoming examinations and the awarding of qualifications.
17. It was noted that the supermarkets were confident of their supply chains and that the military would be available if needed.
18. It was reported that officials were in the process of setting up a dedicated web portal that would provide guidance to the public beyond the public health setting.

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19. In terms, of financial support from the UK Government, Ministers recognised that the Welsh Government would need to cover the costs of any policies that differed from those of the UK Government.
20. The next COBR would be taking place that afternoon and the next meeting of the Core Group would be the following Wednesday. However, it was recognised that Ministers would need to meet more often.

CABINET SECRETARIAT  
March 2020