

<p>Public Health Wales / Welsh Government Update</p> <p>2019 – nCoV (coronavirus)</p> <p>26th January 2020</p>	<p>ATTENDEES Frank Atherton; Quentin Sandifer; Andrew Jones; Giri Shankar NR NR Christopher Williams; NR NR Marion Lyons; Chishan Kamalan</p>
<p style="text-align: center;">AGENDA ITEM</p>	<p style="text-align: center;">NOTES & ACTIONS</p>
<p>1. Confirmation of current incident arrangements – incident level, management and co-ordination – AJ / ML</p> <ul style="list-style-type: none"> • UK wide • Wales 	<p>Described daily rhythm to date both internally within Wales and at UK level (Now 5 nations with joining of Republic of Ireland) across government and public health agencies:</p> <ul style="list-style-type: none"> • 1000h daily PHE IMT (5 Nation) • 1230h daily CMO/UK Government • 1300h daily PHW IMT • 1400h – Official release of UK figures (DHSC) • 1500h daily (PHW/WG) • 1600h daily Communication call (PHE/ 5 Nation) <p>ACTION: ML/AJ Need to review the involvement of wider NHS Wales.</p>
<p>2. Update (including from PHE IMT 26/01/20)</p> <ul style="list-style-type: none"> • Epidemiology – CW/ GS <ul style="list-style-type: none"> ○ Current position (China, Global, UK, Wales) ○ Review of case definition 	<p>Current position</p> <ul style="list-style-type: none"> • 1975 cases (Main land China) 40 cases outside across 13 countries • Proportion outside Wuhan City appears to be increasing. • Deaths 56/2015 cases (known) • England – 52 tested, all negative. • Wales – two tested cases; both negative <p>Case Definition</p>

	<p>Current: Geographical area still restricted to Wuhan City. However, cases are now outside of the city with 60% in Hubei province. Proposal being circulated through PHE IMT into four nations / CMO to look at sign off on new definition. If there is revision, expansion of affected geographical area, could have significant impact on threshold of suspected cases. Could consider tighten the clinical criteria to reduce the anticipated increase number of suspected cases. There is a risk in doing so of missing mild cases (75% of cases have mild symptoms). This is a UK wide decision and will advise.</p>
<ul style="list-style-type: none"> • Communications – AJ, NR <ul style="list-style-type: none"> ○ Welsh Government Statement 24/01/24 ○ Current agreed PHW (Wales wide) public statement http://howis.wales.nhs.uk/sitesplus/888/news/64700 ○ Proposed reactive statement 26/01/24 ○ Communications plan <ul style="list-style-type: none"> ▪ Universities ▪ NHS Direct ▪ Data submission to PHE/DHSC 	<p>CMO WG statement circulated (24/01/20) Welsh Government Statement has been shared. This is on PHW website. A reactive PHW (Wales wide) statement has been prepared as of 26/01/20 Within last hour, Scottish government have issued a statement on figures and plan to update daily. Wales to continue to align with PHE and UK wide release of figures ACTION/DECISION: Agreed to remain with reactive approach.</p> <p><i>Universities</i> Leaflet and information posters (English / Mandarin) amended for PHW contact. Distributed via Occ Health and Student Welfare links. PHW using social medial channels.</p> <p><i>NHS Direct</i> Have shared algorithm for calls and front facing public pages for NHS Direct. Continue to follow as an action to ensure consistency between NHS Direct and NHS111</p> <p><i>Data submission to PHE/DHSC</i> ACTION: AJ, NR to discuss and agree the submission of data to PHE/DHSC by 0900h each day</p>

<ul style="list-style-type: none"> • Diagnostics and Virology – NR 	<p>PHE developed an assay and have a plan to roll-out to regional labs in England and devolved nations. Plan to have a specific test available by 31/01/2020. Currently, local patients will be tested across broad range of respiratory pathogens with samples sent to Colindale for testing for 2019-nCoV. PHW virology attending PHE/ Devolved Administration meeting on Tuesday 28/01/20</p> <p>GS raised the practical issues of receiving results. This has become more challenging with an increased in demand. This means later reporting (2030h rather than 1800h). System will need to adjust to this.</p>
<ul style="list-style-type: none"> • Port Health – GS 	<p><i>What is happening in England:</i> It is being described as Public Health Risk Assessment and Control Measures at Heathrow. Was specific for Wuhan City and is now for all flights from China. Requesting pilot to report any illnesses when 15 mins out from landing. Passengers only allowed to disembark if 'nil return'. Passengers are being provided with leaflets giving guidance on symptoms and contact points. Separate protocol if there is someone unwell. This is to be extended to Gatwick and Manchester (only other airports that receive direct flights from China)</p> <p><i>What is happening in Wales:</i> Preliminary meeting with Cardiff International Airport. Provided advice and information consistent with what is being used in England but these are not being currently used as Cardiff does not receive direct flights. There might be implications should this extend to indirect flights. This will depend on any case definition change that affects indirect flights.</p>

<ul style="list-style-type: none"> • Guidance & case management – GS/ NR CW <ul style="list-style-type: none"> ○ CMO Alert ○ PHW Briefing notes ○ Guidance in progress <ul style="list-style-type: none"> ▪ Decontamination and PPE ▪ Home Isolation ▪ Management of Contacts ▪ Reporting of data 	<p>CMO alert issued 24/01/2020 Aligning to PHE guidance.</p> <p>3 PHW Briefing notes issued to NHS Wales – all signposting to appropriate PHE guidance</p> <p>Guidance in Progress</p> <p><i>Decontamination and PPE</i> Guidance for Primary Care. Infection Control leads have commented on the draft. Awaiting confirmation of publication. Advice for assessment including PPE such as Fluid Resistant Surgical Mask (FRSM) already issued. Doesn't recommend masks for cleaning the environment. Note that Scotland have issued a policy difference i.e. it recommends use of FRSM).</p> <p>ACTION: Keep current position on FRSM under review and agree clear Wales position</p> <p><i>Home Isolation</i> Working with PHE. Still in draft to propose criteria and checklist to assist in identifying cases suitable for home isolation.</p> <p><i>Management of Contacts</i> Guidance in drafting for Health Care Workers who have had contact with / without PPE and household contacts. Will include aspects for self-isolation.</p> <p><i>Reporting of data</i> Data is sent from Wales at 0900h daily into PHE email contact point.</p> <p><i>Where any positive cases would be cared for?</i></p>
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	<p>Any confirmed case would be expected to be managed outside of Wales as guided by the Imported Fever Service to HCID units. Hospital presenters might be cared for as interim within Welsh hospitals. ACTION: These protocols need further discussion at IMT 27/01/2020</p>
<ul style="list-style-type: none"> NHS Wales (HB and WAST update) – AJ/ NR 	<p>Working closely with WAST to ensure preparation and information is appropriate on NHS Direct Health boards Communication Leads and DPHs briefed and sent latest links to available information. Request that all requests for media be referred to PHW and no local reporting, in line with agreed UK wide communication strategy</p>
<ul style="list-style-type: none"> WG update (including Cross Government meeting 26/01/20) - ML 	<p>Cross Government not meeting over weekend. Have received a draft on process of escalating public health response. Is being reviewed by Welsh Government to consider implications for Wales and shared resources such as ECMO.</p>
<p>3. Strategic aims</p> <ol style="list-style-type: none"> Monitor and assess the risk to public health in Wales (as part of the UK response) Facilitate detection, immediate case management and isolation to prevent transmission in Wales (as part of the UK response) Develop a suitable diagnostic pathway for the novel strain Provide robust guidance and information for health professionals and the public in Wales (as part of the UK response) Facilitate Public Health Wales and Welsh Government communications and action (cross-government, NHS Wales and wider partners) 	<p>To be reviewed at IMT (27/01/2020) and revised / adopted.</p>

4. UK Risk Assessment - GS	Remains ' Low '
5. Legal and other issues – All	Standing item. Need to stay closely aligned with other administrations around modelling. Discussions ongoing to create a UK model.
6. Wider Partnership engagement (e.g. LRFs) a) Assisted departure of UK national from Wuhan City	Sent communication to LRF coordinators with links to latest public facing information. Stated this is NHS incident at present and can be strategically managed accordingly and doesn't currently require Civil Contingencies response (subject to review) Further information on the Assisted departure item is expected in coming days from central government.
6. Battle Rhythm – AJ/ All	ACTION: AJ/ML to review the rhythm of CMO briefing. ACTION: AJ/ML to consider involvement of wider NHS into the discussions.
7. Forward Look • Forthcoming meetings - ALL • Business Continuity issues - ALL	Subject to ongoing review.
ACTION LOG	
1.	ML/AJ Need to review the involvement of wider NHS Wales.

2.	Agreed to remain with reactive approach.
3.	AJ/ML to discuss and agree the submission of data to PHE/DHSC by 0900h each day
4.	NR/GS NR/ML Keep current position on FRSM under review and agree clear Wales position
5.	ALL Review guidance protocols need further discussion at IMT 27/01/2020
6.	ALL reviewed Strategic Aims 27/01/2020 and revised / adopt
7.	AJ/ML to review the Battle rhythm / including CMO briefings.
8.	AJ/ML to consider involvement of wider NHS into the discussions.