Message	
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From:	Orford, Rob (HSS - Directorate of Primary Care & Mental Health) [Rob.Orford@gov.wales]
Sent:	22/03/2020 16:18:10
To:	Atherton, Frank (HSS - Chief Medical Officer) [Frank.Atherton@gov.wales]; Jones, Chris (HSS - DPH -
	PopulationHealthcare) [Chris.Jones@gov.wales]; Gill Richardson (Public Health Wales -No. 2 Capital Quarter)
	[Gill.Richardson2@wales.nhs.uk]; Payne, Heather (HSS- DPH - Population Healthcare) [Heather.Payne@gov.wales];
	Kamalan, Chrishan (EPS - Equality & Prosperity) [Chrishan.Kamalan@gov.wales]
CC:	ArchiveGoodall, Andrew (HSS - DG - NHS Wales Chief Executive) [ArchiveAndrew.Goodall2@gov.wales]
Subject:	RE: My overview.

Thanks Frank, a useful summary of where we are from CW.

I'm not sure I agree with the end-game in-so-far as others see a more refined approach to the end of the affair, that is not captured in the current SAGE twin peak model of Imperial (1). Also I'm much more inclined to think we need a different narrative of 'maximum short term suppression, coupled with an aggressive but refined testing, isolation and release strategy'. And that this needs to be done as soon as possible...e.g. tomorrow (2-3).

In effect we need to immediately contain the disease in and within households by, as near as possible, eliminating all societal mixing – closure of all non-essential businesses, only one person allowed out to food shop or for essential urgent business. Signalling to also reduce household contact, hand-washing, cleaning surfaces. If this is done in a collectively agreed short period – with an defined end-point (e.g. when new hospital admissions from Wales get to lower than 5 per day and a scaled and detailed community testing and control method is in place – perhaps 4-8 weeks, if there is compliance).

The public should be made aware of what 'going vertical' looks like for hospitals (see Italy) and that they all have major role to play in winning this battle and that the line between success and failure is slight. Also signalling that after a short sharp period of intense containment – we will use the traditional methods of dealing with communicable disease outbreaks but on a larger scale and with a faster pace. Both elements of this would be hard and not guaranteed, but the alternatives of a swamped NHS or 18 months of suppression are not easy either.

Looking at the mutation rate of the current outbreak, whatever we do now we will likely need to do again in the future – hopefully, like flu, with mass vaccination programme(s)

Please feel free to throw stones at this proposed approach, I suspect we will hear more of this tomorrow at SAGE.... Rob

https://necsi.edu/review-of-ferguson-et-al-impact-of-non-pharmaceutical-interventions https://ourworldindata.org/coronavirus https://medium.com/@tomaspueyo/coronavirus-the-hammer-and-the-dance-be9337092b56

From: Atherton, Frank (HSS - Chief Medical Officer) <Frank.Atherton@gov.wales> Sent: 22 March 2020 15:26

To: Orford, Rob (HSS - Primary Care & Health Science) <Rob.Orford@gov.wales>; Jones, Chris (HSS-DPH-Population Healthcare) <Chris.Jones@gov.wales>; Gill Richardson (Public Health Wales - No. 2 Capital Quarter) <Gill.Richardson2@wales.nhs.uk>; Payne, Heather (HSS-DPH-Population Healthcare) <Heather.Payne@gov.wales>; Kamalan, Chrishan (HSS - DHP Public Health) <Chrishan.Kamalan@gov.wales>

Cc: Goodall, Andrew (HSS - DG - NHS Wales Chief Executive) <Andrew.Goodall@Gov.Wales> **Subject:** Fwd: My overview.

Good summary of UK strategy. Not for onward distribution please

F Get Outlook for iOS

From: Whitty, Chris <<u>Chris.Whitty@dhsc.gov.uk</u>>
Sent: Sunday, March 22, 2020 1:31:39 PM
To: CMO Scotland <<u>Catherine.Calderwood@gov.scot</u>>; Atherton, Frank (HSS - Chief Medical Officer)
<<u>Frank.Atherton@gov.wales</u>>; CMO NI <<u>Michael.McBride@health-ni.gov.uk</u>>
Cc: Van Tam, Jonathan <<u>Jonathan.VanTam@dhsc.gov.uk</u>>; Harries, Jenny <<u>Jenny.Harries@dhsc.gov.uk</u>>
Subject: Fwd: My overview.

dear Catherine, Frank, Michael

This is my draft piece setup out the strategic goal and tactical pillars and how they fit together. This is to help inform No10 thinking. Can you keep it within government for now as I have not yet had it fully cleared (although my SofS v happy for me to share with you).

Chris

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