

Official Sensitive – Cabinet  
Not for publication

COVID 19 – Core Group meeting:- Wednesday 6<sup>th</sup> May 2020 (08:30)  
Caerdydd 1 & 2 / Skype VMR meeting

Present -

**Ministers:** First Minister; Rebecca Evans; Vaughan Gething; Kirsty Williams; Julie James; Lesley Griffiths; Ken Skates; Eluned Morgan; Jane Hutt; Hannah Blythyn; Julie Morgan; Lee Waters; and NR

**Local Government:** Cllr. Andrew Morgan – Chair WLGA.

**Mantell Gwynedd:** NR

**WCVA:** NR

**Opposition party leaders:** Paul Davies MS; Adam Price MS.

**Officials:** Permanent Secretary; Andrew Goodall; Frank Atherton; Reg Kilpatrick; Albert Heaney; Huw Morris; Carys Evans; Toby Mason; NR; Chrishan Kamalan; Will Whiteley; Jo Trott; Christopher Morgan; NR; Jonathan Scourfield.

**Special Advisers:** Jane Runeckles; Ian Butler; Sara Faye; Clare Jenkins; Gareth Williams; Tom Woodward.

NHS and Public Health Update

1. The CMO reported that transmission rates remained fairly stable at lower levels, with the numbers of people being admitted with the virus plateauing. The time patients were spending in hospitals with symptoms had reduced. However, there were higher transmission rates in close settings, such as hospitals and care homes.
2. People were generally following the lockdown restrictions, but data on the latest transmission rates, which was around two weeks old, suggested that Wales had an estimated higher rate of infection directly generated by one case of 0.9, and was reducing than other parts of the UK. It was recognised that the more rural areas of Wales had been less affected by the virus.
3. Public Health Wales (PHW) had been preparing advice for Ministers on plans to introduce an effective test, track and trace programme.
4. The Group discussed the recent decision by the Welsh Government to test all residents and staff in care homes that reported outbreaks of the virus and noted that it had been difficult to obtain clarity from the UK Government on its policy in England. It was reported that the science had become clearer on the spread of the virus in closed settings. Testing was also available in the largest care homes, as they were at greater risk of experiencing an outbreak because of their size and footfall.
5. Further research would be undertaken on the spread of the virus amongst children. It was noted that the clinical review of the management of infected patients in the Aneurin Bevan University Health Board area had not yet reported.
6. The Group discussed the UK Government's policy on whether to quarantine people arriving in the UK and agreed that the CMO would share a note on the last advice from SAGE.

Commented [WW(-CD1)]: I didn't record this, but in terms of choreography I did note the CMO say "half time has reduced from 14-10 days". I think this relates to the trend rate of transmissions?

Commented [WW(-CD2)]: Can we double check? I didn't note the comparison with rest of UK but did capture the sentence as amended.

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7. The Chief Executive of the NHS reported that all Health Boards were continuing to report Green/ level 1 as an indicator of capacity and response.
8. Around 41% of acute hospital beds were currently unoccupied and available for use. There were 1,057 confirmed or suspected COVID-19 patients in NHS beds across Wales, which was around 30% lower than the peak in mid-April.
9. There were now 392 invasive ventilated beds in Wales and 236 were unoccupied. Of the 154 in use, two were closed and 87 had confirmed or suspected cases of the virus. This had reduced from 167 occupied and 98 cases the previous week. The number of beds occupied by confirmed or suspected COVID-19 patients had dropped from one in four to one in five.
10. Nevertheless, without the significant increase in bed numbers the NHS would have been overwhelmed by the COVID-19 cases.
11. The NHS was now moving from a period of COVID-19 critical planning and response, into a longer period where the health and care system must remain both prepared for any future peaks while effectively providing essential services and other high quality care and treatment for the people of Wales.
12. To maintain momentum and to ensure the system continued to focus its attention on the provision of a wider range of services a NHS Wales COVID-19 operating framework would be issued later that week.
13. ~~However, it~~ would be a narrow path to follow to avoid any increases in community transmission. The system would need to be flexible to ensure the delivery of essential services while ensuring that hospitals were able to respond quickly to any further peaks in cases of the virus.
14. ~~There was a conversation about the provision of cancer services were discussed, particularly in relation to~~ Operational data indicated that performance had been maintained, however there was a reported 70% reduction in referrals in some areas. It was acknowledged that only one in ten referrals resulted in a cancer diagnosis.

Commented [WW(-CD3)]: Just trying to weave in that AG said cancer performance has been maintained

**Local Government Update**

15. Cllr. Morgan reported that previous logistical issues relating to the supply of PPE had been resolved. Local Government was engaged with the Government on plans to recommence certain public services and Councils would also need to be involved in the recovery phase.
16. Finance was still a concern and individual Authorities were in the process of gathering evidence about the impact of lost income. This was complex, as for example, Councils had lost planning fees, which may be recuperated when individuals and businesses recommenced development work, but loss of revenue from leisure centres could not be recovered. Some Authorities were considering furloughing certain staff.

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17. More vulnerable people were now looking for help from Authorities, particularly in relation to shopping and medicines. It was noted that Councils had a large number of volunteers that could be engaged should there be a further increase in demand.
18. It was agreed that officials should arrange a meeting between the Minister for Health and Social Services, PHW and the WLGA to further discuss Local Government's role in test, track and trace.

**Contingencies / Resilience update**

19. The Director of Local Government advised the Group that the Strategic Co-ordinating Groups were operational and ready to stand up should present conditions change. Funeral Directors now had sufficient supplies of PPE and plans and facilities were in place to help manage excess deaths. It was still too early to take a decision on the capacity of storage facilities.
20. The SCG had established Recovery Co-ordinating Groups to plan for the recovery phase, which was part of the normal resilience planning process. However, the SCG would remain ready to respond to further peaks in the virus, whether they appeared during the summer months or late Autumn to early Winter. It was recognised that a peak around the normal flu season would put a great deal of pressure on public services.
21. A task and finish group had been established to monitor the flow of information around the supply and delivery of food parcels. The SCG would have a role with the introduction of test, track and trace measures.
22. Plans for the 21 day review of the Regulations was almost complete and advice would be submitted to Ministers later that afternoon. This review would be more complex as it coincided with the UK review of the measures in England and the fact that the Prime Minister intended to make a public broadcast on Sunday.
23. It was noted that the Police Forces and Fire Service were preparing for increased activity over the Bank Holiday weekend and it was suggested that officials should explore whether it was possible to push for more coverage in the UK media about travel warnings to tourist hotspots in Wales.

**Update on the work of the Voluntary Sector**

24. The First Minister welcomed **NR** of Mantell Gwynedd to the Group and invited **NR** to provide an update on the work of the Third Sector in Wales in supporting the Public Sector in responding to the pandemic.
25. So far 30,250 people had registered as volunteers in Wales and 6,912 had been deployed on COVID-19 related activity. This was in addition to the many others that were informally helping out in local settings. The formal role, particularly through charities, had relieved pressure on the NHS and other statutory services.

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26. Wales was benefiting from the existing infrastructure, particularly the network of County Voluntary Councils within each Local Authority area and the national framework put in place by the WCVA.
27. The Third Sector was working with the NHS, PHW and the WLGA, to provide support with health and social care matters, and charities were providing support to people with protected characteristics and the digitally excluded. The Sector was helping with the hidden challenges, particularly in supporting those suffering from domestic abuse. There had also been discussions with the Trades Unions on the role of volunteers.
28. It was noted that the WCVA had already issued a significant amount of grant aid from the Voluntary Services Emergency and the Third Sector Resilience Funds.
29. It was important to consider the personal safety of volunteers and whether they should be able to access PPE.
30. **NR** provided an outline of the work of Third Sector in North Wales.
31. The partnership working between the voluntary organisations and Local Authorities had been unprecedented and the response for the call for volunteers had been significant, with over 600 registering in one week. It would be important to ensure that the new partnership working remained in place after the crisis was over.
32. Many of the volunteers were working in their own communities and individual charities were supporting the larger housing associations to support vulnerable tenants and helping to avoid them from entering into the NHS or Social Care systems.
33. The Welsh Government funding for the sector had been valuable, in particular the small community grants.
34. **NR** summarised the next steps from a strategic perspective, which included planning for a dip in volunteer numbers as people returned to work and taking forward work to prepare an estimate of income lost across the sector. Overall, the message was that a collaborative approach had served Wales well, contributing evidence and working in partnership had all led to a positive volunteer response to the pandemic in Wales.
  - CMO to provide a note in relation to the latest SAGE advice on isolation for international arrivals.
  - Officials to arrange a meeting between MH&SS, WLGA and PHW to further discuss 'test, track and trace'.
  - Officials to discuss how the WG could push for more coverage in the UK media about travel warnings to tourist hotspots, particularly over the bank holidays in May.

CABINET SECRETARIAT

6<sup>th</sup> May 2020