## Message

From: Luney, Peter [/O=NIGOV/OU=EXCHANGE ADMINISTRATIVE GROUP

(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=AA913860B634454E9261F95DE07D7F3E-PETER LUNEY 234106]

**Sent**: 11/12/2021 17:11:52

**To**: Pauley, Bill [bill.pauley@finance-ni.gov.uk]

CC: TEO HOCS (JB) [hocs@executiveoffice-ni.gov.uk]; Boyle, Colum [colum.boyle@finance-ni.gov.uk]; Pengelly, Richard

[richard.pengelly@health-ni.gov.uk]; Pearson, Karen [karen.pearson@executiveoffice-ni.gov.uk]; Holmes, Jane

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Subject: FW: Scenario planing

Bill - to see below. Very much a first stage that we were planning to send a matrix out though the Cross Departmental Working Group to gauge cost and economic impact.

But if there is a quicker way to address it using what we already know that would be preferable.

## Happy to discuss

Peter

From: Luney, Peter < Peter. Luney@executiveoffice-ni.gov.uk >

Date: Friday, 10 Dec 2021, 12:24 pm

To: TEO HOCS (JB) < HOCS@executiveoffice-ni.gov.uk > Cc: Pearson, Karen < Karen.Pearson@executiveoffice-ni.gov.uk >

Subject: FW: Scenario planing

Jayne – we are working on the briefing for COBR(A) but in the meantime I have set out below the approach we are taking to scenario planning.

We spoke with Ian and Michael a few pre-Omicron weeks ago about the process needed for getting advice to the Executive. We don't think it can be a simple pathway approach in the way we used for removing restrictions - when we knew where we wanted to go next and we made proposals to health colleagues for CMO/CSA advice.

The situation is more about CMO/CSA saying that a situation is now developing which needs steps to deliver x impacts in y time.

Scenario planning will be helpful but we can't tie us down too heavily to precise trigger points which is what the Executive may be looking for. We might see issues emerging before we know all we need to about (a) Omicron and (b) the combined effect of Delta and Omicron being in the system. It is likely that it will be primarily driven by hospital pressures. If that is right, I think the scenarios are more about the suite of policy responses, for example:

- Scenario 1: the situation requires less social contacts (ie limitations on domestic settings, limitations on how many people can meet outdoors, more social distancing in settings)
- Scenario 2: the situation requires additional restrictions (ie table service, number and combination of households in hospitality, removal of music and dancing, limitations on family events
- Scenario 3: the situation requires the closure of some venues and settings (ie close contact, aspects of hospitality)
- Scenario 4: the situation requires more fundamental interventions (ie mandating work from home; regional/national lockdown)

There are also some more immediate issues to think about:

- What can be done in care homes and hospitals to reduce risks
- Is there more that can be done in education settings (e.g. bubbles; face coverings
- Are there any areas where we can extend certs to (ie unlicensed hospitality, close contact economy)

There may be some other elements worth at least considering.

- The qualitative aspects of mask wearing (over the nose, FFP2)
- A shift in certification to vaccine / previous PCR plus a negative LFT

A signal that vaccination criteria will require a booster for over 18s from the end of January (to encourage uptake)

We are developing a matrix to send out to Departments in which we will ask them to

- provide a view on the proposed scenarios;
- are any actions missing and, if so, from where;
- what is the financial cost to the Executive of each intervention (where appropriate)
- what is the economic cost of the intervention to the sector or generally.

Peter

## **Peter Luney**

The Executive's Covid-19 Taskforce - Covid Recovery & Strategy

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Subject: Scenario planing					