

Message

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Sent: 18/04/2020 8:50:46 AM
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Subject: Care homes - For limited circulation please

Hi Michael

Thank your for clarifying that some areas of the UK are ramping up their response to COVID in care/nursing homes significantly.

We had some discussion of our concerns at SILVER/GOLD yesterday.

I asked that HSCB and PHA Executives have an emergency meeting at 17:30 last night about the topic on the back of the English modelling paper.

We are planning to discuss the topic further at SILVER today and a wider meeting is being arranged for 10 am on Monday with Trust representatives.

[NR] has been working on some local modelling for me overnight. I have suggested that he works on the presumption that all respiratory care home outbreaks are COVID. I would be keen, with your support, to get Ian Young's group involved on an urgent basis.

We currently have around 70 care/nursing homes with respiratory outbreaks. The English model suggests that we may have around 360 (say 90%) of our 400 care/nursing homes with outbreaks in the next 30 days. The model's presumption of 30-50% mortality is concerning. We are seeking to plot a trajectory of the number of care homes likely to be affected over the next month if the English model applied here. It would pose a huge strain on the system, primarily from a staffing perspective (nursing/carer/cleaner). We are exploring the extent to which Trust may be able to support the sector, as hospitals are only at 50% occupancy and it should be possible to free up staff to help the care/nursing home sector.

I believe that all directors of social care and nurse directors were informed of our concerns last night by [NR] and Rodney.

Sloan and Margaret are thinking about GP/communication actions that might help.

RQIA and [NR] team are seeking to identify care homes that will require the greatest support in the short term, as we are hearing that some are very stretched.

We are continuing extensive public health input to care/nursing homes where cases have been identified. The team are considering measures such as those being implemented in ROI.

I have a speculative hypothesis that even if 99% of care home staff are applying good infection control, but 1% are not we could still have a major problem.

If we hypothesise that we have 10 'super-spreaders' working (moonlighting) across a lot of homes/domicilliary settings, we could get the exponential growth pattern of spread that the English paper suggests is happening in England. Simply expressed, if 10 presymptomatic/asymptomatic carers spread the virus to 10 people, and are working across 5 care homes, up to 50 care homes could be be seeded with infection within one week by just 10 people. If repeated, that should be enough to create an exponential growth in the number of care homes involved. Others may be able to develop that idea further. (I think someone in Frank's team is into autonomous agent modelling.)

I would hope to update you after SILVER.

Best wishes

Hugo

Sent from my Samsung Galaxy smartphone.