

EXECUTIVE OFFICE - OFFICIAL'S MEETING NOTE

TITLE/ORGANISATION:		TEO	
PURPOSE:		FM / dFM pre-Executive meeting with Minister Swann, CMO and CSA	
DATE:	1 December 2021	NOTE WRITTEN BY:	Jane Holmes
Venue – Online			
LIST OF ATTENDEES:			
FM, dFM, Minister Swann (MS), JM Kearney, JM Middleton, Jayne Brady (JB), CMO, CSA			
KEY POINTS			
JB – further to meetings over the weekend and recent developments, useful to get an update on health position in advance of Executive.			
dFM – invite update on where we are in relation to the new variant, the R paper and impact of Omicron (O) if known at this stage.			
MS – correspondence over the weekend was busy once WHO designated Omicron as a VOC. Currently working with PHA in relation to a small number of suspected cases. O is subject of an ongoing conversation between all four health Ministers and is being taken seriously. Learning from what happened when saw Delta (D) emerging and how quickly it became dominant.			
CMO – arrival of O is not good news and likely to have unfavorable impact in terms of transmissibility; do not know what extent immune-escape from the vaccine; tactical approach is to drive down community transmission; to increase adherence; and for public behaviours to be consistent with public health advice. Even though hospital pressures have fallen, still at high level and do not want a D wave with an O wave on top of that. Have time to make further progress on reducing the D wave			
CSA – R paper.			
<ul style="list-style-type: none">- Cases – reached peak numbers last week and slightly down now. Split in that seeing largest no. of cases in 0-11s, continuing rise in all age groups 18-50 and slight fall in over 50s. Result of a balance of vaccination programme progressing and increased mixing.- Entering period of increased mixing pre-Xmas and will need to see impact of that by pushing vaccination program at same time.			
Hospital pressures – better than expected. Most are >50s with a fall in admissions in that age group and hence overall due to the impact of the booster programme and public response to the messaging from Ministers.			
Rising admission number in <50s aligned with correlating increased cases in those age groups.			
Hospitals worked hard to improve hospital flows and discharges and some evidence of reduced length of stay there.			
Omicron – SAGE met and are nervous about impact of O based on what is happening in South Africa. Intl travel measures intended to delay introduction and allow time to drive down D cases. No confirmed O cases here, as is the case in Wales but there are cases in E, S and likely Rol. Matter of when arrives, not if, and how quickly will become established and the impact.			

FM – good work on patient flow and the booster programme is working well. Positive signs there. Right to be cautious with new variant but there is cause for hope and need to maintain that balance. When schools issue flagged up, messaging about being safe was the right one to help keep some normality without complacency.

Rol announcements to do with PCR testing and UKG – were there discussions with Rol around what in place? Will NI become the backdoor for people travelling? Minister Swann - No communication with Rol on this. FM – this means there is a loophole in CTA travel to avoid checks.

Criteria for mandatory certs not proceeding as was brought in because of hospital pressures so what is the trigger point for certs not happening? Min Swann – conversation by the Executive. Very high transmission level for D and need to see impact of O.

FM – high level of testing peaked last week – with this, what is the sense on effectiveness of booster and naturally inquired immunity, O aside, to give us confidence? Min Swann – seeing test positivity of 7.8%, WHO says if >5%, virus is out of control. The basket of measures is important.

CSA – relationship between testing numbers and behaviors. Test positivity is the key factor. Start of school term saw huge rise in testing and test positivity dropped at that time so no increase in community transmission. Case numbers and positivity are just falling now so slight decline in community transmission. In terms of O, too much uncertainty at the moment. High level of confidence it will transmit more easily in an immune population, which we have. Unsure if because of increased transmission or reduced immunity. Larger fall in hospital admissions than case number which confirms vaccination more effective against severe infection. Hopeful vaccination will protect against severe illness.

FM – what is the residual number left who have not contracted Covid or not vaccinated. Adults – 90-95% will have evidence of antibodies but does not mean they are immune. Majority of those being admitted to hospital aged >50 have been vaccinated. In the absence of ongoing vaccination is likely people will get repeated Covid.

dFM – further period of uncertainty. Sage advice is right to use time wisely before O becomes dominant. D became dominant v easily and could happen with O. Need to limit community transmission. Is what we are doing now enough? Booster rollout is welcomed. Particularly concerned about the 0-11 category.

Minister Swann – re what we are doing, England has re-introduced what we are already doing. Need to reinforce what we have asked people to do already, e.g. face coverings. Scotland, Wales and Rol using same step we are to reinforce what doing.

CMO – useful meeting of the ECT yesterday and discussed what more could be done on adherence. Anecdotal can see a change in some behaviours. Need a population level movement to increase face coverings, WFH, reducing unnecessary contacts, etc. Need to be prepared if some of the concerns re O are realized, that current measures may not be enough but need more information. Need to do more planning.

CSA – current messaging if good adherence and enforcement, that would be sufficient. If O spreads rapidly and has sig ability escape vaccine, unlikely current measures will be sufficient. Existing measures are adequate to ensure downward transmission of spread.

dFM – joint message from us is important. **EIS to consider what else could be done to get the message out to emphasize how serious and change people's behaviours.**

Rol – encourage Min Swann to engage with Rol proactively. MS - this did happen on Friday evening.

RS – this is a global issue and everyone is being asked to look at their behaviours.

FM – in terms of booster, happy to do media when get booster. Keen we are out pushing the booster uptake. Min Swann – real push on the booster programme ongoing with Trust centres re-opening. Yesterday 17.5k booster vaccines in the previous 24 hours on top of other vaccines.

JB – at ECT, suggested should prepare potential lines on Omicron.

FM – messaging around how the booster is having a benefit to hospitalisation rates and more can push out the connection between getting booster and taking other steps, such as wearing face coverings, makes a difference.

CMO – point made by Min Swann in the Assembly and by others re importance of hope as well as thanking the public for their individual ongoing efforts makes a difference balanced with cause for concern, cause to be careful but we know what works.

dFM – this needs to be a weekly conversation as the O situation develops.

Actions	Person Responsible
<ul style="list-style-type: none">• Consideration of messaging to emphasize how serious the current position is in relation to Covid and influence behaviours	EIS

Jane Holmes