4-3-21

FM Intro

FM Minutes 25-2, 1 + 2 March
Agreed? (Yes)

DOS amendᴹ -11-2-21

DOS Agreed Bill wd complete by Summer - I said I wd advise Committee deadline — needed for Judicial Review affidavit - need clear ref in Exec mins - I circulated timeframe. Important to get right -

FM 25-2, 1+2 March Agreed.

DOS request — 11-2 - under consideration

DOS Need before Thursday.

COVID update.

DOH Slight increase - inpatients yesterday. Deescalating central approach to ICU - regional centre for most critical cases.
Care homes progressing well — 23 outbreaks
556,000 first doses
47(?)000 second doses.
Opened 60+ cohort for vaccine bookings.

DCSH R - reduced from last week
R - hosp admissions - slight increase
- time lag.
ICU ~~R~~ occupancy starting to fall
~~Pos~~ tests - falling.
Positivity - 5%.
ONS Infection survey - 5000/6000
people in NI every 2 weeks
Feb 1 in 192 had COVID
Average rolling cases per day
- flat line R=1.
Local Govt districts - most have
fallen - DCity/Strabane - slight rise
Mid Ulster still highest.
Tests per 000 of population - tailing
off.
Flow into hospital - on its way down.
Occupancy in hospital - was 800, now
about 300 - back to levels of 1st
wave.
ICU - reducing, will reduce further.
R - hosp adm - approaching 1.

Mobility - more retail, recreation,
transport, work than rest of UK,
Fewer people staying at home than
rest of UK.

DOF Comparative figures for UK - any for
~~NI~~. South

DCSH Lower than South

DOS People admitted with COVID / because of COVID - comparative figures?
Help understand - filter out info.

DCSA Complicated to get answer - figs only show reason for admission when they are discharged.
Manual system - TRENTS - suspected COVID / confirmed COVID - but cd have any respiratory infection. Don't distinguish - COVID main or secondary - hospital has to treat as COVID in terms of isolation etc.
Cd do retrospective view

DOS Gen. population - going into hospital - isolation etc depends on COVID test - impact downstream - liver cancer / collapsed lung
Desegregate out - primarily treated for COVID OR treated for other issues but with COVID added on
Manage down the line - cases dropping but still showing as COVID in hosp figures

DCSA DOS say - hosp figs as evidence of severity of pandemic.
We do have community incidence - reliable indicator of epidemic, good proxy for epidemic - reliable for modelling.
Cd investigate individual records

9 show – lab tests/hosp computer matched in real time – comfortable it is a good indicator

DOS Helpful
If you are content it is best proxy, fine
Measure risk of pressure for health service.

DOH Standard measure across UK to measure strength of pandemic.

CMO Classification / nos – some calculated, some [ ]
× Can provide further detail – help to Mins for answering questions.

DE Not a replacement for [ ].
Nos moving lower – R rate less significant.
ONS figures – lower they are, small variations cd give false picture.
Robust proxy up to now – will robustness diminish?
Vaccination linked to age – COVID will move to lower cohorts – longer term impacts – age profile of those affected.
Road accident – asymptomatic COVID?
Test detail of what is there – driving public policy.

DOH — Valid ~~point~~ point.
Lower no of cases –
10,000 COVID Tests yesterday - communit
Lot of variables
Front line health staff - younger age
profile, sick for longer - fighting
virus..

DfE — Wonderful to see R rate coming down
Interested to know - studies on
transmissability, impact on older
people - NI to publish info / studies

CMO — Work ongoing - will publish in few week
fall in mortality - care homes, need
peer review
× Will share with Exec in first instance

Action log

FM — Circulated

CCG

FM — Circulated

COVID Manage[M]

FM — Workshop – 10-3-21

HOCS — Part of work on 2nd step — short/medium term recovery, wider statutory commitm - NDNA, PfG.
Map priorities we are facing,
- Budget, Civil Service focus, come out of delivery of schema.
What is system capable of delivering, financial delivery, DfE strategy.
= Ernst/Young - will help guide Ministers
Agree process for setting priorities.
Will send more details when available.

DfE — Contacted by lot of people - P1-3 - in school for 2 weeks, then out, then Easter etc.
Childrens' lives turned upside down.
Consider - P1-3 stay in school once they go back.
Parents need to make arrangem
Struck by issue - difficult to explain to small children.
Expedite process?

FM — DE + DoH were to discuss

DE — Accept -
Paper for Thurs next week - give certainty. Go directly to Exec on points.
Difficulties for P1-3. Need decision

quickly to give time for planning.
Wider paper on Thursday.

DOE Away Day next Wed – my diary is full – not aware of event.

Pathway – only launched, but then undermined within hours. Other Exec Min shd have taken part – but v difficult when doc shot in the knees.
Narrative in media — not agreed Exec position.
Twitter report – faster moves on Ed.
Object to my position being assumed without discussion.
Don't want to do media re pathway –
x wd be asked about DUP views – divided Exec rather than agreed coherent focus.
Said – agreed, best way forward. I wasn't asked to agree faster way forward on Education or faster pathway.
V undermining – not an accurate reflection of my views in Exec.
When we launch Recovery or way forward always someone 'overboard' – excruciating for public.

DFI Agree with DOE.
Workshop – talked about resetting – wd like to discuss how we will reset relationships.
Increasingly frustrating to be at table

to rubber stamp.
Shd be treated with respect.

FM — Shd all be treated with respect.

DSS — Want answer – was not advised of date next Wed – busy diary. ⇒ Am I the only one who wasn't notified?

HoCS — Spending / finance issues.
2 hour slot
Initial piece of work – how to prioritise spending.
Future – socially distanced workshop.

DFC — Only heard date today as well – not a conspiracy.
My diary busy as well – but important will re-organize diary.

International Travel. – update.

FM — Sp Note.

Business Support

DFE — Paper to alert – type of scheme involved
2 schemes – hairdressers, not rateable place; also supply chain.
Schemes v generous – better than

England.
Got 10,200 to date - additional £2000 to end March - some companies - lot of lunch.
Setting out financial risk - agree to extend scheme?
Large Tourism/Hospitality scheme - top up scheme - hotels which didn't get initial support - end on 31 March.
- Agree Ministerial Direction?

DOF - LRSS set up to pay out as long as there are restrictions - why one scheme to end on 31 March if other schemes stay open?

DFI Written response - noted DFE concerns re financial risk.

DFE When we launched scheme, advised of financial risk - want colleagues to understand risk
Want scheme to continue while restrictions in place - current set to end March - review on 8 March.
Continue top-up large hospitality.

DOF DFI comment - risk.
Aware since start of pandemic - depts have to operate at risk. Auditor Gen recognized need for this approach.
Manage risks as well as poss.

FM Agree recomm? Yes

Irrelevant & Sensitive

City / Growth

Irrelevant & Sensitive

Irrelevant & Sensitive

CO Derry Airport

Irrelevant & Sensitive

Irrelevant & Sensitive

MOB

Police, courts etc.

Irrelevant & Sensitive

Irrelevant & Sensitive

Irrelevant & Sensitive

Brts

Irrelevant & Sensitive

DOF

Have sent note to Mins - headline issues R Sunak.
Furlough - extended
Self-employed scheme - grants available ind newly self-employed [ ] 6 months.
Corp Tax exemption - Housing Exec
Extra £100+m - some COVID
Help to meet pressures for depts.
£4.2 m - need SOS confirmation - cd add to monitoring round.
Schemes - some vague - Community £11m

- ESS/ERDF -apply through Whitehall
Levelling Up - will have to apply through Whitehall - awaiting detail/prospectus.
Community ownership - June
Shared Prosperity - awaiting.
Direction of travel - bypassing Exec to administer funds (same in Scotland/Wales).
Shd be NI Exec - but devolved admins being bypassed - resisting.
Alcohol, fuel duty
25% - larger businesses - Corp Tax(?)
- 2023.
Note drafted - Exec concern - funds outside Exec control. Trying to find out how is being handled in Scotland/Wales
Rate relief - England is rolling forward - 12 months.
Will bring proposals to Exec - COVID.

FM Welcome - rate relief, COVID funds.
Town fund - Barnett consequentials?
Townsfund - set up arrangem similar to High St Taskforce?

DOF No prospectus yet - may not want to give us fund to make own decisions/own authority - bidding process to Whitehall - may be working to their priorities

FM Get more clarity soon.

DOF — Up to £900m (?)
See if schemes we cd set up.

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dPM — next meeting
9-3 - EN Exit
11-3 - COVID
16-3 - Review
10-3 - Workshop.