20-12-20

9.10 pm FM — TKS – week from officials Sunday, close to Xmas. HOCS to pass on

New variant COVID 19 Transmitting - fast pace

Sp Note.

FM — DOH – General paper

DOH — TKS to all officials - DOH CMO/CSM. Meeting – CDL, DMS.

Variant – came to attention on Tues. Detail in paper 4 cases in NT Para [7] of paper – sample being analysed – pre can't be confirmed at this stage Concern – transmissability. Seems to be no difference – profile, mortality. Decisions we took on Thurs – more stringent than Tier 4 England – want further – curfew.

Xmas bubbles Schools

messaging

Engage[m] with DE re return at start of year (schools).

FM CMO / CSA.

CMO Nothing to add ☺

FM Xmas bubbling
Beginning Dec - gave clear message. Things have now changed last night - message - 1 day if poss.

DOH Smaller gathering, less opportunity to spread virus.
Different place today - variant.
Message - 1 day, useful.
Put into regs?
Travel from GB curtailed.
1 day instead of 5 - preferable from one point of view.

CMO Mental health, isolation
Health protection - as small as poss, as close to home as poss, 1 day instead of 5.

FM People working on Xmas Day - may have family day on another day.

CMO — Risk the same no matter which day chosen – but one day only.

CSA — Balance of risk has changed since Thurs.
Advice – shorter – weight has shifted – need stronger guidance/ regs – shorter bubble time – weigh up mental health.
Bubble – one day, only one bubble – day can vary, but only one day, one bubble.

DFT — Appreciation for officials' work.
Balance of advice – shifted.
Modelling – change?
4 pass – variant
Changing because of variant or because of R rate?
Young people more susceptible to variant?
Variant – more of a threat?
Restrictions on families – given more time at Xmas – now reducing
Shortening self-isolation
Behavioural issues – understanding

CSA — Balance of risk shifted – emergence of variant, uncertainty re prevalence in NI
More easily transmissable – 70% more transm.

Wd have upward pressure on R
– 0.4 to 0.9 extra.
Impact in Sth + East England.
Rapid increase in cases –
predominant form of virus.
Uncertainty – how prevalent in NI.
Need time to be sure.
Rapid increase in cases ROI.
[1.6] cases in short period of time.
Inter-generational mixing –
Xmas
Balance of risk shifted in past
4–5 days.
Younger people, school children
– increase in S/E England.
No evidence – variant 'targeting'
young people – more transmissa
virus
Reduction in days ~~self-isolating~~.
See friends / family 2 days /
1 day – difference.
May not be infections Day 1, cd be
infections by day 2 – reduce days
reduce risk.
Reduction in self-isolation days –
behavioural + biological reasons
No evidence – different PR variar

DOI TKs – officials.
Bubbles – greater risk,
5 days
Change bubbles now – how wd

work for people who have already travelled - telling them to leave?
Restrict bubble - pick one day -
how to enforce / control - advice / guidance? How wd it work?
People asking - allowed to travel?
Can't travel from Tier 4 to Tier 3, but can travel to NI.
Travel restricted in NI, but not between NI / GB or ROI
What point - 1 day of bubble, arrive in NI & mix elsewhere.
GB travel restrictions?
ROI - no travel from GB - 48 hrs
Also Scotland etc?
Are we going to do the same?

FM Travel - Tier 4 - regs - not allowed to travel, Tier 1, 2 + 3 OK.

CSM Need to be pragmatic - people who have already arrived, staying in household - don't mix with others.

CMO Agree

DOF Some people about to travel - tell them not to come. People from outside - in 5-day bubble; if live in next street, can only see parents one day

CSA — Advise people not to travel - political decision.

DOF — Insurance
Concern - create disparity - someone live in house for 5 days someone local - only a few hrs - person from Tier 2 etc - higher risk.

FM — KP - UK Govt - advice not to travel out of area.

dFM — stop people coming into NI - 1967 Act (draconian).

dFM — Need travel discussion - public health emergency - cancel flights 48 hrs - review again for Tues meeting.

FM — ARO - R = 1.6 in ROI - no travel from/to ROI - consider

DFE — Exec - legal powers to do this - need advice - travel to recompense airlines / travellers.

LPP/LAP

LPP/LAP

CMO Variant already in UK, also other Euro countries. - if you look, you find.
Restrictions on travel - small impact.
Bigger impact - reduce contacts.
NI - dependent on international access - drugs, medication - aware of unintended consequences.

CSA Agree - v little doubt - variant already in NI - risk of additional VBMs from QB etc - small.
Less than 1/100 visitors will have VBMs, mostly not new variant.

DoJ Option to allow relevant workers - ~~##~~ ROI stopped passenger travel,

not freight.
Dover - closed - French upping ante - BREXIT.
Issue - messaging - why allowing people to come in with loss virus, while not allowing people here to visit families? Not comfortable.

DS Messaging - unless journey necessary
Additional transmission - incubation period longer)
Evidence - airborne transmission different view of face coverings?
Why transmitting more?
Greater prevention needed?

CSA Unknown - why increased transm
Protein spikes on virus different - alteration in spike - modified virus sticks to airways more, more likely to bind to cells.
Doesn't appear to cause more severe disease.

CMO Vaccine - no info to show vaccine is less effective against variant.

DOF Travel - CMO/CSA say - less of an issue/risk. Scotland/Wales etc have banned travel to avoid spread of variant - why NI

different view?. NI travel from GB could end up coming through North - Dublin won't allow in - access by ferry/planes - will come to part of island with no restrictions.
Don't understand - other jurisdictions say travel major issue, why not NI?

CMO Suspect variant here, don't want to see more
CSA - [ ].
Any advice - don't travel, [ ]
Political aspects.
In terms of CMO/CSA advice - not saying travel is of no consequence, but wd not add

CSA Risk - relatively small, not zero risk. Can't comment on other res jurisdictions. NI - 6000 cases, only [23] referred to travel to UK.
Wrong to give impression - no risk from travel. Scotland - lot of travel from England.

DF Said - relatively minor for NI.
Why did other jurisdictions move so fast to ban travel.
Why are we not preventing people

from travelling here for Xmas.
S/E England - if people travel here, will put hospitals under strain.
Stop travel until we get handle on nos travelling / contain / prevent from coming here.

FM Tier 4 - prevented from travelling
Tier 1-3 - guidance - stay local.
People - nervous re travel ban,
supply chain - manufacturing [illegible]
People looking for compensation if we bring in travel ban.

DOF Goods, workers can travel.
Bigger cost = risk to health.

dFM DoH - discussion with S Donnelly ROI
Dublin announce re travel - list of exemptions.
Situation so severe - don't want to be funnel for all travel to come on to island.
48 hrs - allow HSE to work with Taskforce - come back for meeting on Tues.
Concur - Public Health logic - travel ban.

PM — CMO/CSA advice – small risk.

dPM — Need intervention 48 hrs – bring further into Tues.

DoH — LPP/LAP

Scotland / Wales – Scottish police – can't enforce.
People can't travel from Tier 4 – follow guidance already there:
Tier 1–3, advice – no essential travel.
Bubbles – only one day.
Tier 1, 2 or 3 [ ].
TEO engage^m with Cabinet Office

Messaging – non-essential travel.
Not sure how 1967 Act usable for 48 hrs
Compensation issues
Unintended consequences.
Take 48 hrs to see if we need to engage 1967 Act.

dPM — For those 48 hrs, people will travel to Ireland via Bfs/Derry.

LPP/LAP

LPP/LAP

KP Scotland – in regs.

FM What legis?

KP Will check.

FM DOH to take views on whether 1967 Act cd be used – DOH/ Public Health issue – to give recomm?
Put in paper.

DFE CMO/CSA – not saying – no risk; but small impact – most people – no COVID, even less with varian

CMO Correct.

DFE Why move so quickly to use 1967 Act?
Travel – England/Scotland/Wales – lot more people travelling – land border
Do we meet threshold (MS) for travel?

Ban travel – legal/compens-ation issues.

LPP/LAP

LPP/LAP

London - don't travel out of TB&LH.
Check - exact ramifications of using legis to ban travel from other parts of UK.
× Recognise - fluid, fast situation.
Indication - threshold met for use of 1967 Act?
× Legal advice on ramifications of using act?

DASERA 2 significant issues
- NO RECOMMENDATIONS FROM DOH

LPP/LAP

Getting nowhere
Not capable of closing borders in UK as UKA - all borders.

LPP/LAP

DOH

LPP/LAP

Scotland / Wales – Xmas Day only.
Opportunity for us to allow another day.
ROI – have moved back to 28 Dec – close hospitality for New Year.
Hard ask.

PM If you have split family – kids to one parent each day?
Make 2 days?

DOH Specific ref in regs already – split re households.

JMK Only under 18s – some young people wd have to choose parent.

Advice / guidance – not be over-prescriptive.

DfE Agree with JMK / DfT.
Have imposed restrictions on family life – longest + most severe in UK.
Asking people – another 6 weeks.
But also saying – not doing what we promised Xmas.
Social contract – families – allow 2 days – sets of parents.
Stringent measures – people won't pay heed.
Need to think carefully re social contract.

SMC — Some families deciding not to see people – planning for bubbles.

DSF — Confirm – children / parent – part of both households.
Issue – some people sensible / selfless. Some not – parents organising parties.
Instinct – let people make own decisions, but lot of people not sensible.
– 2 days at Xmas / travel.
Lot of people with travel QBANI – not available to inform discussion?
Will follow rules – but lot of people will not.
Frustrating.
Need to be robust – regs.
Could not predict mutation of virus.
Need to be realistic – virus spreading.
Lot of recklessness, can't leave to people's better judgement.

DOH — Down to 1 day to reduce risk – then go for 2nd day.
5 days too long – made contract in good faith

DSF — Relative risks – only 1 day Xmas

but leaving airport open?
Why NI useless - Nolan shows not over.

CMO 2 days riskier than 1 day, may be incubating virus.

DCS Quantitatively - info - travel)

CMO Households, indoors, longer time - higher risk of transmission than inward travel.

CSA Not enough data. Both connected to risk. One day less risky than 2.
Minimise no of days, reduce nos of people travelling.

DAERA People who obey regs will obey new regs, rest won't.
CMO/CSA - no numerical info.
We keep breaking promises to public.
Outset - S/E England.
Things have not altered since Thurs, shouldn't be meeting tonight.
People who spread virus will continue to spread - we are punishing people

FM — now clear – illegal to travel from Tier 4 – shd not be allowed. Any tonight – advise – only essential travel from Tier 1–3.

DOF — What will we do – 1967 Act?

FM — Tiers travel advice – v clear. Bubbles – more days, more risky – move to one day, 2 days, or stay as is?

dFM — Go with least / worst – 1 day, flexibility for workers (working on Xmas Day).

FM — DOF – one day.

— — DAERA – wd prefer 2 days out of 4

DFE — Agree with DAERA – let people know we understand pain.

DOF — 1 day proposition likelihood of travel – 1 day deters people

DOH — One day / flexibility.

DE — Prefer 2 days – but live with decision.

DFC — 1 day - flexibility

JWL — 2 days - young adults, need flexibility.

JMK

DFI — Uncomfortable, accept health advice - 1 day, flexibility need clear messaging.

FM — Would prefer 2 days - young people, hard life stories.
Health advice - Xmas Day, Boxing Day alternative.
Abide.

FM — Travel - TIER 4 - no travel in/out.
Rest of QB - stay local, only essential travel.

AFM — OK for holding position. Want DOH proposition tomorrow.

DOH — Recomm or advice)

AFM — Recomm - public health issue.

DOH — Need to consider financial implications.

PM

LPP/LAP

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DoH Change to household bubbles - regs.

PM Police knocking on people's doors on Boxing Day?

DfE In regs - human rights issue?

LPP/LAP

SML R rate - we don't have any info on how these actions will impact on R Rate.
Advice - no way to quantify impact?

DoH Weren't able to measure impact of 5 day relaxation - political decision.
Now reducing risk - reducing days

DFE — My understanding - we know risk of R rise to 1.[5] - balance of benefit to society.

. Travel - small impact - most people - no risk.
Human rights - need to be proportionate.

CSA — Modelling - previous paper - estimate R = 1.4 - 1.8 - result of relaxations now, not Xmas bubble.
Said - cd not quantify impact of Xmas bubbles - mixing generations - more hospitalizations, but unpredictable - depends on how people behave.
Can't put no. on impact of reduction in bubbling.

FM — HOCS/KP - understand issues to take forward?

HOCS — Will check with team
- transport
- regs
- messaging - stronger messaging ready, prep for changes to bubbling.
Work for next few days.
Also EH Exit - punitive

impacts, Dover etc.
Factor in, over next 24 hrs.
Clear on priorities.

dFM School issue – more discussion DE / DOH.

DE Try to create consensus – good conversation DE, DOH, CMO + CSA – continuing.
Resumption not as normal (DOH)
Can't replicate situation pre Xmas
Need range of mitigations in place – work with DOH – ongoing interventions.
Potentially – may need greater interventions as situation goes on.

FM DOH content with work ongoing.

DOH Summarise what we are saying?

CMCH Travel – rejig states
Change to Xmas bubbles – 1 day 23 / 27
No travel from Tier 4, only essential travel other Tiers

DOH Mention in media – work re travel legis?

FM No – wait until work by HAG, DOH

etc is done.

DOJ Mention work is being considered.

FM Urge against sharing info – SF in ROI already briefing.

DF

LPP/LAP

Accurate recording of discussion. Also – say health / DE looking at schools.
Haven't dealt with curfew issue. See no problem with saying publicly

DOH Taskforce to look at travel,

DOF Say publicly – looking at travel

FM Also include ROI.

dFM Situation changing – keeping all issues under review.

CMCN Factual statement
Need Exec spokesperson to do GMM.

PM Will come back to EIS re GMM.