Novel Coronavirus Covid 19 – UK Preparedness

COBR (M)

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5 March 2020, 15:00pm

Chair: PM

Summary Note

CMO: Will need to trigger Delay within the next week or fortnight.

1. Self-isolation 2. Home quarantine 3. Cocooning (need to decide in next two weeks)

Based on new data overnight and modelling.

CMO: any time beyond 2 weeks to start quarantining is too late. Now have 5 people and 1 death without foreign travel.

Cocooning of elder people is difficult. They have to stay in it throughout peak and afterwards. Risks of loneliness. Greater impact on death.

These are measures which are clinically appropriate. What is the socio-economic impact of doing this? Triangulation of themes. Have to balance against social and economic costs.

If you cocoon everyone over 60 compared to over 80 different

SCHOOL CLOSURES: not now. No strong case at present.

MASS GATHERINGS: don't stop. No real case.

How fast can we get package of recommendations ready?

Progress report for COBR(M) on Monday.

In terms of communication with the public – increased morbidity –testing what is said will be done. Maximum transparency. Why this is science led?

Not going to announce measures today. Hold that in reserve. Public have confidence in measures being taken. Need right communication, dos and donts.

55% to reduce the peak.

CMO: don't link change of status to death.

PM: not yet at the stage but close to it.

Don't overreact, measures taken too early are wasted. Need to announce death in a timely and proportionate way. Avoid raising public concern.

Will need to action in 1-2 weeks. PM: Measures are draconian and need packaging.

Have to tidy up what phase we're in. Engaged in preparations for Delay. Decide when to bring forward measures.

CMO: elements of Contain are also in Delay.

Still in containment phase but are actively preparing for delay.

2. UNDERSTANDING IMPACT OF RECOMMENDED INTERVENTIONS – Sir Mark Sedwill

3 interventions: 1. Self-isolation if symptomatic, 2. Quarantine for whole household if one member is symptomatic,
-50% compliance rate based on evidence.
3. Cocooning for vulnerable i.e. elderly or on flu register

Which actions are enforceable or guidance?

Would there be compliance with whole household if it affects bread winner? Is no 2 the difficulty? (likely to be poor compliance rates)
Greater chance of individual catching if quarantined.

What is cohort and what do they have to do? Risks associate with staying at home and say suffering injury.

Modelling done on over 65s but benefits increase for older age. Could set this at 75. If it can be done, better to do in regions e.g. Norfolk if threshold reached.

Keep people inactively disengaged for as long as possible. DAs involvement sought in the morning – how can social care be maintained?

Voluntary sector and critical pathways. Challenge to transition within 1 week.
Children will be great source of support for elderly and need to be in loop.

Families in different circumstances need to be reflected.

Planning assumptions should be RWCS.

Cocooning compliance not that important.

Social wrap around. How to make effective. What to do if person has a fall?

Powers to quarantine but not for cocooning.

Has to be a cross government initiative. Need case studies.