Thirteenth meeting on Wuhan Coronavirus (Covid-19), 5th March 2020
Held in 10 Victoria Street

Summary

1. There are currently no scientific grounds to move away from containment efforts in the UK.
2. There is epidemiological and modelling data to support implementation – within 1-2 weeks – of individual home isolation (symptomatic individuals to stay at home for 14 days) and whole family isolation (fellow household members of symptomatic individuals to stay at home for 14 days after last family member becomes unwell) to delay Covid-19 spread, modify the epidemic peak and reduce mortality rates.
3. In addition, there is scientific data to support implementation – roughly 2 weeks later – of social isolation (cocooning) for those over 65 or with underlying medical conditions to delay spread, modify the epidemic peak and reduce mortality rates.
4. SAGE agreed an updated set of reasonable worst case scenario planning assumptions for Covid-19.

Situation update

5. UK surveillance of intensive care units has identified Covid-19 cases. Not all of these have had overseas travel or contacts, suggesting sustained community transmission is underway in the UK.

Behavioural and social interventions

6. SAGE concluded that the UK remains in the containment phase of the epidemic.
7. HMG should plan for the introduction of behavioural and social interventions within 1-2 weeks to contain and delay spread; precise timings depend on progress of the epidemic.
8. SAGE advised that the science supports a combination of case isolation and whole family isolation.
9. The science supports that a third intervention has epidemiological advantages: to socially isolate those in vulnerable groups (the elderly and those with underlying conditions) approximately 2 weeks after these initial interventions.
10. If implemented in combination as modelled, this set of measures is understood to most effectively delay and modify the epidemic peak, and reduce mortality.
11. To be most effective, these measures should be implemented early in the epidemic and publicly adhered to throughout the peak period of infection.
12. The modelling undertaken assumed considerably less than total public compliance for these measures (e.g. 50% compliance for household quarantine).
13. SAGE discussed the relative merits of regional versus national enactment of these measures: this issue will be explored further over the next day or two.
14. SAGE agreed there is no evidence to suggest that banning very large gatherings would reduce transmission. Preventing all social interaction in public spaces, including restaurants and bars, would have an effect, but would be very difficult to implement.
15. SAGE agreed that school closures would have smaller effects on the epidemic curve than other options.
16. SAGE noted the importance of clear and sufficiently detailed public communication in advance of their implementation.
17. The point in time at which measures should be lifted will depend on epidemiological evidence, but is likely to be at least 12 weeks after initial implementation.
18. Cocooning of older and vulnerable patients can start later, and would have to continue longer, than other measures.

ACTION: Imperial group to model and compare triggers and timings for national-level and regional-level behavioural and social interventions, and share findings by end of working week (6 March)

Review of reasonable worst case scenario

19. SAGE reviewed the reasonable worst case scenario for Covid-19 and agreed revised assumptions for cross-government planning.
20. These assumptions will be reviewed once additional case and serology data are available.

ACTION: DHSC and **NHS England** to agree categories for public-facing version of Covid-19 reasonable worst case table

ACTION: PHE to produce specific criteria for when workers in critical sectors should self-isolate, for discussion at next SAGE meeting (10 March)

List of actions

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DHSC and **NHS England** to agree categories for public-facing version of Covid-19 reasonable worst case table

PHE to produce specific criteria for when workers in critical sectors should self-isolate, for discussion at next SAGE meeting (10 March)

Attendees

SAGE participants: *Patrick Vallance (chair), Chris Whitty, Jonathan Van Tam, Dominic Cummings, Steve Powis, Angela McLean, John Aston, Rob Orford, Stuart Wainwright, Sharon Peacock, Gavin Dabrera, Meera Chand, Graham Medley, Neil Ferguson, Ben Warner, Kate Thomas, David Halpern*

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