

MEETING	COVID-O	DATE: 04/12/2021 PM
SUBJECT: International Border Measures in response to Omicron		
<p>OVERVIEW</p> <ul style="list-style-type: none"> • In response to the emergence of the Omicron variant in Southern Africa, ministers agreed to move South Africa, Botswana, Eswatini, Lesotho, Namibia and Zimbabwe onto the red list at 12.00 midday Friday 26 November. Angola, Malawi, Mozambique and Zambia were subsequently moved onto the red list at 4am Sunday 28 November. • Ministers also agreed to change the day 2 test requirement for all non-red list arrivals, so that all arrivals must take a PCR test. • The number of confirmed omicron cases globally continues to rise with [486] cases reported across [35] countries (as of 1200 3 December), and cases now spread across all continents. This includes [217] confirmed cases from South Africa and [109] cases from EU/EEA countries. In the past 24 hours, new cases have been confirmed in Sri Lanka, Malaysia, Zimbabwe, UAE and Russia. • COVID-O will meet on Saturday to decide whether to: <ol style="list-style-type: none"> 1. Introduce a 48 hour Pre Departure Test requirement for all travellers (regardless of vaccination status) to align with the PDT requirements in place for unvaccinated non-red and red list arrivals from 4am Tuesday; and, 2. Add Nigeria to the red list from 4am Tuesday, reflecting the latest UKHSA risk assessment . Delay removing social distancing guidance in ports and airports. 3. Pause the onboarding of new countries to our approved vaccine list. • We expect significant push back from other Government Departments to these enhanced measures. With this in mind, we think it would be sensible to prioritise our asks and to push for early red-listing of Nigeria as our top priority from a public health perspective. 		
<p>RECOMMENDATIONS</p> <p>That you:</p>		

OVERALL STEER

- Recognising the large resistance we will get from other Government Departments (particularly DfT, FCDO and HMT) on these additional measures we would recommend:
- **Prioritising** the early red listing of Nigeria (announcing today and bringing into force no later than midday Sunday).
- **Also pushing** for an earlier implementation for PDT's and for PDT's to be taken within 24 hours from departure but recognising the implementation challenges accept that we would be content to bring in by 4am Tuesday and for PDT's to be taken within 48 hours from departure (which is in line with what France and other European partners have recently brought in).

1. Pre departure testing

- **Strongly recommend** that we should bring in PDT for all passengers from all destinations (outside of the Common Travel Area) regardless of vaccination status as soon as practically possible.
- **Recommend** that PDTs can be either a LFD or a PCR test, recognising that each have advantages (e.g. PCR more sensitive for detection of omicron but needs to be taken further in advance LFD can be taken closer to the time of travel and will identify travellers when most infectious but are less likely to detect very early developing disease).
- **Recommend** that PDT's should be taken ideally within 24 hours of travelling (but accept a 48 hour window from a practicalities point). The clinical assessment of omicron (not yet statistically corroborated) suggests that omicron infections transmit earlier i.e. there may be a shorter incubation period and so there is more reason to undertake a PDT nearer the point of travel because infection can 'pop up' more quickly in the pre-flight period.
- **Note** that the re-introduction of pre-departure testing should be announced on Saturday and brought into force as soon as possible.

2. Add Nigeria to the red list

- **Note** that Nigeria has been assigned a 'very high' biosecurity risk rating.
- **Strongly recommend** that we red list Nigeria and that we do so as soon as possible (ideally announcing today and then bringing into force by midday tomorrow but at the very latest by midday Monday).
- **Recommend** that we bring in an immediate flight ban for Nigeria.
- **Note** that we will only be able to meet deadlines if we can achieve DA alignment.

- **Noting** that given hotel capacity, it's likely that not everyone who wants to will be able to book hotel accommodation in MQS (and therefore fly back to the country) for the first few days.
 - **Note** that MQS hotel capacity is not infinitely scalable for operational and financial reasons and that DHSC colleagues are working at pace into MQS alternatives which they will bring back to a COVID-O next week.
 - **Note** that public health officials will also continue to advise on when we can review these current short term border measures and that this is likely to be once we have widespread community transmission of omicron in the UK.
3. **Delay removing social distancing guidance in ports/airports**
- **Agree** to delay the removal of social distancing guidance in airports.
4. **Pause the onboarding of new countries to our approved vaccine list**
- **Agree** to pause the onboarding of new countries to our approved vaccine list.

SPEAKING NOTE

- The Omicron variant has now been confirmed in 37 countries, including the UK, and it is almost certain that it has spread more widely than this.
- Whilst we cannot prevent the new variant from entering the UK entirely, we can continue to delay or slow incursions to prevent cases rising. This provides more time to understand the characteristics of the variant, and could delay incursion until after Christmas, or ideally later in January when NHS winter pressures begin to ease, and more people will have received a booster.
- Our immediate and highest concern today is around Nigeria, where we have had 7 confirmed cases of Omicron in England with travel links to Nigeria plus a further 14 probable cases with travel links. The only country where we have had higher numbers is from South Africa. From a public health perspective our highest priority is that we therefore red list Nigeria as soon as possible (ideally by midday tomorrow) and that we introduce an immediate flight ban.

1. Pre- Departure Testing

- In addition to the existing border measures we have put in place, there are a number of additional measures that we could deploy to further strengthen our defence against Omicron.
- These could include applying one or more of the measures that we currently have in place for unvaccinated arrivals but instead requiring this for all arrivals e.g. (a) Pre Departure Testing (b) Daily LFD testing with confirmatory PCR's and sequencing for positives (c) a PCR on or after day 8 with sequencing for positives (d) a 10 day isolation period.
- Our recommendation is that we push for mandatory PDT's for all travellers, regardless of vaccination status to be brought in as soon as possible. We think this would (a) help reduce the influx of people coming into the country with the omicron variant and (b) help with our monitoring of which countries have the omicron variant.
- Recognising the significant public health concerns around omicron, we would recommend that the PDT is brought into force as soon as possible and that we ask travellers to take these within 24-48 hours of travelling.

2. Nigeria

- The latest risk assessment into Nigeria indicates that the biosecurity risk posed is 'very high'. We have now have a total of 21 omicron cases linked to travellers from Nigeria. Only South Africa has had a higher number.
- We would therefore strongly recommend that we announce today that Nigeria should be put onto our red list and that this should come into force by midday tomorrow and that we should introduce an immediate flight ban.
- We recognise that this may create some operational and diplomatic difficulties. Whilst we are confident that we can bring on more rooms by Thursday 9th December, this decision will mean that in the short term there will be a risk that arrivals from Nigeria would not be able to enter the UK until then.
- Recognising our significant concerns on Nigeria we still believe that from a public health point of view, these dates are proportionate and necessary to help slow down seeding and transmission of omicron within the UK.
- Accepting that the continuing rapid spread of omicron and that hotel capacity is not infinitely scaleable we would stress that we think these strengthened measures are short term measures only to help slow down the seeding of omicron in the UK until we both understand more about the impacts of the variant and to help manage pressures on the NHS (delaying seeding in the UK until January and beyond will significantly help in terms of our ability to manage the pressures on the NHS).

- In the meantime, my officials are continuing to look for alternatives to hotel quarantine and will bring further proposals on this back to COVID-O next week.

3. Delay removing social distancing guidance in ports/airports

- Whilst we agreed at the COVID-O in November to lift guidance to socially distance in ports and airports ahead of border control, changes to the guidance have not yet been implemented.
- We would agree with the paper that lifting social distancing guidance now could send the wrong message while there is uncertainty around the threat posed by the omicron variant.
- Our strong public health advice is to therefore not support a further relaxation of risk mitigations at this point in time.

4. Pause the onboarding of new countries to our approved vaccine list

- We agree with the paper that pausing the onboarding of new countries to our approved vaccine list would be a sensible precaution at this point in time, particularly recognising that early indications show that omicron may have some degree of vaccine escape.

OTHER GOVERNMENT DEPARTMENT VIEWS

DfT

- We expect DfT to push back on early red listing of Nigeria, citing operational difficulties in standing this up. From our perspective we are content that a timeline of midday Monday is achievable for this to be implemented. Any delay will increase the public health risk, recognising the large number of cases we are already seeing from Nigeria.
- DfT are likely to also cite concerns with bringing in PDT's and the knock-on impact that these may have on travel. They have a particular concern around travellers needing to take tests within 24 hours, as they think this be challenging and will lead to an increased fraud risk. Whilst we acknowledge that PDT's may have an impact on travel, we think that PDT's will be a valuable tool in terms of (a) reducing the numbers of travellers who have omicron (b) helping our overall surveillance of which countries omicron is currently in.

FCDO

- We expect FCDO to have similar concerns to DfT on both of the above issues.

- FCDO have also expressed concerns around red listing of another African country and whilst they accept the risk assessment, are keen that we actively manage this in our comms (i.e. why Nigeria and not Netherlands).
- We have yet to see widespread community transmission in the Netherlands (or other European countries) and the cases there remain linked to travel. This is not the case for Nigeria.

HMT

- In addition to the ongoing costs of MQS we expect HMT to ask about the future border measures for Omicron and to demand clear public health lines around when we will be able to review the current measures.

DA's

- We know that DA's are keen to bring in strengthened measures so should be supportive. It will be important for DA alignment in terms of bringing in all of these changes within our preferred timelines.

DEFENSIVE Q&A

PDT's

Q: We cannot bring in PDT's by Tuesday

A: From a regulatory perspective, we are able to make legislative changes from tomorrow assuming no major departures in policy from that set out in the Covid O paper.

Q: Travellers will not be able to obtain a PDT within 24 hours

A: Both UKHSA and DfT modelling support that PDTs as close as possible to flight time is the best policy from a disease prevention perspective. Many countries around the world have re-introduced PDTs for travellers. For example, the USA currently require tests with specimen date no more than 'one calendar day' before the flight departs; it is thus clearly feasible to require that tests be close to departure time. Flexibility between taking a PCR or LFT is also reflected in the requirements for entering the Netherlands where up to 48 hours before departure is permitted for PCR tests and for rapid tests these must be performed no more than 24 hours before flight departure.

RED LISTING NIGERIA

Q: Why are we red listing Nigeria and not e.g. Netherlands?

A: The latest risk assessment into Nigeria indicates that the biosecurity risk posed is 'very high'. We have now had 17 confirmed omicron cases linked to travellers from

Nigeria. Only South Africa has had a higher number. We believe that the Netherlands is in a similar epidemiological stage as the UK. There is likely to be widespread community transmission taking place in Nigeria that we have not seen within the Netherlands (or other European countries), unlike Nigeria where we believe that there is a high likelihood of greater community transmission.

Q: When are we expecting hotel capacity to be available? Should we not wait until then until we red list Nigeria recognising that this will mean British citizens will be stranded in a high risk country?

- This decision balances the urgent public health imperative to reduce ingress of the Omicron variant, the need to ensure UK residents can travel home.
- The Managed Quarantine Service has contracted several new hotels to enter service this week, in view of the likely numbers of UK residents who will want to travel from Nigeria before Christmas;
- However, we should proactively communicate that it will be very difficult to get an MQS booking for travel this week until the new hotel rooms are made available;
- Passengers should always ensure they have a MQS booking reference number before travelling to the UK. Those without an MQS booking will not be able to board a flight, and could be subject to a Fixed Penalty Notice at the UK border.

OUTSTANDING ACTIONS FROM PREVIOUS COVID-O DISCUSSIONS

25 Nov: CO-A964

UK HEALTH SECURITY AGENCY to work with DEPARTMENT FOR TRANSPORT and COVID-19 TASKFORCE on an exit strategy [from Red List restrictions] for the Committee to consider at the next review of the Red List on 9 December.

CO STATUS: The exit strategy will be discussed at COVID-O (95) on 4 December.

DSHC UPDATE: This is not being scheduled for discussion at COVID-O (95) on 4 December and will likely be discussed at a COVID-O w/c 6 December. Officials are working on proposals for MQS alternatives alongside consideration of when to move away from border restrictions in the context of domestic Omicron epidemiology.

4 Nov: CO-A950

DEPARTMENT OF HEALTH AND SOCIAL CARE to implement as quickly as possible a solution for visitors in transit so that they are exempt from self-isolation if contact traced during their journey to the UK, with an aim to introduce by 22 November. The DEPARTMENT OF HEALTH AND SOCIAL CARE should write to the Committee within the next week, no later than 11 November, with an update on how this will be delivered.

CO UPDATE: DHSC reported that implementation of this action was delayed by a week and will only be deliverable by 9 December rather than the 1 December deadline as agreed in COVID-O 21(93) on 25 November.

DHSC UPDATE:

28 Oct: CO-A941

COVID-19 TASKFORCE to work with ALL DEPARTMENTS to review whether countries should be added to the Red List at least every 28 days (in line with legal obligations), with the next regular review due in three weeks. COVID-19 TASKFORCE to also agree a schedule for reviews over the winter.

CO STATUS: Ongoing - reviews will still be carried out at least every 28 days, however the schedule for reviews over the winter may need to be revisited given the new variant Omicron (B.1.1.529).

DHSC UPDATE: COVID-O (95) will be discussing whether and when to place Nigeria on the Red List, outside of the normal review process.

21 Oct: CO-A937

DEPARTMENT OF HEALTH AND SOCIAL CARE to take forward further work on the full range of options to support compliance and enforcement with home isolation, including digital solutions, alongside the work on contingency options, and to explore the feasibility of expediting the timeframes for securing the best solution

CO STATUS: Ongoing - This action was discussed at CO 21(92) on 18 November and it was agreed that this work would now be taken forward as part of the January Review.

DHSC UPDATE: This work is ongoing and is being considered alongside rapid development of MQS alternative options in response to Omicron.

