



Mr. Stephen Donnelly TD,
Minister for Health,
Department of Health,
Miesian Plaza,
50-58 Lower Baggot Street,
Dublin 2.

21st December 2020

Via email to Private Secretary to the Minister for Health

Dear Minister,

The epidemiological profile of COVID-19 has deteriorated very substantially since my letter of 17th December and is giving cause for grave concern. This concern is amplified by the increased levels of socialisation, including intergenerational socialisation, which is anticipated over the coming days, alongside increased domestic and international travel including (and notwithstanding measures currently in place) from Britain. My letter of yesterday, 20 December 2020, in relation to the epidemiological situation in Britain and the emergence of a new variant there, refers.

In light of the current data, I invited members of the Department of Health's management board that are members of the NPHET, along with Dr Cillian de Gascun of the NVRL, to our daily epidemiological review meeting yesterday to brief them on the current situation and to seek their advice. I write to apprise you of the most recent position in advance of the Cabinet meeting tomorrow.

The current epidemiological situation is detailed in appendix 1, and the following trends are of particular concern:

- The number of reported cases has increased rapidly since the 17th December:
 - A total of 3,837 cases have been notified in the seven days to 21st December; this is compared with 2,323 cases in the seven days to 16th December (latest data available to NPHET meeting) – a 65% increase;
 - The 5-day rolling average has increased from 339 on 17th December to 616 on 21st December, an increase of 82%;
 - As of 21st December, the 7- and 14-day incidence rates per 100,000 population have increased to 81 and 122 respectively. These compare to rates of 49 and 88 on 17th December, a 65% and 39% increase in the 7-day and 14-day incidence rates, respectively;
 - The 7-day incidence as a proportion of 14-day incidence is 66% and 22 counties have reported more cases in the last 7 days compared with the preceding 7 days; on 17th December this the cases in 18 counties.

- The 7-day incidence rate among those aged 19-44 years is 248 per 100,000 population, this is more than double the rate the same day last week.
- The positivity rate continues to rise with the 7-day positivity rate increasing from 2.9% on 16th December to 3.9% on 19th December.
- Referrals for swabbing today, 21 December, have increased approximately 100% compared to last Monday, 14 December.
- There are currently 244 confirmed COVID-19 cases in hospital, compared with 211 on 17th December. There have been 20 newly confirmed cases in hospital in the preceding 24 hours.
- There are currently 29 confirmed cases in critical care, compared with 31 on 17th December.
- To date, there have been 65 deaths notified with a date of death in December, an increase of 17 since the 17th December.
- The growth rate is now estimated to be between 5% – 6% per day, and the doubling time is estimated at less than 14 days. It is very likely that R is higher than the latest estimate of 1.1 – 1.3 (next estimate available Wed 23rd December).
- It is estimated that if the growth rate is 5% per day, there will be in the region of 900 cases per day by 30 Dec, and 1,300 cases per day by 6 January. If the growth rate is 7%, it is estimated that there will be in the region of 1,100 cases per day by 30 Dec, and 1,800 per day by 6 January.

For reference, a comparison of indicators as they were on October 4 when Level 5 measures were recommended versus those indicators as they are today, December 21, is set out in the Table below:

	4 th October 2020	21 December 2020
14 day incidence rate*	114	122
7 day incidence rate*	66	81
5 day average new cases*	476	616
Positivity rate	3.4	3.8
Number in hospital	150	244
Five day Moving Average number of hospital admissions	10	11
Number in ICU	22	29
Average number of new ICU admissions	2	1
Average number of deaths per day (all patients in Hospital)	1	3

* Data notified to HPSC up to midnight 20th December

The epidemiological profile of the disease is deteriorating rapidly and there are now clear signs of exponential growth similar to or greater than that seen at the peak of the second wave. And, as was the case at that time, there is now:

- High and rapidly increasing incidence and widespread community transmission
- Multiple clusters with secondary and tertiary spread
- Other indicators of disease - referrals, positivity rates, growth rates – are all increasing rapidly
- Admissions to hospital and critical care have not decreased substantially and are now at an imminent risk of increasing. If current trends are not addressed, there is a high likelihood that hospital and critical care capacity will be exceeded and that non-COVID health and social care services will be significantly impacted
- Deaths have not decreased substantially and are now at imminent risk of increasing

- There continues to be a concerning level of cases and outbreaks in nursing homes
- Capacity to undertake testing and contact tracing across the system of referral, sampling, testing and contact tracing is likely to be constrained over the coming days
- The pandemic is escalating rapidly, both in Ireland and internationally

This deteriorating situation must also be considered in the context of several other risk factors that will only serve to amplify an already concerning trajectory, namely;

- Increased levels of domestic and international travel
- Increased levels of interaction and socialisation between people
- Increased levels of intergenerational mixing likely over the Christmas period
- Significant reforming of 'households' as students and those working away from their family homes return to those homes over the festive period
- Continued operation of hospitality, religious services and other indoor settings which facilitate interhousehold mixing and which may act as loci for 'super-spreading' events

Furthermore, following a meeting of the European Commission's Health Security Committee (HSC) regarding the new variant in the UK this morning (21 December), it is anticipated that the HSC will recommend that countries introduce domestic public health restrictive measures to slow down further spread of this variant.

The NPHET will meet again this Wednesday, 23 December 2020 and, in light of the evolving situation, will consider whether additional public health measures over and above those advised on the 17 December 2020 are necessary. This will include consideration of the timing and nature of measures up to and including those set out as part of 'Level 5' in the Government's Plan for Living with COVID-19, as well any additional recommendations which may be warranted. The NPHET will also consider its current and any potential additional recommendations and the timing of same in the context of the decision by Northern Ireland to implement comprehensive measures from the 26th December and the need to avoid any unintended cross border movement into the country as a consequence.

Comprehensive analysis of the emerging data will continue over the coming days to ensure that the NPHET can provide you with the best possible advice, but there is no basis upon which to believe, at this time, that the situation will not continue to deteriorate in the days ahead.

My considered view as Chair of the NPHET is that measures as set out in Level 5 of the Government's Plan are necessary. This will be the subject of discussion by NPHET on Wednesday. Of course, the NPHET meeting planned for Wednesday 23 December can be brought forward if this would be helpful to inform the Cabinet's considerations.

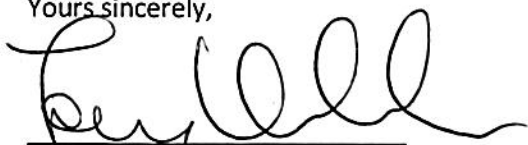
In relation to NPHET's advice of the 17th December, I would like to provide some additional clarification in relation to the recommended provisions for intercounty travel. As per Level 3 of the Government's Plan for Living with COVID-19, the NPHET advised that domestic travel should be restricted to within a person's county of residence, apart from travel for work, education or other essential purpose from midnight on the 28 December. The NPHET made reference to the potential need to provide some flexibility for those who had travelled prior to the 28 December to spend the Christmas period in a dwelling different to their normal residence, for example third level students. It is important to clarify that the intention of this proposal was to provide a specific exemption to allow people in these

circumstances to take one journey to return to their normal place of residence after the 28 December. Similar exemptions have been provided for in previous Regulations. Otherwise, the NPHET recommendation of the 17th December that all non-essential inter-county travel should cease on the 28 December.

Finally, I would like to draw your attention to an issue that has arisen in relation to the Health Protection Surveillance Centre's (HPSC) Contact Tracing Guidance. On 3rd of December, the NPHET endorsed the updated "*National Guidelines for the Public Health Management of Close Contacts of Cases of COVID-19*" prepared by the HPSC, and recommended that the HPSC make arrangements to finalise the guidance for subsequent implementation. As part of the updated guidance, it was agreed that, in line with recent ECDC guidance, household contacts ('secondary contacts') of people identified as close contacts would be advised to restrict their movements until the close contact had received a 'not detected' result from their Day 0 test. I understand that this has not been implemented by the HSE, and the Department is seeking further clarification from the HSE as to why this is case. The implementation of this particular aspect of the ECDC contact tracing guidelines will become of particular importance as households reform over the festive period. We will need to ensure that this important aspect of the public health response to COVID-19 is implemented in a manner consistent with ECDC guidance as set out above as soon as possible.

As always, I would be happy to discuss further, should you wish.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Tony Holohan', written over a horizontal line.

Dr Tony Holohan

Chief Medical Officer

Chair of the COVID-19 National Public Health Emergency Team

cc. Ms Elizabeth Canavan, Department of the Taoiseach and Chair of the Senior Officials Group for COVID-19

Appendix 1: Detailed Epidemiological Data

The following is the updated epidemiological position as of the 21st December:

- A total of 3,837 cases have been notified in the seven days to 21st December, this is compared with 2,323 cases in the seven days to 16th December (latest data available to NPHET meeting). The case numbers in the 7 days to 20th December was a 93% increase on the previous 7 days in which there were 1,990 cases;
- As of 21st December, the 7- and 14-day incidence rates per 100,000 population have increased to 81 and 122 respectively. These compare to rates of 49 and 88 on 17th December;
- As of 21st December the 7-day incidence rate among those aged 19-44 years is 248 per 100,000 population, this is more than double the rate the same day last week (121 on 14th December); the 7-day incidence rate among 45-64 year olds also doubled in this period (from 71 to 142 per 100,000); there has been a 92% increase in the 7-day incidence in those aged 65 years and older (30 to 58 per 100,000) and a 62% increase in those in the 0-18 years age group (62 to 100 per 100,000);
- Nationally, the 7-day incidence as a proportion of 14-day incidence is 66% and 22 counties have a proportion above 50% demonstrating that there has been more cases in the last 7 days compared with the preceding 7 days; on 17th December the national proportion was 55%;
- The 5-day rolling average has increased from 339 on 17th December to 616 on 21st December, an increase of 82%;
- Of cases notified in the past 14 days, 64% have occurred in people under 45 years of age; the median age for cases notified in the same period is 36 years;
- The proportion of cases notified in the over 65 age group has remained stable. In the last fourteen days, 11% of cases notified were aged over 65;
- We continue to see a high proportion of infections in healthcare workers who account for 10% of all reported cases in the last 14 days;
- The best estimate of the reproduction number (R) is currently 1.1-1.3. The current daily growth rate of cases is 5-6%;
- A total of 85,569 tests were undertaken in the seven days to 19th December. The 7-day average test positivity rate has increased to 3.9% from 2.9% on 16th December;
- Excluding serial testing, the positivity rate has also increased over recent days and is estimated to be 6.5% over the 7 days to Monday 21st December, this compares with 5.2% in the 7 days to Friday 18th December;
- There are currently 244 confirmed COVID-19 cases in hospital, compared with 211 on 17th December. There have been 20 newly confirmed cases in hospital in the preceding 24 hours;
- There are currently 29 confirmed cases in critical care, compared with 31 on 17th December.
- To date, there have been 65 deaths notified with a date of death in December. This compares with 123 and 152 deaths notified (to date) with a date of death in October and November, respectively. Of the 65 deaths so far in December, 23 have been associated with hospital outbreaks and 20 have been associated with nursing home outbreaks.

Further relevant information includes:

- There were 9 new clusters notified in acute hospitals with 39 linked cases in week 50.

- There are currently 54 open clusters associated with 23 acute hospitals. 1026 cases have been linked to these outbreaks with 50% (511) of these cases related to healthcare workers. There have been 64 deaths linked to these outbreaks.
- There were 9 new clusters notified in nursing homes/community hospitals with 73 linked cases in week 50;
- There are currently 39 open clusters associated with nursing homes. 948 cases have been linked to these outbreaks with 40% of these cases related to healthcare workers. There have been 53 deaths linked to these outbreaks.
- A range of mobility and compliance data suggest that movement and social contact in the population has increased significantly since the introduction of Level 3 measures.
- The influenza like illness rate (ILI rate) has increased in recent weeks and is now 32.1 per 100,000 population (Week 50).
- As of 19th December, the 14-day incidence per 100,000 population in Northern Ireland was 378, this is over 3 times the 14-day incidence in the Republic of Ireland on the same date (112 per 100,000 population). The 7-day incidence per 100,000 population in Northern Ireland was 205, nearly 3 times the 7-day incidence in the Republic of Ireland on that date (71 per 100,000 population).