TITLE: TIMELINE AND DETAIL OF PUBLIC HEALTH RESTRICTIVE MEASURES ADVISED BY NPHET IN RESPONSE TO THE COVID-19 PANDEMIC

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INTRODUCTION

This paper provides an overview of the considerations and advice provided by the NPHET in relation to the application of population-level public health restrictive measures as part of the overall response to managing the COVID-19 pandemic. It has been prepared as part of a series of forthcoming papers detailing the advice and actions taken by the NPHET in response to specific areas of concern.

The paper first provides an overview of the general approach in relation to population level measures across different stages of the pandemic since March, and then sets out a more detailed timeline and overview of NPHET advice from mid-July to end-October as infection rates increased. The period from the end of October to the end of the year is being documented and will be finalised shortly. Please note that the purpose of the paper is to capture a timeline of NPHET considerations and advice only, and does not seek to provide any analysis of the disease trajectory or the impact of the application/easing of public health measures, nor detail on other complementary NPHET considerations in areas such as international travel policy, public health response etc. These will be set out in future papers.

OVERVIEW OF GENERAL APPROACH SINCE MARCH 2020

January – March 2020: Initial Response

The National Public Health Emergency Team (NPHET) was convened in January with the task of overseeing the health sector response to the COVID-19 emergency, and providing advice, guidance, support and direction regarding the implementation of a strategy in response to Covid-19. It held its first meeting on 27th January 2020 and there were 70 NPHET meetings to end December. The first confirmed case of the coronavirus in Ireland was announced by the NPHET on 29th February. The first death was confirmed in Ireland on 11th March, the day the WHO declared a pandemic.

As cases numbers increased during March 2020, the NPHET moved quickly to make a series of recommendations to Government over the course of the month. The first recommendation made by the NPHET relating to public health restrictive measures was in relation to mass gatherings in early March. The closure of schools, colleges, childcare facilities, and cultural venues and restrictions on mass gatherings, including the cancellation of St Patrick’s Day celebrations, were advised on the 12th March. This was followed by recommendations on the 24th March to close non-essential outlets and services, cancel all events (including sporting), limit hospitality to take-out/delivery, restrict home visits and limitations on outdoor social gatherings, and advice to work from home. Further recommendations for strict stay at home measures were made on the 27th March requiring people to stay at home unless necessary for work or essential shopping and permitting exercise within 2km, a prohibition on all gatherings, and the closure of further non-essential businesses and services. These strict measures remained in place until May.
April – June 2020: Reopening Roadmap

The NPHET gave detailed consideration over the course of April to how public health measures could be most effectively and safely eased, culminating in final advice provided to Government on 1st May 2020. This set out a public health framework approach for advising Government in relation to reducing social distancing measures. Overall, a cautious approach was advised and a slow, gradual, stepwise and incremental reduction of measures in a risk-based, fair and proportionate way was recommended to enable the continued suppression of the virus and mitigation against a further resurgence in cases while enabling a gradual return to social and economic activity.

The NPHET recommended reopening in five phases, with a range of indicative measures set out across these phases and with each phase set to last for three weeks to allow time for assessment of impact in advance of any further relaxation of measures. This advice informed the Government’s reopening plan, Roadmap for Reopening Society & Business, which was published by the Government on the 1st May with the five phases to run from mid-May to mid-August. In addition, in recognition of the impact of restrictive measures on people’s daily lives, in its advice of the 1st May, the NPHET recommended the immediate easing of a number of measures, including the extension of the 2km limit to 5km and guidance to enable those cocooning to take exercise in their local area.

Based on a continuing improvement in the epidemiological situation, the NPHET recommended moving to Phase 1 and 2 of the Roadmap in mid-May and early June respectively. Given the favourable epidemiological trends at the time, on the 18th June, the NPHET recommended the realignment of the remaining three phases into two phases. The final timeline for reopening was scheduled as following: Phase 1 commencing on 18th May, Phase 2 on 8th June, Phase 3 on 29th June and Phase 4 on 20th July.

July 2020: Development of Future Strategy for Ongoing Response

There was a steep decrease in disease incidence from late April, followed by a period of low incidence and relative stability during June and early July. However, in recognition of the inevitable fluctuating nature of the pandemic as well as the WHO warning that countries should prepare for subsequent epidemic waves, the NPHET took the opportunity over the course of July to develop a strategic approach and decision-making framework for managing Ireland’s ongoing response across different phases of the pandemic. The resulting document was informed by the lessons learnt from the first wave of the pandemic and ongoing public health and broader economic and societal concerns. The document Framework for Future COVID-19 Pandemic Response was underpinned by a set of guiding principles and set out four phases of response to COVID-19 (blue, yellow, orange, red) in which indicators for escalation, objectives, and priority actions were outlined. It also detailed areas of focus for the future. The Framework was submitted to Government for consideration on the 23rd July.

July – October 2020: Response to increasing levels of infection

As has become apparent over the last number of months, the nature of the pandemic is continuously evolving, and the national response has had to be agile in order to keep pace with the ebb and flow of the disease. This was especially evident as the country moved from a period of low transmission during the early summer to a deteriorating epidemiological situation by July when case numbers started to increase, albeit initially very slowly. As a result, the NPHET adopted a cautionary approach and recommended that Phase 4 of the reopening, scheduled for the middle of July, be postponed, resulting in the continued closure of wet bars and prohibition on mass gatherings. It also recommended new limits on the numbers that could gather in private homes. The objective at the
time was to limit opportunities for people to congregate in different indoor and outdoor settings and thus maintain progress in suppressing the virus. Phase 4 of the Roadmap was ultimately postponed until 21st September when wet bars were permitted to open outside of Dublin. Phase 4 increases in the numbers permitted at mass gatherings and the reopening of nightclubs and casinos were never implemented.

By early August, the epidemiological situation had deteriorated further with very rapid development of large outbreaks occurring regionally (Kildare, Laois and Offaly) and in certain higher risk sectors (e.g. meat processing and construction) and within vulnerable groups (e.g. people living in direct provision centres). Using the Framework developed in July, a range of public health restrictive measures (similar to Level 3 of the subsequently published Plan for Living with COVID), were recommended for Kildare, Laois and Offaly by the NPHET to manage these outbreaks and contain them within geographical areas in order to avoid wider community spread. These measures were successful in containing the disease and the measures were lifted in late August 2020. From the middle of August, the NPHET grew increasingly concerned regarding the deteriorating trajectory of the disease nationally, and a set of measures limiting the size of indoor and outdoor gatherings, moving sporting events to behind closed doors and promoting work from home were introduced on the 18th August.

In early September, based on learnings from the application of escalating restrictive measures over the course of August, the NPHET further refined the 4-phase Framework developed in July into a 5-Level Framework for Restrictive Measures to provide further clarity, consistency and certainty in relation to the application of public health measures. In mid-September, the Government published its medium-term strategy Resilience and Recovery: Plan for Living with Covid-19. A key feature of the Plan is the NPHET recommended 5-Level Framework which sets out five levels of response depending on prevalence of the disease. Each level contains a suite of measures designed to reduce COVID-19 transmission and sets out what is permitted at a particular moment in time, for example the numbers that can meet socially and what businesses and premised can operate and to what extent.

Over the course of September, disease incidence continued to increase, initially in Dublin, then Donegal, and later increases were more widespread across the country. In response, NPHET raised escalating levels of concern in relation to both the situation in certain regions, and also the overall national situation. In line with a continuing deteriorating position, the NPHET advised the application of increasing levels of restrictive public health measures initially on a regional basis in Dublin and Donegal (Level 3) and later at a national level (Level 5). This culminated in the introduction of Level 5 measures nationally for a six-week period from mid-October until the beginning of December as the country tackled a second epidemic wave.

Note: At all times, NPHET advice has been informed by the epidemiological status of the disease, modelling projections, international advice and guidance, evolving evidence and practice both nationally and internationally, and the overarching priority of limiting the impact on public health and in particular protecting the following three core priorities; the protection of the most vulnerable, the continued resumption of non-COVID health and social care services and the need to protect the ongoing delivery of education and childcare.
TIMELINE OF ADVICE FROM MID-JULY TO END-OCTOBER 2020

Date: 14th July 2020
Key NPHET Advice:

- Postponement of move to Phase 4 of the Roadmap to Reopening Society and Business (opening of pubs/bars & increase in size of mass gatherings) until 10th August
- Introduction of limits on social gatherings in private homes to a max. of 10 people from 4 households

Rationale

In light of the progression of the disease since late June, the NPHET expressed a growing concern regarding the increasing case numbers being reported in the community and a number of large clusters, the fact that the R number was likely to have exceeded 1 and the deteriorating international epidemiological situation which demonstrated the precariousness of disease suppression following the easing of public health measures by countries and risk of importing cases from abroad. It also noted WHO advice in relation to the likelihood of recurring epidemic waves interspersed with periods of low level transmission.

The NPHET noted the critical importance of low levels of community transmission of this disease in order to ensure the protection of the most vulnerable and to enable the recommencement of essential societal services, such as education and healthcare services for all. It considered that adopting a cautious disease control strategy at that stage and targeting a small number of additional measures at known areas of infection risk (such as social gatherings and international travel) would contribute to minimising the impending risk of an upsurge of infection, as was evident in other countries at the time.

Supporting Data

- 5-day case average: 20; 14-day incidence 3.47.
- 13 cases in hospital, 10 in ICU
- R estimated to be above one and most likely between 1.2-1.8

Government decision

On the 15th July, the Taoiseach announced that Phase 4 of the reopening would be delayed¹. The measures were given effect in regulations², ³, ⁴.

Date: 23rd July
Key NPHET Advice:


² http://www.irishstatutebook.ie/eli/2020/si/244/made/en/print
Rationale:
The purpose of the Framework was to set a direction for future sustainable and flexible responses during different Phases of the pandemic and to enable key stakeholders to prepare national, regional and local level plans aligned to the Framework’s priorities. The Framework covered four disease status phases including when emergency response has been stood down (blue), low incidence (yellow), increasing incidence (orange), and high or rapidly increasing incidence (red). The Framework outlined the key considerations, priorities and ethical principles underpinning its development and lessons learned to date which would inform future responses.

Date: 30th July
Key NPHET Advice:
- Provision of any additional supports necessary to prevent further transmission in direct provision and other vulnerable groups.

Rationale:
The NPHET noted an increase in outbreaks in vulnerable populations and workplaces as a concern, as was the increase in the number of cases in younger people.

Supporting Data
- 14-day incidence: 4.2
- 10 cases in hospital, 4 in ICU
- $R$ estimated at 0.95

Date: 4th August 2020
Key NPHET Advice:
- Further postponement of move to Phase 4 of the Roadmap to Reopening Society and Business until 31st August and additional requirements for the hospitality sector (close at 10.30, no table service, face coverings for staff, additional inspection and enforcement if necessary)
- Targeted recommendations for high risk work places (food processing and construction in particular) and socially vulnerable groups
- Intensification and refresh of cross-Gov communications, with particular focus on under 45s

Rationale
In recognition of the deteriorating epidemiological situation with cases and incidence levels increasing, an increase in cases in younger people, and a shift in the geography of the majority of cases from Dublin to other countries, the NPHET recommended that a cautious but measured approach be pursued and that the public health measures in place at the time (as per Phase 3 of the reopening) should be extended rather than progressing to Phase 4 of the revised Roadmap for Reopening Society & Business. It also recommended some additional requirements for the hospitality sector. In doing so, the NPHET reiterated the critical importance of low levels of community transmission of this disease in order to ensure the protection of the most vulnerable and to enable the recommencement of essential societal services, such as education and health and
social care services for all. It also noted the increase in cases in vulnerable groups, such as direct provision, and in high risk sectors such as construction and food production, and made a range of recommendations targeted at those areas.

Supporting Data

- 5-day case average: 53; 14-day incidence: 7.54.
- 10 cases in hospital, 5 in ICU

Government decision

On the 4th August, the Government announced the further delay of Phase 4 of the reopening.5

<table>
<thead>
<tr>
<th>Date: 7th August 2020</th>
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<td><strong>Key NPHET Advice:</strong></td>
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<td>• Application of a number of enhanced public health measures to Kildare, Laois and Offaly for 2 weeks (similar to Level 3 of the Living with COVID Plan).</td>
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<td>• Measures included travel restrictions (within county), limits on social gatherings and sporting events, cafes and restaurants closed for all indoor service, cultural and leisure facilities to be closed, religious services moved online.</td>
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Rationale

The NPHET noted a sharp rise in cases over the preceding week, more than doubling in that period and the occurrence of several significant and large clusters in the region of the country covering counties Kildare, Laois and Offaly. It expressed significant concern in relation to the epidemiological situation in those counties with regard to a number of the indicators that it monitors on a collective basis, including: the existence of multiple clusters, with secondary spread and the 14 day cumulative incidence and related indicators which showed substantial and increasing levels of disease.

The NPHET expressed concern that, given the scale of the outbreaks, there was a significant volume of infection in the region and a real risk that this could spread more widely in the community within a short space of time. The NPHET concluded that, in the interest of being proactive and proportionate, a suite of restrictive measures for the region was necessary to disrupt the pattern of disease transmission and contain outbreaks, to protect the health and wellbeing of people living in these and surrounding areas, to protect public health, as well as the economy and society more broadly, especially the recommencement of essential services such as education and health and social care.

Supporting Data

- 5-day case average: 52; 14-day incidence National: 9.6, Kildare: 61.6, Laois: 62.6 and Offaly: 46.2
- 11 cases in hospital, 5 in ICU
- The mode of transmission for 52% of confirmed cases was identified as having been associated with an outbreak. In Kildare, Laois and Offaly multiple outbreaks were associated with

workplaces and residential institutions with very few cases in the three counties associated with community transmission.

**Government decision**

On the 7th August, the Taoiseach announced restrictive measures that would apply to counties Kildare, Laois and Offaly\(^6\). The measures were given effect in regulations\(^7,8\).

**Date: 17th August 2020**

**Key NPHET Advice:**

- Application of a number of enhanced public health measures (similar to Level 2 of the *Plan for Living with COVID*) to apply nationwide until midnight on Sunday 13th September including limits on social gatherings; no spectators at sporting events; cafes and restaurants open but with legally binding conditions relating to closing times, face coverings, table service and numbers per table; people to work from home unless essential to attend in person.

**Rationale**

The NPHET noted, with growing concern, the persistently high number of cases in the three counties of Kildare, Laois and Offaly as well as the increasing number of cases in other parts of the country. It also expressed concern regarding the continuing upward trend in the number of cases in people under the age of 45 nationally and the increasing number of outbreaks associated with workplaces, households, social and sporting events. The NPHET advised that a cautionary approach was necessary and that the proposed suite of measures at the national level was targeted, reasonable and proportionate and aimed at limiting congregation and inter household interactions. It also cautioned that while the measures had the potential of arresting the disease trajectory, there was also the possibility of the epidemiological situation deteriorating further with a subsequent need for more restrictive measures at a national level.

While recognising the importance of individual behaviour, the NPHET also underscored the responsibility of employers and organisations to ensure workplaces, venues, events, sporting activities etc. adhere to public health advice and guidelines and highlighted the continued importance of monitoring and enforcement by the relevant regulatory bodies.

**Supporting Data**

- National: 5-day case average: 96; 14-day incidence 23.3 – the 4th highest amongst EU Member States.
- 14 day incidence in Kildare: 190.1, Laois: 55.5 and Offaly 133.5 with a further 11 counties having a 14 day incidence rate higher than 15.
- 21 cases in hospital, 8 in ICU
- R: 1.6 (as of 12th August)

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Government decision

On the 18th August, the Government announced the application of a series of moderate restrictive measures to limit the spread of COVID-19 nationwide\(^9\). The measures were given effect in regulations\(^{10,11,12,13}\).

**Date: 20th August 2020**

**Key NPHET Advice:**

- The discontinuation of additional public health measures in Laois and Offaly and the alignment of these counties with nationwide measures as agreed by Government on 18th August.
- The extension of the measures in place in Kildare for a further two weeks to allow sufficient time for the measures to take full effect, disrupt the pattern of disease transmission and prevent further community transmission. It also noted that schools in Kildare should reopen as planned.

**Rationale**

Having reviewed the epidemiological situation in Laois and Offaly, the NPHET was of the opinion that it had improved and noted that incidence rates were stable or falling. In contrast, it noted a very different epidemiological situation in Kildare and while there was some evidence of stabilisation, high numbers continued to be reported on a daily basis, incidence rates were multiples of national averages, cases were widely distributed throughout the county, there remained a significant number of clusters, and there was evidence of an increase in community transmission. Overall, the NPHET noted a relatively high numbers of cases being notified nationally on a daily basis.

**Supporting Data**

- 5-day case average National: 112; Laois: 3.4; Offaly: 2.2, Kildare: 38.4
- 14-day incidence National 26.3 with 12 counties with an incidence rate higher than 15.
- 7-day incidence for Laois: 22.4 and Offaly: 23.1 – showing a decline in disease progression in those 2 counties but remaining high in Kildare with 100.7 (highest observed in any county).
- 7-day average positivity rate: 1.3%
- 16 cases in hospital, 6 in ICU
- R: 1.2 (as of 19th August)

**Government decision**

On the 21st August, the Government announced the decision to continue the additional measures in Kildare and the lifting of additional measures in Laois and Offaly and alignment with national measures\(^{14}\). The measures were given effect in regulations\(^{15}\).

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Date: 27th August 2020

Key NPHET Advice:

• Further postponement of move to Phase 4 of the Roadmap to Reopening Society and Business, in light of nationwide measures advised on the 17th August
• Continuation of the public health measures in Kildare, first announced on 7th August

Rationale

The NPHET proposed that in light of the current epidemiological situation and the enhanced measures that had been put in place nationally on the 18th August, Phase 4 measures shouldn’t proceed at that time. The NPHET also noted that while there were signs of improvement in Kildare, the situation hadn’t improved sufficiently to ease measures yet.

Supporting Data

• 5-day rolling average National: 123
• 14-day incidence National 32.2: 14-day incidence in Kildare: 154.2
• R estimated at 1.0

Government decision

On the 28th August, the Government approved the drafting of regulations to provide for a number of measures as agreed on 18 August and noted the NPHET recommendations that measures in Kildare remain in place and that the epidemiological situation did not allow to a move to Phase 4. These regulations came into effect on 31 August16.

Date: 31st August 2020

Key NPHET Advice:

• Relaxation of measures in Kildare and alignment with those introduced nationally on 18th August (i.e. Level 2 type measures).

Rationale

In its letter of the 31st August, the NPHET stated that the profile of the disease in Kildare continued to improve and was similar to the rest of the country and no longer warranted a differentiated approach. The NPHET further noted that the situation nationally remained uncertain and the impact of the national measures introduced on 18th August continued to be monitored closely. It called for people everywhere to continue to adhere to public health advice and guidance.

Supporting Data

• 5-day case average National: 113; Kildare 10.8
• 14-day incidence National 31.8: 14-day incidence in Kildare: 105.2.
• 7-day incidence Nationally 16.8: Kildare 33.7.

Government decision

On the 31st of August the government announced that the specific public health measures introduced in Kildare on 7th August would be lifted with immediate effect\(^\text{17}\). These measures were given effect in regulations\(^\text{18}\).

Date: 3rd September

Key NPHET Advice:

- A proposal for a five-level framework of public health restrictive measures to provide a mechanism for managing the on-going response to COVID-19
- Proposed that phase 4 measures (reopening of pubs and bars and greater numbers at mass gatherings) should only be activated when the disease trajectory had been stable for at least 2 weeks (and no sooner than Monday 21st September).

Rationale:

The NPHET proposed a five-level framework of measures as an addition to the Framework for Future COVID-19 Pandemic Response sent to Government for consideration on 23rd July. The framework was developed based on learnings from the introduction of the most recent measures, and sought to provide (1) a coherent, stepwise and phased approach to the introduction and escalation of measures and (2) greater clarity and certainty across all aspects of society in relation to measures.

In relation to Phase 4 measures (pubs and mass gatherings), NPHET advised that it was inappropriate to advance them at that point in time given the nature of the current epidemiological situation and the recent reopening of schools.

Date: 11th September

Key NPHET Advice:

- Finalised version of five-level framework submitted for consideration
- Extension of measures nationally (aligned with Level 2 of Framework) for a further three-week period (4th October 2020)
- Pubs and bars should only open and numbers at mass gatherings increased only if there has been at least 2 weeks of stabilization in the disease trajectory, and no sooner than the 21st September 2020. Under Level 2, pubs and bars that do open should have an occupancy of 25.
- Application of enhanced Level 2 measures in Dublin (only meet with one other household, pubs/bars not to open, limits on visiting in LTRC facilities, increased measures in HE/FE, advice to limit travel out of Dublin)

Rationale

In its letter on the 11th of September\(^\text{19}\), the NPHET continued to express concern regarding the epidemiological situation nationally, highlighting the persistently high average number of cases and

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the steady increase in incidence rates. NPHET also noted evidence of a subtle shift in the age profile of the cases identified in the past several weeks, and expressed concern with the rise in cases in older people. It also noted that while Dublin was influencing the national picture, there was also a high number of cases across the country.

The NPHET considered the epidemiological situation in a number of counties that are of particular concern, namely Limerick, Kildare, and Dublin. In examining the particular circumstances in Limerick and Kildare, the NPHET concluded that measures over and above Level 2 were not warranted. The NPHET agreed that the situation in Dublin was different than that anywhere else in the country and was giving cause for grave concern with the epidemic growing at a rate of 4% per day, with a R of 1.4 and a doubling time of 16 days. It further noted that given the population size of Dublin, there was a potential to transmit widely and quickly within Dublin and to other areas, and given the volume of disease there was a risk of increased transmission in vulnerable groups. While the NPHET considered that the data did not strongly support a move to Level 3 at the time, it advised that additional measures should be taken targeting social gatherings and inter-household interactions.

Supporting Data

- 5-day case average: National 172, Dublin 97.6, Limerick 9.2, Kildare 11.8
- 14-day incidence: National 38, Dublin 67.8, Limerick 63.1, Kildare 61.6
- 7-day incidence: Nationally 22.1, Dublin 41.7, Limerick 27.7, Kildare 35.1
- 47 cases in hospital, 6 in ICU, 6 deaths in September
- R is just above 1.0 nationally, but approx. 1.4 for Dublin

Government decision

The Government, on 15 September20, published the Plan for living with COVID-19 and announced measures as follows: Level 2 of the new framework in place nationally until 4 October; additional measures in Dublin (6 visitors from one other household permitted to visit; enhanced measures in higher and third level education; those in Dublin encouraged to limit travel outside of Dublin); and announced the reopening of wet pubs outside Dublin on 21 September. The measures were given effect in regulations2122.

Date: 17th September

Key NPHET Advice:

- Application of Level 3 Measures in Dublin for 3 weeks (including the continued closure of wet bars, restaurants to close for all indoor services, visits to private homes restricted to one other household only, no non-essential travel in/out of Dublin).
- Continuation of Level 2 Measures nationally, but concern expressed about the trajectory of disease and caution that it will “require a united, concerted effort by everyone...to bring the situation back under control”

Rationale

In its letter of 17 September\(^{23}\), the NPHET expressed concern in relation to the situation nationally, with all key indicators of disease incidence and severity increasing. It also noted a noticeable increase in cases in older people. While it concluded that further measures were not required at that time, it cautioned that cases, hospitalisations and deaths would increase if there wasn’t a united, concerted effort by everyone to arrest the current trajectory of the disease and to bring the situation back under control.

The NPHET emphasised that its major concern at that time was in relation to Dublin. The NPHET stated its view “that the profile of the disease in Dublin is at an extremely critical juncture and it believes that the window of opportunity to bring the disease under control in the county without significant additional measures is no longer available. It is the strong view of the NPHET that further measures must now be taken.” It noted that proposed measures “are targeted specifically at limiting social contacts and reducing congregation.” It outlined the very different level and pattern of cases in Dublin with a combination of high incidence rate and high growth rate meaning a force of infection about 3-5 times greater than in the rest of the country, and the risk associated with this volume of disease in terms of protecting vulnerable groups and potential spill over into other parts of the country. It also highlighted proportion of cases linked with community transmission in Dublin.

Supporting Data

Dublin:
- 5-day case average: 138.6; 7-day incidence: 68.4; 14-day incidence: 110
- 48 cases in Dublin hospitals, 8 in ICU
- R number estimated at 1.3 – 1.7

National:
- 5-day case average: 246; 7-day incidence: 34.3; 14-day incidence: 56.4
- 73 cases in hospital, 14 in ICU, 14 deaths in September
- R: 1.3 – 1.7, growth rate: 5-7%, doubling time: 10-14 days
- Modelling based on current trajectory estimated between 500 – 1,000 cases per day in one month’s time, with 50-60% of cases in Dublin.

Government decision

The Government announced on 18 September\(^{24}\) a move to Level 3 in Dublin. The measures were given effect in regulations\(^{25}\).

Date: 24\(^{th}\) September

Key NPHE\(T\) Advice:
- Application of Level 3 Measures in Donegal for 3 weeks (wet bars and restaurants to close for all indoor services, and visits to private homes restricted to one other household only).

Continuation of Level 2 Measures nationally, but “the NPHET continues to stress that concerted efforts are required across every county to prevent a further deterioration in the profile of the disease and to bring the situation back under control nationally and specifically in the counties [Kildare, Wicklow, Louth, Waterford, Cork, Galway] noted above”.

Rationale

In its letter of 24 September\(^\text{26}\), the NPHET concluded that the situation in Donegal had further deteriorated and that further measures needed to be taken. It noted that the 7 day and 14 day incidence rates continued to increase quickly and were the highest in the country with the number of cases in the most recent 14 day period having increased by over 600% compared to the previous 14 day period. It also noted the 7 day incidence rate for Derry City and Strabane (141 per 100,000) and that mobility data suggested that there was significant movement of people for work, education, recreation and social purposes within the county.

The NPHET also noted that the situation nationally remained concerning with a further deterioration in all indicators over the last week and high R number and growth rate, making the future trajectory difficult to predict. While it didn’t recommend any further measures nationally at that time, it reiterated its advice that concerted efforts were required across all counties to bring the disease under control.

Supporting Data

Donegal:
- 5-day case average: 26 per day; 7-day incidence: 101.8; 14-day incidence: 148.2
- R number estimated at 1.5-1.7

National:
- 5-day case average: 293; 7-day incidence: 41.7; 14-day incidence: 76.5
- 90 cases in hospital, 17 in ICU, 22 deaths in September
- R: 1.5-1.7, growth rate: 5-6%, doubling time: 12-14 days

Government decision

The Government announced on 24 September\(^\text{27}\) a move to Level 3 in Donegal. The measures were given effect in regulations\(^\text{28}\).

Date: 1\(^{st}\) October

Key NPHET Advice:
- Continuation of Level 2 measures nationally for a further three week period (Dublin and Donegal at Level 3 already) but with escalated measures in relation to social and family gatherings (max 6 visitors from 1 other household)


Rationale

In its letter of 1 October, the NPHET expressed its growing concern with the continuing deterioration in the situation nationally. The situation in Dublin and Donegal remained concerning where Level 3 measures had not had sufficient impact to date however the NPHET’s main concern was the overall national picture. While epidemiological data at that time did not strongly support a move to Level 3 nationally, the NPHET was of the view that some additional measures were necessary, targeted at inter-household interactions and socialisation given the growing experience and evidence in relation to the role that these activities are having on the increasing transmission of the virus across the country. While it didn’t advise measures beyond this, the NPHET reemphasised the growing concern it had with the current trajectory of the disease, the current profile of cases and trends in disease severity and the implications a continuation in these trends would have for the acute hospital system. It noted that the situation would be kept under close review over the coming days.

Supporting Data

National:

- 5-day case average: 370; 7-day incidence: 52.4; 14-day incidence: 92.1
- 122 cases in hospital, 20 in ICU, 32 deaths in September
- R: 1.2-1.4, growth rate: 4-5%, doubling time: 14-18 days
- 30% increase in the number of COVID-19 hospitalisations in the past week

Date: 4th October

Key NPHET Advice:

- Application of Level 5 measures nationally for 4 weeks. It was specifically noted that schools should remain open.
- Series of recommendations in relation to communications, inspection and enforcement measures and public service supports.

Rationale

In its letter of 4 October, the NPHET stated that the measures currently in place were not sufficiently controlling the disease as evidenced by a high volume of community transmission and sustained increases across key indicators, particularly since the NPHET’s last meeting. In particular, the NPHET noted that between the 1st and 4th October there was a sudden and very significant deterioration in the disease profile with a 25% increase in daily cases, a 27% increase in the 7-day incidence. In addition, in the seven days to October 4th, there was a 24% increase in hospitalisations and a 23% increase in the positivity rate.

The NPHET advised “that it is vital that we do everything in our power now to arrest the current trajectory nationally and very substantially suppress the virus back down to a low level of transmission in advance of the winter months...and to protect core priorities.” The NPHET believed “that proactive and robust measures must now be taken such that very significant suppression of the disease with a reproduction number well below 1.0 is achieved” adding that “the profile of the

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disease is such that a graduated approach will not have sufficient or timely impact on the trajectory and scale of the disease and will not protect the core priorities set out above. A graduated approach would, ultimately, result in application of Level 5 measures as mitigation.” The NPHET reemphasized the importance of decisive action to limit the impact on public health while protecting core priorities of preventing unnecessary disruption to non-COVID care, protecting vulnerable groups and averting disruption to education and childcare services.

Supporting Data

National:

- 5-day case average: 462; 7-day incidence: 66; 14-day incidence: 108
- Sustained increased in 14-day incidence in those aged 65+: 67.3 per 100,000
- 134 cases in hospital, 22 in ICU, 34 deaths in September
- Modelling based on current trajectory estimating between 1,600-2,300 cases per day by 7th November, with 43 people with Covid-19 being hospitalised per day by then.

Government decision

The Government announced on 5 October a move to Level 3 nationally. The measures were given effect in regulations.

Date: 8th October

Key NPHET Advice:

- The NPHET reemphasised the importance of a continuing focus on communications, inspection and enforcement measures, and public service supports as set out in its letter of the 4th October.

Rationale

In its letter of 8 October, the NPHET expressed deep concern in relation to the epidemiological situation across the country, which had further deteriorated since it last met on the 4th October. The NPHET will continue to monitor the situation very closely.

Supporting Data

National:

- 5-day case average: 508; 7-day incidence: 72; 14-day incidence: 124
- 159 cases in hospital, 27 in ICU, 8 deaths in October to date
- In the week to Saturday 3rd October, there were 11 new clusters notified in nursing homes (n=10) / community hospitals (n1), with 86 linked cases.
- The estimate of effective reproduction Re for the country is 1.2;

Government decision

The Government announced on 14th of October34 to move to Level 4 in counties Donegal, Cavan and Monaghan and implement a national ban on household visits35. The measures were given effect in regulations36.

Date: 15th October 2020

Key NPHET Advice:

• Application of Level 5 Measures nationally for 6 weeks. It was specifically noted that schools should remain open.

Rationale

The NPHET in its letter37 noted further significant deterioration in all key indicators of disease transmission and severity, widespread community transmission across the country, and an accelerating growth rate with cases and hospitalisations rising faster than was predicted by modelling. It further emphasised that all triggers for escalation to Level 5 as set out in the Living with Covid Plan continue to be met. The NPHET also expressed concern in relation to the ability to continue to protect core health and education services, the potential disproportionate impact on vulnerable groups (noting in particular the increasing number of outbreaks in nursing homes and in the Irish Traveller community), and risks for the health service coming in to the winter period, including constraints on testing and public health capacity and demands on acute hospital capacity with implications for non-COVID care.

The NPHET concluded that escalating measures introduced over the course of September and October had “not had sufficient impact to date” and called for “a more aggressive strategy to achieve the levels of suppression that are necessary to bring the disease back under control”. It also emphasised that an escalation to Level 5 was inevitable, the risk of waiting for a further period of time was too great, the need for an R number well below 1, and “that the earlier proactive action is taken, the greater chance there is of quickly reversing the current trajectory of the disease and limiting the impact on public health....and protecting vulnerable groups and non-COVID health services and education.” It further noted the deteriorating situation across the EU and that “more comprehensive restrictions are being increasingly reintroduced as earlier less-intensive measures have failed to control the disease”.

Supporting Data

• 5-day case average: 946; 7-day incidence: 133; 14-day incidence: 207
• 7-day average positivity rate: 6%
• 234 cases in hospital, 30 in ICU, 33 deaths in September & 30 in October
• R: 1.4 (1 in Dublin, 1.6 – 1.8 25 counties), growth rate: 5-6% (1% Dublin, 6-7% 25 counties), doubling time: 12-14 days
• Data relating to traffic routes, public transport, financial services and mobile operator data, show some impacts on behaviour but nowhere near the level in March/April and not at the levels required to suppress transmission rates.

Modelling showed that were trends to continue there would be between 1,800 - 2,500 cases per day, between 450 and 600 people in hospital, and between 80 and 110 people in critical care by the 31st of October.

However, if the R was reduced to 0.5 for a period of three weeks, case numbers could fall to 250 – 300 per day by end of period but could rise rapidly again to c. 1,000 cases per day by mid-December based on R returning to 1.4. If R was reduced to 0.5 for six weeks, cases numbers could fall to 50 - 100 per day, with cases not expected to rise above 300 cases per day until January 2021 even if R returned to 1.4.

**Government decision**

On the 19th of October, the Taoiseach announced that the country would move to Level 5 restrictions effective as of the midnight on the 21st of October. The measures were given effect in regulations.

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