



**National Public Health Emergency Team – COVID-19
Meeting Note**

Date and Time	Tuesday, 25 th February 2020 (Meeting 8) at 3pm
Location	Department of Health, Miesian Plaza, Dublin 2
Chair	Dr Tony Holohan, Chief Medical Officer, DOH
Members in Attendance	Dr Cillian de Gascun, Laboratory Director, NVRL and Expert Advisory Group Chair Dr John Cuddihy, Acting Director, HSE HPSC Ms Tom McGuinness, Asst. National Director, Office of Emergency Planning, HSE Mr David Leach, Communications, HSE Dr Jeanette McCallion, Medical Assessor, HPRA Mr Sean Egan, Head of Healthcare Regulation, HIQA Dr Ronan Glynn, Deputy Chief Medical Officer, DOH Dr Colette Bonner, Deputy Chief Medical Officer, DOH Mr David Keating, Communicable Diseases Policy Unit, DOH Ms Deirdre Watters, Communications Unit, DOH Dr Philip Crowley, National Director, Quality Improvement, HSE (on behalf of HSE Office of the Chief Clinical Officer) Dr Kevin Kelleher, Asst. National Director, Public Health, HSE Dr Breda Smyth, Public Health, HSE Mr Liam Woods, National Director, Acute Hospitals, HSE Mr David Walsh, National Director, Community Operations, HSE Ms Denise Long, Office of Emergency Planning, HSE Mr Liam Morris, Acute Hospitals, DOH Dr Eibhlin Connolly, Deputy Chief Medical Officer, DOH Mr Paul Connors, Communications, HSE
Apologies	Dr Colm Henry, Chief Clinical Officer (CCO), HSE
In Attendance	Ms Aoife Gillivan, Communications Unit, DOH
Secretariat	Ms Rosarie Lynch and Ms Claudine Hughes, Patient Safety Surveillance Unit, NPSO, DOH

1. Welcome

The Chair welcomed the group and introductions were made. The Chair then handed over the Minister for Health, Mr Simon Harris. The Minister thanked the NPHE, HSE and other parties involved for their work to date on the Public Health Emergency and noted the international nature of the issue. He acknowledged the importance of decisions that are grounded in public health advice and in line both ECDC and WHO guidance to inform Ireland's response.

A discussion took place about the advice for travellers, passengers at airports / ports, mass gatherings, hospital and ambulance capacity, self-isolation/isolation facilities and general information and advice for the public. These topics were discussed in more detail later in the meeting.

2. Conflicts of Interests Declarations

Verbal pause and none declared.



3. Note of Previous Meeting

The note of the previous meeting was circulated to members via email prior to Meeting 5 (on 17th February 2020).

Meeting 5 note taken as an accurate record.

Meeting 6 (ad hoc teleconference 23th February 2020) note taken as an accurate record.

4. Matters Arising

All other actions from meetings 5 and 6 are either complete or on today's agenda.

5. Situational Report and Governance

The HSE's COVID-19 Report to NPHE (No. 3) was tabled. The format of the report is still being refined.

The group reviewed and discussed the current ECDC case definition (currently in use in Ireland) and the most recent data across countries affected.

Action: It was agreed that the geographical criteria of case definition for Ireland should be now updated to include China, Hong Kong, Iran, Italy (Emilia-Romagna, Lombardy, Piedmont, Veneto), Japan, Singapore and South Korea (identified as areas with presumed community transmission of COVID-19, as of 25 February 2020).

The potential challenge posed by differences in approach between ECDC and UK authorities was acknowledged.

6. Updates on current situation (for information and discussion)

a. Current Assessment / Epidemiology

As above, the HSE's COVID-19 Report to NPHE (No. 3) was tabled.

The HSE presented a preparedness update. Discussions included acute and community capacity, accommodation options, isolation requirements and modelling approach to inform further planning, communications and procurement.

The ECDC are currently undertaking an update of their risk assessment and continue to monitor the evolving situation so as to provide scientific and case definition advice to member states. Ireland continues to participate in the ECDC engagements.

It was noted that DOH continues to engage with counterparts in Northern Ireland.

b. Preparedness

Planning assumptions - HSE/HPSC

A deliberative paper on containment and mitigation considerations was tabled by the HSE. Further discussion on this paper is due to place at the HSE National Crisis Management Team (NCMT) meeting later today. It presents options across four scenarios, informed by ECDC guidance, and



considers some aspects further from a national perspective. It also includes a SWOT analysis, list of interventions, surveillance considerations and a set of checklists for different types of service (adapted from those previously used for pandemics). The HSE advised that hospitals have been requested to provide update on their planning and surge capacity.

Action: HSE to submit paper on current critical care capacity and surge options.

A discussion took place on the value of swabbing asymptomatic individuals. Advice has been sought from the ECDC and a response is awaited. The advice of the EAG would also be sought.

Action: To submit the question to the EAG - *During containment, should asymptomatic contacts of confirmed cases of Covid-19 be tested?*

The HSE advised that work is underway to evaluate preparedness against the checklists in the document tabled. This is in advance of the work to be undertaken by the modelling group.

Action: HSE NCMT to look at preparedness against the checklist criteria described in the deliberative paper on the *COVID-19 Containment and Mitigation considerations for HSE*. HSE to present update to NPHEM meeting (3rd March 2020).

A deliberative options paper on locations for testing was tabled by the HPSC. A detailed discussion took place. Four possible options (relating to four different settings) and the challenges/restraints posed by them were presented. It was agreed that there was currently a lack of public health evidence to choose one option over another. Therefore, it was agreed to consider the practical implications and what might be the most feasible option.

Action: HSE NCMT to consider the feasibility of the potential models of out of hospital testing, including rollout timelines. Update on this, including identification of the most suitable option, to be presented to NPHEM for decision on 3rd March 2020.

A discussion took place on a deliberative paper, tabled by the HPSC on *National Interim Guidelines for a patient undergoing diagnostic testing for COVID-19 in a hospital but who is suitable for home isolation while awaiting test results* and a discussion took place.

Action: Patients undergoing diagnostic testing can now be considered for self-isolation at home while they await the results of their test. Guidance will be provided to individuals with regard to self-isolation. HSE to commence implementation.

Guidance for large gatherings

Deliberative paper on mass gatherings, based on WHO guidance, was tabled by HPSC.

It was proposed that a NPHEM sub-group be established to consider guidance requirements and the approach to mass gatherings and large events.

Action: NPHEM Subgroup to be established to consider guidance and to develop an approach to the risk assessment of mass gatherings and large events, chaired by the DOH. Update on this to be provided at NPHEM meeting (3rd March 2020).



The NPHE specifically discussed issues relating to the large gathering of people in attendance for a number of international rugby matches involving Italian and Irish teams which are due to take place over the weekend of 6th March 2020. In light of the recent increase in cases related to 4 provinces of northern Italy, and given that these matches are due to take place in less than one incubation period, it is the view of NPHE that due to public health concerns it would be inappropriate, at this time, for a large number of people from an affected area to attend such mass gatherings.

Action: A recommendation will issue to the Minister that the forthcoming rugby matches between Ireland and Italy (over the weekend of 6th/8th March 2020) should not proceed.

HSE

The situational report update was provided by the HSE. Subsequent to the updates provided by the HSE at previous meetings, the further updates were provided in the following areas: Acute Hospitals, Occupational Health, Procurement, Pre-hospital Services, HSE Community Operations and Port Health. Structure of the report is yet to be finalised.

Discussion took place on the information supports available and required at the main airports, other ports of entry and public offices.

Action: NPHE has requested that HSE staff are available in airports (to commence with Dublin as the main point of entry) so as to provide advice and informational leaflets to arriving passengers. HSE NCMT to consider how this should be put in place quickly and to provide update at NPHE (3rd March 2020).

HPRA

The HPRA updated the group and noted that work continues at national and European levels in relation to regulatory issues, supply of medicines and vaccination development.

The HPRA have proposed reconvening a group previously used for Brexit to co-ordinate potential medicines shortages. HPRA will liaise with the HSE in this regard.

NVRL

A presentation was made by NVRL to the group outline their plans to increase testing capacity should this be required.

Expert Advisory Group

It was noted that it would be helpful for the EAG to consider at this point the possibility of clinical trials of antivirals, including the HPRA update mentioned previously applies. There was also a discussion on a possible WHO protocol.

Action: HPRA to forward information to EAG in relation to clinical trials procedures for their consideration.

7. Interaction with Government Departments / Agencies

(a) Other government departments

DOH communications provided an update on the cross government Communications Co-ordination Group. There have been requests from other government departments for COVID-19 information posters for staff and public spaces. Draft posters have been prepared by DOH communications and



the work on this acknowledged. More work is required to ensure an accurate and public-friendly message aligned to HPSC guidance.

Action: HPSC to work with DOH Communications to agree and finalise the public facing posters for widespread dissemination.

(b) Health Threats Co-ordination Group

DOH provided an update. Updates on mass gathering and business contingency planning will be provided to the HTCG at the meeting tomorrow.

In addition, the HTCG held a meeting this morning of their Accommodation Sub-group to discuss accommodation options. A template has been prepared and is being circulated to the stakeholders at the meeting. They are to complete and revert with their position on possible accommodation solutions.

(c) National Emergency Co-ordination Group

Not convened.

(d) Other as needed.

Scenario planning for Ireland for a similar event to what seen in Italy was discussed. Consideration to the given to any powers and arrangements which may be needed to support such a response.

8. Communications Planning

a) Key stakeholder communications, including public communications

There was discussion on the capacity of both the HSElive phone line and capacity of the public health services to respond. The HSE advised that all public health doctors are participating in the response. It was noted that all up to date information is posted on the HSE website and agreed that the public should be directed to the HSE website as their first port of call.

Action: HSE website should now be promoted as the most suitable first point for the public seeking information. Communications to promote awareness of this resource.

Discussion also took place on the timing of updated case definitions and the need for prompt communications to staff. HSE advised they have a mechanism for this across acute hospitals and can use to alert staff to the change in case definition.

9. AOB

NIL identified.

10. Date of next meeting

Tuesday, 3rd March 2020 at 3:00pm.

There is also the possibility of a teleconference in the interim should the need arise.