



National Public Health Emergency Team – COVID-19
Meeting Note – Ad Hoc Meeting

Date and Time	Wednesday, 11 th March 2020 (Meeting 13) at 9.15pm and concluded Thursday 12 th March 2020 ca. 1am.
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 Dr Darina O’Flanagan, Special Advisor to the NPHE Dr Colm Henry, Chief Clinical Officer (CCO), HSE Dr Ronan Glynn, Deputy Chief Medical Officer, DOH Dr Alan Smith, Deputy Chief Medical Officer, DOH Dr Eibhlin Connolly, Deputy Chief Medical Officer, DOH Dr Siobhan O’Sullivan, Chief Bioethics Officer, DOH Ms Tracey Conroy, Assistant Secretary, Acute Hospitals Division, DOH Mr Fergal Goodman, Assistant Secretary, Primary Care Division, DOH Mr Paul Bolger, Director, Resources Division, DOH Dr Kathleen MacLellan, Assistant Secretary, Social Care Division, DOH Mr David Keating, Communicable Diseases Policy Unit, DOH Ms Deirdre Watters, Communications Unit, DOH Dr Kevin Kelleher, Asst. National Director, Public Health, HSE Dr Breda Smyth, Public Health, HSE Mr Colm O’Conaill, Policy and Strategy Division, DOH Ms Kate O’Flaherty, Head of Health and Wellbeing, DOH
By teleconference	Mr Sean Egan, Head of Healthcare Regulation, HIQA Mr Liam Morris, Acute Hospitals, DOH Mr Tom McGuinness, Asst. National Director, Office of Emergency Planning, HSE Mr Liam Woods, National Director, Acute Hospitals, HSE Mr David Walsh, National Director, Community Operations, HSE Mr David Leach, Communications, HSE
In Attendance	Ms Marita Kinsella, Director, NPSO, DOH Mr Ronan Toomey, Communicable Diseases Policy Unit, DOH
Secretariat	Ms Claudine Hughes and Ms Clodagh Murphy, NPSO, DOH

1. Welcome

The Chair welcomed the group and thanked the group for their attendance, at short notice, either in person or via teleconference. The purpose of the meeting is to consider the current data and information regarding the progress of the disease at national and international level, and in light of the evolving situation consider whether a recommendation should be made to Government with regard to societal public health measures.

2. Matters Arising

The HPSC provided an update on the epidemiological situation nationally and internationally.



Epidemiological Update

In particular, the NPHET noted the increase in additional cases identified today (11th March) as well as over recent days. The NPHET also noted that some cases continue to be associated with travel to affected areas abroad, but that there are reports of community transmission in a number of individual cases. Furthermore, cases have been reported geographically in several areas across the country. The NPHET noted the number of cases admitted to hospital requiring ICU care and that a number of clusters of infection had been reported, including in two hospital settings. With regard to the evolving international situation and particularly within Europe, the NPHET took note of the *ECDC Rapid risk assessment: Novel coronavirus disease 2019 (COVID-19) pandemic: increased transmission in the EU/EEA and the UK – sixth update* published on 11 March 2020.

NPHET noted in particular the advice of the ECDC that “*the EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19*” and that “*containing transmission to local epidemics is no longer considered feasible*”. Furthermore, the ECDC advised that social distancing measures should be implemented early in order to mitigate the impact of the epidemic and to delay the epidemic peak “*given the current epidemiology and risk assessment, and the expected developments in the next days to few weeks*”.

Consideration of Public Health Measures

Given the current epidemiological situation in Ireland and the advice of the ECDC, the NPHET agreed that it was now necessary to move to Delay Phase and that additional actions to disrupt the spread of COVID-19 are now required.

According to the ECDC, while decisions in relation to social distancing measures should be based on evidence, there are also social and economic considerations for countries in introducing such measures. It was acknowledged that a suite of social distancing measures are likely to be additive in terms of effect and there is uncertainty in relation to the magnitude of effect of individual measures. However, such measures would be expected to both delay a peak and reduce its size.

Based on the recently published ECDC paper and from modelling work undertaken in the UK, potential measures were discussed by the NPHET. It was agreed that the public health measures should now be recommended to Government. NPHET considered that measures should be considered in two broad groups:

- those which are focused on messages to the individual about actions they can take themselves;
- population-level measures.

Individual measures

A discussion took place in relation to measures that individuals could undertake to help attenuate the spread of COVID-19. The international experience was also considered regarding measures that have been put in place elsewhere e.g. closing of museums and tourist sites. These measures included isolation of cases, social restriction for vulnerable groups, cocooning, reduction in contacts and social distancing.



Isolation of cases

The questions considered was: Should patients who are symptomatic be advised to stay at home for 14 days, even without a positive test result? The group agreed that this measure should be recommended.

Social restriction for vulnerable groups/cocooning

The question considered was: should there be additional specific measures recommended for those in vulnerable groups - acknowledging that there is a spectrum of potential measures from social distancing through to full cocooning?. After discussion, it was agreed there should be a continued focus on protecting the most vulnerable and consideration will continue on measures in line with disease progression.

Reduction in contacts

After discussion, the group agreed that it is recommended that people reduce their contacts. An approximation of reducing workplace contacts by 25% and reducing out-of-workplace contacts by 75% was outlined as a suitable aim, and measures should be proportionate to achieving this aim.

Population-level measures

A discussion took place in relation to measures that could be recommended to Government for implementation at a population-level to help attenuate the spread of COVID -19. These measures included restrictions on mass gatherings, closure of / restrictions of face-to-face educational and childcare facilities, implementation of remote working facilities and restriction of visiting at hospitals, long term care settings, mental health facilities, prisons and spacing measures in homeless shelters.

Mass gathering restrictions

It was recognised that even at outdoor events, it is likely that people will congregate in close proximity at the event as well as prior to and after the event and the international measures that have been adopted in other countries were considered. The group agreed that it should recommend the restriction of mass gatherings of more than 100 people indoors; and more than 500 people outdoors.

Closure of schools and other educational facilities

It was acknowledged that school closures will present a challenge for schools in terms of continuity of education for students. It was acknowledged that the closure of schools and creches will also present challenges for parents and service providers. It was agreed that the closure of schools, third level education facilities, creches and other childcare facilities should be recommended to Government and that this would be recommended for a two-week period initially and reviewed at that point.

Timeframe for recommendations

The NPHE agreed that these recommendations should be made to Government for introduction for the period from Friday 13th March 2020 until Wednesday 29th March 2020. The NPHE will keep the impact of these measures under review.



Action: The NPHE now recommends the following measures to attenuate the spread of symptoms of COVID-19:

1. Individuals who have symptoms should self-isolate for a period of 14 days.
2. Individuals should reduce discretionary social contacts as much as possible.
3. Elderly and/or medically vulnerable people should reduce as much as possible contacts outside home.
4. There should be no mass gathering:
 - a. involving more than 100 people if located indoors
 - b. involving more than 500 people if located outdoors.
5. Closure of museums, galleries and tourism sites.
6. Closure of schools, creches, other childcare facilities and higher education institutions.
7. Reductions of workplace contacts where possible and implementation of remote working practices and teleconferencing where possible and not to travel for meetings. Work times and break times should be staggered, where possible.
8. Restriction of visiting at hospitals, long term care settings, mental health facilities, prisons and spacing measures in homeless shelters.

3. National Plan

DOH provided an outline of the progress on the preparation of a National Action Plan on COVID-19 currently being developed across Government and led by the Department of the Taoiseach.

It was noted that there will need to be a key focus on increasing public health and surveillance capacity. There will also be a key focus on communications and stakeholder engagement, particularly in relation to messaging around personal behaviours to ensure the public and various stakeholders are provided with clear advice on the measures and what they can do as part of the national response.

Finally, the NPHE discussed the critical role of public health measures such as sample, testing, contact tracing and active surveillance and noted that these should be strengthened and progressed by the health service in addition to the measures recently approved by Special Cabinet Committee on COVID-19. Progress on these will be kept under review by the NPHE.

4. Close of Meeting

The Chair thanked the group for the meeting and advised that the agreed recommendations will now issue by letter to the Minister for Health for consideration by Government.