



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

1st May 2020

Via email to Private Secretary to the Minister for Health

Dear Minister,

I write further to today's meeting of the COVID-19 National Public Health Emergency Team (NPHET).

As you are aware, in the short few months since the first cases of COVID-19 were reported in Ireland at the end of February 2020, it has become necessary to take unprecedented steps to control the disease. A tiered approach of public health social distancing measures was first announced by An Taoiseach on 13th March, and these measures were further strengthened on 24th March and again on 27th March, before being extended to 5th May 2020. The risks to human health and life caused by COVID-19 warranted the public health measures that have had to be imposed.

These measures have shown a clear impact in suppressing the transmission of COVID-19. People across the country have contributed to this achievement through changing behaviours, complying with the full range of public health measures in a responsible and caring way, through having regard to the safety of those at greatest risk and indeed of everyone in society.

These collective efforts are now resulting in measurable improvements in the progression of COVID-19 in Ireland. The reproduction number of the virus (R) (i.e. the average number of infections generated by an infectious person) has now fallen below 1, with indications being that it is now between 0.5 and 0.8. It has since been estimated that in the initial stages of the unmitigated pandemic the R_0 could have been as high as 4.

Notwithstanding, the real efforts that have been made over the last number of weeks to suppress the virus, the NPHET continues to have concerns regarding: the ongoing extent of this disease in the community; the specific burden being experienced by residential care facilities; the current COVID-19 related occupancy levels in hospitals and ICU settings; the transmission profile of COVID-19 amongst healthcare workers; and the burden of mortality, particularly in vulnerable groups.

Ireland's situation at the time of consideration by NPHET was as follows:

- i. the number of confirmed cases stands at 20,612 (with an average of 414 cases notified per day over the past 5 days);
- ii. 740 confirmed cases in hospital today;
- iii. the number of confirmed COVID-19 patients requiring critical care today is 103, with a further 20 patients suspected of having COVID-19 also in critical care;
- iv. 371 number of clusters in residential care facilities to date;
- v. the number of confirmed cases in residential care facilities stands at 4,590 of which 3,679 are in nursing homes (with an average of 194 cases notified per day over the past 5 days);
- vi. 5,684 cases are associated with healthcare workers;
- vii. there have been 1,232 deaths recorded to date, with 43 notified yesterday.

Furthermore, the ECDC published an updated risk assessment for the EU/EEA and the UK on 23rd April last and the NPHET noted their assessment that:

- *The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels. The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.*
- *The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels. The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.*
- *The risk of resurgence of sustained community transmission in the EU/EEA and the UK is currently **moderate** if measures are phased out gradually and accompanied by appropriate monitoring systems and capacities, with the option to reintroduce measures if needed, and remains **very high** if measures are phased out without appropriate systems and capacities in place, with a likely rapid increase in population morbidity and mortality.*
- *The reduction in the rate of incident reported cases in many EU/EEA Member States is almost certainly due to the introduction of stringent control measures. However, a progressive strategy to phase out measures, where an increasing proportion of the population returns to work, could mitigate the risk of significant upsurges, and maintain incidence at a rate within hospital capacity and allow monitoring systems to identify the need for re-introduction of specific measures if there is a sharp resurgence.*

- *If control measures are to be lifted, conscious efforts to protect the vulnerable and careful choices by all in their interactions with others will help to moderate the increased risk of transmission.*

Given the latest national data and the updated ECDC risk assessment, the NPHET today considered the public health measures currently in place (letters of 12th, 24th and 27th March and 10th April refer).

Arising from the discussion at the meeting, the NPHET recommends the extension of the current public health measures; with this extension effective until midnight on Sunday 17th May 2020. The NPHET will keep this under review during the intervening period.

In light of the extension date for the public health measures, the NPHET considered that the powers contained in the Health Act 1947 (Section 31A – Temporary Restrictions) (COVID-19) Regulations, 2020 should be updated and continue to be available for use by the Gardaí in the coming weeks.

The NPHET is conscious of the impact of the public health social distancing measures on people's daily lives. Bearing this in mind, in the intervening period, the NPHET has agreed that the following measures are appropriate for recommendation to Government, as it is considered that they will not significantly increase the overall public health risk associated with the disease:

1. the 'stay at home' restriction now be expanded geographically to cover an area within 5km from the home rather than the current restriction of 2km;
2. continue to advise those aged 70 years of age and over and the medically vulnerable of the importance of remaining cocooned for their safety, however, should they now wish to leave their homes to engage in exercise and activities outdoors, they should continue to adhere to strict social distancing, keep 2 metre from other people, comply with appropriate guidance regarding maintaining a 'no touch' approach and hand hygiene on returning home. Guidance will also be developed for the general public on how to maintain social distancing and assist in keeping those aged 70 years of age and over, and the medically vulnerable safe;
3. the use of face coverings in the community will be implemented as part of the reduction of public health social distancing measures, and work will now be progressed to ensure that supplies are available, bearing in mind the need to ensure necessary availability of medical grade masks for use by healthcare workers. Guidance will be developed in relation to the correct and appropriate use of such face coverings and further recommendations on this matter will be considered by the NPHET.

I would also wish to bring to your attention that, at today's meeting, the NPHET agreed a *Public Health Framework Approach in providing advice to Government in relation to reducing social distancing measures introduced in response to COVID-19*, and I am pleased to enclose the Framework for your information. The NPHET has worked effectively to provide clear and responsive public health advice to inform Government as part of its decision-making process on the current pandemic. This Framework will assist the NPHET in continuing to provide such advice, as consideration is given to changing the restrictive measures over time.

The purpose of this public health framework approach is to inform a slow, gradual, step-wise and incremental reduction of the current public health social distancing measures, in a risk-based, fair and proportionate way with a view to effectively suppressing the spread of COVID-19 disease while enabling the gradual return of social and economic activity. This framework approach contains a range of indicative or illustrative measures set out under a number of different headings (categories) and across a number of potential phases. This framework acknowledges that there are other important considerations regarding the reduction of measures that Government will have, such as social and economic considerations, adherence, public sentiment, acceptability, feasibility, overall population health & wellbeing and others.

As previously outlined, the NPHET continues to closely monitor the current epidemiological situation and the deployment of public health measures to address outbreaks and clusters in residential health care and hospital settings to ensure that there is a strong health service focus on the protection of 'at risk' people in these settings. There is ongoing implementation by the HSE of the priority actions previously agreed by the NPHET for these settings. In addition, enhanced analysis of mortality data is ongoing and is informing the pattern of the disease in long term residential care settings; reassuringly preliminary findings demonstrate that the point in time mortality census aligns closely to the official HPSC mortality data and the mortality statistics reported to HIQA.

Officials from this Department have been and will continue to be available to work with relevant HSE staff, other health agency staff and staff across Government on the ongoing implementation and rollout of previous recommendations and actions.

The NPHET of course also remains available to provide any further advice and recommendations that you or the Government may determine that it requires in order to assist it in making the difficult and complex decisions for which you are responsible.

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

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