Epidemiology

Case definition

https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casedefinitions/

Interim case definition for possible case – ‘history of travel to areas with presumed ongoing community transmission of 2019-nCoV.’

Ireland Case update
To date, there are NO laboratory confirmed Irish cases meeting the above case definitions.

NVRL 2019-nCoV testing update
To date, 11 specimens have been received at NVRL for 2019-nCoV testing, of which none were positive, 11 were negative and none are pending.

International situation update
Since 31 December 2019 and as of 3 February 2020, 17 383 laboratory-confirmed cases of novel coronavirus (2019-nCoV) infection have been reported, including 17 healthcare workers and 362 deaths.

Cases have been reported on the following continents:
Asia: China (17 220), Japan (20), Thailand (19), Singapore (18), Republic of Korea (15), Taiwan (11), Malaysia (8), Vietnam (8), United Arab Emirates (5), India (2), the Philippines (2), Cambodia (1), Nepal (1), and Sri Lanka (1).
Europe: Germany (10), France (6), Italy (2), United Kingdom (2), Russia (2), Finland (1), Spain (1) and Sweden (1).
America: the United States (11) and Canada (4).
Oceania: Australia (12).

Of the 362 deaths reported, 361 have been reported from China: Hubei (350), Henan (2), Heilongjiang (2), Beijing (1), Hainan (1), Hebei (1), Shanghai (1), Sichuan (1), Chongqing (2). One death has been reported from the Philippines.
Risk assessments

China CDC assesses the transmissibility of this virus to be sufficient for sustained community transmission without unprecedented control measures. Further cases and deaths are expected in China in the coming days and weeks. Further cases or clusters are also expected among travellers from China, mainly from Hubei province. Therefore, health authorities in EU/EEA Member States should remain vigilant and strengthen their capacity to respond to such an event. There are considerable uncertainties in assessing the risk of this event, due to lack of detailed epidemiological analyses.

On the basis of the information currently available, ECDC considers that:

- the potential impact of 2019-nCoV outbreaks is high
- the likelihood of infection for EU/EEA citizens residing in or visiting Hubei province is estimated to be high
- the likelihood of infection for EU/EEA citizens in other Chinese provinces is moderate but will increase
- there is a moderate-to-high likelihood of additional imported cases or associated clusters in the EU/EEA
- the likelihood of observing further limited human-to-human transmission within the EU/EEA is estimated as very low to low if early detection of cases and adherence to appropriate infection prevention and control (IPC) practices are implemented, particularly in healthcare settings in EU/EEA countries
- assuming that cases are detected in EU/EEA in a timely manner and that rigorous IPC measures are applied, the likelihood of sustained human-to-human transmission within the EU/EEA is currently low
- the impact of the late detection of an imported case in an EU/EEA country without the application of appropriate infection prevention and control measures would be significant, therefore in such a scenario the risk of secondary transmission in the community setting is estimated to be high.

NPHORT Topic area update

Surveillance

Current case definition - ‘history of travel to areas with presumed ongoing community transmission of 2019-nCoV’. The algorithms on HPSC website say ‘mainland China’ but hyperlink to ECDC areas with presumed ongoing community transmission (currently only mainland China).

Testing available in NVRL - letter circulated to wider health system and available via the HPSC website.

Surveillance case and contact forms were circulated to the influenza representatives in the regions and NPHORT on Friday 31/01/2020. A contact tracing database is being finalised by HPSC. Work is ongoing to incorporate 2019-nCoV onto the CIDR system at HPSC.
FAQs and general information
FAQs and general information on HPSC and HSE webpages are updated regularly. These resources will be updated today to reflect current advice that all people returning from Mainland China are to contact their local Department of Public Health.

Current guidance/resources available via the HPSC website include:

- Algorithms for Irish healthcare settings
- Clinical management for novel coronavirus (link to WHO guidance)
- Educational settings guidance
- Infection Prevention and Control guidance for hospitals and primary care
- Laboratory testing guidance
- FAQs

Contact Tracing
Contact tracing guidance has been finalised and circulate to NPHORT this morning (03/02/2020), with the exception of the appendices (contact packs and contact surveillance form) which will be finalised today by the relevant workstream.

Education
Guidance to be altered today (03/03/2020) commensurate with change in case definition.

Healthcare worker and occupational health
A group has been established linking Public health and occupational health. Occupational Health guidance has been circulated to all Occupational Health Physicians.

Infection Prevention and Control
IPC guidance has been prepared and circulated to relevant sectors of the health system and is hosted on HPSC website. Queries are being addressed as they arise.

Port Health
This area covered by the HSE MoH Port health group and the HSE Multidisciplinary Port Health Group.

Communications
Group consists of Kevin, John and Sarah Doyle – press conference scheduled for 5pm today (03/03/20).

Home care management
Guidance being developed.

Port Health
Relevant WHO protocols have been communicated to the Sea and Air Ports.

Response collaboration arrangements are in place with Dublin Airport Authority (tested on two 2 potential cases - 02/01/20 and 03/01/20).

Clear messaging about the threat levels and PPE requirements are constant.
**Acute Operations**
Algorithm has been circulated to all departments in hospitals and a clinical engagement approach is currently underway to ensure workable pathways are in place.

Isolation response requirements are in place for the index case of suspect 2019-nCoV case.

Critical care surge capacity options are being review by NCMT.

The potential need for additional ventilation equipment is being considered. A reserve stock is being discussed with procurement.

Market availability of products is being examined and supply been secured and reserved to meet this need.

A central distribution system is in place within the HSE to ensure appropriate PPE equipment can be rapidly distributed on an “as needed” basis.

**Community Operations**

General Practice (GP) have received the processes and protocols from HPSC and Public Health.

Each GP Practice will receive Personal Protection Equipment Packs.

Public Health and the HPSC are crating capacity to deal with the increased enquiries from Primary Care.

Local response structures are being established.

**National Ambulance Service**

All necessary processes and protocols are in place across control and paramedic teams.

PPEs are in place in all areas.

Algorithms filtered through the system.

**Communications**

HSE communications are actively working with HSE functions to prepare and disseminate information relating to the 2019-nCoV. Audiences and messaging are being targeted to respond to emerging need.

Media briefing are being scheduled (one held on 30/01/20).

Co-ordination exists between internal and external messaging.
HSE website redirecting all traffic to the HPSC and European Centre for Disease Prevention and Control to ensure access to live updates.

**Procurement**

HSE procurement has taken action to secure supply of essential Personnel Protective Equipment. The market has seen significant increase in costs, for example a rise in cost for FFP2 masks from 0.50 cent to €4.10 per mask or a 720% increase in cost within a week. The market is being distorted both by an increase in demand, a reduction in production capacity in China and the entry into the market of private equity firms who are buying up stock and production capacity. This is reflected across a range of products.

The procurement of additional 200k masks which NCMT had sanctioned on 3rd February, has been lost to another bidder. In addition some stock reserved by HSE refused entry at UK port.