



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

25<sup>th</sup> June 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 (NPHE).

You will recall that at last week's NPHE meeting, on the basis of the overall public health risk and the good progress that has been made in suppressing the overall incidence of COVID-19 infection the NPHE presented its advice to you in relation to realigning the Public Health Framework Approach to reducing restrictive measures into two final phases. This was in recognition of the combined efforts and collective action of people across Irish society over the months of March and April to change the trajectory of the COVID-19 epidemic in Ireland.

During May and continuing into June, continued progress has been made in suppressing the overall incidence of the COVID-19 disease in Ireland. Through high levels of adherence to the public health restrictive measures and the rapid adjustment to new personal and collective hygiene behaviours, people across the country have been protected from infection and lives have been saved. In the last week these downward trends in all key parameters have been sustained.

#### Current Epidemiological Situation

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

- (i) the number of confirmed cases stands at 25,396 (with an average of 9 cases notified per day over the past 5 days);
- (ii) 37 confirmed cases in hospital yesterday;
- (iii) the number of confirmed COVID-19 patients requiring critical care yesterday was 9, with a further 10 patients suspected of having COVID-19 also in critical care;
- (iv) 8,177 cases (32% of all cases) were associated with healthcare workers;
- (v) 1,726 deaths due to COVID-19 recorded to date, with 6 new deaths notified yesterday.

With regard to clusters and outbreaks specifically, NPHET noted–

- (vi) the total number of clusters in residential care facilities to date has been 470\*,
- (vii) the number of confirmed cases in residential care facilities stands at 7,121 of which 5,600 have been in nursing homes,
- (viii) that as of Saturday 20<sup>th</sup> June, there have been–
  - 4 COVID-19 outbreaks involving the Roma community involving 42 cases. One of these outbreaks remains open. No new cases were notified in the past week in this cohort,
  - 7 COVID-19 outbreaks involving the Irish Traveller Community, involving 63\* cases. 4 of these outbreaks remain open. No new cases were notified in the past week in this cohort,
  - 6\* COVID-19 outbreaks notified in residential facilities for the homeless involving 18\* cases. 2 of these outbreaks remain open. No new cases were notified in the past week in this cohort,
  - 16 outbreaks in Direct Provision Centres, involving 180 cases. 4 of these outbreaks remain open. No new cases were notified in the past week in this cohort,
  - 48 clusters in workplaces including 23 in meat processing plants. 24 of these outbreaks remain open, including 13 in meat processing plants. Just 2 new cases were associated with meat processing plants in the week to Saturday 20<sup>th</sup> June and no new cases were notified in association with other workplaces, and
  - 5 new outbreaks were notified in the previous week. 2 of these were in nursing home settings and 3 were in private households.

The NPHET also took note of the following:

- the effective reproductive number is now estimated to be between 0.5 and 0.8 (it should be noted however, that it is difficult to estimate the reproduction number given the current small number of cases);
- the positivity rate for all tests processed nationally in the past week is 0.5%;
- the latest reported influenza like illness rate (ILI rate) is 2.8 per 100,000 (i.e. below threshold).
- the increased number of new cases within the last 14 days related to travel.

Furthermore, the ECDC published an updated risk assessment for the EU/EEA and the UK on 11<sup>th</sup> June and the NPHET noted its assessment that–

- *the risk of COVID 19 in the general population of the EU/EEA and the UK is currently assessed as: **low** in areas where community transmission has been reduced and/or maintained at low levels and where there is extensive testing showing very low detection rates; and **moderate** in areas where there is substantial ongoing community transmission and where appropriate physical distancing measures are not in place,*
- *the risk of COVID 19 to the population with defined factors associated with severe disease outcome is currently assessed as: **moderate** in areas where community transmission has been reduced and/or maintained at low levels and where there is extensive testing showing very low detection rates; and **very high** in areas where there is substantial ongoing community transmission and where appropriate physical distancing measures are not in place, and*

\* This number is lower than previously reported, as some cases or outbreaks have been de-notified or reclassified as part of normal data validation processes.

- the risk of COVID-19 incidence rising to a level that may require the re-introduction of stricter control measures is currently assessed as **moderate** if measures are phased out gradually, when only sporadic or cluster transmission is reported, and when appropriate monitoring systems and capacities for extensive testing and contact tracing are in place; and **high** if measures are phased out when there is still ongoing community transmission, and no appropriate monitoring systems and capacities for extensive testing and contact tracing are in place.

#### Advice regarding realigned Phase 3 Easing of Measures

Given the latest national data, as set out above and in the report to Government as provided for in the *Roadmap for Reopening Society & Business*, and the most recent ECDC risk assessment, the NPHET today considered the public health measures currently in place. Arising from the discussion at today's meeting, the NPHET recommends that Government give consideration to the realigned Phase 3 easing measures in the NPHET's Advice to Government on 18<sup>th</sup> June, and as set out in the Appendix to this letter, with effect from the 29<sup>th</sup> June 2020.

In developing this public health advice to Government in relation to the reduction of the public health restrictive measures, the NPHET had regard to the following:

- the report to Government prepared by the Department of Health in accordance with the decision-making framework provided for in the *Roadmap for Reopening Society & Business* and in particular:
  - the latest data regarding the progression of the disease,
  - the capacity and resilience of the health service in terms of hospital and ICU occupancy, and
  - the capacity of the programme of sampling, testing and contact tracing.
- ongoing evidence and information regarding the experiences of members of the public; adherence to the public health personal behaviours and social distancing measures in place through regular quantitative and qualitative public opinion research and focus groups; analysis of non-health information sources such as transportation, mobility, and congregation data;
- the NPHET's *Advice to Government in relation to realigning the Public Health Framework Approach to reducing restrictive measures into two final Phases* of the 18<sup>th</sup> June;
- the experiences internationally, including in some countries, which have seen some significant increases in cases of COVID-19 infection, following the easing of public health measures, including outbreaks in some settings and regions; and
- that there are other important considerations for Government with regard to the reduction of measures, such as social and economic considerations, while noting the potential effects of the current measures on the wider health and wellbeing of the population.

In providing this public health advice to Government the NPHET reiterated that it is impossible to predict with certainty what the future trajectory of the COVID-19 disease will be in Ireland. Consequently, it is not possible to provide assurance that it is safe to reduce the public health measures and stricter measures may have to be reintroduced if a strong upsurge of infection were to occur at some point in the future. In this regard, the NPHET emphasised the ongoing importance of a continued focus by the health service and across Government on—

- ongoing monitoring and review of epidemiological trends and health system impact of COVID-19 such that any changes in the overall situation will be detected rapidly, in order that future advice to Government, and health service measures and responses can be implemented based on the transmission patterns of the disease, the trajectory and velocity of change, and the evolving analysis of the impact of COVID-19 on the population and health system capacity,
- continued enhancement of the HSE's sampling, testing, contact tracing, surveillance and reporting processes, with a particular focus on reinforcing the public health management of complex cases and clusters, especially among vulnerable populations, higher risk populations, including healthcare workers,
- clear consistent sustained accessible risk communication strategy with the public and other key groups, to continually re-emphasise collective behaviours and solidarity in limiting the spread of infection for the foreseeable future and support the desired behavioural change through ongoing communication and education initiatives,
- ongoing public health responses, infection prevention and control, surveillance including the prevention and management of outbreaks in different settings including workplaces, residential and other settings,
- effective engagement with employers in light of the concern that workplaces have the potential to become foci for new clusters of infection as public health measures are eased and emphasised the need for employers, workers and relevant stakeholders to work together to promote adherence to public health guidance and advice appropriate to the relevant sector,
- ongoing implementation, monitoring, review and re-calibration of measures including regionalised, localised or sector-specific responses, bearing in mind the specific associated public health risks, and
- maintaining the continued commitment across society from all arms of the State, organisations, employers, businesses and individuals to work together to collectively promote and adhere to the core public health principles.

#### Overseas Travel

As the NPHET has previously emphasised, it is important that Ireland carefully heeds the recent advice of the European Centre for Disease Prevention and Control that *"the pandemic is not over, and hypothetical forecasting indicates a rise in cases is likely in the coming weeks"*.

As you will be aware, on the 16<sup>th</sup> March, the NPHET recommended that all Irish residents be advised against all non-essential travel overseas at this time and that all persons, including Irish residents, entering the country from overseas should restrict movements for 14 days, if asymptomatic.

As noted in its letter of 8<sup>th</sup> May, the NPHET is concerned that, as the number of indigenous cases here declines and Ireland continues to ease measures, the relative importance of the risk of importation of cases from overseas increases. Given the significantly improved epidemiological profile of the disease in Ireland in the interim, travel-related introduction of the disease is now a significant and growing concern, this represents a major threat to public health and increases the risk of a potential second-wave of the disease in Ireland.



In this context, the NPHET today noted that 7% of cases notified over the past fortnight have been associated with travel. In addition, the NPHET noted the acceleration of the pandemic internationally, including that–

- 9.1 million cases and 474,000 deaths have been recorded globally to date,
- the largest day on day increase in cases globally was recorded within the past week,
- while 10,000 cases were recorded in the first month of the pandemic, 4 million cases were recorded within the last month,
- the epidemiological profile of the disease remains uncertain in many countries due to limited testing and/or reporting,
- in the past fortnight, 27 of 54 countries within the WHO European Region have reported a greater than 10% increase in cumulative 14-day incidence versus the previous fortnight, and
- in the past fortnight, within the EU27/UK, while Ireland has experienced a very substantial (c.65%) improvement in the number of cases reported, 11 countries have reported a greater than 10% increase in cumulative 14-day incidence versus the previous fortnight.

NPHET noted that consideration is being given by Government and at EU level to the establishment of reciprocal travel arrangements with countries that have a broadly similar or better epidemiological profile (which can be verified as such). In order to ensure the credibility of these arrangements, it will be necessary to put in place legal restrictions regarding travel from countries which do not qualify for such arrangements, as is the approach taken by other EU Member States. In this regard, the NPHET recalls with urgency its prior recommendations on the need for legal restrictions to be put in place in regard to overseas travel.

#### Critical Care Capacity

You may wish to note that the NPHET supported a proposal to expand critical care capacity in acute hospitals for the delivery of COVID-19 care needs as well as non-COVID care and in particular, the intention to seek the necessary approvals through the normal processes.

Finally, in the context of nearing the completion of the Phases of the *Revised Roadmap for Reopening Ireland*, the NPHET will now commence work on the development of further public health advice to provide for a more nuanced approach to the ongoing future management of the pandemic, which takes into account the evolving epidemiological situation both here and internationally, the understanding gleaned from Ireland's experience of this disease to date and emerging evidence with regard to factors impacting transmission and control of this disease.

The NPHET of course remains available to provide any further advice and recommendations that may be of assistance to you and Government in relation to ongoing decision-making processes in respect of the COVID-19 pandemic.

I also enclose a copy of the letter which has been forwarded to the HSE CEO arising from today's NPHET meeting.

I would be happy to discuss further, should you wish.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Tony Holohan', with a horizontal line drawn underneath the signature.

Dr Tony Holohan

Chief Medical Officer

Chair of the COVID-19 National Public Health Emergency Team

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

## **Appendix – NPHET Advice to Government in relation to the realigned Phase 3 reduction of public health measures in advance of 29 June 2020**

The NPHET, taking note of the continued progress during the month of June to suppress the overall incidence of the COVID-19 disease in Ireland and the current overall public health risk, advises that Government may wish to give consideration to implementing with effect from the 29<sup>th</sup> June 2020 the realigned Phase 3 easing measures contained in the NPHET's *Advice to Government* of 18<sup>th</sup> June and as set out below:

### **Section 1: Updated general advice from Phase 3 onwards & Public Health Checklist**

Should Government decide to commence the realigned Phase 3 easing on 29<sup>th</sup> June, this will see the re-opening of a majority of the remaining businesses, services, amenities and sectors, as well as social, cultural and recreational activities, that had been closed in light of the public health restrictive measures.

#### *Public health messages*

Consequently, it is recommended that the following updated general public health messages continue to be communicated:

- wash your hands frequently with soap and water or use an alcohol-based hand rub even if your hands are not visibly dirty;
- practise good respiratory hygiene, that is, when coughing and sneezing, cover your mouth and nose with flexed elbow or tissue – discard tissue immediately into a closed bin and clean your hands with alcohol-based hand rub or soap and water;
- maintain physical distancing, that is, leave at least 2 metres (6 feet) distance between yourself and other people, particularly those who are coughing, sneezing and have a fever;
- avoid touching your eyes, nose and mouth – if you touch your eyes, nose or mouth with your contaminated hands, you can transfer the virus from the surface to yourself;
- remember that this disease spreads easily in crowded environments, therefore avoid crowded places as much as possible, leave if a location becomes overcrowded and physical distancing becomes difficult;
- everyone should be vigilant of the symptoms of the virus and should self-isolate and seek medical care as quickly as possible if they have even mild symptoms, including flu-like symptoms. When self-isolating, stay at home and do not go to work or school and the household contacts of a confirmed or suspected case, should follow public health advice and restrict their movements until advised otherwise.

#### *Public Health Checklist*

In Phase 3 many of the public health restrictions are being lifted and there will no longer be detailed rules in place. Therefore, everybody in society will now exercise their own judgement and take personal responsibility for decisions that they make about the risk of infection to themselves and to others in different situations.

The Public Health Checklist set out in the NPHET's advice of 18<sup>th</sup> June is intended to provide assistance to individuals and families, in making decisions about how to assess the risk of different activities and take actions to lower the risk of spreading infection. It is also provided as a means of supporting organisations, businesses, schools, community groups etc., who should assess the risk of different activities and identify ways to lower the risk for themselves, other workers, employees, colleagues, customers, students, and other participants that engage in the work or activities associated with the organisation.

### **Section 2: Community Health**

In the realigned Phase 3 the following are recommended:

#### *Face Coverings*

- The wearing of face coverings continues to be recommended as an additional hygiene measure, when using busy public transport or when in indoor public areas including retail outlets, where appropriate, and where physical distancing cannot be maintained.

### *Cocooning*

- Cocooning for those aged 70 years and over and the medically vulnerable continues to be recommended for their safety. However, it is important that people who are cocooning feel empowered to exercise their own judgement and autonomy regarding the extent to which they consider the cocooning guidance is appropriate to their individual circumstances.
- For people aged 70 years and over and the medically vulnerable who wish to visit others, receive visitors in their home, attending shops, and engage in other activities, it is recommended that they:
  - (and their visitors) maintain strict hand hygiene and respiratory etiquette,
  - continue to strictly adhere to the physical distancing guidance of 2m,
  - avoiding touching surfaces and cleaning surfaces touched by visitors,
  - ideally use face coverings when attending the shops or other busy public areas.
- Those cocooning who are planning to travel within and outside their region should acquaint themselves with the level of transmission of the virus in the relevant area, and consider how best to protect themselves.
- See HPSC's *Guidance on cocooning to protect people over 70 years and those extremely medically vulnerable from COVID-19* for useful practical guidance.

### *Travel within Ireland*

- From the 29<sup>th</sup> June it is recommended that people may travel throughout the country, and travel to Ireland's offshore islands by non-residents may now resume. Those planning to travel should acquaint themselves with the level of transmission of the virus in the relevant area and consider how best to protect themselves. NPHET continues to advise that non-essential travel outside of Ireland is not recommended at this time.

### *Family and non-family activities and social visits*

- No specific number is now given for a gathering in a private home other than that people should restrict the number so that adequate physical distancing and ventilation of the home can be maintained bearing in mind the size of the home.
- During Phase 3, in line with the Mass Gatherings restrictions below, indoor mass gatherings should be limited to groups of up to 50 people and outdoor mass gatherings limited to groups of up to 200 people.

## **Section 3: Mass Gatherings of People**

In the context of the COVID-19 pandemic it is widely recognised that mass gatherings of people can amplify the transmission of the virus and have the potential to significantly impact on the health service and wider COVID-19 response.

Mass gatherings are events where there is a concentration of people at a specific location for a specific purpose over a set period of time and constitute a diverse range of gatherings such as sports, music/entertainment, religious events, family events (e.g weddings, funerals etc.) large conferences and exhibitions, as well as community, charity events and other types of events.

In line with the advice of the European Centre for Disease Prevention and Control and the current approach of many other EU countries, it is recommended that for the duration of Phase 3 indoor and outdoor mass gatherings be restricted to 50 and 200 respectively, bearing in mind the following:

- Mass gatherings should be organised in advance to enable adequate planning by organisers so that prevention and control measures can be implemented, and physical distancing can be maintained so as to reduce the risk of transmission and avoid strain on health services;
- The mass gathering numbers listed above are total numbers of people at mass gathering events including organisers, participants and attendees;
- Mass gatherings operating in line with the limits above should comply with the Public Health Checklist and physical distancing, having regard to the size of the venue;



- Adopting a cautious approach considering the high risk of infection spread at mass gatherings, it is recommended that marquees, tents, circuses etc. be considered indoor venues for the purposes of these mass gatherings restrictions.

#### **Section 4: Easing of restrictive public health measures in Phase 3:**

The following measures are recommended to Government for re-commencement in Phase 3 unless specified elsewhere in the NPHET document *Advice to Government in relation to realigning the Public Health Framework Approach to reducing restrictive measures into two final Phases* dated 18th June 2020.

##### **Health and Social Care Measures:**

- Re commencement of visiting at hospitals, and other residential settings on a planned and phased basis.
- Finalisation and implementation by the HSE and service providers of the Service Continuity Framework for the Resumption of Non-COVID-19 Care.

##### **Community, Religious, Cultural, Social and Sport Measures:**

In reopening, following venues, amenities and activities should operate in line with physical distancing, the Public Health Checklist and Mass Gathering restrictions applying in Phase 3, as set out above:

Re-open venues, amenities, organised events, ceremonies including–

- Religious buildings and places of worship,
- Museums, galleries, theatres, concert halls and other cultural outlets,
- Cinemas, music venues (excluding nightclubs and discotheques), leisure facilities, bingo halls, arcades, skating rinks, amusement parks etc.,
- All other recreational venues unless specified elsewhere in the NPHET document *Advice to Government in relation to realigning the Public Health Framework Approach to reducing restrictive measures into two final Phases* dated 18<sup>th</sup> June 2020.

Re-commence all sporting activities and venues including–

- Team leagues for adults and children, close contact sports, as well as organised sporting spectator events and fixtures,
- Indoor gyms, exercise, yoga, Pilates and dance studios, sports clubs, public swimming pools.

The following precautions are recommended where the practice, teaching and performance, of (i) Choirs and (ii) brass and wind music groups takes place:

- Maintenance of very strict physical distancing of a minimum of 2 metres from other people, ideally activities to be held outdoors, limit duration and include frequent breaks to facilitate regular ventilation of rooms and instrument cleaning (where applicable);
  - Singers and musicians should consider protective equipment and measures to minimise the potential for droplet or aerosol emission (e.g. instrument covers, screens, face coverings etc);
  - A risk assessment should be carried out to minimise the risk to the participants and their audience, including bearing in mind the age profile and risk factors of the participants/audience in question.

##### **Education, Childcare and Children's Measures:**

- Re-commence all other education, adult education and community-based activities, projects and facilities (e.g. adult education programmes, community groups, Men's Sheds etc.).
- Re-commence crèches, childminders and pre-schools for children of essential workers in phased manner with physical distancing and other requirements applying as per the HPSC Guidance.
- Re-commence all other indoor and outdoor amenities, including summer camps and youth clubs, for children and teenagers of all ages.

In reopening adult education and community-based activities, projects and facilities, as well as indoor and outdoor amenities, including summer camps and youth clubs, for children and teenagers of all ages, these should operate in line with physical distancing, the Public Health Checklist and Mass Gathering restrictions applying in Phase 3.

***Retail, Personal Services & Commercial Activities:***

- Re-open all remaining health and wellbeing-related services e.g. chiropractic, massage therapy, acupuncture, reflexology, homoeopathy etc.
- Re-open all remaining providers of contact personal services e.g. hairdressing salons, barbers, nail and brow salons, beauty salons, spas, make-up application services, tanning, tattooing and piercing services etc.
- Re-open all remaining retail (e.g. bookmakers), personal services, commercial activities and services.
- Re-commence restaurants and cafés providing on-premises food and beverages in line with HPSC guidance.
- Re-commence hotels, caravan parks, holiday parks, hostels for social and tourist activities. Hostels will need to risk assess the safety of communal room-sharing arrangements. Communal spaces of these venues and amenities to operate in line with physical distancing, the Public Health Checklist and the Mass Gatherings restrictions in Phase 3.

***Economic Activity (Work):***

- All workers and businesses that can work remotely from home should continue to do so to the maximum extent possible.
- Organisations should continue to deploy their own plans for prioritising onsite working arrangements by those workers that are required to work onsite utilising all options to limit the number of workers interacting with each other at any one time e.g. shift work, staggered hours, designated teams working always together, defined break times, etc.
- Employers should work proactively, including with authorities and health authorities where necessary, to limit the spread of disease within or connected with the workplace and to mitigate the effects of workplace outbreaks should such occur.
- Businesses and organisations should apply the Return to Work Safely Protocol - COVID-19 Specific National Protocol for Employers and Workers published by the Department of Business, Enterprise and Innovation, including having a COVID-19 Response Plan in place.
- Workers should not come to work, should self-isolate and should seek medical care if they have even mild symptoms, including flu-like symptoms, and workers who are contacts of a confirmed or suspected case, should follow public health advice and not come to work until advised otherwise.

***Transport Measures:***

Those providing transport services, whether commercially or in a private capacity, or where vehicle sharing is a normal feature of work or activity, should consider developing guidance for their sector / organisation.

- Re-commence driving schools, driving test centres, voluntary or other driving services etc.
- Re-commence all other private transport services, including tourist and entertainment activities (e.g. tour buses, event buses, private bus and vehicle hire etc.)
- All transport providers should increasingly encourage the use of face coverings on public transport as an additional measure to hand hygiene / respiratory etiquette.
- In light of the numbers of people, the importance of communal handrails, to reduce the risk for those using public transport, provide hand sanitizer for use by passengers.
- Public and private transport providers to continue to actively monitor passenger numbers and progressively decrease restrictions on numbers travelling on public transport.
- Continue to encourage the public to stagger travelling times on public transport in order to maintain physical distancing on public transport.