



Mr. Stephen Donnelly TD,
Minister for Health,
Department of Health,
Miesian Plaza,
50-58 Lower Baggot Street,
Dublin 2.
4th August 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).

On 14th July, having considered the national and epidemiological status of the disease, and in particular having noted a change in the progression of the disease since the end of June, the NPHE advised Government that a cautious approach should be pursued and that the public health measures in place, with some adjustments, should be extended until 10th August 2020 rather than progressing to Phase 4 of the *revised Roadmap for Reopening Society & Business*.

The NPHE gave further consideration today to the current status of the COVID-19 disease in Ireland, the pandemic situation globally and the current overall public health risk. In light of the progression of the disease over recent weeks, the NPHE has significant and growing concerns, in particular, regarding the following:

- the increasing case numbers of this disease currently being reported each day, and the increasing incidence observed nationally;
- the increasing number of cases observed in vulnerable groups including those living in direct provision;
- multiple significant outbreaks notified in workplaces, particularly in the construction and food production sectors;
- the increasing number of cases reported in younger people, particularly those between 25-34 years of age;
- the observed shift in the location of the majority of cases from the greater Dublin region to other counties over the past 7-10 days.

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

Cases and Deaths

- The number of confirmed cases stands at 26,208;
- The five-day rolling average of cases was 53 cases;
- The 14-day epidemiological incidence per 100,000 population was 7.54;

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- 8,437 cases (32% of all cases) were associated with healthcare workers;
- 1,763 deaths due to COVID-19 notified to date;
- the positivity rate for all tests processed nationally in the past week was 0.7% and that this number has increased over the previous week (albeit, this may reflect the previously undertaken serial testing programme in healthcare workers);

Demographic and Location Trends

- 73% of cases in the past 14 days have occurred in people under age 45 years;
- The incidence among those 25-34 years of age is over 18 cases per 100,000 population;
- The median age for cases notified in the past 14 days is 32 years and some days within that time period have seen a median age of under 30 years;
- Only 27% of cases in the last 7 days have occurred in Dublin with six counties having a greater 7 days incidence than Dublin. The majority of cases are no longer predominantly limited to the greater Dublin region;
- Of the cases where occupation sector status was recorded, the construction, food production and healthcare sectors had the highest numbers of cases. In addition, 12 cases are noted as working in the hospitality sector (bars, restaurants, catering, etc).

Hospitalisations

- There were 10 confirmed cases in hospital yesterday;
- The number of confirmed COVID-19 patients requiring critical care yesterday was 5, with a further 7 patients suspected of having COVID-19 also in critical care;

Clusters

- 37 new outbreaks in total were notified in the previous week. The total number of outbreaks notified to date was 2319 with 188 of these remaining open;
- 21 outbreaks in Direct Provision Centres, involving 235 cases. 5 of these outbreaks remain open. **47 new cases and 4 new clusters were notified in the past week in Direct Provision Centres;**
- 10 COVID-19 outbreaks involving the Irish Traveller Community, involving 89 cases. 3 of these outbreaks remain open. **21 new cases and 2 new clusters were notified in the past week in the Irish Traveller Community;**
- 51 clusters in workplaces including 24 in meat processing plants. 9 of these outbreaks remain open, including 4 in meat processing plants. **4 new outbreaks were notified in the past week in workplaces, 2 of which were in meat processing plants. 57 new cases associated with workplace outbreaks were notified in the past week, of which 47 these were in meat processing plants.**
 - In total, the **4 outbreaks open in meat processing plants have been associated with 94 cases with the results from additional testing of employees in these settings pending;**
- the total number of clusters in residential care facilities to date has been 479;
 - the number of confirmed cases in residential care facilities stands at 7,550 of which 5,871 have been in nursing homes;
- 4 COVID-19 outbreaks involving the Roma community, involving 42 cases. One of these outbreaks remains open. No new cases or outbreaks were notified in the past week in this cohort;

- 4 COVID-19 outbreaks notified in residential facilities for the homeless, involving 15 cases. All of these outbreaks have been closed. No new cases or outbreaks were notified in the past week in this cohort.

Mode of Transmission

- “Close contact with a confirmed case” is now the most frequently cited mode of transmission for cases that have occurred in the past 14 days (49% of cases).
- The proportion of cases that are noted as being attributable to community transmission appears to be stable.

International Situation

The NPHET today noted that 7.8% of cases notified over the past fortnight have been associated with travel. Importantly, the NPHET also took note of cases where travel-related transmission has been linked to further clusters within private households or within extended family units.

Furthermore, the NPHET continued to note with concern the experience internationally, with many countries experiencing increases in cases resulting in actions being taken to reimpose public health restrictive measures in those countries or regions of those countries. It noted that:

- 17.9 million cases and 686,000 deaths have been recorded globally to date; 1.8 million cases were recorded within the last 7 days (10% increase).
- the epidemiological profile of the disease remains uncertain in many countries due to limited testing and/or reporting.

Consequently, in light of the current national and epidemiological situation set out above and in the report to Government as provided for in the *Roadmap for Reopening Society and Business*, and cognisant of the most recent ECDC risk assessment, **the NPHET today recommends that a cautious but measured approach must now be pursued and that the current public health measures in place, with some adjustments as set out in the Appendix to this letter, should be extended rather than progressing to Phase 4 of the revised *Roadmap for Reopening Society & Business*.** This will be further reviewed in advance of the 31st August, in light of the epidemiological position at that time.

In doing so, the NPHET reiterated the critical importance of low levels of community transmission of this disease in order to ensure the protection of the most vulnerable and to enable the recommencement of essential societal services, such as education and health and social care services for all.

NPHET emphasises that while community transmission is reasonably low at present with the majority of cases accounted for within known outbreaks and close contacts, Ireland is no different to other countries, and there remains a continuing and heightened risk that the already evident increase in cases could potentially lead to increasing levels of community transmission in the coming weeks.

Furthermore, at today’s meeting, NPHET noted the continuing risk associated with any social gatherings indoors and recommends a number of additional measures for the restaurant and café sector, including the requirement for premises to close by 10.30pm, other than for takeout and delivery, and the mandatory wearing of masks for staff. The NPHET emphasised that in recommending

the reopening of these premises in late June, it was on the basis of strict adherence to the detail and spirit of public health guidelines, and on the basis that the intended premises are controlled restaurant environments. The NPHET recognises that the vast majority of such premises have adhered to the guidelines in place, but also calls for continued robust inspection and enforcement arrangements and the enhancement of these arrangements where necessary.

The NPHET also recommended a series of targeted actions and supports at known areas of infection risk, including vulnerable groups and high-risk workplace environments, to immediately contain current outbreaks and to put in place sustainable measures to mitigate the risk of further outbreaks. The NPHET also reiterated advice in relation to other areas of known risk such as overseas travel and private home social gatherings. Details are set out in the Appendix.

As already stated, the increase in cases over the last number of weeks, in addition to the profile of those cases, is a cause of concern. International experience is proving that countries are likely to experience periods of resurgence of the disease and the World Health Organisation has advised that based on current evidence it is likely that there will be recurring epidemic waves interspersed with periods of low-level transmission. It is critical that we are prepared to respond at all times to any changes in the profile of the disease in Ireland.

In this regard, NPHET agreed a Framework for Future COVID-19 Pandemic Response on 23 July 2020 which is intended to inform the future strategic approach to COVID-19 across Government and society. I understand that this Framework is forming part of considerations ongoing across Government. In addition, last week NPHET also recommended a series of actions aimed at strengthening our public health structures and resources to ensure a sustainable and robust response to COVID-19 in the months ahead. Finally, NPHET today noted the centrality of communication of key messages to the public, recognising that it is only through individual and collective action that we will be able to manage and control this disease. This is especially important for those aged under 45. In this regard, NPHET recommends a refreshing of cross-Government communications in relation to COVID-19

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 would be happy to discuss further, should you wish.

Yours sincerely,



Dr Ronan Glynn

A/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 1: NPHET Advice to Government in relation to public health restrictive measures in advance of 10 August 2020

The NPHET, taking note of the current status of the COVID-19 disease in Ireland over the month of July 2020, the pandemic situation globally, the current overall public health risk, and the key priorities of resuming non-COVID health and social care services and reopening the education sector in three weeks' time, advises that the Government give consideration to implementing with effect from the 10th August 2020 the measures set out below.

In developing this public health advice to Government, 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;
- the experiences internationally, in particular in countries, which have seen significant increases in cases of COVID-19 infection, including outbreaks in some settings and regions, following the easing of public health measures, resulting in the requirement to reimpose public health restrictive measures in those countries and / or regions of those countries;
- 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, and analysis of non-health information sources such as transportation, mobility, and congregation data;
- the NPHET's *Advice to Government in relation to Phase 4 measures on the 14th July 2020*;
- 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;
- the key priority of recommencing essential societal services, such as education and health and social care services for all.

Section 1: Social and Recreational

Pubs, bars, hotel bars

Pubs/bars pose a particular risk to the spread of COVID-19 as alcohol can make people less aware of social distancing and hygiene/respiratory behaviours, loud atmospheres can increase particles emitted and many pubs/bars can be small spaces with poor ventilation. Internationally, there have been a number of examples of outbreaks of COVID-19 in bars.¹ It is also noted that pubs/bars can form part of the social fabric of many communities and provide an important social connection for many people.

Where pubs/bars have re-opened in other countries, various conditions have been imposed including: reduced opening hours, social distancing, mandatory seating, table service only, booking required, limited number per table, mandatory wearing of masks by staff, and capacity ceilings.

In light of the current status of the COVID-19 disease in Ireland in recent weeks, the significant risk of infection spread associated with social gatherings, the evidence of outbreaks associated with pubs and bars in other countries and the current public health risk, while also being cognisant of broader social/wellbeing considerations, it is recommended that:

- Pubs, bars, and hotel bars are to remain closed. This will be further reviewed in advance of the 31st August, in light of the epidemiological position at that time and the key priority of resuming essential services such as health and social care and education.
- In light of practice in other countries, the following conditions should apply when these premises are reopened:
 - Guidelines have already been developed for re-opening pubs/bars and these will apply to all premises re-opening. This includes guidance in relation to physical distancing, contact tracing records, protections for staff and frequent cleaning; these should be strictly adhered to.
 - In addition, it is recommended that:
 - The wearing of face coverings should be mandatory for members of staff in bars, pubs, and hotel bars unless there is a partition between the person or employee and member of the public, or a distance of at least 2 meters is maintained at all times between the person or employee and members of the public.
 - All customers are to be seated at tables, with no seating allowed at the bar.
 - Premises will be required to have arrangements in place to record the contact details of attendees to facilitate rapid contact tracing if required.
 - All premises to close at 10.30.
 - Measures should be taken by the appropriate authorities to ensure that all additional inspection and enforcement arrangements are put in place to ensure that premises are operating safely once reopened.

¹ Paper to NPHET, 14th July

Nightclubs, discotheques & Casinos

The risks associated with pubs/bars are even further heightened in nightclub type environments, which by their very nature are not intended to be seated environments where people can maintain 2 metre physical distance. Given the significant risk of infection spread and the evidence of outbreaks associated with these settings in other countries, it is recommended that:

- Nightclubs, discotheques and casinos are to remain closed until at least the 31st August 2020.

Restaurants & Cafes

Restaurants and cafés have been allowed to open since the 29th June and comprehensive public health guidelines have been developed to support businesses in reopening premises safely. In July, the NPHET recommended the reopening of these premises on the basis of strict adherence to the detail and spirit of the guidelines, and on the basis that the intended premises are controlled restaurant environments. The NPHET recognises that the vast majority of such premises have adhered to the guidelines in place.

Nonetheless, any social gatherings indoors represent a significant risk of infection spread, and in light of (1) the increase in cases in many parts of the country, (2) the proportion and absolute number of cases in those under the age of 45, and (3) the emerging evidence of a number of cases in staff working in the hospitality sector, the following is recommended to enhance risk prevention measures in this sector:

- The strict adherence to the detail and spirit of the guidelines currently in place.
- That restaurants and cafes (including bars/pubs/hotel bars serving food) are required to close by 10.30pm, other than for take-out and delivery service.
- The wearing of face coverings should be mandatory for members of staff in restaurants and cafes unless there is a partition between the person or employee and member of the public, or a distance of at least 2 meters is maintained at all times between the person or employee and members of the public.
- Relevant authorities should continue to ensure that robust inspection and enforcement arrangements are in place and enhance these arrangements where necessary.

Mass gatherings

Mass gatherings are events organised in advance 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, family events (e.g. weddings), large conferences and exhibitions, as well as community, charity events and other types of events and gatherings. 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. It is important to recognise that it is not just the risk associated with the event itself, but also the risks associated with people congregating in different ways both before and after events that must be considered. It is also noted that sporting and other events play an important role in Irish society and the general wellbeing of individuals and communities.

In light of the current status of the COVID-19 disease in Ireland over the month of July, the significant risk of infection spread associated with social gatherings particularly indoors, the risks associated with congregation before and after mass gatherings taking place, the increasing proportion and number of cases in younger people, and the current overall public health risk, it is recommended that:

- the current restrictions of 50 persons at indoor mass gatherings and of 200 persons for outdoor mass gatherings be retained. This will be further reviewed in advance of the 31st August, in light of the epidemiological position at that time and the key priority of resuming essential services such as health and social care and education.
- For events within these limits, current public health guidance must be strictly adhered to, with particular attention to:
 - Attendance numbers must be strictly linked to the ability to ensure appropriate physical distancing of 2 metres.
 - All appropriate measures to be put in place to avoid congregation of people at any stage, including arrangements for entry and exit to venues, and toilets and hospitality facilities
 - To facilitate contact tracing, arrangements to be put in place to record or be in a position to rapidly gain access to the contact details of attendees.
 - Organisers to encourage the safe transport to and from venues, with the aim of minimising contacts between different households.
 - Organisers should be aware that shouting or singing loudly may be associated with an increase in transmission of the virus and all appropriate measures should be taken to mitigate these risks.

With regard to mass gatherings, the following should also be borne in mind:

- 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;
- Marquees, tents, circuses etc. should be considered indoor venues for the purposes of these mass gatherings restrictions.
- Social gatherings of large groups of people which are not structured and organised have the potential to increase the risk of transmission of infection because they are not adequately planned by the organisers so that prevention and control measures can be implemented, and physical distancing can be maintained. People organising social gatherings should comply with public health guidance in relation to mass gatherings.

Private Home Social Gatherings

Private homes are uncontrolled environments, with significant risk of infection spread associated with indoor social gatherings in this setting. In light of the current status of the COVID-19 disease in Ireland in recent weeks and recent evidence of outbreaks in Ireland associated with social gatherings in private homes, it is recommended that:

- current public health guidance that social gatherings in private homes should be limited to visitors from no more than 4 other households and up to a maximum of 10 visitors to the home in total should be retained.

- Stronger messaging in relation to the risks associated with gatherings in private homes and appropriate measures to be taken is included as part of overall communications.

Section 2: Over 70s and medically vulnerable

People aged 70 years and over and the medically vulnerable have an elevated risk for COVID-19 both in terms of risk of infection and disease impact. The following is recommended that for these groups:

- They should exercise judgement regarding the extent to which they engage with others and in activities outside home.
- For those who wish to visit others, receive visitors in their home, attend shops, and engage in other activities, it continues to be 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,
 - use face coverings when attending shops or other busy public areas.
- For those who are planning to travel within and outside their region, they should acquaint themselves with the level of transmission of the virus in the relevant area, and consider how best to protect themselves.

It is further recommended that:

- Everyone should have due regard and take special care in relation to interactions with those that are over 70 or medically vulnerable.
- Residential care facilities should endeavour to enable the return to as normal a life as possible for residents, while ensuring that all necessary precautions are taken in line with public health guidance to protect residents from COVID-19.

Section 3: Specific Measures targeted at Vulnerable Groups

Vulnerable groups continue to be at higher risk and are being impacted disproportionately by COVID-19. This has been especially evident in the cases arising in Ireland over the last fortnight. A wealth of experience has been developed over the earlier phases of the pandemic and a suite of processes, services and supports were developed to support those most at risk. Given the recent increase in cases in some vulnerable groups, the following is recommended:

- The immediate establishment of a cross-Government mechanism to coordinate sustained support for those that are vulnerable and others disproportionately impacted by the pandemic.
- Using experience to date, the development and/or enhancement of multi-agency, multi-disciplinary plans to protect the most vulnerable from the disease across health and other settings.
- Fully reinstitute the set of cross-Government protective measures previously employed for those in vulnerable groups.
- Subject to completion of preparatory planning at a national level, the HSE to implement a programme of fortnightly serial testing, on a voluntary basis, in conjunction with representative groups and SafetyNet where appropriate, for persons living in Direct Provision centers, and homeless and Roma living in congregated settings.
- Measures should be put in place to ensure that economic considerations and insecurity of employment are not a deterrent for people coming forward for testing in these groups.

- In recognition of the high risk of congregated settings and recent pattern of cases in particular in Direct Provision, the NPHET recommends that relevant State bodies take appropriate immediate actions to further mitigate risks associated with congregation. This should be specifically expedited for healthcare workers, those over the age of 65 years and those that are medically vulnerable.

Section 4: Specific Measures targeted at Economic Activity

Significant efforts have been taken to date in the development of protocols, guidance and supports for workplaces to reopen and operate safely in a COVID-19 environment. This has been the result of a collaborative effort between State agencies, and employer and staff representatives. Notwithstanding, certain workplaces continue to be higher risk environments and this has been clearly evident in cases reporting over the last month. It is essential that all relevant parties redouble their efforts to ensure current outbreaks are brought under control and robust preventative measures are in place, including risk mitigation measures and inspection arrangements. The following is recommended:

- The advice remains that all workers and businesses that can work remotely from home should continue to do so to the maximum extent possible.
- Employers should strictly adhere to the Return to Work Safely Protocol — COVID-19 Specific National Protocol for Employers and Workers published by the Department of Business, Enterprise and Innovation on 8 May 2020, including having a COVID-19 Response Plan in place.
- Public health teams should adopt a rapid, robust and comprehensive public health response to cases in high risk settings such as food processing and construction sectors in particular, and should apply a very low threshold for mass testing of employees in such settings once an initial case is identified (subject to public health risk assessment).
- Regulatory bodies across all sectors should utilise their legal standards, assurance and enforcement powers to support comprehensive national and local responses where cases/clusters occur.
- In line with the recommendations of the National Outbreak Control Team (NOCT), the establishment by the HSE of a National Standing Oversight Committee on COVID-19 for food processing plants to maintain an ongoing review of the impact of COVID-19 on this industry, to be available to update guidelines and to oversee the establishment of a follow-up NOCT in the event of any resurgence of outbreaks.
- Employers should keep under review the sharing of transport to and from work by staff and should communicate clear guidance to all employees in relation to physical distancing being maintained on transport while travelling to work.

Section 5: Overseas travel to and from Ireland

In light of the deteriorating pandemic situation globally, the significant risk of imported COVID-19 cases to Ireland from overseas and the current overall public health risk, the NPHET reiterates its previous public health advice regarding travel, noting that the travel-related introduction of the disease continues to be a significant concern in terms of increasing the risk of a potential second-wave of the disease in Ireland. Consequently, the following continue to be recommended:

- NPHET continues to advise against non-essential travel outside of Ireland at this time;
- All measures be utilised to discourage travel from overseas to Ireland at this time.

The NPHET has previously recommended mandatory quarantine for all passengers travelling to Ireland from overseas. While this remains NPHET's preferred recommendation, if this is deemed unworkable or disproportionate, the NPHET again recommends that:

- consideration is given to the introduction of a travel ban on non-essential travel for those countries with particularly high incidence rates.

Section 6: Communications

Behavioural and message fatigue is a risk as we move into the next phases of the response to the pandemic, as the population disengages from COVID-19 related news and begins to take more responsibility for assessing risk and navigating situations in daily life. It is recommended that:

- There is an intensification and refreshing of cross-Government communications in relation to COVID-19 with specific emphasis on communicating and engaging with those under the age of 45. The objectives of this relaunched campaign should be to:
 - Continuing to communicate clearly and consistently on the facts of the disease and the 'why' of public health advice
 - Educating and empowering on risk perceptions and mitigation
 - Emphasising the positive gains and past progress
 - Continuing to maintain a sense of collective action and resilience
- While noting that the cumulative number of cases is published daily per county on the COVID-10 dashboard, the feasibility of also publishing the number of new cases over the previous 14 day period should be explored.
- All relevant authorities should ensure that any further additional measures are taken to ensure that information, advice and guidance is readily available in all relevant languages.

Section 7: Broader ongoing considerations and advice

In providing this public health advice to Government the NPHET—

- having due regard to the recent ECDC statement that *"the pandemic is not over, and hypothetical forecasting indicates a rise in cases is likely in the coming weeks"* and the NPHET's concerns regarding the current trend of increasing incidence of COVID-19 in the community, emphasised the importance of now redoubling efforts across Government and society to enhance compliance with hand hygiene, respiratory etiquette, physical distancing, the wearing of face coverings, the need to minimise direct contacts with people outside our households and all public health measures to the greatest extent possible to minimise the risk of a resurgence of infection in Ireland, so as to avoid the necessity to reintroduce stricter measures,
- expressed its concern regarding the increase in the number of cases in younger people and particularly those aged under 45 in recent weeks. While it is recognised that people will want to socialise and engage with family and friends again after the extended period of restrictive measures, it is important that, people of all ages do so safely through maintaining good hygiene practices and physical distancing as well as the need to minimise direct contacts with people outside our households, all to protect each other from infection spread,
- noted the significant impact of COVID-19 on nursing homes, the gravity of the outcomes of COVID-19 on this older vulnerable population, the high intensity and pace of transmission within nursing

homes, the asymptomatic transmission of COVID-19, the atypical presentation of COVID-19 in older people, the ongoing open clusters within nursing homes, that community disease suppression protects vulnerable nursing home residents and staff and the pending significant recommendations for protective actions for nursing home residents from the Nursing Home Expert Panel,

- reiterated the criticality of robust processes of sampling, testing, contact tracing, surveillance and reporting, noted the significant efforts already made and emphasised the need for a continued process of enhancements, 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, and ensuring the comprehensive completion of all relevant surveillance data and the timely notification of cases,
- committed to a 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,
- to ensure the effectiveness of the HSE's sampling, testing, contact tracing and surveillance processes, emphasised the need for continued communication efforts and commitment across the health service and Government to continually conveying the importance to the public of engaging fully with testing and contact tracing as key societal public health measures in order to limit the spread of infection,
- underlined that it is impossible to predict what the future trajectory of the COVID-19 disease will be in Ireland or provide assurance that it is safe to reduce the public health measures,
- noted the emerging evidence regarding the longer-term health impacts and outcomes of this disease for some people who become infected,
- emphasised the continued importance of 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,
- emphasised a continued focus on 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, as well as ongoing implementation, monitoring, review and re-calibration of public health measures including regionalised, localised or sector-specific responses, bearing in mind the associated public health risks.

ENDS