An Roinn Sláinte Department of Health Office of the Chief Medical Officer



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

20th 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 (NPHET).

The NPHET today reviewed the current epidemiological situation nationwide, and specifically the profile and pattern of COVID-19 in counties Kildare, Laois and Offaly. Enhanced public health measures have been in place in these three counties since the 7th August.

At national level, the NPHET noted the following:

- relatively high absolute numbers of new cases continue to be notified daily.
- the primary mode of transmission is close contact with a confirmed case (including cases associated with outbreaks), though this varies between counties;
- multiple significant outbreaks associated with workplaces, households, social and sporting activities have been notified;
- as of the 19th August, the R number is estimated at 1.2, this number is updated weekly;

Ireland's current epidemiological situation at the time of consideration by the NPHET was as follows: Cases and Deaths

- Number of confirmed cases: 27,457;
- Five-day rolling average: 112 cases;
- 14-day incidence: 26.3 per 100,000 population;
- Number of cases in healthcare workers: 8,523 (31% of all cases);
- Number of deaths due to COVID-19: 1,775;
- Positivity rate for all tests processed nationally in the past week: 1.3%;

Demographic and Location Trends

- 71% of cases notified in the past 14 days were in people aged under 45 years;
- The median age for cases notified in the past 14 days is 31 years;
- 12 counties have incidence rates higher than 15 cases per 100,000 population in the past 14 days. Bloc 1, Plaza Míseach, 50 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath 2, D02 XW14
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Hospitalisations

- As of yesterday (19/08/2020), there were 16 confirmed cases of COVID-19 in hospital, with 2 new admissions in the previous 24 hours;
- As of yesterday (19/08/2020), 6 confirmed cases of COVID-19 were in receipt of care in Intensive Care Units/ Critical Care Units. There were no new ICU admissions in the previous 24 hours.

Clusters and Modes of Transmission

 An increasing number of clusters related to social and family engagements, sporting activities and workplaces are being identified;

Contact Tracing and Testing

From 11th August – 17th August:

- the average number of close contacts per case was 5.61 and the median number of close contacts per case was 4;
- the median turnaround time for all tests, from referral to the completion of contact tracing, was approximately 2.83 days.
- the median turnaround time from referral to completion of contact tracing for tests with a "COVID-19 detected" (positive) result in community settings was 3.8 days.
- the median turnaround time from referral for testing to communication of test result to symptomatic patients with a "SARS-CoV-2detected" (positive result) in community settings was 2.9 days.

The NPHET also specifically considered the epidemiological situation in Laois, Offaly and Kildare following the introduction of additional public health measures in those counties on 7th August. These measures were introduced in the context of the disease indicators included in the *Framework for Future COVID-19 Pandemic Response*.

Laois and Offaly

Having reviewed the epidemiological data specifically relating to Laois and Offaly, the NPHET considers that the situation in these counties has improved. The mean number of new cases per day is low in both counties and incidence rates are stable or falling. As such, the NPHET considers that the additional public health measures in Laois and Offaly can be discontinued and these counties can be aligned with the nationwide measures agreed by Government on the 18th August. The epidemiological data for Laois and Offaly are as follows:

Case Numbers

- The rolling 5-day average in Laois as of 18th August is 3.4, compared to 5.3 on 6th August.
- Similarly, the rolling 5-day average in Offaly as of 18th August is 2.2, compared to 14.5 on 6th August.
- In Laois, 50 cases were notified to HPSC (4% of all cases) over the 14-day period to 18th August, 30 of these cases were notified in the first 7 days of this period.
- In Offaly, 103 cases were notified to HPSC (8% of all cases) over the 14-day period to 18th August, 90 of these cases were notified in the first 7 days of this period.

Incidence Rates

- The rolling 14-day incidence rates in Laois and Offaly remain high compared to other counties. In Laois, as of 18th August, the 14-day incidence rate is 56.7 cases per 100,000 population. In Offaly, the 14 day-incidence rate as of 18th August is 136.0 cases per 100,000 population.
- However, the rolling 7-day incidence rates are declining. In Laois, as of the 18th August, the 7-day incidence is 22.4 cases per 100,000 population. In Offaly this number is 23.1 cases per 100,000 population. This, combined with the 5-day average in both Laois and Offaly, indicate that the progression of the disease in these areas is declining compared to what was observed in late July-early August.

Modes of Transmission

 Lastly, the NPHET considered that the majority of cases in recent days in Laois and Offaly have now been attributed to known outbreaks and the number of cases attributable to community transmission is considered low (less than 10 in each county in the 7 day period to 18th August), in both counties.

<u>Kildare</u>

The NPHET determined that the epidemiological situation in Kildare differs considerably from that observed in Laois and Offaly. While there appears to be a certain level of stabilisation, high number of cases continue to be reported on a daily basis, with cases widely distributed across the county. The 7-day and 14-day incidence rates remain very high, at several multiples of the national averages. There are also a significant number of clusters, some with suspected secondary spread, and there are a number of facilities that are currently undergoing mass testing as a result of recent cases. Finally, there has been evidence of some increasing community transmission. The key epidemiological data relating to county Kildare are as follows:

Case Numbers

- The rolling 5-day average in Kildare is 38.4 cases as of 18th August. This is the highest rate observed in any county nationally. This compares to a 5-day average of 22.2 cases in Kildare on 6th August.
- In Kildare, 431 cases (35% of all cases) were notified to HPSC during the 14-day period from 5th August to 18th August. 212 of these cases were notified in the first 7 days of this period.

Incidence Rates

- The rolling 14-day incidence rates in Kildare remains high compared to other counties at 195.5
 cases per 100,000 population. This is the highest rate of any county by some margin.
- Similarly, the 7-day incidence of 100.7 cases per 100,000 is the highest observed in any county.
 This indicates that while the disease trajectory in the county may be stabilising, it has not yet shown any convincing signs of decline.

Modes of Transmission

- The number of cases attributable to community transmission appears to be increasing in Kildare in recent weeks.
- In the two-week period from 26th July to 8th August, 3% of cases were classified as "community transmission" cases. Since the 9th August, 16% of cases are "community transmission" cases in Kildare. While this is not out of line with the national figure (19%), the absolute volume of cases in Kildare means that it would be at risk of a potential significant level of community transmission were the current measures to be eased.

Given the epidemiological data and the reasons outlined above, the NPHET remains very concerned about the profile of the disease in Kildare and advises that the measures currently in place should be extended for a further two weeks to allow sufficient time for the measures to take full effect, and disrupt the current pattern of disease transmission and especially to prevent any further community transmission.

The NPHET also recommends:

- that advice in relation to working from home aligns with the nationwide measures agreed on 18th August; i.e. employees should only attend work in person if it is absolutely necessary to do so.
- that schools in Kildare can reopen as planned. Schools by their nature are highly controlled
 environments, and significant guidance and protective measures are already in place to enable
 schools in Kildare and across the country to reopen safely in the coming weeks.
- that both staff and students can move in and out of Kildare for the purposes of attending educational settings in the same manner as currently provided for other workers and for essential purposes.

The NPHET fully appreciates that this advice will be disappointing and challenging for the people of Kildare, but the aim of these measures is to significantly improve the situation in relation to COVID-19 in Co Kildare in the coming weeks. The NPHET once again repeats its call for continuing national solidarity and for everyone across the country to continue to adopt the behaviours that are so critical to stopping the spread of this disease.

NPHET also gave consideration to the issue of testing and management of COVID-19 in children, and the need for parents and carers of children to have clear guidance on this. To this end, a number of work streams were recently established with a view to developing recommendations and clear communications. These work streams are nearing completion and will launch over the coming week. In developing its recommendations, the NPHET had regard to the findings of the European Centre for Disease Prevention and Control (ECDC) technical report "COVID-19 in children and the role of school settings in COVID-19 transmission", published on the 6th of August 2020.

Key messages of the ECDC technical report² include the following:

- Child-to-child transmission in schools is uncommon
- Children are not the primary drivers of COVID-19 transmission to adults in the school setting.
- There is little evidence of COVID-19 transmission from adults to children in the school setting.
- Adults are not at higher risk of COVID-19 in the school setting than in the community or household.
- There is limited evidence that schools are driving transmission of COVID-19 in the community, however there are indications that community transmission is imported into or reflected in the school setting. If appropriate physical distancing and hygiene measures are applied, schools are unlikely to pose a greater risk for transmission of COVID-19 than other occupational or leisure settings with similar densities of people.

[https://www.ecdc.europa.eu/en/publications-data/children-and-school-settings-covid-19-transmission]

¹ ECDC. COVID-19 in children and the role of school settings in COVID-19 transmission. 2020. [https://www.ecdc.europa.eu/en/publications-data/children-and-school-settings-covid-19-transmission] ² ECDC. COVID-19 in children and the role of school settings in COVID-19 transmission. 2020.

 Of note, while very few significant outbreaks of COVID-19 in schools have been documented (internationally), they do occur and may be difficult to detect due to the relative lack of symptoms in children.

The NPHET also considered the issue of visitation to long term residential care facilities today, in light of the changing profile of the disease across the country. While recognising the importance of visiting to the general health and wellbeing of the residents of LTRCs, given the current epidemiological profile of the disease NPHET recommended that in addition to the current visitor guidance and in keeping with the general public health advice to limit contacts, that the number of nominated visitors in LTRCs is limited to 4 per resident from Monday 24th August and that PPE is provided to visitors as necessary. In addition, consideration should be given to enhanced support from Community Response Teams and local public health teams to support service providers in the provision of safe, consistent and proportionate visiting, balancing risk with benefits.

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