

COVID-19 Strategic Intelligence Group

12.00 pm – 28 September 2020 - Zoom Video Conference

Present:

Professor Ian Young (Chair)	Chief Scientific Advisor, DOH
Dr Michael McBride	Chief Medical Officer, DOH
Dr Lourda Geoghegan	DCMO, DOH
Kieran McAteer	COVID-19 Response, DoH
Dr. Eugene Mooney	Senior Statistician, DOH
Dr. Liz Mitchell	Chair of Contact Tracing Service Steering Group, DoH
Professor Hugo Van Woerden	Director of Public Health, PHA
Dr Declan Bradley	Consultant Public Health Medicine, PHA
Professor Frank Kee	Centre for Public Health, QUB
Professor Diarmuid O'Donovan	Centre for Public Health, QUB
Professor Stuart Elborn	Faculty Pro-Vice-Chancellor, School of Medicine, Dentistry and Biomedical Sciences. QUB
Professor Fiona Alderdice	Nuffield Department of Population Health, University of Oxford
Dr. Michael Quinn	Head of Clinical Information, HSCB
Tricia Lavery	DOH (Secretariat)

Apologies

Dr Naresh Chada	DCMO, DOH
Dr Gerry Waldron	Asst. Director of Public Health (Health Protection) PHA
Professor Cathy Gormley-Heenan	Pro-Vice-Chancellor (Research and Impact), Ulster University

Welcome

1. Prof Young welcomed all participants to the meeting.

1.1. Apologies were as noted.

1.2. Professor Cathy Gormley-Heenan has been in contact to advise that this meeting now clashed with a recurrent meeting within University of Ulster and Prof. Young agreed to contact Prof. Gormley-Heenan to see if she would like to nominate someone else to represent UU at this group.

ACTION: Prof. Young to contact Prof. Gormley-Heenan to see if she would like to nominate someone else to represent UU at this group.

1.3. There were no outstanding actions to be reviewed.

Status Update

1. Prof Young provided an update to the group on the current state of the epidemic.

1.1. Considering the 7-day rolling average of cases, current data cannot be compared to wave 1 as the testing strategy is now different. There is a strong upward trajectory and the doubling time last week was 10 days and running at 150 cases per day. This implies that if left unabated this would put us in the position of having over 600 cases per day in 3 weeks' time. This information fed into the Executive decision to introduce NI-wide restrictions last week.

1.2. Testing has stabilised at around 20 tests per 100 of population for 7 days but the test positivity rate is increasing and has risen sharply in the past 2 weeks from around 1.5% to over 3%. Test positivity in wave 1 was around 30-40% when the testing strategy was a hospital symptom-based strategy whereas the current testing strategy is a community-based testing strategy which shows that comparisons cannot be made. The vast majority of testing is now happening in Pillar 2, meaning that they are in the community.

1.3. In terms of R, this has been persistently above 1 since the start of August and R based on hospital admissions is currently sitting around 1.2. The 7-day rolling average for hospital admission has risen sharply to just under 40 from just under 20 last week. Similarly the 7 day average for COVID positive inpatients has risen from around 25 last week to almost 45 this week. We are now moving out of the lag period and are starting to see an impact of the epidemic on hospital admissions, and deaths will lag behind further probably by around 2 weeks. The current doubling time for hospital inpatients is around 14 days. Given the current level of 40, this would imply that in 3 weeks we would see levels in 4 weeks of 160 and in 6 weeks at 320. The peak of inpatients in wave 1 was around 300 and if the doubling time remains at 14 days we will exceed that number in 6 weeks. Unabated this doubling rate could also increase level reached in wave 1.

1.4. Looking at the Local Government Districts (LGDs), the incidence levels data shows the following:

- Antrim & Newtownabbey and Ards & North Down are stable and reasonably low;
- Armagh City, Banbridge & Craigavon stable and higher;
- Belfast rising but at a slower rate than previously;
- Causeway Coast & Glens just beginning to rise in the last few days;
- Derry City & Strabane very high following a dramatic rise, with a doubling rate of 3 days last week but perhaps beginning to settle, although still a great cause for concern;
- Fermanagh & Omagh no longer at the low level it was;
- Lisburn & Castlereagh stable
- Mid & East Antrim stable and the lowest of all the LGDs;
- Mid Ulster also showing a dramatic rise; and
- Newry Mourne & Down high but relatively stable towards the end of last week.

1.5. In terms of postcodes, there are quite a few causing concern:

- BT82 (Strabane) has had 163 cases in the last 7 days and an incidence of over 600 cases per 100K of population;
- BT80 (Cookstown & Dungannon) has had 73 cases in the past 7 days and an incidence of over 300 per 100K of population;
- BT48 (Derry) has had 118 cases in the past 7 days and an incidence of 200 per 100K of population;

1.6. These postcodes are all around the border corridor. There are others that are still quite high but are mainly in the greater Belfast area. In terms of the postcode areas that were the first to be subject of local restrictions, the modellers have pointed out that R for these areas collectively is about 1 or less and there have been significant falls in both BT43 and BT29 recently. The modelling team are reporting 20 clusters in the BT82 area but this only accounts for 100 cases and the incidence level is 600 cases. The biggest category of transmission is of household-transmission and of community-transmission. Community transmission is where the source of transmission is unknown and it is likely to be a mixture of unidentified bars, restaurants and other kinds of social interactions.

In terms of the Agenda, the papers presented will be discussed at the next meeting as there is a need today to focus on the situation in QUB and some questions arising from this.

Potential Outbreak in Queens University, Belfast.

2. Prof Young invited Prof. Stuart Elborn to provide an update to the group on the emerging outbreak in QUB.
 - 2.1. There are currently 24 students who have tested positive who are located in 3 different university accommodation blocks within the Queens Elms Village. They are now in isolation and are being supported by university staff assisted by PHA. There are a further 112 students who have been asked to self-isolate in 3 of the universities 51 accommodation blocks. There are currently 3000 students living in QUB accommodation, so these figures equate to less than 1% of students having tested positive with around 5% now self-isolating.
 - 2.2. There are a further students that live in private accommodation that will also be self-isolating and this is being collated on the university portal reporting system that all students and staff report into when they are self-isolating or have tested positive. Unfortunately some of the students in Halls had travelled home before getting their positive test which resulted in at least 1 household reporting further positive cases, and this is being handled by PHA. The situation has progressed very quickly over the weekend.
 - 2.3. QUB are following up with all of their positive students with guidance from PHA and initial data gathered would suggest a lot of transmission has come from social interactions as opposed to on-campus activities. It is unclear whether these social interactions occurred within the Halls of Residence or in external hospitality settings etc.
 - 2.4. There was a lengthy discussion on what options should be considered in terms of next actions in dealing with this situation

Draft advice from PHA on the issue of whether students should or should not be travel home at weekends.

3. Prof Young invited members to offer their thoughts on this.
 - 3.1. One of the issues previously highlighted around this is the lack of suitability of some accommodation, particularly in the private rental sector, in terms of allowing students to remain in their accommodation longer term i.e. no washing machines or limited cooking facilities. If this group were minded to advise that students should not travel home at weekends then there is need to consider how they can be supported at weekends. Conversely if the advice is that all students should return home, then the issue arises of sending asymptomatic students across the country, potentially causing widespread transmission. QUB have been exploring the feasibility of on-site testing within QUB labs to deliver some asymptomatic testing to help reduce this risk to a degree but this is still at an early stage of discussion with PHA and DoH.

3.2. There was a lengthy discussion around a range of factors for consideration on both sides of this issue. There were many complex issues considered during the discussion in an effort to reach a consensus position in terms of advice from the group on this issue.

3.3. In drawing the meeting to a close it was agreed that further discussions would be necessary outside of this meeting. The following action points were also agreed:

ACTION: PHA to liaise with both QUB and UU on the information and advice to be sent out to all students.

ACTION: Prof. Young and Dr. Michael McBride to liaise with other NICS Departments and TEO to discuss a high level strategic piece on support for students.

ACTION: Advice to students to be issued detailing that any students who are positive cases or contacts of cases should immediately isolate where they are currently living. Students who are neither a case nor a contact of a case should be advised to limit their travel to essential travel only. Further work to the support for students in isolation need to be developed and should include human rights and welfare considerations.

ACTION: PHA to share details of the IMT for this outbreak with CMO and colleagues.

Date of next meeting

4. The next meeting will be on Monday 5 October 2020 at 12pm and will be via Zoom.