

COVID-19 Strategic Intelligence Group

29 March 2021 at 12:00 – Zoom Video Conference

Present:

Professor Stuart Elborn (Chair)	Faculty Pro-Vice-Chancellor, School of Medicine, Dentistry and Biomedical Sciences, QUB
Professor Ian Young	Chief Scientific Advisor, DoH
Dr Michael McBride	Chief Medical Officer, DoH
Dr Lourda Geoghegan	DCMO, DoH
Dr Liz Mitchell	Chair of Contact Tracing Service Steering Group, DoH
Professor Frank Kee	Centre for Public Health, QUB
Professor Fiona Alderdice	Nuffield Department of Population Health, University of Oxford
Professor Duncan Morrow	Director of Civic Engagement & Student Affairs, Ulster University
Dr Stephen Bergin	Director Public Health (Interim), PHA
Professor Diarmuid O'Donovan	Professor of Global Health, Centre for Public Health, QUB
Jonathan Norwood	DoH (Secretariat)

Apologies:

Dr Naresh Chada	DCMO, DoH
Dr Declan Bradley	Deputy Chief Scientific Advisor, DoH
Dr Michael Quinn	Head of Clinical Information, HSCB
Dr Gerry Waldron	Assistant Director of Public Health – Health Protection, PHA
Dr Eugene Mooney	Director of Information and Analysis, DoH
Kieran McAteer	COVID-19 Response, DoH

Welcome, Introductions and Apologies

1. Prof Elborn welcomed all participants back to the meeting.
 - Apologies were as noted.
 - The previous minutes were accepted.
 - Prof Young will return to chair meetings from the next scheduled meeting on 12th April 2021.

Status Update

SPI-M-O: Consensus Statement (Paper 2a)

SPI-M-O: Medium Term Projections to SAGE (Paper 2b)

2. Dr McBride provided an update on the current position:

Current estimate of Rt (new positive tests): 0.75-0.95 (7 days previous 0.90-1.10)

Current estimate of Rt (hospital admissions): 0.65-0.95 (7 days previous 0.55-0.75)

Current estimate of Rt (ICU): 0.65-1.15 (7 days previous 0.45-0.95)

Average number of new positive tests per day last 7 days: 153 (7 days previous 180)

7 day incidence based on new positive tests: 57 / 100k (7 days previous 66)

14 day incidence based on new positive tests: 123 / 100k (7 days previous 131)

7 day average of total positive individuals (pillar 1 and 2): 3% (7 days previous 6%)

7 day daily average tests completed: 6,539 (7 days previous 6,524)

Number of new positive tests in over 60s in last 7 days: 147 (7 days previous 179)

Proportion of total positive tests occurring in over 60s: 13.6% (7 day previous 13.7%)

First COVID +ve hospital admission in last week: 40 (7 days previous 51)

Number of community acquired COVID inpatients: 105 (7 days previous 125)

COVID +ve ICU patients: 14 (7 days previous 23)

- 7-day and 14-day incidence rates continue to decrease.

- Hospital admissions continue to decrease.
- Positivity continues to decrease and remains below 5%.
- 0.32% of the NI population (1 in 313 people) has COVID-19, which is below Scotland.
- There is an uptick in children testing positive according to ONS data.
- All LGDs remain below 100/100k incidence rate. Border areas have reported slight increases recently; PHA colleagues are working with local councils closely.
- Northern Ireland has lower 7-day cumulative total cases than Rol and Scotland. Dr McBride shared a graph comparing prevalence in all UK regions.
- Dr McBride shared graphs showing 'Scottish Incidence in Children' and 'Welsh Incidence in Children' where both show an uptick.
- A further graph showed 'Mobility changes in Northern Ireland over the past 4 months'.
- ICU admissions continue to decrease.
- Number of deaths in care homes continue to decrease.
- There is regional variation and in particular, there are challenges in border areas with rising case numbers and rising numbers of clusters.

COG-UK: Impact of Travel Restrictions on Importations to England from May to Sept 2020 (Paper 3)

3. Prof Elborn asked for comments on the paper:

- The paper outlines how to limit travel safely.
- The B.1.3.5 variant is more prevalent in Europe and international travel risks were discussed.
- Wastewater surveillance is underway in two pilot sites and the longer-term strategy was discussed.
- Quarantining and data sharing of people arriving to Northern Ireland via Rol was discussed. Completing a 'UK Passenger Locator Form' is the current process to collecting this data and there is a data sharing agreement in place between NI and Rol.
- There being no further comments, the paper was noted.

EMG: Transmission in Prisons (Paper 4)

4. Prof Elborn asked for comments on the paper:

- Vaccination and testing within prisons were discussed and are in line with JCVI recommendations.

ACTION: Jonathan Norwood to forward paper to Director of Asymptomatic Testing in DoH.

- Prison officers are more likely than prisoners to be the source of infection. There was consensus to allow JCVI to reflect and await the considerations.
- Movement of prisoners has been the main challenge to controlling spread; there has been less new prisoners introduced into prisons during the pandemic.
- There being no further comments, the paper was noted.

Different Impacts on Men and Women (Paper 5a)

UKOSS ISARIC CO-CIN: COVID-19 in Young Females and Pregnancy for SAGE (Paper 5b)

BMJ: Clinical Manifestations, Risk Factors, and Maternal and Perinatal Outcomes of Coronavirus Disease 2019 in Pregnancy (Paper 5c)

5. Prof Elborn asked for comments on the group of papers relating to pregnancy:

- The group discussed asymptomatic testing of pregnant women and the indirect consequences associate with COVID-19. There is an increase in infant prematurity; less women are attending antenatal care and an increase in mental health problems.
- Are we recording if vaccinated women are pregnant; this data is required to better aid understanding? The UK Senior Clinicians are leading work in this area.
- There is a bias towards females in terms of post COVID syndromes.
- The group reflected on the vigilance of care of women and particularly those pregnant. The uptake of dexamethasone of pregnant women is reported as 19%, which is extremely low.
- Women under 40 are more likely to be admitted to hospital than women over 40; there is a lower threshold for admitting pregnant women to hospital.
- There being no further comments, the papers were noted.

Andrew Kunzmann: Weekly Digest (Paper 6)

Connor: COVID Digest (Paper 7)

6. Prof Elborn asked the group to note the two Queen's papers.

AOB

British Academy: Understanding the Long-term Societal Impacts of COVID-19 (Paper 8)

7. Prof Elborn asked the group to note this paper and invited members to raise any further items for discussion:

- The group discussed the potential longer-term societal impacts of COVID-19. How will the impacts on younger people be tackled? How will the next 12-18 months look?
- The group noted the Marmot Review.
- 'Non COVID' healthcare delivery was discussed.
- There being no further business, the meeting closed.

Date of Next Meeting

8. The next meeting will be on Monday 12 April 2021 at Noon via Zoom.