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SCIENTIFIC AND TECHNICAL ADVISORY CELL

(21st Meeting)

21st September 2020**PART A (Non-Exempt)**

Note: The Minutes of this meeting comprise Part A only.

- Media briefing. A1. In advance of the meeting of the Scientific and Technical Advisory Cell, members watched the media briefing given by Sir Patrick Vallance, the Government's Chief Scientific Adviser and Professor C. Whitty, the Chief Medical Officer for England in relation to increasing cases of COVID-19 in the United Kingdom.
- Minutes. A2. The Scientific and Technical Advisory Cell received and noted the Minutes from its meeting of 16th September 2020 and thanked the Secretariat Officer, States Greffe, for the speed with which they had been produced. It was noted that the Chair had undertaken to circulate them to the Competent Authority Ministers, in advance of a meeting that was due to take place on the evening of 21st September, so members were asked to provide any comments thereon, in the absence of which they were taken to have been approved.
- Monitoring Metrics. A3. The Scientific and Technical Advisory Cell ('the Cell'), with reference to Minute No. A3 of its meeting of 14th September 2020, received and noted a PowerPoint presentation entitled 'Scientific and Technical Advisory Cell monitoring update', dated 21st September 2020, which had been prepared by the Principal Officer, Public Health Intelligence, Strategic Policy, Planning and Performance Department.

The Cell was informed that the data had been prepared on Friday 18th September and that, as at that date, there had been 17 active cases of COVID-19 in the Island. Since then, 3 people had recovered and 3 new positive cases had arisen, which resulted in no net change to the figures. Of the 17 cases, 9 were symptomatic, 8 asymptomatic and they were all located within the community. 12 had been identified as a result of arrivals testing, 4 through workforce screening and one following testing pre-admission to hospital. One of the cases, who had been symptomatic and had been identified as having COVID-19 during the previous week, appeared to have contracted the virus from an, as yet, unidentified source, which was a cause of some concern because it was the first example of such transmission. Screening of 51 direct - and more distant - contacts had been undertaken and all results had, to date, been negative.

Deaths from COVID-19 in the Island remained static at 32, but the overall number of deaths in the Island for the year to-date had increased to 472, which remained lower than for the same period in 2019 (529) and over 100 lower than in 2018, when there had been 578 deaths.

Since the start of the pandemic, there had been 393 positive cases for COVID-19, excluding infections which had subsequently been shown to be 'old', following serology testing and 360 people had recovered. The rate of Jersey cases per 100,000 population over the last 14 days had stood at 17.63 on 18th September, but had now increased to 19.5. Since early May, the Island had consistently remained green under its system of categorisation, as it had been below the rate of 25 cases per 100,000 population over the previous 14 days during that period.

The Cell noted that the graph relating to symptoms reported on helpline calls had been amended to include tiredness, sore throat and gastrointestinal problems. In respect of the latter, there had been fewer callers experiencing this symptom. Since the schools had re-opened, the number of calls from, or relating to, children aged from birth to 11 years had remained higher than previously. This was partly due to them experiencing coughs and high temperatures and this was confirmed by the feedback received from primary care settings. On a related note, the Cell was informed that discussions had taken place over the weekend of 19th / 20th September, around the definition of 'continuous cough', with a view to reducing the threshold for PCR testing, rather than turning patients away. This emphasised the need for surveying the indigenous population with increased alacrity. It was noted that the overall number of calls to the helpline had risen over the previous week, although it was suggested that much of the increase was as a result of confusion amongst Islanders around the current travel policy.

The number of inbound travellers to the Island had continued to decline, since the peak during the week of 17th August, albeit it was acknowledged that the data for the week of 14th September was not complete, because it only reflected the number of travellers for 5 days. Since the start of the pandemic, there had been a total of 105,337 tests undertaken, 78,019 of which had been on inbound travellers. Jersey's weekly testing rate per 100,000 population was 8,300, which was lower than in previous weeks – following the reduction in the number of inbound travellers – but far exceeded the rate in the United Kingdom (2,269) and other jurisdictions with which the Island had close links. Jersey's weekly test positivity rate remained static at 0.1 per cent, whilst the United Kingdom had increased from 0.6 per cent to 1.4. France had increased to 5.4 per cent and Spain to 10.9 per cent.

In respect of the prevalence of the virus amongst non-travellers, it was noted that the current non-inbound rate was 0.129. During July, August and September, a total of 18 cases of COVID-19 had been identified in the Island in people who had not travelled. Since the borders had re-opened on 3rd July 2020, there had been 76,763 arrivals and 74,598 swabs taken. Since 1st July 2020, there had been 53 positive cases for COVID-19 (excluding those with 'old' infections), of which 64 per cent had arrived from green countries and 36 per cent from amber / red countries. 87 per cent had arrived by air. The total inbound rate had been 0.071 on 18th September and was now approximately 0.1. The Independent Advisor - Epidemiology and Public Health, suggested that it would be helpful for the Cell to receive graphs which depicted the weekly inbound rate for COVID-19 over time, in order that any changes, due to passenger numbers and the force of infection from outside the Island, could be clearly identified. He anticipated that these would show an upwards trend. The Consultant in Communicable Disease Control, requested the same for the non-arrivals, in addition to a consolidated version of both.

The Cell noted that the average turnaround time for the testing of arrivals over the previous 7 days had decreased to 23 hours. Of the 71 positive cases since 3rd July 2020 (53 arrivals and 18 non-travellers), 28 (almost two fifths) had been aged between 20 years and 29 years.

The Cell was presented with maps, which set out the geographic distribution of 14 day cumulative numbers of reported COVID-19 cases per 100,000 population on a worldwide and European basis, as at 17th September 2020. Also included were maps from 7th August, which indicated the changing prevalence of the virus across the world and Europe. These showed that the majority of Spain and much of the southern part of France now had in excess of 120 cases per 100,000 population and the situation in the north of England had also worsened. Globally, there had been over 31 million cases of COVID-19 since the start of the pandemic and 960,736 deaths.

As at 17th September 2020, data for 167 regions in France, Eire, Italy and Germany had

21st Meeting
21.09.20

been classified. Of these, 38 (23 per cent) were classified as red; 100 (60 per cent) as amber and 29 (17 per cent) as green. Of the 104 Départements in France, only one per cent was currently green and 37 per cent red, compared with 27th August 2020, when 40 per cent had been green and 9 per cent red. In Eire, 69 per cent of its counties were now amber, compared with 31 per cent on 27th August 2020 and 62 per cent of the regions of Italy were now amber, compared with 48 per cent the previous week (10th September). In Germany, 75 per cent of its regions were green, which had reduced from 81 per cent the previous week.

With regard to influenza, the Cell was informed that the next update from Flu News Europe would be received on 2nd October 2020. In the Southern Hemisphere, the situation had not changed, with much lower than expected levels of influenza for the time of year, notwithstanding that the amount of testing had remained static, or even increased.

For the period up to 13th September 2020, the number of people registered as actively seeking work in the Island (excluding those claiming through the Covid Related Emergency Support Scheme (CRESS)) continued to decline, when compared with the previous week and the number of active income support claims had stabilised. Footfall in St. Helier had increased by 5.6 per cent when compared with the previous week, but remained significantly lower than for the same period in 2019 (down 38.7 per cent). It was suggested that the distribution of the £100 Spend Local cards to Islanders might have contributed to the increased number of people visiting Town.

The Cell noted the position and thanked the Principal Officer, Public Health Intelligence, for the comprehensive briefing.

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borders.

A4. The Scientific and Technical Advisory Cell ('the Cell'), with reference to Minute No. A1 of its meeting of 16th September 2020, recalled that countries and regions (in some jurisdictions) were currently assessed as Red, Amber or Green (RAG), depending on the number of positive cases for COVID-19 over the previous 14 days, per 100,000 population and that the Competent Authorities had recently discussed the categorisation of regions and had expressed concern that the Island ran the risk of isolating itself and impacting on connectivity as a result of that categorisation.

The Cell further recalled that it had been asked to provide views on a policy paper, which had included a full range of options for Ministers, including the possibility of sub-dividing up amber in order to separate out regions as posing a greater, or lesser risk, mindful that much of the United Kingdom ('UK') had been scheduled to become amber with effect from 00.01 hours on 17th September. The Chair, Vice-Chair and Consultant in Communicable Disease Control had attended a meeting of the Competent Authority Ministers on 16th September 2020 and had communicated the Cell's advice, which had been that, taking account of all prevailing circumstances and likely trajectory of the virus, it did not consider that it was the appropriate time for any change to be made to the current categorisation of regions / countries, that would increase the risk of COVID-19 being imported at the border. The Competent Authorities had heard from the Group Chief Executive, Ports of Jersey and it had become apparent that any further restriction on travel to the Island could, potentially, have a significant effect on the economy and the Island's connectivity, acknowledging that, in light of the upwards trajectory of cases in the UK, any changes in Jersey might become irrelevant in relatively short order. As a consequence of the meeting of the Competent Authority Ministers, the Chair had agreed that the Cell would revisit the issue, subject to being provided with more robust data and additional information on the economic impact of any changes to the categorisation. The Cell accordingly received an updated PowerPoint presentation, dated 21st September 2020, entitled 'Safer Travel – updated analysis' and welcomed the Group Chief Executive, Ports of Jersey and the Chief Executive Officer, Jersey Finance, to the meeting.

The Cell heard from the Director of Strategy and Innovation, Strategic Policy, Planning and Performance Department, who indicated that the presentation included additional information on the figures for the virus in the UK, anticipated passenger numbers and how various safer travel risk assessments might apply. The Cell was reminded that the COVID-19 Strategy, which had been adopted by the States Assembly, aimed to ensure that positive cases of the virus remained at very low levels and sought to weigh up the harms posed by it and the public policy responses to it. The retention of connectivity with the UK was key to achieving that balance. In the rapidly changing situation, policy decisions might impact on the decisions made by commercial travel providers and in order for informed choices to be taken, it was important to analyse the risks on both sides.

The Director of Strategy and Innovation informed the Cell that, on the basis that there had been no opposition to the proposal at the meeting of the Competent Authorities, the latter had decided to adopt the second option that had been contained within the paper that the Cell had considered at its meeting on 16th September, namely to apply the current risk assessment thresholds and controls to Lower Tier Local Authorities ('LTLA') in England, in order to distinguish between those areas within counties where there were higher and lower instances of the virus.

The Principal Officer, Public Health Intelligence, Strategic Policy, Planning and Performance Department, had provided a breakdown of the numbers by area of England, based on Upper Tier Local Authority and LTLA for the previous 2 weeks and, in the Director of Strategy and Innovation's view, the change did not appear significant. Consequently, he questioned whether this would justify increasing the threshold for green up to 50 per 100,000, or dividing amber into light and dark. Based on this proposal, the Cell noted tables, which had been prepared on various scenarios, for actual figures from 31st August and estimated passenger numbers up to 26th October 2020. These demonstrated that most of the travel hubs were located within green areas, but that those in the North West of England (Manchester and Liverpool) were red. They also showed that if the rates of infection with COVID-19, per 1,000, remained stable – currently at 1.6 – the number of positive cases imported at the borders would decrease from 8.9 to 7.7. The Consultant in Communicable Disease Control suggested that, when based on the new classification, half the incoming passengers would arrive from green areas (which had a rate of one per 1,000) and half from amber (which had a rate of 4 per 1,000), which equated to 2.5 per 1,000. On the aforementioned table, the closest column was 2.4, which gave a figure for week 39 (21st September) of 13.9, which would then decrease to 11.5 by 26th October, which represented more cases than currently.

The Chair indicated that when looking at the detail of the figures in England for COVID-19, they were doubling on a weekly basis, as had been stated by Professor C. Whitty, the Chief Medical Officer for England in the media briefing referenced at item A1 of the current meeting. Consequently, in 2 weeks' time, even if the threshold for green were to be increased, it was likely that all areas would be back in the situation in which they found themselves now, potentially making any discussion around the subject academic. He suggested that the issue was, in fact, how to allow people, who were required to support the economy and finance, into the Island in a safe way. The Medical Officer of Health, opined that if the UK were to enter lockdown – and dependent on whether a ban on travelling to airports was imposed – it was possible that Jersey could become an attractive destination, with the associated risks posed by importing the virus. The Director of Communications, Office of the Chief Executive, informed the Cell that he was working with Visit Jersey to ensure that the Island was not perceived as a 'quarantine haven'.

The Cell heard from the Chief Economic Advisor, who had re-circulated a report,

entitled 'Economic implications for Jersey of restricting external travel', which had been prepared earlier during the pandemic. In that paper, it was stated that a decision to maintain travel restrictions into the autumn would start to have a significant negative impact on the financial services industry and that the greatest long term risk to the Island would be the permanent loss of travel connectivity, which would cause structural harm to the economy. The Chief Economic Advisor indicated that those assessments remained valid and that it was extremely important to have an extant air route to the Island, even if the number of passengers was low. He suggested that the economic value of those people, who would continue to travel, would be greater than average. It was not possible for all companies to conduct their business in a virtual way and it was key to retain confidence in the Island by maintaining connectivity. He cautioned against underestimating the economic impact of restrictions.

The Chief Executive Officer, Jersey Finance, informed the Cell that industry members believed that the Government had managed to attain the right balance in respect of the virus, when compared with other areas. The re-opening of the borders had been a positive move and the retention of connectivity was a confidence booster for the industry. In discussions around the financial services industry with international press, Jersey Finance had emphasised the Island's resilience and ability to cope. However, it was extremely difficult to quantify the value of maintaining travel links. Many fund lawyers and administrators had not been too adversely impacted and there was no significant demand from their clients for face to face meetings at this juncture. However, those operating in Trust, in the private client sector, were aware that deals could not be closed unless clients were able to travel to the Island. The banks were coping relatively well and staff had started to return to their offices, but the policy decision on whether employees should work from home, or from the office, was taken off-Island and this was also the case for some accountancy firms. Some of the latter had encouraged people to come to Jersey in order to attend board meetings and there was an element of inward travel for essential meetings, generally. From a business perspective, it was key to be able to get to London in the morning and return in the evening and much of the industry wished to retain the British Airways link to London Heathrow for as long as possible.

The Chief Executive Officer, Jersey Finance, was aware that some partners from law firms had been able to travel off Island and secure good deals and that ability had differentiated Jersey from other jurisdictions. An increasing number of fund managers were headquartered in Jersey and, as global businesses, they needed the ability to travel in order to meet with international clients. It was acknowledged that some had access to private jets, rather than flying with commercial airlines, but it was important for the sector to ensure that the Island did not return to a state of lockdown, because confidence, both on and off Island was crucial. From a business perspective, it would be problematic if people were required to self-isolate until they received a negative day 5 PCR test, but if self-isolation was deemed necessary until a negative day zero test was received, this would be less of an issue, particularly if the results could be obtained within 12 hours. For the industry, it was key to retain the connectivity with London, irrespective of the number of flights each day. With respect to the model which had been adopted by Guernsey – a business tunnel – the theory sounded good, but, anecdotally, the questionnaire that people were required to complete was so detailed that some firms had decided not to use the facility.

Group Chief Executive Officer, Ports of Jersey, informed the Cell that the situation in respect of the airlines was dynamic and rapidly evolving. Air connectivity could not be turned on and off and it would be problematic for that sector if restrictions were to be introduced in Jersey. In order for an airline to be financially viable, it required flights to be 75 per cent full. Below 65 per cent capacity, the airlines would not make any money. In order to fill a plane, a combination of business travellers, tourists and people visiting family and friends was required and if one of these elements of the 'three-legged

stool' was absent, passenger numbers would drop below 65 per cent. During July and August there had been an improving situation, but recently the load factors had declined and, during the week of 20th September, had averaged 53 per cent. The airlines submitted flying programmes to a central body, which co-ordinated the slots. This was a costly exercise, which was normally only undertaken twice a year, for the summer and winter schedules. At the current time, the airlines were sending in the programmes on a monthly basis and, on the basis that the latest submissions had been provided several weeks earlier, it was likely that they were already out of date and that the anticipated loads would be even lower than had been estimated.

Media attention around the spread of COVID-19 had an adverse impact on travel and the Group Chief Executive Officer, Ports of Jersey, suggested that it was highly likely that there would be an ongoing reduction in the number of flights across the board and that this could be significant and fast, irrespective of any decision made by Jersey. However, if the Island imposed a decision upon the airlines, acting 'out of step' with neighbouring jurisdictions, this would be detrimental. The effect on demand of passengers having to isolate until they received a negative day 5 PCR test would be significant, as there would be insufficient numbers who would be willing, or able, to fulfil that requirement.

The Independent Advisor - Epidemiology and Public Health, suggested that retaining the current policy around COVID-19 would be consistent, proportionate and sensible. Jersey was currently a well-managed jurisdiction in that regard and the impact of the pandemic on connectivity would be widespread. In the absence of strong evidence that the situation was different in competing locations, such as Monaco, Cayman, Luxembourg or Guernsey, he was of the view that the airlines would reduce the frequency of their flights to Jersey during the winter, but still continue to fly, thereby maintaining the trust of the finance industry.

The Associate Medical Director for Primary Prevention and Intervention, indicated that he had seen definitive medical facts around the increasing risk posed by the COVID-19 pandemic, but had been provided with no clear details – in monetary terms – of the impact that retaining the current categorisation would have on the finance sector.

The Chief Executive Officer, Jersey Finance, stated that it was impossible to provide that information. At the start of 2020, the financial services industry had been extremely concerned about COVID-19 and whilst it had impacted on those supporting local industry, the international firms had been resilient. They had adapted well, implemented good policies and had received support from Jersey Finance and the telecommunication companies. There were some questions around the ongoing resilience and it was possible that some business might be lost, or gained. However, the impact of an absence of connectivity for a period of months could not be accurately assessed, because it was not possible to definitively state what business had been 'lost' during that time. The Chief Economic Advisor informed the Cell that it was not through lack of expertise that the impact was not quantifiable. However, he indicated that it would be 'absolutely awful' and worse than the recession of 2008. The loss of Island connectivity would compound the effects of the downturn brought about by COVID-19. It was likely that the economy would not spring back quickly, profits would not be made, employees would not be paid and businesses would close. The longer the economy struggled, the more likely it would be to stall and then it would be challenging to reinvigorate it at a later juncture.

The Chair suggested, in weighing up the risks and benefits of changing the criteria, it was important to be mindful that if, as a consequence, there was an outbreak of the virus in a care home and people lost loved ones, questions would be posed around the decision making. He questioned when the economic benefit was sufficiently great that it was acceptable for people to die. The Independent Advisor - Epidemiology and Public

21st Meeting
21.09.20

Health, emphasised the growing risk of infection from the UK and indicated that the risk would augment if the criteria was relaxed. By avoiding outbreaks of COVID-19 in the Island through the existing mitigations, it would help to maintain the economy. He suggested that the commercial airlines could be asked if, whilst reducing the flights into the Island, they could be rescheduled for times that were optimal for businesses.

The Medical Officer of Health stated that the COVID-19 virus was present across the UK and people were able to circulate without impediment. As part of the UK, the Isle of Wight was very concerned, particularly because some symptomatic people were being sent there as part of the test and trace scheme. That island was unable to take any action, but Jersey could do so. If the threshold for quarantine was reduced, she predicted that the cases of the virus locally would increase in the same way as had occurred in the Isle of Wight. Jersey had finite health care resources because it was not in a position where it could draft in additional health staff, or transport patients to another hospital. She suggested that if the point was reached where it was necessary to employ the intensive care beds in the Nightingale Wing, this would be perceived as a sign of failure. She appreciated the wider perspective that had been provided by the Chief Executive Officer, Jersey Finance and the Group Chief Executive Officer, Ports of Jersey, but had heard nothing that detracted from the view formed at the previous meeting in respect of the public health implications of relaxing the thresholds. She could not advise that it would be sensible to take that action in the prevailing circumstances, especially in the light of the rapidly increasing cases in neighbouring jurisdictions. Others agreed, particularly because the community was highly receptive to the virus, on the basis that people did not appear to be adhering to the requirement to keep a physical distance of at least one metre from each other.

The Director of Strategy and Innovation informed the Cell that Ministers would be likely to take the view that arrangements were currently in place to address the threat of the virus, which had not been present previously and would question what weaknesses existed in the 'contain' system that precluded the change in categorisation, based on the interplay between the seeding of the infection and the ability to interrupt the same.

The Consultant in Communicable Disease Control indicated that the Island had a choice between pre-emptive mitigation and having actions forced upon it by the virus. In the latter case, people would lose confidence in the Government and there would be increased cases of COVID-19 in the Island as the resultant outcome. Moreover, as Winter approached, the risk of transmission would increase, as would the severity of the infection. It was not possible to state exactly how effective the track and trace system was locally at managing the virus.

The Chair concluded that the Island was receptive to the virus, because of the lack of distancing and only a small increase in the number of positive cases would have a significant impact on the ability of those in the health care sector to cope. However, if it was feasible to apply a greater level of granularity to the assessment of risk in regions in England, the Cell had no issue with that, provided that it was clearly understandable to the public.

The Cell thanked the Chief Executive Officer, Jersey Finance and the Group Chief Executive Officer, Ports of Jersey, for attending.

140
21st Meeting
21.09.20