## SCIENTIFIC AND TECHNICAL ADVISORY CELL

#### (34th Meeting)

### 14th December 2020

## (Meeting conducted via Microsoft Teams)

# PART A (Non-Exempt)

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

Minutes. A1. The Scientific and Technical Advisory Cell ('the Cell') received and noted the Minutes from its meeting of 7th December 2020, which had previously been circulated. Members of the Cell were invited to provide any comments thereon to the Secretariat Officer, States Greffe, by the end of 14th December 2020, in the absence of which they would be taken to have been confirmed.

Monitoring A2. The Scientific and Technical Advisory Cell ('the Cell'), with reference to metrics.
Minute No. A3 of its meeting of 7th December 2020, received and noted a PowerPoint presentation, dated 14th December 2020, entitled 'STAC monitoring update' which had been prepared by the Principal Officer, Public Health Intelligence, Strategic Policy, Planning and Performance Department and the Senior Policy Officer, Public Health and Wellbeing and heard from them in relation thereto

The Cell was informed that, as at Sunday 13th December 2020, there had been 738 active cases of COVID-19 in the Island, which brought the total number of positive cases, since the start of the pandemic, to 1,779. The aforementioned 738 cases had been in direct contact with 4,818 individuals. With regard to the reported test reason for the active cases, the Cell noted that 216 had not been recorded and was advised that some issues had been encountered in respect of the reasons allocated for the testing. A meeting was due to take place on the afternoon of 14th December 2020, with a view to resolving the issue and members of the Cell were informed that some test positivity rates might not currently reflect reality. It was noted that the largest number of active cases, approximately 62 per cent were displaying symptoms, 30 per cent were asymptomatic and there was a relatively large percentage (8.81 per cent) of unknowns in the data set at the current time.

Sadly, there had been one death of a person testing positive with COVID-19 in Jersey since the previous meeting, which brought the total number of deaths related to the virus to 33, although this death had not yet formally been registered. It was noted that the overall number of registered deaths for the year to 6th December had increased to 620, which remained lower than for the same period in 2019 (693) and more than one hundred lower than in 2018, when there had been 732 deaths. The Cell noted the PH Intelligence: COVID-19 Monitoring Metrics, which had been prepared by the Health Informatics Team of the Strategic Policy, Planning and Performance Department on 13th December 2020 and was informed that over one thousand people, who had tested positive for the virus, had now recovered. The Cell noted the positive cases that had been identified over the previous 2 weeks, which showed that there were almost equal numbers of people who had sought healthcare as a consequence of experiencing symptoms of COVID-19 (232) and direct contacts (231), but, as aforementioned, there were some concerns regarding the way in which the information was being recorded.

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This was also the case for the numbers assigned to 'workforce screening', where the reported numbers were believed to be greater than was, in fact, the case, but the Principal Officer informed the Cell that there was more certainty around the figures for inbound travel and admissions screening.

It was noted that, over the previous weeks, there had been an uplift in the number of people testing positive for COVID-19 who had an underlying medical condition, of which there had been a total of 381 since the start of the pandemic. In respect of the testing reasons from 1st June 2020, there had been more testing of direct contacts and essential workers since the start of November. During the previous 2 weeks, in excess of 2,000 tests had been analysed each day. With regard to the early warning metrics and calls to the COVID-19 Helpline, the number of people reporting symptoms of the virus had increased over previous weeks, with a relatively even spread of symptoms being described, although it was noted that more people had indicated that they were experiencing muscle ache than had previously been the case. Over the last 2 weeks there had been an increase in the number of patients in the Hospital with COVID-19, of which there were currently 25. There had also been a growth in the number of people arriving into the Island and during the week commencing 7th December 2020, there had been approximately 1,400 inbound travellers and 24 positive cases had been identified, which equated to a test positivity rate of 1.74 per cent.

With regards to testing, this had increased over previous weeks, with over 2,000 tests per day being undertaken on-Island. For the week ending 6th December 2020, the combined testing rate per 100,000 population of both arrivals and non-travellers had increased to 9,800, which was much greater than the rate in the United Kingdom ('UK') (3,422) and other jurisdictions with which the Island had close links, such as France, Portugal and Poland. During the week ending 6th December, there had been 1,510 tests on inbound travellers – which had increased by 500 on the previous week - 650 on symptomatic individuals seeking healthcare and 8,380 as part of the on-Island surveillance screening.

The weekly test positivity rate, as at 6th December, had risen to 2.9 per cent in Jersey and had decreased to 4.4 per cent in the UK. In Poland, however, the rate remained at approximately 50 per cent and exceeded the axes of the graph. The Cell was shown a graph, which set out the positivity rates for COVID-19 amongst the different testing groups - those seeking healthcare, direct contacts, inbound travellers, workforce screening and admissions and cohort screening - over the period from 6th October to 7th December 2020. As anticipated, symptomatic individuals seeking healthcare had the highest positivity rate (16.74 per cent), with a rate of 4.36 per cent amongst direct contacts of active cases. There had also been an increase in positivity in those people being screened pre-admission to Hospital. However, as previously referenced, there were some issues around the way in which the data was being recorded, particularly in relation to direct contacts and workforce screening, which remained to be resolved. The weekly epidemiological update mapped the volume of positive cases and calls to the COVID-19 helpline, with symptoms, on a 7-day moving average and demonstrated that there had been a slight decrease over the previous week, but insufficient time had elapsed to reflect the impact that various measures, such as the instruction to work from home, the increase in physical distancing to 2 metres and the hospitality circuit breaker would have on the spread of the virus. Evidence from other countries demonstrated that a reduction in active cases of COVID-19 came to light between 2 and 6 weeks after the introduction of mitigations.

The Cell noted a graph of the 14-day cumulative case numbers per 100,000 population, which mapped those against certain key events since the start of the pandemic. It also included the 7-day rate, as had been requested by members of the Cell at the previous meeting. As at 6th December, the 14-day rate had been 655.8 and the 7-day rate 369.2, although the impacts of the recent restrictions had not yet had time to become evident.

With regards to the graph, which tracked the instantaneous reproductive number ( $R_t$ ) for COVID-19 in the Island, it was noted that the daily testing rate per 1,000 population had grown, whilst there had been a slight decrease in the daily incidence rate. Although the  $R_t$  had diminished, it still remained above 1.0, which was indicative of exponential growth of the virus in the Island and the Cell was informed that the rate was being updated every day. The Independent Advisor - Epidemiology and Public Health, suggested that it could be misleading to place too much emphasis on the  $R_t$  because there were ongoing changes to the type of people who were being tested. It was noted, for example, that there had been a move away from more generic workforce screening to a focus on testing in the schools and those working in health and care settings. He opined that the rate of increase of the spread of the virus was slowing, or plateauing, because more health and care workers were being tested and they had a higher exposure risk than other individuals and, as a consequence, were more likely to be infected with the virus. He also emphasised the importance of ensuring that the data associated with the categorisation of those tested was accurate. The Consultant in Communicable Disease Control, indicated that the targeting of the testing was determined by the optimal way to identify the active cases, to isolate them and to locate their direct contacts, rather than to collect data. On a related note, the Cell was told that there had been positive cases of COVID-19 in all sections of Jersey society.

The Cell was shown maps, prepared by the European Centre for Disease Prevention and Control ('ECDC'), which set out the geographic distribution of cumulative numbers of reported COVID-19 cases per 100,000 population on a European basis, for weeks 48 to 49 of 2020 (weeks commencing 23rd and 30th November) when compared with the previous week. It was noted that the UK had 14-day rates in excess of 120 cases per 100,000 population across most of the North of England, the Midlands and the South East, including London. The high instances of the virus in Sweden were also highlighted. The Cell viewed charts, which showed the proportion of areas within the British Isles, France, Germany and Italy by RAG (Red / Amber / Green) categorisation for the period from 29th September to 12th December 2020 and noted that 89 per cent of areas in England were Red, with some areas now Amber and Green. Scotland had remained relatively stable, with 19 per cent of areas Green. Wales had increased to 91 per cent Red and the picture in Eire was mixed, because there had been an increase in Green areas (to 38 per cent), but also an increase in Red areas (to 23 per cent). There had been a reduction in Red areas in France, whilst the situation in Germany had remained as per the previous week, with 88 per cent Red and the whole of Italy remained Red. For those countries and territories that were not included within the regional classification, there had been very little change since the previous week. The Principal Officer informed the Cell that there would be slight changes to the way in which these areas were classified because the ECDC - which provided the information for most countries around the world - would henceforth be reporting weekly, rather than daily and officers wished to ensure that the most current information was being used as the basis for the classification.

The Cell noted information from the local EMIS central records system in relation to flu-like illness for the period from 6th September to 13th December 2020 and was informed that during the last complete week, 17 cases had been encountered, which was a slight increase on the previous week, although the numbers remained significantly lower than during the Winter of 2019 / 2020. Across the world, influenza activity remained considerably lower than would be expected at this juncture.

With regard to the economic indicators, the Cell recalled that Statistics Jersey would be providing the data on a monthly cycle. It was noted that there had been a further reduction in the number of people registered as Actively Seeking Work, albeit the figures were higher than at the same time in the previous year and that was also the case in relation to the number of active Income Support claims. The equipment which monitored the number of vehicles passing through the Tunnel had been undergoing repairs during 3 weeks of the month, but for week the week ending 6th December (week 49) there had been a 9 per cent drop in traffic volume when compared with 2019. There had been a decline in bus travel during week 49 and it remained significantly lower than for 2019.

The Senior Policy Officer provided the Cell with an overview of cases – since the start of December - within priority groups of Islanders, namely Hospital patients, those working within the Health and Community Services Department, health and care workers, care home residents and schools. It was noted that wider community clusters were no longer under significant review, on the basis that there had been 422 cases during the previous week and there was insufficient capacity within the analytical team to focus other than on those in the priority groups. The Cell was informed that, on 13th December, it had not been possible to undertake an in-depth analysis of 57 cases and that this was the situation for between 40 and 50 per cent of cases. However, the Cell was provided with reassurance that officers working within the Contact Tracing Team were liaising with all people who were active cases on an operational basis. It was also intended to seek to automate the analysis. The Cell agreed that more resources were required for the analysis of the data and it was noted that the Interim Director of Public Health would liaise with the Director General, Justice and Home Affairs Department in this regard.

The Cell noted the position accordingly and thanked officers for the presentation.

Return to school – January 2021.

A3. The Scientific and Technical Advisory Cell ('the Cell'), with reference to Minute No. A4 of its meeting of 7th December 2020, recalled that the Chair of the Cell had been asked to provide guidance to the Minister for Education on whether there were any medical reasons, at that juncture, why the schools should not remain open. The request had been made on the basis of the rising number of cases of COVID-19 in the Island. The advice provided on 3rd December, which had been endorsed by the other members of the Cell, had been that there was limited effectiveness on the spread of the virus by closing the schools and, whilst there had been some transmission to children, this had largely been from outside the school environment. The detrimental impact of missed schooling on children and their families had also been emphasised.

The Cell welcomed the Director General, the Group Director of Education and the Head of Office, Education, Children, Young People, Education and Skills Department, who sought advice in connexion with the proposed return to school on 4th January 2021 and questioned whether this was the appropriate time, or if it should be delayed. The Cell was informed that the current week was the last week of the Autumn term and the Department wished to liaise with parents before the schools closed for Christmas. Some concern was expressed that a significant number of pupils were not being sent to school, despite not being unwell, or in self-isolation. These numbers had recently been of the order of 2,000 out of 16,000 students, but it was anticipated that this figure would have increased during the week commencing 14th December. Accordingly, it was important to communicate to parents and students that it would be safe for them to return to school in January. The Cell's views were also sought on whether transmission of the virus was occurring within the schools, whether students and teachers should be tested prior to return in January and if the current policy adhered to by the Department - namely to keep the schools physically open - should be maintained.

The Chair of the Cell, expressed some concern that the message being provided to pupils was that it was OK for them not to be in school. He reiterated the previously expressed view that there was little evidence to show that students were at risk by being physically in schools, there was minimal evidence of transmission of the virus within the schools, the inequality of online access had not been addressed and it was important to provide the young people with some certainty and stability before the holidays. There had been no significant change since the advice had been provided to the Minister earlier in the month and uncertainty had an adverse impact on students' wellbeing, as demonstrated by an increase in referrals to the Children and Adolescent Mental Health Service (CAMHS).

These views were echoed by the Independent Advisor - Epidemiology and Public Health, who suggested that when a positive case of COVID-19 was encountered in the schools, whole year groups, or large 'bubbles' of students were being sent home, which caused concern and panic. As a consequence, it was important to review who was being sent home and the rationale therefor. The Interim Director of Public Health, informed the Cell that some schools had implemented seating plans, which facilitated the identification of any direct contacts when a student received a positive COVID-19 test result. She emphasised the importance of considering safeguarding, particularly for any vulnerable children, who were not currently in school, which meant that their level of harm could not be assessed. The Director General, Justice and Home Affairs Department, indicated that he had attended a meeting with the Head Teachers and whilst some schools had introduced good practice for identifying direct contacts, this was not the case across the board, so he had emphasised the importance of implementing good structures to obviate large numbers of students being sent home unnecessarily.

The Director General, Children, Young People, Education and Skills Department, informed the Cell that the issue of direct contacts was being kept under daily review, with the aim of becoming more efficient in their management, although he stated that it was sometimes necessary to take the difficult decision to close more than one 'bubble' or year group.

With regards to the return in January, the Cell indicated that its advice was that students should return to school in a physical environment at that time, mindful of the importance of young people receiving an education. The Cell was due to meet on 29th December and would reconsider the situation at that juncture, but something extreme would have had to have happened in the intervening period for that advice to change. If anything, it was more likely that the schools would not be able to open due to a lack of staff, rather than any medical reasons. Noting that older students had a tendency to mix outside schools, the Cell reflected on whether their priority for receipt of the COVID-19 vaccination should be reassessed. The Consultant in Communicable Disease Control, stated that the Joint Committee on Vaccination and Immunisation had, to date, only provided advice on the vaccination down to those aged over 50 years and the current vaccine had only been approved for administration to those aged over 16 years.

With regard to the testing of pupils and school staff before the start of term, it was noted that this cohort would comprise 15,000 people. The Consultant in Communicable Disease Control suggested that it might be possible to test the 1,700 staff members and 3,000 students in years 11 to 13 over a 2 week period, but did not believe that this would make a significant difference. There were reasonably low instances of COVID-19 within the schools and the virus was evenly distributed across the *loci*, which was indicative that it was not being transmitted within that environment, but that students were becoming infected outside the school setting. He opined that there were more important priority groups at which to target the testing, because their infection rate and level of risk was greater. It was suggested that the Chief Executive Officer, Influence at Work, could be of assistance to the Children, Young People, Education and Skills Department in drafting appropriate messaging to provide reassurance.

Officers from the Children, Young People, Education and Skills Department thanked the Cell for the advice and asked the Chair if he could put it in written form for the Minister. They subsequently withdrew from the meeting.

Hospitality A4. The Scientific and Technical Advisory Cell ('the Cell'), with reference to sector – Minute No. A7 of its meeting of 7th December 2020, recalled that the Competent

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potential limited re-opening of sections. Authority Ministers had taken the decision, on 2nd December, to introduce a hospitality circuit break, with the situation to be reviewed a fortnight later. In relation thereto, the Cell noted an undated letter, which had been sent by Senator L.J. Farnham, Minister for Economic Development, Tourism, Sport and Culture and Senator I.J. Gorst, Minister for External Relations, to Deputy R.J. Renouf of St. Ouen, Minister for Health and Social Services, copied to the Chief Minister, the Chair of the Cell and the Deputy Medical Officer of Health. This letter asked the Cell to consider the potential limited reopening of parts of the hospitality sector. It mooted either that pubs should remain closed, but all other licensed premises should be permitted to serve non-alcoholic drinks and food, if they wished; or that all licensed premises should be permitted to open, with an ongoing prohibition on the sale of alcohol; or that all licensed premises should be permitted to a substantial meal.

The Consultant in Communicable Disease Control, indicated that the data, upon which the Competent Authorities had based their decision to close the hospitality sector, had been accurate and officers undertaking the analysis of the cases had been able to review, in detail, the various clusters at that time. There was evidence to demonstrate that hospitality settings were significant in the transmission of the virus and, in his view, it was too early to reduce any mitigations. He suggested that consideration should be given to whether it was appropriate to maintain other enclosed public spaces open, such as coffee shops, where there was the potential for significant overcrowding and questioned whether adherence to public health guidance was being monitored in those venues.

The Independent Advisor - Epidemiology and Public Health, stated that this matter had not been discussed by the whole membership of Cell. In his view, he would have preferred to have made it less attractive for people to attend hospitality venues, by allowing alcohol to be consumed, but only in conjunction with a substantial meal, whilst ensuring tables were appropriately spaced and the number of attendees limited. He did not believe this would have posed more of a risk than Islanders meeting within one another's homes. He did not advocate re-opening the sector at the current time, as it would convey the wrong message, but suggested that when the time arose it would need to be managed carefully and gradually, having given licensees advance notification, in order to avoid a spike in cases as people returned to those venues.

Having considered the foregoing, the Cell decided that it was not minded to recommend any changes to the situation in the hospitality sector at the current time and indicated that it did not think this should happen before the New Year, mindful that the festive season was likely to result in upward pressures on the number of active cases.

Jersey Reds – resumption of National league.

A5. The Scientific and Technical Advisory Cell ('the Cell') welcomed the Director of Rugby and the COVID-19 Manager, Jersey Reds to the meeting and received and noted an undated paper, entitled, 'Request for exemptions for the Jersey Reds professional rugby team', together with a covering note in connexion with a request for advice on proposed exemptions sought by the Jersey Reds to facilitate them being able to continue to participate in the Championship.

The Cell noted that the sport's governing body, the Rugby Football Union ('RFU') had prepared extensive documentation which detailed protocols in order to facilitate the resumption of the competitive game, but that there were certain aspects of local policies that would preclude Jersey Reds from competing, unless exemptions could be obtained. It was noted that *inter alia* Jersey Reds wished to be exempted from the physical distancing requirements, to enable them to undertake face to face contact in the scrum, sought agreement to be able to use the licensed club house for meetings and to feed players and wished for the showers and changing rooms to be used. The Chair of the Cell, declared an interest to the extent that his son participated in the 'Minis' section of the Jersey Rugby Club. He informed the Director of Rugby and the COVID-19 Manager that the Cell could not take decisions, but acted in an advisory capacity for Ministers, who would be the ultimate arbiters. He noted that the protocols proposed by the RFU were reassuring, but indicated that the Cell could only discuss the overall principle of permitting the exemptions, recognising the Jersey Reds' unique position in professional sport in the Island. However, he expressed concerns around the potential of a precedent being set.

The Head of Public Health Policy, informed the Cell that the mitigations prepared by the RFU would assist in reducing the risk of spread of COVID-19 amongst players and to the wider community. Included therein was the requirement for players to provide a negative PCR result before participating in a match, a restriction on direct contacts and the introduction of rugby safe zones, with limited access thereto. He indicated that the Consultant in Communicable Disease Control, had provided initial views on the proposed exemptions and had sought clarification in respect of the plans for managing the isolation of the squad – which included support staff – from the public when training in Jersey. It was mooted that following the return to the Island from an away game, the squad should be tested on arrival and then at day 5. It was proposed that the testing could be undertaken on a peer-to-peer basis by the Club's medical staff, although it was noted that the requisite additional 100 tests per week could place some pressure on the system. Consideration would also need to be given to the isolation requirements of the full squad in light of the exposure to risk in receiving visiting players, or travelling off-Island.

The Cell's views were sought on the extent to which the proposed mitigations by the RFU and Jersey Reds would reduce the risks to the team and staff and wider spread of the virus in the community; what additional controls, if any, might support further reduction in risk; and its advice to Ministers on the overall balance of harm.

The Director of Rugby informed the Cell that the delayed 2020 / 2021 Championship Season was due to commence on 23rd January 2021, with pre-season fixtures on the 9th and 16th January. He indicated that he was not aware of what the consequences would be if the Jersey Reds could not compete in the Season, but the RFU was planning for all 12 teams to participate in the competition. He informed the Cell that the Jersey Reds was a professional sports team, which wished to work within the guidelines as far as possible and in conjunction with the Cell. If the team was to take part in the Season from 23rd January, it would need to commence contact training by 9th January in order for the Club to fulfil its duty of care. He provided assurances that the players understood hard work and sacrifice and would undertake to complete the Stage 2 RFU COVID-19 education module, to submit to daily screening, including temperature checks and to practise good hand hygiene. He indicated that there were in excess of 700 young people participating in the 'Minis' and 'Juniors' sections of the Club and that, for them, to have professional players in the Island was something to aspire to and encouraged them to stay active and support sport. He provided reassurances to the Cell that, although the clubhouse had a licence, no alcohol would be served.

The Independent Advisor - Epidemiology and Public Health, suggested that in light of the proposed measures that would be introduced, there was little risk to players and support staff and the testing regime was such that any spread of the virus would be mitigated. Accordingly, he supported the proposal in light of the importance to the Island and the economy of the Jersey Reds being able to play in the Championship. However, he also suggested that the key issue was precedent.

The Strategic Policy Officer, Strategic Policy, Planning and Performance Department, informed the Cell that with regard to precedent, there were parallels to be drawn with the Jersey Bulls (football club) and that whilst they were not professional, they also

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participated in games off-Island. He had been in discussion with that club and anticipated that it would also submit a request for exemptions. The COVID-19 Manager suggested that the difference between the Jersey Reds and other teams, such as the Jersey Bulls and the Jersey Jets (netball club) was that all the interactions that the Jersey Reds squad would have off-Island would be with players who were participating in the same testing regime, so everyone taking part in the match would have received a negative PCR result, which reduced the risk.

The Director of Rugby indicated that the squad would self-isolate until they received a negative PCR result before participating in training. The opposition teams intended to charter flights to and from Jersey and would arrive, travel to the ground, play the match and then depart, with minimal contact. The Jersey Reds would not play against any other local teams and when training would only mix in small groups, with every session coded, in order that any direct contacts could be easily identified. They would attend the training, go to the shops and then go home, with no socialising. The Consultant in Communicable Disease Control suggested that it would be preferable for the squad to form its own 'bubble' because, whilst they might be disciplined in respect of their contacts, those within their family homes would be leading a more 'normal' life and would be going out and meeting friends. As a consequence, the players could become infected through that route. It could take some time for the positivity to be identified, during which period they could pose a risk to others.

Having discussed the foregoing, the Cell indicated that it was generally supportive of the Jersey Reds receiving exemptions, subject to certain requirements being met, in order to make it as safe as possible for both the squad and the community. It decided that the Head of Public Health Policy should summarise the Cell's discussion into a briefing paper for Ministers, which clarified that the issue of precedent had been considered and why Jersey Reds was a unique case and highlighted what the benefits would be of permitting it the exemptions. The Head of Public Health Policy stated that he would liaise with the Strategic Policy Officer and circulate the paper by electronic mail to members of the Cell in advance of it being presented to Ministers. It was agreed that the RFU guidance should be appended to that document and an undertaken given that if that guidance was subsequently relaxed, the Cell would be informed accordingly.

The Cell thanked the Director of Rugby and the COVID-19 Manager for attending.

Matters forA6.In association with item No. A2 of the current meeting, the Scientific and<br/>Technical Advisory Cell received and noted the following –

- a paper for information, dated 11th December 2020, entitled 'COVID-19 weekly operational snapshot;
- a weekly epidemiological report, dated 10th December 2020, which had been prepared by the Strategic Policy, Planning and Performance Department;
- death statistics for the week to 10th December 2020, from the Office of the Superintendent Registrar; and
- economic indicators for November 2020, which had been prepared by Statistics Jersey.