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SCIENTIFIC AND TECHNICAL ADVISORY CELL

(4th Meeting)

15th June 2020(Meeting held via Microsoft Teams)**PART A (Public)**

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

Minutes. A1. The Chair requested the Secretariat Officer, States Greffe, to send all future draft minutes from meetings of the Scientific and Technical Advisory Cell (the Cell) to all attendees for their input.

COVID-19 - Contact tracing. A2. The Scientific and Technical Advisory Cell, welcomed Ms. A. de Bourcier, Head of Environmental and Consumer Protection, in connexion with the development and operation of an Integrated Public Health Record (IPHR) system, which would be used for the purposes of contact tracing during the COVID-19 pandemic.

Ms. de Bourcier informed the Cell that as the number of positive cases of COVID-19 in the Island had started to increase, the IPHR system had been deployed. It had now been replicated by Guernsey and other jurisdictions were employing the same platform. The system had been populated with information held on Islanders in the People Directory and this had been permissible under the Data Protection (Jersey) Law 2018, which made specific provision relating to the collection, use and disclosure of personal data for the purposes of protecting public health during a public health emergency.

The Cell was provided with a demonstration of the IPHR system in a training environment, which did not contain any live data and was informed that whenever an individual received a positive PCR test, this created a case on the system, which was then populated with information. Wherever possible, the relevant information was captured by the use of data sets, rather than free text. The front page provided an overview and linked to the individual's personal information, which had been transferred from the People Directory *inter alia*, their date of birth, address, contact details and social security number. There was space to add case notes, which enabled any contact with the individual to be date and time stamped. The 'Care and outcome' tab listed the various symptoms that were most commonly associated with the COVID-19 virus and enabled officers to enter the date of the onset of each or any of those symptoms and the end date of the same.

The Cell was informed that when PCR tests were undertaken in the laboratory, the date of the test and the results thereof were automatically entered onto the IPHR system. There was the facility to send the patient the results by text message, or electronic mail message, but Ms. de Bourcier indicated that her team would always telephone anyone receiving a positive test and would discuss with them the contact they had had with other people and their movements. These details were entered onto the 'Interactions' tab and were categorised according to the location of that contact, for example household, healthcare, school or restaurant and whether the contact had been direct – at 2 metres distance for in excess of 15 minutes – or indirect. The system would create a visual map of the contacts and automatically join up any links between them. Direct contacts were linked with a solid line and indirect with a dotted line.

All people who had been in direct contact with a person who had tested positive for COVID-19 ('the primary case') would themselves receive a PCR test immediately and at days 6 and 8 thereafter. The results of their tests would be added to the IPHR system with a link to the case number of the primary case and indicating whether they were deceased, recovered, had tested positive or negative, or were untested. Ms. de Bourcier informed the Cell that these interactions would be particularly significant as young people started to return to school.

As aforementioned, all the data, which was entered onto the IPHR system, could be used to show any connexions between people, but could also identify whether any particular venue, or part of the Island was a 'hotspot' for the virus. As a consequence, it was crucial for the contact tracing team to receive test results at the earliest possible juncture.

In order to assist with the high level data analysis of the transmission of COVID-19 on Island, a data analyst had joined the contact tracing team and had the necessary skills and knowledge to assist, whilst adhering to the requirements of data protection legislation. Ms. de Bourcier indicated that access to the data held on the IPHR system was restricted to certain officers within the Environmental Health Department and the Strategic Policy, Planning and Performance Department. Officers within the Health and Community Services Department did not currently have permission to access the IPHR system and it was not clear if this was envisaged for the future, but could be discussed with the data governance board, which the Modernisation and Digital Department had agreed to establish as a conduit through which critical decisions relating to the IPHR system could be agreed with stakeholders.

In the event of a sharp increase in the number of COVID-19 cases on-Island, the notification route was from the analytical cell, to Dr. I. Muscat, Consultant in Communicable Disease Control and thence to the Scientific and Technical Advisory Cell, which could provide guidance to Ministers. Ms. De Bourcier indicated that she was in daily contact with Dr. Muscat, so any concerns could be immediately addressed.

The Cell queried how the tracing team was coping in respect of contacting individuals and uploading their information to the IPHR system. Ms. de Bourcier stated that her team had recently been upscaled and with access to the data, which had been transferred from the People Directory, it was straightforward to make contact with people. In her view, enhancements to the information technology would make the most significant difference and a small team was currently working to ascertain if the system could be adapted to automatically generate electronic mail correspondence, which could be sent to contacts of primary cases, directing them to advice and support and affording these people the facility to respond directly to the contact tracing team.

The Cell thanked Ms. de Bourcier for the briefing and the demonstration of the IPHR system and Dr. Muscat congratulated her and the contact tracing team for the positive interactions that they had with the people they contacted, especially because the information that they were able to garner was dependent upon them establishing a *rapport* with those patients, which could not be replicated by digital contact tracing.

Monitoring Metrics and results from the second round of seroprevalence testing.

A3. The Scientific and Technical Advisory Cell was informed that there were currently 7 positive cases for COVID-19 in the Island, of which 4 were old cases. Of the latter, only one patient was symptomatic and the remaining 3 would shortly cease to be recorded as active cases.

There had been 3 new positive cases identified over the weekend of 13th / 14th June, following testing on the 11th and 12th June 2020. All cases were asymptomatic and had been identified as a result of screening. They had been informed of their results on

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13th June and all of their known contacts had been identified.

The Cell reaffirmed its view that rigorous testing underpinned the way forward in seeking to avoid a second wave of positive cases of COVID-19.

In respect of the results from the second round of seroprevalence testing, it was noted that the findings aligned with the results from the first round of tests. Of interest was that 62 per cent of those individuals, who had contracted COVID-19, were asymptomatic, which was higher than had initially been anticipated, but was on a par with the results from seroprevalence testing in the United Kingdom.

Border policy. A4. The Scientific and Technical Advisory Cell, with reference to Minute No. A1 of its meeting of 10th June 2020, received and considered a paper, dated 15th June 2020, in connexion with the development of a COVID-19 border policy. It was recalled that it was important to seek to balance the risks to public health by allowing some travel, which would inevitably lead to the importation of some individuals with the virus, with the wellbeing that the ability to travel would bring to the Island's people and economy.

The Cell recalled that during its meeting of 10th June 2020, it had discussed a range of issues relating to the medium term contain strategy, to include the proposal that the border policy would establish a quarantine, high level testing and tracing regime in order to control the seeding and transmission of COVID-19; would contain the indicators which might result in a change to borders control; would consider the infection status in countries from which passengers might travel and how any changes to that status might impact on the border controls; would consider the relationship between the rate of on-Island transmission and how that might be impacted by allowing travel into the Island and the measures that could be introduced to mitigate that risk; and, as mandated by Ministers, would ensure that the border testing would not result in resources being diverted from on-Island screening. It was anticipated that the border policy would be explicit as to how step up, or step down, controls might be implemented, depending on the rates of external seeding.

The Cell was reminded that the States Assembly would be debating the Proposition of Deputy J.M. Maçon of St. Saviour, entitled 'Lifting of travel restrictions: States Assembly approval' (P.68/2020 referred). This debate was expected to be held on 16th June 2020. This Proposition requested Members to agree that the current travel restrictions, allowing only those who were undertaking necessary travel to and from Jersey, should not be lifted without the prior approval of the States Assembly; that no-one should be allowed to travel to Jersey without having first been tested for COVID-19 and providing proof thereof; that the Council of Ministers should develop a proposed policy for travel to and from Jersey to permit more safe travel to and from Jersey; and that the Council of Ministers should distribute the proposed policy to States Members at least 5 days before the debate on any Proposition seeking the Assembly's approval of lifting the current travel restrictions. It was recalled that Senator L.J. Farnham, the Minister for Economic Development, Tourism, Sport and Culture, had lodged an Amendment to P.68/2020, which acknowledged the significant work that was already taking place, in line with the Safe Exit Framework, to permit more safe travel to and from Jersey.

It was anticipated that a formal request for advice might be received by the Cell during the week commencing 22nd June 2020, following the debate on P.68.

The Cell heard from Mr. M. Thomas, Chief Executive Officer, Ports of Jersey, in connexion with the commercial considerations related to securing transport connectivity in the short and longer term. Mr. Thomas informed the Cell that he had come under increasing pressure over the last few weeks from the airlines and the ferry operator for the restrictions at the borders to be relaxed. The impact of the COVID-19

pandemic on the transport industry had been unprecedented, with a 99 per cent decline in passenger numbers across Europe since the end of March 2020. There had been a significant number of redundancies across the commercial airlines and it was envisaged that this sector would not return to normal for a period of between 3 and 5 years.

Condor Ferries had a Channel Islands monopoly and it was anticipated that its long-term prospects were relatively positive, particularly as its freight vessels continued to operate at the current time. When its passenger ferry service resumed, it was intended to run 2 trips north (to the United Kingdom) and 4 trips south (to France) each week, with a maximum of 300 passengers on each boat.

In the United Kingdom, EasyJet, all of whose staff had been furloughed, had started to fly within the Common Travel Area and to France, but wished to increase its operations over the coming weeks, with a view to resuming half its normal routes by July and three quarters by August. It had expressed the intention to recommence flights from Jersey on 3rd July 2020, with British Airways anticipating a start date later in the month. However, if arriving passengers were required to self-isolate for 14 days, this would preclude any commercial airline traffic to Jersey. The testing regime, which was currently being trialled, would, if introduced more widely, need to be counterbalanced with what was commercially viable for the airlines. There was a risk that EasyJet and British Airways might decide to redeploy their capacity elsewhere and not return to fly from Jersey for a prolonged period of time, if at all, leaving a *lacuna* on the routes. Mr. Thomas informed the Cell that Jersey had very little leverage over these airlines and the Cell noted that if they withdrew from Jersey, this would send the wrong message to businesses and visitors.

If the requisite regime were in place to make it economically viable for the airlines to service Jersey, it was envisaged that British Airways would fly into London Gatwick and EasyJet into East Midlands and Manchester several times a week, bringing in initially 150 passengers per day to the Island, with a view to that number increasing to a maximum of 300, noting that, under normal circumstances, between 4,500 and 5,000 people would fly daily into the airport. Mindful of the limited number of seats that would be available on flights, consideration was given to whether Islanders wishing to travel off-Island should be given priority over visitors, in order to benefit their mental wellbeing. However, Mr. Thomas indicated that the airlines would not be prepared to operate on that basis.

The Cell was informed that officers were confident that the tracing methodology, on which it had received a presentation at item B2 of the current meeting, could be used to monitor individuals arriving from off-Island. Anyone coming to Jersey was currently required to complete an online form in advance of travel, even if they did not intend to participate in the pilot testing scheme and this form created a record on the contact tracing platform. It was hoped that within 4 weeks it would be possible for passenger manifests to automatically populate the system.

Mr. J. Blazeby, Director General, Justice and Home Affairs Department, indicated that there were challenges around the tight timescales within which the commercial airlines wished to recommence operations and the associated requirement to upscale the testing regime, mindful that there were only 15 working days until 3rd July. Between 30 and 70 passengers were currently being tested on Mondays, Tuesdays, Wednesdays and Fridays on arrival on the Blue Islands flights, but the results of some tests were taking up to 5 days. As a consequence, consideration was being given to additional flights to take the tests to the United Kingdom with a view to increasing the turnaround speed. Mr. Blazeby reminded the Cell that the aforementioned 150 passengers did not include those travelling on the Blue Islands flights and suggested that while it would be challenging to source the swabs and cartridges necessary to undertake the testing, all options were being explored. It was suggested that requiring new arrivals to undertake

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3 tests (at days zero, 4 and 7) was perhaps excessive and costly and that there might be merit in testing at days zero and one further day – potentially day 5 - instead.

Mr. Blazeby informed the Cell that he had received approval to invest in an end-to-end information technology system that would manage the testing of passengers arriving into Jersey from the time of their booking to them receiving the results of their tests.

It was noted that the population now behaved differently from 3 or 4 months previously, when COVID-19 had first started to spread, in that it was accustomed to practising physical distancing. It was accepted that the prevalence of the virus in the United Kingdom was now lower than before and it was mooted that there was sufficient capacity on-Island to manage a significant number of patients affected with the virus, particularly now that the Nightingale Wing of the hospital was operational and the enhanced contact tracing system would make it easier to identify positive cases. However, the Cell was also mindful that as the physical distancing requirements were relaxed, it was more likely that COVID-19 would spread as increasing numbers travelled to the Island. It was, therefore, important to reinforce the messages around physical distancing and hand hygiene and to keep the population alert to the virus by providing them with consistent messaging.

It was suggested that it would be beneficial for people wishing to come to Jersey to have a COVID-19 ‘passport’, which demonstrated that they had tested negative for the virus within a specific period prior to travel, noting that this system was in operation in Madeira. In that jurisdiction, a person who had not had a negative PCR test within the previous 72 hours would be swabbed and the results obtained within 12 hours, during which the person was required to be in quarantine.

Dr. I. Muscat, Consultant in Communicable Disease Control, emphasised that tracing was secondary to testing and that all elements in the testing, tracking and tracing system needed to be watertight when considering opening the borders. However, it was accepted that there would always be some cases of COVID-19, whatever steps were taken.

The Cell recognised the long-term harm that would be caused by not opening up the Island, so supported a gradual and measured opening of the ports, based on the information that had been provided to it. It recommended that both the testing and tracing should be enhanced as far as possible, mindful that there were limits to the numbers of tests that could be undertaken and suggesting that the testing could be more targeted. If a significant number of new cases of COVID-19 were seen in the Island as a result of opening the borders, the Cell would recommend that some restrictions were reintroduced. It acknowledged that by relaxing the controls at the borders, some measures, such as physical distancing would need to be prolonged on Island, to balance the risk posed by allowing people to travel. It opined that, when introduced, Level 1 would be likely to continue into 2021.

COVID-19:  
Medium term  
contain  
strategy.

A5. The Scientific and Technical Advisory Cell, with reference to Minute No. A1 of its meeting of 10th June 2020, received and noted an updated version of the COVID-19 Medium term contain strategy, which, it was informed was not the final version, but a draft for ongoing discussion.

Views of members of the Cell were sought on a number of strategic and clinical regimes for testing for COVID-19 and they were invited to provide these to Mr. S. Skelton, Director of Strategy and Innovation, Strategic Policy, Planning and Performance Department, by electronic mail.

On a separate note, the Cell expressed some frustration when Ministers indicated that they had taken a particular decision based on medical advice, which implied that the

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advice had been received from the Scientific and Technical Advisory Cell, when what was said was often in direct contradiction to the Cell's guidance. The Chair indicated that he had raised this at his feedback session.