

**Meeting:** National Crisis Management Team. Meeting#72 COVID-19.

**Date:** Tuesday 26<sup>th</sup> January 2021 @ 08:30am.

**Members:** Paul Reid, CEO; Ann O'Connor, COO; Tom McGuinness, AND National Emergency Management; Sean Bresnan, ND Procurement; Liam Woods, ND Acute Operations; Martin Dunne, National Ambulance Service; Ann Marie Hoey, ND HR; Dr Martin Cormican, National Lead on Infection Control; Dr Kevin Kelleher, AND Public Health; Dr Siobhan Ni Bhriain, National Lead Integrated Care; Ray Mitchell, Parliamentary Affairs; Stephen Mulvany, CFO; Yvonne O'Neill, Community Operations; Niamh O'Beirne, HSE EMT; Dean Sullivan, CSPO; John Kelly, Corporate Affairs; Joe Ryan, ND National Services.

**In Attendance:** Dr Trish Markham, National Office for Emergency Management; Sinéad Fox, Office for Emergency Management.

**Apologies:** Dr Lorraine Doherty, CL HPSC.

Topic	Discussion	Action	Owner
<b>1. INTRODUCTION</b>			
	The CEO opened NCMT #72.		
<b>2. PREVIOUS MINUTES</b>			
	Minutes of NCMT #71 approved.		Sinéad Fox
<b>3. NPHET ACTION LOG</b>			
	Review of actions deferred until next meeting.		Dr Trish Markham
<b>4. NCMT ACTION LOG</b>			
	Review of actions deferred until next meeting.		Dr Trish Markham
<b>5. PUBLIC HEALTH UPDATE</b>			
	<p>KK: Epidemiological update.</p> <p>36,486 cases over last 14-day period.  Median age 41yrs.  55.1% of cases &lt;45yrs.  Monaghan has highest rate of 1485.7/100K.  National incidence rate of 766.21/100K.  Hospitalisations: 2,266.  ICU Admissions: 104.  Deaths: 232.  1,372 new cases and 7 new deaths reported in last 24hrs, with median age of 77yrs. 4 deaths related to two outbreaks.</p> <p>Outbreaks - Week 3</p>		Dr Lorraine Doherty

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	<p>268 new outbreaks in the last week.            27 in Nursing Homes.            5 in Community hospital/long stay units.            20 in hospitals.            Workplace Outbreaks            6 in Meat factory.            3 in Manufacturing.            37 outbreaks in Childcare and Schools.            Globally - USA, India and Brazil have the highest cumulative cases and deaths.</p> <p>KK: Numbers of cases and close contacts are halving due to the impact of movement restricted. Hospital numbers are reducing.</p> <p>There are a number of outbreaks in hospitals, nursing homes and long-term care facilities. Cases need to be &lt;100/day to stop a resurgence.</p>		
<b>6. COMMUNITY OPERATIONS</b>			
	<p>YO'N: 30% of nursing homes currently with outbreaks. Continued outbreaks being experienced – 111 in total.            High numbers of residents and staff infected. 3,000 and 1,500 members of staff on COVID leave.</p> <p>Number of deaths have increased.            There have been &gt;200 deaths in nursing homes, this is very difficult for other residents, their families and the staff.</p>		<p>Anne O'Connor            Yvonne O'Neill</p>

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	<p>8 residents were transferred from a nursing home to a hospital, the HSE is now supporting this nursing home and will have clinical oversight until it stabilises.</p>		
<b>7. GENERAL SURGE PREPAREDNESS</b>			
	<p>Demand for FFP2 masks has increased. Previously issued 130,000 units/week, now issuing in excess of 1m units/week. 6.5m units in stock. Additional supply being received. Opening additional supply lines to ensure continuity of supply.</p> <p>FFP2 masks usage raised - guidance to help control and management of same required.</p> <p>MC: Reviewing guidelines for mask use to align with ECDC guidance. Challenges exist in the adherence of guidelines – will remind all colleagues to use all IPC measures as preventative measures for COVID-19.</p> <p>SM: Funding and sanction required for FFP2 masks expenditure due to scale of orders. Letter to be submitted to the board/DoH advising of same and seeking approval as outside remit of sanction.</p>	<p>MC: To updated mask use guidance and circulate.</p> <p>SB: Drafting letter for PR to submit to DoH Secretary General regarding FFP2 approval/expenditure decision.</p>	<p>Sean Bresnan</p>

Topic	Discussion	Action	Owner
<b>8. ACUTE OPERATIONS</b>			
	<p>AO'C. High number of acute hospital outbreaks continue to be a challenge. Continuing to support hospital areas that are significantly impacted. Focusing on the ongoing roll out of the vaccination programme. Monitoring COVID rates – numbers of staff infection continuing to grow. Profiling – more individuals on leave with higher numbers going on leave compared to those returning.</p>		Liam Woods
<b>9. HR</b>			
	<p>PR requested an analysis of staff numbers on COVID-19 related leave and expected date of return. There has been an increase in the last week of about 4,000.</p>	AMH: To provide analysis on staffing detail on COVID-19 leave and related timelines.	Anne Marie Hoey
<b>10. TESTING &amp; TRACING</b>			
	<p><b>Testing:</b> Cases for testing have reduced. Expect approx. 4,500 per day from early next week.</p> <p>Just under 10,000 referrals yesterday from GPs. There is capacity for just under 15,000 without the support of NAS in the community. Pending on available capacity, the plan is to start with one test on day 5, and as capacity grows to return to testing on</p>		Niamh O'Beirne

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	<p>day zero and day 7 pending on NPHEP advice.</p> <p><b>Contact Tracing:</b> Participation Provider Agreement PPA has to be increased as call 1 and 2's merged – the call will now be extended to 40 minutes to collect further data.</p> <p>ICT systems being improved. There will be a link for booking own test and a portal will be in place for people to record their own close contacts details. This new technology will be deployed in the coming days.</p> <p>Healthcare workers close contact tracing being progressed with Occupational Health and Public Health - review being undertaken to move the contact tracing into the Clinical Strategy Programme (CSP).</p>	<p>This information will be shared at the press briefing on Thursday 28/01/21.</p>	
<b>11. AOB</b>			
	Nil.		
<b>NEXT MEETING</b>			
	<p><b>NCMT #73</b> <b>Tuesday, 2<sup>nd</sup> February 2021 @ 09:00hrs.</b></p>		