



**Meeting:** National Crisis Management Team. Meeting #116 COVID-19.

**Date:** Tuesday 29<sup>th</sup> March 2022 @ 09:00 hrs.

Members: Paul Reid, CEO; Anne O'Connor, COO; Stephen Mulvany, CFO; Anne Marie Hoey, ND HR; Liam Woods ND Acute Hospitals; Dean

Sullivan, CSPO; Fran Thompson CIO; Damien McCallion, ND COVID Vaccination & Test & Tracing Lead; Joe Ryan, ND Operational Performance and Integration; John Swords, ND Head of Procurement; Ray Mitchell, Parliamentary Affairs; Yvonne O'Neill, Community Operations; Tom McGuinness, AND Emergency Management; Robert Morton, Director NAS; Dr Siobhán Ní Bhriain, National Lead Integrated Care; Geraldine Smith, Internal Audit; John Kelly, Dr Máirín Boland, National Clinical Lead, HTEPP; Patrick Lynch, ND Governance and Risk; Mark Brennock, ND Communications; Dr John Cuddihy, Director of HPSC; Dr Eimear Brannigan, CL on Infection

Control.

In Attendance: Cahir O'Byrne, National Office for Emergency Management; Tara Rowe, National Office for Emergency Management.

Apologies: Dr Colm Henry, CCO; Dr Lorraine Doherty, CL HPSC; Dr Máirín Boland, National Clinical Lead, HTEPP; John Kelly, Head of Corporate

Affairs.

Topic	Discussion	Action	Owner			
1. INTRODUCTION	1. INTRODUCTION					
	The CEO opened NCMT #116.  NCMT – Due to the current epidemiological and healthcare position, the CEO indicated that NCMT meetings will continue.		Paul Reid			
2. PREVIOUS MINUTES						
	Minutes of NCMT #115 approved.		Cahir O'Byrne			
3. NPHET ACTION LOG						
	Update deferred.		Tom McGuinness			
4. NCMT ACTION LOG						
	Update deferred.		Tom McGuinness			
5. PUBLIC HEALTH UPDATE						
	JC: Summary of the last 14-day period (up to 27/03/22).  Case numbers – 83,186 representing a significant increase from 53,584 cases in the preceding 14-day period.  5-day moving average: 7,639 compared to 5,042 in the preceding 14-day period.  National incidence – 1,878 per 100k compared to 1,125 in the preceding 14-day period.  Outbreaks - Week 12 *		Dr John Cuddihy			
	*Provisional data may change, subject to validation. 201 new outbreaks in the last week.					

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	59 in nursing homes. 6 in community hospitals/long-stay unit. 76 in residential care facilities. 18 in other healthcare services. 37 in acute hospitals. 4 in vulnerable populations.  Overall, the number of outbreaks have increased with symptoms being reported as generally mild.  There has been a decrease in the number of positive antigen results over the past week - this may be as a result of people not recording results on the portal.  The Omicron variant BA2 is now the dominant variant.  Hospital cases - 1,634. ICU cases - 54.					
6. COMMUNITY OPERATIONS	6. COMMUNITY OPERATIONS					
	YON: The number of outbreaks has increased in all community settings – in particular, the Older person's services. The number of cases per outbreak have increased.  There has been an increase in the number of staff on Covid-19 related		Yvonne O'Neill			

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	leave – 1,100 compared to 960 last Friday.					
7. ACUTE OPERATIONS	7. ACUTE OPERATIONS					
	<b>LW:</b> Hospital numbers remaining high - at 1,605 this morning.		Liam Woods			
	AOC: The main challenge and shared concern is staffing levels. It was noted that staff absenteeism is currently associated with confirmed Covid infection, compared to previously where absenteeism was a combination of infection and close contacts.		Anne O'Connor			
8. TESTING & TRACING						
	DMcC: Noted a decrease of 10-20% in community testing over the past 3 days. Requests for antigens tests remains high.  Social media to target messaging to encourage booster uptake in the 16-30yr age cohort.		Damien McCallion			
9. AOB						
NEXT MEETING						
	NCMT Covid-19 #117 Tuesday, 12 <sup>th</sup> April 2022 @ 09.00hrs.					