

Emergency Advisory Group

Response to the Council of Ministers

9th June 2021

The Emergency Advisory Group is a non-statutory group, appointed by the Council of Ministers, to provide external independent advice and perspective to the Council of Ministers on its response to 'emergency' situations in an informed, professional, balanced and timely manner.

At its meeting on Thursday 3rd June, the Council of Ministers sought advice from the Emergency Advisory Group. Council requested that the advice was provided no later than Wednesday 9th June 2021. The Group recognises the need for CoMIN to seek advice in a rapidly changing environment and is happy to respond to these challenging timescales. The Group hopes CoMIN will accept that a compromise has been struck in the provision of timely advice balanced with a high-level assessment of the available data and evidence.

Summary

- The EAG believes that there are significant risks to the Island from the current plan to open borders on 28th June in the context of UK transmission rates and in particular the spread of the Delta variant of Covid-19.
- The EAG believes that the Council of Ministers should consider early messaging which alerts the public to the issues caused by the Delta and other new variants and that there remains a potential for a change to the Borders opening plan in the event of a sharp spike in cases in the UK.
- A minority view was that 'level 3' border controls – consistent with the Exit Strategy framework on current levels of UK infection - should be reintroduced now for a short period of a month / six weeks to avoid an additional lockdown this summer. Once the vaccination program has delivered 'two jabs' protection to the majority of the Island's population these border controls could then be lifted.

The questions

1. The Isle of Man exit plan aims to move to unrestricted travel to the Island on 28 June 2021. The Council of Ministers would welcome advice in respect of the risks from this plan arising from the following factors:
 - **UK indicators relating to Covid (daily case numbers, hospital admissions) increasing**

Since 28th May, in the UK the 14 day rolling average cases per 100,000 has risen from 40 to 48 cases. On a seven-day average, this figure is 42.1.1 In the Council of Ministers' published exit framework², the level at which CoMIN has determined it will

¹ <https://coronavirus.data.gov.uk/>

² <https://covid19.gov.im/media/1687/exit-framework.pdf>

implement 'level 3' border controls is set at between 30 - 100 cases per 100,000 on a 14 day average.

The current 'transition' level of 2.5 represents a compromise between the risk of infection from the UK and the need to maintain a level of travel between the Isle of Man and the UK for residents and their families as well as essential workers.

A minority view was that this level presents too great a risk of community infection, which with the delta variant and the low level of second vaccinations (relative to the UK) is likely to lead to more rapid spread of the virus on the island with an unacceptable risk to the unvaccinated young of 'long covid' without severe – lockdown measures.

The EAG sees the current UK Covid-19 case numbers as presenting an early warning. If the UK infection rate and hospitalisation rate continues on their current trajectory, CoMIN is advised to reconsider its exit plan. The EAG feels the public would benefit from a transparent set of weighted objectives from CoMIN which describe CoMIN's appetite for risk in respect of Critical Care capacity, morbidity, mortality and a return to normal living conditions. The group feels decision making in this area would be well-informed by up-to-date modelling on transmission in the community, producing different scenarios taking into account various assumptions.

- **The risk posed by Variants of Concern, in particular high transmission levels, lower vaccine efficacy**

The Delta variant originating in India currently poses the most significant risk to the Borders reopening. This is due to its high transmission rate and the lack of domestic mitigations currently in place in the Island. This highly transmissible variant, together with the day 0/6 testing regime creates a risk of uncontained community transmission in the current environment. While the group acknowledges that higher numbers of people with two vaccinations reduces this risk, the residual infection rate of 20% is likely to cause outbreaks or clusters. Further, the group believes that as the current vaccination programme will not see most adults fully vaccinated until July, a moderate to high level of residual risk remains in the period until the vaccination programme is completed.

- **IOM Vaccination rates and the impact on Covid spread and an open borders policy (1st dose v 2nd dose and proportion of adult population who haven't received a vaccine)**

The Isle of Man's current vaccination rates for 2nd dose of the vaccine are currently lower than the UK's at the present time. This presents a higher level of risk to the population from Variants of Concern.

The group feels strongly that every effort should be made to progress the vaccination programme to ensure each adult has had two vaccinations as soon as possible and to follow the recently announced UK guidance on 12-15 year olds being

eligible for vaccination. The group also supports an increase in public messaging on the importance of vaccination in terms of a return to normality.

- **The finite capacity for PCR testing (inc. swabbing capacity). This capacity must also respond to surge testing requirements in the event of an outbreak or cluster**

The group's advice is that the use of postal self-swabbing in certain situations would increase capacity in PCR testing, without requiring swabbers. There is also a role for quality-assured Lateral Flow antigen tests (from the Public Health England list of validated manufacturers).

- **The current isolation policy, including isolation on entry (day 0, day 6) and isolation of high risk close contacts (day 0, day 9) and ECDC recommendations to distinguish high risk close contacts of a positive case where the contacts have received two vaccinations.**

The group's advice is that the ECDC guidance is not up-to-date or reflective of current variants of concern in the British Isles. The group would advise CoMIN to consider using the UK PHE analysis/guidance in relation to isolation protocols as it is more relevant to the UK/IOM context.

- **What the social and economic implications of any delay in relation to opening the borders may be.**

The group feels that this is an area which needs to be reviewed in more detail as numerous social, economic and non-covid medical implications have already been expressed and debated during the pandemic. The continued restrictions and isolation affects nearly every facet of life. It is noted that differing approaches to lockdown by other competitor jurisdictions may create an economic risk. There may be negative comparisons with those jurisdictions which have opened up while the Isle of Man has not. It is however recognised that this may be offset in the event that opening up too early causes widespread outbreaks amongst the partially vaccinated or unvaccinated.

2. How the EAG feels the risks in the above factors may be mitigated

The group advises CoMIN to consider a number of areas of mitigation both under the current regime and if it proceeds to the current plan to open the Border on 28 June:

- Residents are not used to the non-pharmaceutical interventions, outside of 'lockdown' periods, which have been practiced widely elsewhere. When the borders open, residents should be advised that some degree of social distancing is advisable as inevitably infected people will be coming to the island and

vaccines aren't 100% effective. The most simple message is: Hands, face, space. Avoid close contact and crowded indoor spaces.

- Where a person is subject to day 0/6 testing on entry, they should be recommended to wear masks and practice social distancing in high risk settings, including in schools, indoors and in other areas of risk.
- The use of surveillance testing through antigen/LFD testing in schools
- Improving ventilation in schools
- Introduce public messaging and recommend the use of some non-pharmaceutical interventions for the general public in certain high risk settings
- Where families host a visitor from the UK who returns to the UK before the day 6 test, recommend surveillance testing and infection control measures for that family.

The EAG considered that the above questions were a priority in supporting the Council of Ministers' decision making in relation to the 28th June date and has allocated working groups to consider the remaining two questions and will revert as soon as possible.

3. Whether a move towards ECDC guidance³ in relation to isolation of close contacts of Covid positive cases should be applied in the Isle of Man to reduce the impact of an outbreak on society and the economy would extend to all close contacts, including household members of a positive case, (in line with ECDC commentary) or initially just those who reside outside of the household?
4. Whether removal of testing and isolation on arrival for any vaccinated individuals is an acceptable interim position in a move on borders, retaining arrival tests and isolation for those unvaccinated?

³ <https://www.ecdc.europa.eu/sites/default/files/documents/Interim-guidance-benefits-of-full-vaccination-against-COVID-19-for-transmission-and-implications-for-non-pharmaceutical-interventions.pdf>