

**Minutes of a meeting of the Council of Minister's
– Emergency Advisory Group ("EAG") –
Held on Monday 29 November 2021 at 3.30pm**

In the Department of Home Affairs Conference Room and via MS Teams

Present:

Mr John Spellman (Chair)
Mr R Mercer MLC, Tynwald Representative
Mr Jonathan Wild
Mr Peter Davidson

MS TEAMS

Hon J P Poole-Wilson MHK, Minister for Justice and Home Affairs (Vice-Chair)
Mrs Jacqui Bridson
Dr Rachel Glover
Professor Peter Edge

In Attendance:

Mr D Davies, Chief Executive, Department of Home Affairs
Mr M Lewin, Chief Operating Officer, Cabinet Office (via MS TEAMS)
Kathryn Magson, Chief Executive, DHSC (via MS TEAMS)

Secretariat:

Miss J Alexander, PS, DHA

Apologies:

Mr Stevie Christian and Mrs Julie Hotchkiss

It was noted that members: Min Poole-Wilson, Mark Lewin and Kathryn Magson had to leave the meeting early (3.30pm) to attend an extraordinary meeting of Council of Ministers.

081/2021 Declaration of Interest or Conflict

RG declared that Taxa Genomics Ltd was about to launch a service for commercial sequencing and this may give rise to a perception of conflict

082/2021 Minutes of the meeting held on Thursday 4th November, 2021

Having been previously circulated, the Minutes of the meeting held on Thursday 4th November, 2021 were **approved** for publication.

083/2021 Matters Arising:

Ref: 075/2021 (a)

Page 1: In respect of the timetable for the IOM vaccine programme [said to be] behind that of the UK, KM stated that this was not in fact the case.

Minute to be amended.

In respect to the action concerning visibility, this was completed.

Ref: 075/2021 (b) and (c) actions completed.

Ref: 075/2021 (d)
Page 3: Communications Update

Action: Peter Boxer [Executive Director, External Relations] to be invited to the next meeting of the EAG.

Mark Lewin referred to the announcement from Government on Saturday [27th November, 2021) and details are currently being finalised around communications. Waiting for details from the UK around the travel position. – The Island will replicate UK position for international travellers, those from the CTA etc. Mr Lewin then gave a summary of the current position.

Ref: 080/2021 (a)
PD queried as to whether the data was available publicly. Dan Davies confirmed it was not.

Ref: 080/2021 (b)
Page 6: School Data
Lack of context in respect of school data. DD mentioned that in relation, an FOI request has been made. Graham Kinrade (CEO, DESC) expressed concern that without context, data may be used poorly.

Ref: 080/2021 (c)
Page 6: Vaccine Wastage Rates
Level of vaccine wastage discussed.

Ref: 080/2021 (d)
Page 6: Long Covid – remains open.
Jonathon Wild mentioned articles suggesting that having boosters may affect sufferers of long Covid.

Action: Raise points in respect of long Covid with the National Covid Response Group, noting the need for clarity of pathways. Footnote in advice.

Ref: 080/2021 (e)
Page 6: EAG Remit
EAG going forward, direction sought from Chief Minister. One brief conversation has been held in respect of the initial stages of emergency.

084/2021 Current COVID Strategy Assessment

5.1 Dialogue with Kathryn Magson who was welcomed to the meeting.

- Observations on the Advisory Notes (from Nov) and the statement regarding UK booster 3rd vaccine programme.

- KM wished to clarify that the IOM had never lagged behind UK. The booster vaccine programme was driven by eligibility from the date of 2nd dose vac date.
- There is expectation that there will be a permanent vaccination unit and team for the future.
- Change of JCVI advice is often received late and therefore it is difficult to plan.
- The main issues of delay are around 'did not attend' (DNA), and more communication is needed in this regard.
- KM responded that Manx Care absolutely continues to communicate – tweeting, via newspapers, social media etc. It is agreed that there is more to be done in schools and this will form part of discussions.
- At the weekend, booster vaccines were extended to over 18yrs. But still in age order. In addition 16yrs – 18yrs brought forward; 12yrs – 17yrs and 5yrs-7yrs offered single dose in the at-risk groups. Booster moved forward from 6 months interval between 1st and 2nd doses reduced to 3 months which means there will be 43,000 people eligible for the booster. This is an enormous undertaking and a huge resource issue. Planning is going forward yesterday (Sunday 28th November) and today. It is hoped that 20,000 people will be vaccinated before Christmas, if possible. To achieve this, resources will be diverted from elsewhere, therefore other services may be delayed.
- 74% is current uptake; expect people to come forward, bearing in mind weekend news.
- The Chair asked about the response to the 'no show' issue, as Jonathan Wild had raised it. KM responded that the numbers not attending their appointments was higher than the figure for primary doses and this was due to a mixture of reasons. The appointments are sent out 2-3 weeks in advance but a lot of people still do not show up without giving any notice. Consequently, the wastage is higher. The data shows that the wastage for the Primary vaccine rollout was less than 1%, and has risen to 5% for boosters. The health service mitigate as best as they can. Now the product can be held for 28 days (slightly longer than previously). DNA are higher on Moderna days, possibly due to concerns about the vaccine and the relatively greater popularity of Pfizer.

Questions:

- Peter Davidson expressed his congratulations to KM and the Covid Teams. Please pass on thanks.
- Can this committee help in terms of increasing staff numbers? KM stated currently can't use non-medical registered staff. More people to be seconded to the team. The Government will send out a further staff appeal, internally.
- Mark Lewin asked about the PCR testing capacity. KM stated additional capacity to be looked at. Currently capacity is 800 per day. DHSC considering outsourcing. KM reminded group that Pathology lab also carries out other testing functions,
- Jackie Bridson asked that further advice be provided to event organisers. Dr Glover commented that the volume of PCR testing i.e. 800 could be improved by automation.

- Dr Glover mentioned people who travel off Island for treatment and the lack of accreditation from UK. KM added that work is underway (but it will be 2 - 3 years before complete).
- Jonathon Wild referred to wastage. KM spoke of the possibility of running a further walk-in clinic (vulnerable first).

Action: need to revisit the PCR capacity.

- What is the trigger event for additional border controls in the IOM?

085/2021 Standing Items [By Exception]

- 6.1** Vaccine Supplies, Boosters and Quarter 4 Preparations
- 6.2** Mitigation & Outbreak Management Plan
- 6.3** Communications
- 6.4** Community Support
- 6.5** Economic Impact
- 6.6** Covid-19 Long Term Strategy

Tynwald Questions

The group considered a number of questions proposed by Tynwald members, many of which the EAG determined it was unable to answer.

086/2021 Any Other Business

Peter Davidson noted in respect of Omicron that the death rate in South Africa would give indications.

The Chair suggested encouraging CoMin to remain vigilant over the coming days/weeks.

Dr Glover suggested that testing on the boat, prior to arrival, would be sensible.

Peter Edge queried the legislative framework within which mask wearing would be proscribed. DD stated his understanding was that this may be applied through conditions of carriage or service. PE also raised a concern about the level of the spot fine imposed when compared to UK fixed penalties. DD to clarify position.

Jackie Bridson noted the difficulty in enforcing mask wearing in schools.

Jonathan Wild mentioned a Telegraph article with regards to living with Covid and the introduction of new drugs which reduced the likelihood of Covid patients requiring intensive care.

Action: JW to circulate the article.

The Chair expressed thanks to all in attendance.

The meeting closed at 16:40hrs

Date of next meeting: Monday 20th December, 2021, at 16.30hrs

Signed:

Date: