

Minutes: Technical Advisory Group for COVID-19

Date:	Friday 07 August 2020
Time:	10.30am – 12.00pm
Location:	Meeting URL: Out of scope Meeting ID: 948 2567 1811 Password: TAG or Numeric Password: 498734
Chair:	Dr Ian Town
Members:	Dr Anja Werno, Dr Bryan Betty, Dr Collin Tukuitonga, Dr Erasmus Smit, Dr Matire Harwood, Professor Michael Baker, Dr Nigel Raymond, Assoc Prof Patricia Priest, Dr Sally Roberts, Dr Shanika Perera, Professor Stephen Chambers, Dr Virginia Hope
Ministry of Health Attendees:	Andi Shirtcliffe, Asad Abdullahi, Dr Caroline McElnay, Dr Harriette Carr, Jeremy Tuohy, Dr Juliet Rumball-Smith, Dr Niki Stefanogiannis, Sarah Mitchell, Dr Tomasz Kiedrzyński
Guests:	Dr Martin Chadwick
Apologies:	Professor David Murdoch, Louise Chamberlain, Margareth Broodkoorn, Dr Richard Jaïne

1.0	<p>Welcome and Previous Minutes</p> <p>Dr Ian Town welcomed all Members and Attendees in his capacity as Chair of the Technical Advisory Group for COVID-19.</p> <p>Minutes of the last meeting (24 July 2020) were accepted.</p>
2.0	<p>Update on open actions</p> <p>Open actions updated. Action 57 remains open.</p>
3.0	<p>Ministry of Health update on COVID-19 response</p> <p>The Chair gave an update on current issues being worked on in the Ministry:</p> <p>Surveillance Plan</p> <ul style="list-style-type: none"> The Surveillance Plan has now been placed on the MoH website, where is a record of the overarching framework, including the Testing Strategy. The Plan is being reviewed from time to time but there have been no significant changes so far. The key focus is on the Elimination Strategy. New Zealand is in an exceptionally fortunate position; the risks remain around the border explaining the emphasis given to processes and protocols for Managed Isolation & Quarantine facilities (MIQ) Responsibility for managing MIQs shifted to joint agency leadership between the Ministry for Business Innovation & Employment (MBIE) and Ministry of Health. MBIE took over the

primary responsibilities (operations, procedures, maintenance, security, monitoring and compliance) with MoH providing Health advice and guidance.

Appointment of Dr Don Matheson

- Don has joined the Ministry as Deputy Director of Public Health and Primary Care Transformation. He will be based in Auckland

Testing Strategy

- The Testing Strategy is under continue review and the Expert Working Group (EWG) is reviewing the testing data on a weekly basis. The Chief Science Advisor and the Director of Public Health are interfacing with the EWG's recommendations and providing guidance and oversight to the COVID-19 Directorate as it communicates with DHBs.

TAG feedback:

- Query to the length of time people can test positive with virus fragments.
 - In NZ the longest period recorded so far is 106 days, while the Public Health Laboratory Network in Australia reports the period as being longer than 3 or 4 months. There have been no signs of onward transmission in any of these cases.
- The testing team should consider involving the Community Pharmacy Network in future testing
- Query to the considerations for a nominal target per week for testing levels.
 - No current discussion around testing 'targets' i.e. X amount per week per practice, for symptomatic community testing.
- National clarity around asymptomatic swabbing, especially around borders and the practices located around the border.
 - Asymptomatic border worker testing is primarily an employer-mediated programme, although some may come to CBACs and GPs 'if directed'. Fully funded.
- In terms of community testing it is helpful to focus on DHBs where the MIQs' staff live
 - Updated guidance was sent this week to DHBs regarding testing.
 - Some discussions around the testing modelling with issues raised around the frequency of testing of the MIQ staff.
- Query to the possibility of separating or identifying those broken virus fragments or just residual viruses as opposed of those that still hold an infection and if so, the availability in NZ.
 - More people are using PCR Ct values as a guide to infectiousness, with some suggesting that ct values above 34 indicates the patient is no longer infectious.

Use of Masks by the General Public

- Guidance launched by the Director-General yesterday. In preparation for any future outbreak the public needs to be comfortable with the requirements for the safe use of masks.

TAG feedback:

- Query about for advising the use of masks.
 - The advice on the use of masks is a precautionary and would be recommended as part of Alert Level 2. There has been no change to the risk level.

Vaccines and Therapeutics

- Vaccines continue to be an important pillar of the Elimination Strategy. The Vaccine Taskforce continues to meet fortnightly.
- The Ministry is working hard to develop the Immunisation Strategy and how vaccines will be deployed in the community.
- The overall purchasing strategy has been agreed to by joint Ministers and on Monday they will consider a contingency to allow NZ to enter into purchasing arrangements with vaccine suppliers.
- NZ has contributed to COVAX and is working bilaterally with Australia and Singapore, and trilaterally with the UK in terms of purchasing opportunities.
- Potential therapeutics may be just as important to COVID-19 response.
- The National Science Platform for the Vaccine Strategy is led by Malaghan Institute of Medical Research and the University of Otago.

4.0

Resurgence Planning

An updated version of the Resurgence Plan - Sector Briefing was included in the agenda circulated to TAG members for review and feedback



Resurgence
Plan_Sector Briefing v1

Dr Martin Chadwick, the Chief Allied Health Professions Officer for the Ministry of Health joined the meeting and presented the Resurgence Strategy to TAG members. Dr Chadwick welcomed questions, critique and feedback from the group after the presentation as well directly to him by email.

TAG feedback:

- Frontline medical services such as General Practices seem to be missing from the general thinking behind the plan. There are 1000 practices across the country which service frontline medical needs.
- Agreement that it is worth thinking from a pragmatic perspective how to capture all the frontline workers. Healthcare providers that are mobile and services do not also seem to be captured in the plan.
- Laboratory services also do not feature specifically. Laboratory-generated data forms the basis for a lot of emerging strategies.
- There is a high degree of overlap between Operations subfunctions listed in the plan. It is important to have clearly defined roles and responsibilities as PHUs have a role in almost all the subfunctions.
 - There is a quite substantial document that sits behind the plan where roles and responsibilities and accountabilities will be outlined.
- Query to how the Alert Levels fit into the plan.
 - Quite simplistically think of the plan as the machinery that sits behind all of that. There will always be the immediacy of the Public Health response and the public understands Alert Levels.
 - The timeline moving forward is having the Health sector engaged, next phase will be doing some scenario testing and modelling.

	<ul style="list-style-type: none"> • There are risks with disrupting normal relationships between GPs, ARC sector, District Nursing, Maternity and Midwives. <ul style="list-style-type: none"> ○ There are many parallel pieces of work going on at the moment. One of them has started to map the Communication trees for health personnel and how to ensure communications go out in a sequential way and prevent cross communication. • Integrating 'scenarios' with the current border protections will be helpful. Worth thinking about the possible vulnerabilities, whether it is MIQ staff, airline crew, medical evacuation. <ul style="list-style-type: none"> ○ This is very much a Health focus and response, but there is also an All of Government (AoG) functionality as well. <p>The next steps include a health sector briefing pack that will be going out by the end of this week and will be also distributed to TAG members. The actual resurgence Plan document will be going to from draft to version 1.0 early next week</p>
5.0	Māori Health Perspectives <ul style="list-style-type: none"> • No update.
6.0	Pacific Health Perspectives <ul style="list-style-type: none"> • Question about the trigger for mask advice covered earlier in the meeting.
7.0	Any other business <ul style="list-style-type: none"> • No other business discussed
8.0	Agenda items for next meeting <ul style="list-style-type: none"> • No items discussed
9.0	New Action Items raised during meeting <ul style="list-style-type: none"> • No new actions raised on 07 August 2020 meeting
10.0	Summary of TAG Recommendations
Meeting closed at 11:40am Next meeting Friday 21 August 2020 - 10.30am – 12:00pm	

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Action #	Agenda item	Actions	Action Owner	Updates	Status
57	Subgroup Activity Updates	TAG Chair to be in contact with the Ministry's workforce team regarding the concern around lab workforce	Chair	06/08 - Ongoing 24/07 - Action raised	Open

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