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From: [Redacted] < [Redacted] @gov.scot > On Behalf Of Chief Medical Officer

Sent: 21 July 2020 13:34

**To:** First Minister <firstminister@gov.scot>

**Cc:** [Redacted] @gov.scot>; Mitchell E (Elinor) <Elinor.Mitchell@gov.scot>; Covid-19

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Secretary for Education and Skills <DFMCSE@gov.scot>; Lloyd E (Elizabeth)

<Elizabeth.Lloyd@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Modelling COVID-19 The Chiefs <DLORGPMCOVID19TC@gov.scot>; Health and Social Care

Directors <DLHSCPHSCD@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

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<DLHSCPCOVIDDEPDIR@gov.scot>; DL Ministers <DLMPOPMIN@gov.scot>; DG Education, Communities & Justice <DGECJ@gov.scot>; Chief Medical Officer <CMO@gov.scot>

**Subject:** RE: For Action: Advice: Change of Isolation Period For Confirmed Covid-19 Cases

**Importance:** High

P/S First Minister,

Please see the attached advice from the Chief Medical Officer on the Change of Isolation Period for your consideration.

This has been approved by Cab Sec HSC.

If FM is content, the 4 CMOs will work together to coordinate an announcement for <u>early next</u> <u>week.</u>

Erdm Link: [Redacted – link to Document 1.1]

Many thanks [Redacted]

[Redacted]
CMO Office | Scottish Government
T | [Redacted] BB | [Redacted]

[Redacted – out of scope]

#### 1.1 Document 1.1 - Attachment to Document 1

From: Dr Gregor Smith Interim Chief Medical Officer 21 July 2020

First Minister

### **ISOLATION PERIOD FOR CONFIRMED COVID-19 CASES**

### **Purpose**

1. To advise the First Minister of a clinical decision made by the four Chief Medical Officers of the United Kingdom to change the isolation period for milder confirmed COVID-19 cases to 10 days, up from 7 days; and to seek agreement that these changes be brought in simultaneously across the four nations.

## **Priority**

**2. Immediate** – I would welcome the First Minister's views ahead of coordinating the simultaneous announcement across the four nations.

#### Overview of Clinical Decision

- 3. The four UK CMOs have agreed, based on most recent data, to change the self-isolation period for symptomatic individuals from 7 days to 10 days where they have a positive test result but without severe infection requiring hospitalisation. This change is being made on the basis of evidence that some people may retain viable virus with potential for transmission beyond 7 days after symptoms began.
- 4. The exception to the 10 day rule remains patients admitted to hospital with COVID-19, and patients with COVID-19 in care homes where a 14 day isolation applies. This therefore is the same as the existing guidance for those admitted to or diagnosed in care homes for a 14 day isolation period. For those admitted to or diagnosed in hospital the current guidance is for 14 days isolation if they required critical care or are severely immunocompromised. This will remain the case and 14 day isolation will also apply to anyone admitted to or diagnosed in hospital, to make the guidance clearer and more operational. The 10 day requirement for isolation will therefore apply to those in the community e.g. not in hospitals or care homes.
- 5. The New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) re-reviewed the evidence on the duration of the infectious period for individuals infected with SARS-CoV-2. They advised that in mildly ill patients who are recovering, there is a low probability of infectiousness 7-9 days after illness onset (moderate confidence).
- 6. The UK Senior Clinicians Group discussed the NERVTAG paper and shared the view that the period of self-isolation should be increased to 10 days. The clinicians considered that given the NERVTAG review at this point in the epidemic 10 day self-isolation would better balance isolating individuals who could spread infection while not isolating individuals for longer than is needed.
- 7. Following that meeting the UK CMOs each made the decision to change the period of self-isolation from 7 days to 10 days in their respective nations. This is a clinical decision, as was setting the 7 day isolation before.
- 8. At this point in the epidemic, the common view across the four nations is to ease restrictions on the general population by increasing targeted measures where they will have the greatest impact.

Isolation of contacts via Test and Protect is an example of this. Increasing the self-isolation period for index cases is similarly targeted to help drive down incidence of infection by making a greater ask of a small number of people to the benefit of the broader community.

- 9. The CMOs also consider that the impact of making this change now will be lessened as testing is available to all symptomatic individuals, and therefore those who are isolating but do not in fact have COVID-19 will be released after testing negative in a few days.
- 10. This change will move the UK towards closer alignment with WHO guidance, which is for 10 days isolation after symptom onset, plus 3 additional days without symptoms for symptomatic cases; and 10 days isolation for asymptomatic. Other countries have varying periods in isolation for proven cases: for example, the USA has in place 10 day isolation from first symptoms (provided 3 days with no fever and respiratory symptoms have improved also). The UK currently has the shortest period of isolation of international comparators.
- 11. The UK CMOs have agreed that this change should ideally be announced at the same time across the four nations to minimise potential for confusion, with appropriate guidance in place ahead of that. The view of the CMOs is that this should happen, if possible, no later than the last week of July. We will work internally to review and update relevant guidance and messaging.

#### Recommendation

- 12. The First Minister is invited to:
  - **Note** the decision of the four UK CMOs to change the isolation period for symptomatic individuals with a positive test result from 7 days to 10 days;
  - Agree that we work with the UK Government, Welsh Government and Northern Ireland Executive to jointly announce the change across the four nations; and
  - Note that policy, marketing and clinical leads in Scottish Government will collaborate to review and update processes, messaging and guidance to reflect the change.

#### DR GREGOR SMITH

Interim Chief Medical Officer 21 July 2020

[redacted – out of scope]

From: Smith G (Gregor) < Gregor. Smith@gov.scot>

Sent: 29 November 2020 16:44

To: First Minister <firstminister@gov.scot>; Cabinet Secretary for Health and Sport

<CabSecHS@gov.scot>

Cc: First Minister Covid Briefing Unit <FMcovidbriefingunit@gov.scot>; Lloyd E (Elizabeth) <Elizabeth.Lloyd@gov.scot>; Hutchison D (David) <David.Hutchison@gov.scot>; Leitch J (Jason) <Jason.Leitch@gov.scot>; McQueen F (Fiona) <Fiona.McQueen@gov.scot>; Chief Medical Officer <CMO@gov.scot>; DCMO Health COVID19 <DCMOHealth.COVID19@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Mitchell E (Elinor) <Elinor.Mitchell@gov.scot>; Lamb C (Caroline) <Caroline.Lamb@gov.scot>; Covid-19 Director <covid-19.director@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>; Thomson KAL (Ken) (Director-General) <Ken.Thomson@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Communications Healthier@gov.scot>

Subject: Isolation Period for Contacts: Proposed Move to 10 days

First Minister, Cabinet Secretary

[Redacted]

G

Dr Gregor Smith Interim Chief Medical Officer for Scotland Scottish Government

Room 1E:02A St Andrews House Regent Road Edinburgh EH1 3DG

Telephone: 0131 244 2799

[redacted – out of scope]

From: [Redacted] < [Redacted] @gov.scot> On Behalf Of First Minister

Sent: 09 December 2020 18:15

To: Steedman N (Nicola) (DCMO) < Nicola.Steedman@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; Lloyd E (Elizabeth) <Elizabeth.Lloyd@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; Chief Medical Officer <CMO@gov.scot>; First Minister

<firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills

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<PermanentSecretary@gov.scot>

**Cc:** DCMO Health COVID19 <DCMOHealth.COVID19@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Hutchison D (David) <David.Hutchison@gov.scot>; Mitchell E (Elinor)

<Elinor.Mitchell@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

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(Scott) <Scott.Wightman@gov.scot [Redacted] <[Redacted]@gov.scot>; Rogers D (David)

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<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: RE: Self isolation for contacts of positive cases and returning international travellers

All

The First Minister has noted the information provided by the CMO and is content to agree to reduce the self-isolation time from 14 to 10 days.

Grateful if the necessary regs could be put in place and grateful if you could advise us of the timescales.

**Thanks** 

## [Redacted]

## [Redacted]

Deputy Private Secretary
Private Office to the First Minister

5th Floor St Andrew's House | Regent Road | Edinburgh | EH1 3DG | T: [Redacted] | [Redacted]



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From: Steedman N (Nicola) (DCMO) < Nicola. Steedman@gov.scot>

Sent: 08 December 2020 18:32

**To:** [Redacted] <[Redacted]@gov.scot>; Lloyd E (Elizabeth) <Elizabeth.Lloyd@gov.scot>; [Redacted]@gov.scot>; Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice <CabSecJustice@gov.scot>; Cabinet Secretary for Transport, Infrastructure and Connectivity <CabSecTIC@gov.scot>; Permanent Secretary <PermanentSecretary@gov.scot>

**Cc:** DCMO Health COVID19 < DCMOHealth.COVID19@gov.scot>; DG Health & Social Care < DGHSC@gov.scot>; Hutchison D (David) < David.Hutchison@gov.scot>; Mitchell E (Elinor)

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<SGLDInternationalTravelRegs@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

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<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: RE: Self isolation for contacts of positive cases and returning international travellers

And PHS will presumably also need some notice to amend all of their published guidance which mentions the current isolation period.

Warm regards,

Nicola.

Dr Nicola Steedman

Interim Deputy Chief Medical Officer Scottish Government

nicola.steedman@gov.scot 07990554182

From: [Redacted] < [Redacted] @gov.scot>

Sent: 08 December 2020 17:28

**To:** Lloyd E (Elizabeth) <Elizabeth.Lloyd@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice

<CabSecJustice@gov.scot>; Cabinet Secretary for Transport, Infrastructure and Connectivity

<CabSecTIC@gov.scot>; Permanent Secretary <PermanentSecretary@gov.scot>

Cc: DCMO Health COVID19 < DCMOHealth.COVID19@gov.scot>; Steedman N (Nicola) (DCMO)

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(David) <David.Hutchison@gov.scot>; Mitchell E (Elinor) <Elinor.Mitchell@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Sunderland RE (Rachel)

- <Rachel.Sunderland@gov.scot>; Wightman S (Scott) <Scott.Wightman@gov.scot>; [Redacted]
- <[Redacted]@gov.scot>; Rogers D (David) (Constitution and Cabinet Director)
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- <Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: RE: Self isolation for contacts of positive cases and returning international travellers

In relation to the reduction of the isolation period for close contacts, whilst no amendments to regs are required, NHS24 have flagged that they require 5 days (including Saturday/Sunday) lead in time to make necessary changes to systems and processes.

Kind regards,

[Redacted]| Head of Contact Tracing and Supporting Isolation Policy | Testing and Contact Tracing Policy Division | COVID Public Health Directorate| DG: Health & Social Care | Scottish Government |

m: [Redacted]|email: [Redacted]

Pronouns: [Redacted]

From: Lloyd E (Elizabeth) < Elizabeth.Lloyd@gov.scot>

Sent: 08 December 2020 15:24

**To:** [Redacted] @gov.scot>; Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice <CabSecJustice@gov.scot>; Cabinet Secretary for Transport, Infrastructure and Connectivity <CabSecTIC@gov.scot>; Permanent Secretary

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**Cc:** DCMO Health COVID19 <DCMOHealth.COVID19@gov.scot>; Steedman N (Nicola) (DCMO) <Nicola.Steedman@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Hutchison D (David) <David.Hutchison@gov.scot>; Mitchell E (Elinor) <Elinor.Mitchell@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] @gov.scot>; [Redacted]

<[Redacted]@gov.scot>; Sunderland RE (Rachel) <Rachel.Sunderland@gov.scot>; Wightman S (Scott) <Scott.Wightman@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Rogers D (David) (Constitution and Cabinet Director) <David.Rogers@gov.scot>; [Redacted]

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<[Redacted]@gov.scot>; Covid-19 Director <covid-19.director@gov.scot>; Lamb C (Caroline)

<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: RE: Self isolation for contacts of positive cases and returning international travellers

Do we need to change the regs in advance...I'm cautious about a shorter quarantine period being publicly confirmed when we still want people to follow the longer period.

## Elizabeth Lloyd Chief of Staff to the First Minister

St Andrew's House Regent Road Edinburgh EH1 3DG Tel: 0131 244 5647 Mobile: 07867 375 279 Elizabeth.Lloyd@gov.scot

Please note Scottish Ministers, Special advisers and the Permanent Secretary to the Scottish Government are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot for information.

From: [Redacted] < [Redacted] @gov.scot>

**Sent:** 08 December 2020 15:22

**To:** Lloyd E (Elizabeth) <Elizabeth.Lloyd@gov.scot>; Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport

<CabSecHS@gov.scot>; Cabinet Secretary for Justice <CabSecJustice@gov.scot>; Cabinet
Secretary for Transport, Infrastructure and Connectivity <CabSecTIC@gov.scot>; Permanent
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<[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; Sunderland RE (Rachel) <Rachel.Sunderland@gov.scot>; Wightman S (Scott) <Scott.Wightman@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Rogers D (David) (Constitution and Cabinet Director) <David.Rogers@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

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<SGLDInternationalTravelRegs@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]

<[Redacted]@gov.scot>; Covid-19 Director <covid-19.director@gov.scot>; Lamb C (Caroline)

<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

**Subject:** RE: Self isolation for contacts of positive cases and returning international travellers

## Hello Liz

We would need to change regulations for international travellers. Assuming announcement is in the morning of Friday 10 December, to come into effect Monday 14 December, we are confident we can combine the changes with the regular weekly update to travel corridors this week. We would still announce travel corridor changes as usual at 1700 on Thursday in that case, with a separate announcement for the isolation period change but both measures combined into one SSI to be signed on Friday.

#### [Redacted]

[Redacted]
Border Measures Review
Population and Migration Division
Directorate for External Affairs
Scottish Government

From: Lloyd E (Elizabeth) < Elizabeth.Lloyd@gov.scot>

**Sent:** 08 December 2020 15:13

**To:** Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice

<CabSecJustice@gov.scot>; Cabinet Secretary for Transport, Infrastructure and Connectivity

<CabSecTIC@gov.scot>; Permanent Secretary <PermanentSecretary@gov.scot>

**Cc:** DCMO Health COVID19 <DCMOHealth.COVID19@gov.scot>; Steedman N (Nicola) (DCMO) <Nicola.Steedman@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Hutchison D

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- <[Redacted]@gov.scot>: Covid-19 Director <covid-19.director@gov.scot>: Lamb C (Caroline)
- <Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

**Subject:** RE: Self isolation for contacts of positive cases and returning international travellers

Could officials advise if there is a need for any regulatory change - if this position is agreed, and if so how far in advance we would need to do that.

Liz

Elizabeth Lloyd Chief of Staff to the First Minister

St Andrew's House Regent Road Edinburgh EH1 3DG Tel: 0131 244 5647

Mobile: 07867 375 279 Elizabeth.Lloyd@gov.scot

Please note Scottish Ministers. Special advisers and the Permanent Secretary to the Scottish Government are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot for information.

From: Chief Medical Officer < CMO@gov.scot>

**Sent:** 06 December 2020 11:15

**To:** First Minister <firstminister@gov.scot>; Chief Medical Officer <CMO@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>: Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice

<CabSecJustice@gov.scot>; Cabinet Secretary for Transport, Infrastructure and Connectivity

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<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

**Subject:** RE: Self isolation for contacts of positive cases and returning international travellers

[Redacted],

[Redacted]

**Dr Gregor Smith Interim Chief Medical Officer for Scotland Scottish Government** 

Room 1E:02A St Andrews House Regent Road Edinburgh EH1 3DG Telephone: 0131 244 2799

Twitter: @DrGregorSmith

From: [Redacted] < [Redacted] @gov.scot > On Behalf Of First Minister

Sent: 05 December 2020 15:44

**To:** Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills <DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Cabinet Secretary for Justice

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Cc: DCMO Health COVID19 < DCMOHealth.COVID19@gov.scot>; Steedman N (Nicola) (DCMO)

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<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: RE: Self isolation for contacts of positive cases and returning international travellers

Hi [Redacted],

A note to say that FM is not entirely comfortable with this approach, in the main because FM doesn't understand why it is suddenly thought that this change is OK. What is the evidence? Grateful for some further detail on this point.

FM's main concern is that this will be seen as (and on the part of UKG, it may well be) driven by a desire to make arrangements easier for international travel.

Grateful if CMO, alongside colleagues, could digest the above and feedback on FM's points.

Thanks, [Redacted]

[Redacted]

**Deputy Private Secretary to the First Minister Office of the First Minister** 

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From: [Redacted] < [Redacted] @gov.scot > On Behalf Of Chief Medical Officer

**Sent:** 04 December 2020 16:22

To: First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for

Education and Skills < DFMCSE@gov.scot>; Cabinet Secretary for Health and Sport

<CabSecHS@gov.scot>; Cabinet Secretary for Justice <CabSecJustice@gov.scot>; Cabinet

Secretary for Transport, Infrastructure and Connectivity <CabSecTIC@gov.scot>; Permanent Secretary <PermanentSecretary@gov.scot>

Cc: Chief Medical Officer < CMO@gov.scot>: DCMO Health COVID19

<DCMOHealth.COVID19@gov.scot>; Steedman N (Nicola) (DCMO)

<Nicola.Steedman@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Lloyd E

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Cabinet Director) < David.Rogers@gov.scot>; [Redacted] < [Redacted]@gov.scot>; [Redacted]

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<Caroline.Lamb@gov.scot>; Kellet M (Michael) <Michael.Kellet@gov.scot>

Subject: Self isolation for contacts of positive cases and returning international travellers

PS/FM

PS/DFM

PS/Cabinet Secretary for Health and Sport

PS/Cabinet Secretary for Justice

PS/Cabinet Secretary for Transport, Infrastructure and Connectivity

PS/Perm Sec

CC list as above

# Aligning the self-isolation period for international arrivals and contacts of index cases from 14 days to 10 days

I am writing to update you on the outcome of a discussion between the 4 UK CMOs about the self-isolation period for international travellers and contacts of positive cases.

The UK CMOs are now confident that the self-isolation period for international arrivals from countries not on the travel corridor list can be reduced from 14 days to 10 days without significant increase in absolute risk.

This follows agreement between the UK CMOs to reduce the self-isolation period for contacts from 14 days to 10 days.

The UK CMOs agree that consistency between the isolation periods for international arrivals and contacts of positive cases would be prudent and reduce confusion.

Currently the 14 day period self-isolation for international arrivals starts from the day after a passenger leaves a non-exempt country, or territory or island. A non-exempt country, or territory or island is any country, or territory or island that is not on the travel corridors list. The proposed

change would reduce the self-isolation period to 10 from an international arrival departing a country or territory not on the travel corridor list.

The text of an accompanying public statement, agreed by all UK CMOs, is included below. It is the intent to announce and implement these changes together on the 14<sup>th</sup> December, subject to final agreement between the respective policy teams within each country, and to allow for necessary arrangements and changes to guidance to take place.

I am happy to answer any questions.

Dr Gregor Smith Interim Chief Medical Officer

## UK CMOs statement on the self-isolation period

"Self-isolation is essential to reducing the spread of COVID as it breaks the chains of transmission."

"After reviewing the evidence, we are now confident that that we can reduce the number of days that contacts self-isolate from 14 days to 10 days. People who return from countries which are not on the travel corridor list should also self-isolate for 10 days instead of 14 days.

"People who test positive should continue to self-isolate for 10 days from onset of symptoms or 10 days from point of taking a positive test if asymptomatic. We urge everyone to self-isolate when appropriate, it will save lives."

Chief Medical Officer for England, Professor Chris Whitty Chief Medical Officer for Northern Ireland, Dr Michael McBride Chief Medical Officer for Scotland, Dr Gregor Smith Chief Medical Officer for Wales, Dr Frank Atherton

[Redacted] CMO Team | Scottish Government | 1E.09, St Andrew's House, Regent Road, Edinburgh EH1 3DG

From: [Redacted] < [Redacted] @gov.scot > On Behalf Of First Minister

**Sent:** 29 September 2020 11:20

**To:** Chief Medical Officer <CMO@gov.scot>; First Minister <firstminister@gov.scot>; Cabinet Secretary for Health and Sport <CabSecHS@gov.scot>; Deputy First Minister and Cabinet

Secretary for Education and Skills <DFMCSE@gov.scot>; DCMO Health COVID19

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(Jason) <Jason.Leitch@gov.scot>; Crossman D (David) <David.Crossman@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] @gov.scot>; [Redacted]

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**Cc:** O'Connor N (Niamh) <Niamh.O'Connor@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Covid-19 Director <covid-19.director@gov.scot>; Wightman S (Scott) <Scott.Wightman@gov.scot>; Sunderland RE (Rachel) <Rachel.Sunderland@gov.scot>

**Subject:** RE: Submission: Assessment of modelling of testing to shorten isolation/quarantine periods

## [Redacted],

The First Minister made questions which I have marked in red of the submission. FM's initial view is that quarantine for a period of days followed by an early release test is an option we should pursue. FM thinks a negative test on arrival would make compliance with any period of quarantine even more difficult.

Regards

## [Redacted]

DPS/First Minister of Scotland

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From: [Redacted] < [Redacted] @gov.scot > On Behalf Of Chief Medical Officer

**Sent:** 17 September 2020 17:03

To: First Minister <firstminister@gov.scot>; Cabinet Secretary for Health and Sport

<CabSecHS@gov.scot>; Deputy First Minister and Cabinet Secretary for Education and Skills

<DFMCSE@gov.scot>; DCMO Health COVID19 <DCMOHealth.COVID19@gov.scot>; Nicholson

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Subject: Submission: Assessment of modelling of testing to shorten isolation/quarantine periods

Cab Sec/PO FM/PO DFM/PO

Please find attached advice from senior clinicians with advice on the issue of 'test to release': "Assessment of updated modelling of testing to shorten isolation and quarantine periods for COVID-19".

Best wishes,

[Redacted]

[Redacted] Private Secretary to CMO & DCMOs | St Andrews House | Regent Road | Edinburgh | EH1 3DG | M: +44 (0) 7880441808 | T: 0131 244 0634

Cabinet Secretary for Health and Sport

## ASSESSMENT OF UPDATED MODELLING OF TESTING TO SHORTEN ISOLATION AND QUARANTINE PERIODS FOR COVID-19

## **Purpose**

1. To set out the clinical assessment of updated modelling about the potential to use COVID testing to shorten isolation and quarantine periods, and the further data we think are required to inform Scottish decision making on this issue.

## **Priority**

2. Routine.

## Background

- 3. At the current time, people who share a household with a confirmed case of COVID-19, or who are identified as a close contact, are asked to self-isolate for 14 days. In addition, in some circumstances the whole household of a close contact is asked to self-isolate. Anyone who is arriving in Scotland from overseas must also self-isolate for 14 days, unless they have travelled from a country on the quarantine exemption list. The purpose of 14 day self-isolation and quarantine is to reduce the risk of a person who may have been exposed to COVID-19 developing and transmitting the disease to others.
- 4. 14 days is used as the large majority of cases of COVID-19 have an incubation period of 14 days or less. However, there are significant concerns about individuals' understanding of and/or ability/willingness to comply with the 14 day isolation period, and the social and economic impact that self-isolation can have. The Directors of Public Health have recently highlighted numerous examples of people arriving from countries not on the exemption list who have been going back to work or seeing family members indoors. It is unclear at this stage whether it is due to a lack of understanding of the need to quarantine or an unwillingness to comply, either in principle or for a period of as long as 14 days.

## Recent research on testing people who are required to guarantine to release early from isolation

- 5. A recent paper by the London School of Hygiene and Tropical Medicine (now published online) looked at how testing and a shorter quarantine period would compare with other approaches to reducing the risk of people arriving from other countries with COVID-19 causing transmission. The paper uses modelling and is based on a number of significant assumptions. It found that a quarantine period of 8 days on arrival with a PCR test on day 7 (assuming the test result 1 day after the test is taken) could reduce the number of infectious arrivals in the community by an average of 94%, compared to having no quarantine and no testing. By contrast, a 14-day quarantine period (our current approach for high risk countries) would reduce the number of infectious arrivals in the community by an average of 99%. [Redacted]
- 6. Another recent paper, by PHE, compared a single test at the airport on arrival in the UK, and no subsequent quarantine, with testing twice and a shortened quarantine. In summary, it found that, while only 7% of infectious arrivals would be identified by a test on arrival, 96% of infectious arrivals would be identified by testing on entry and again at day 8 with quarantine up

to day 10. It should be noted that this model relies on symptomatic cases **not** travelling to the UK (which is unlikely to be the case). There is also a risk that people getting a negative test on entry will believe that they are not infectious and will re-enter the community without waiting for the second test.

7. Overall, this new modelling work shows that a testing regime combined with a shorter quarantine period is <u>not</u> as effective in reducing the number of infectious arrivals in the community as 14 day quarantine on arrival. However, that is based on a high level of compliance with the 14 day period and, based on anecdotal evidence, that does not appear to be the case. Suggestions have been made that compliance may be higher with a shorter quarantine period, and therefore the overall impact of a shorter quarantine period combined with a testing regime may be higher than a 14 day quarantine period that is not properly complied with. There is, as yet, however, no actual evidence to support this.

## Testing close contacts to reduce disease transmission

- 8. The Scottish Government committed to testing close contacts in the Testing Strategy published on 17 August 2020. It is expected that this testing will begin once testing capacity allows.
- 9. A recent PHE paper used modelling to assess the effectiveness of isolation and testing of close contacts to reduce disease transmission.
- 10. While a 14 day self-isolation period reduced infection risk by 99%, the paper found that a 10 day isolation period with a test performed on day 8 would reduce infection risk by 95%.

## Compliance with self-isolation and quarantine

- 11. Recently modelling work has been undertaken in England to consider what role testing might play in enabling a shorter isolation period by mitigating to some extent the risk of people who are asymptomatic but infectious leaving self-isolation or quarantine. The theory being that a shorter quarantine period may lead to more people complying with the basic principle to self-isolate.
- 12. In Scotland, we do not have evidence about current levels of compliance with self-isolation or quarantine to inform a decision about relative risk in different approaches, and it is unclear whether people who do not comply with a 14 day self-isolation or quarantine period would comply with a 7 or 10 day quarantine. Any decisions about whether to use testing to reduce quarantine periods would need to be based on judgements balancing the different harms, and the risk appetite in relation to imported cases.
- 13. The travel industry, in particular, is keen to explore the use of testing at airports to reduce the 14 day quarantine period as they feel it is deterring people from travelling abroad. In their view, a reduction in the 14 days, combined with a negative test, would encourage more people to take flights and reduce the impact on the airline industry. It is worth noting that some other countries do adopt a test and release approach for people arriving at airports, though there has been a move by some to a more cautious approach. Further information can be provided on international comparisons if that would be helpful. [Redacted]
- 14. Officials have recently found out that the UK government is exploring introducing a test and release strategy for all passengers arriving from a country not on the quarantine exemption list. They are proposing a single test approach due to concerns about people not complying with even a shortened period of isolation if they test negative on arrival (though the counter to this is that you would also miss a reasonable proportion of positive cases who are arriving in the country). Passengers would be required to isolate for a period of days still to be determined (likely to be around 5-7) and then pay for a test if they wish to end their isolation early. Tests

would be expected to be carried out at private sector facilities and estimated to cost £60-100. There are a number of concerns and risks with this overall approach, but if they do proceed with any form of test and release, then this will likely put pressure on the Scottish Government to introduce something similar.

- 15. If Ministers wish to consider using testing to reduce the length of quarantine or self-isolation, there would be significant value in commissioning and funding a short study to improve our understanding of levels of compliance with self-isolation quarantine at the moment, and also to assess what proportion of those who are self-isolating or quarantining are infected. Such a move for quarantine would also be welcomed by airlines and airports as acknowledging their concerns. To that end, there have been discussions with representatives of the main commercial Scottish airports who have provided options for potential pilots for a test and release strategy. Those options are attached at Annex A.
- 16. A separate submission setting out options in relation to increasing the evidence base around compliance with isolation is being drafted and will be shared later this week. [Redacted]

## Conclusion

- 17. This recently updated modelling work builds on earlier evidence about the role testing could play in mitigating the risks of reducing quarantine and self-isolation periods. While 14 days still offers the safest approach for both quarantine and self-isolation, risks could be significantly mitigated, albeit not entirely, by effective testing.
- 18. If Ministers wanted to explore this further, there would be value in collecting more data, particularly about compliance with quarantine and self-isolation, and rates of infection in this group. Research of this type, however would need to be specifically commissioned and funded. Substantive considerations about the operational arrangements required to provide testing on a certain day to all of those quarantining or self-isolating would also be required, along with analysis of the impact on testing capacity and flexibility.
- 19. In light of the above, I would welcome Ministers views on whether they are content for officials to explore further the potential for a pilot to explore the potential risks and benefits of a test and release strategy.

Chief Medical Officer DATE

From: [Redacted] < [Redacted] @gov.scot > On Behalf Of First Minister Sent: 18 December 2021 14:51 To: [Redacted] <[Redacted]@gov.scot>; First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Covid Recovery < DFMCSCR@gov.scot>; Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; Cabinet Secretary for Finance and Economy < CabSecFE@gov.scot> Cc: Cabinet Secretary for Rural Affairs and Islands < CabSecRAI@gov.scot>; Minister for Public Health, Women's Health & Sport < Minister PHWHS@gov.scot>: Permanent Secretary <PermanentSecretary@gov.scot>; Thomson KAL (Ken) (Director-General) <Ken.Thomson@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; DG Education & Justice <dgej@gov.scot>; Mitchell E (Elinor) <Elinor.Mitchell@gov.scot>; Chief Medical Officer <CMO@gov.scot>; Smith G (Gregor) <Gregor.Smith@gov.scot>; Covid-19 Director <covid-19.director@gov.scot>; McLaughlin C (Christine) < Christine.McLaughlin@gov.scot>; Director of Culture. Major Events and Covid Co-ordination <DirectorofCultureMajorEventsandCovidCoordination@gov.scot>; Rogers S (Shirley) <Shirley.Rogers@gov.scot>; McAllan M (Mary) <Mary.McAllan@gov.scot>; Ogle G (Geoff) <Geoff.Ogle@fss.scot>; Laing SG (Shirley) <Shirley.Laing@gov.scot>; Director for Covid Business Resilience and Support < Director COBRAS@gov.scot>; Rogers D (David) (Constitution and Cabinet Director) < David.Rogers@gov.scot>; Gallagher S (Stephen) <Stephen.Gallagher@gov.scot>; Cumming A (Alison) Early Learning & Childcare <Alison.Cumming@gov.scot>; Kerr S (Stephen) (Social Security Director) <Stephen.Kerr@gov.scot>; McGillivray D (Donald) <Donald.McGillivray@gov.scot>; O'Connor N (Niamh) <Niamh.O'Connor@gov.scot>; Nicholson J (John) <John.Nicholson@gov.scot>; Somers J (John) <John.Somers@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Johnston ATF (Alan) <Alan.Johnston@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Liddle JP (JohnPaul) <JohnPaul.Liddle@gov.scot>; [Redacted] <[Redacted]@gov.scot>; Anson S (Sam) <Sam.Anson@gov.scot>; Drought A (Andrew) <Andrew.Drought@gov.scot>; DCMO Health COVID19 < DCMOHealth.COVID19@gov.scot>; Ellis G (Graham) < Graham. Ellis@gov.scot>; [Redacted] < [Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]< [Redacted]@gov.scot>; Barugh J (Jennie) <Jennie.Barugh@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; [Redacted]< [Redacted]@gov.scot>; [Redacted] <[Redacted]@gov.scot>; McAllister C (Colin) <Colin.McAllister@gov.scot>; McCaig C (Callum)

[Redacted],

FM is broadly content with the below – however would like to briefly touch on the first point at tomorrow's Gold meeting.

<CommunicationsHealth&SocialCare@gov.scot>; Higgins K (Kate) <Kate.Higgins@gov.scot>

Ken – grateful if this can be factored into any planned Agenda/discussion points etc.

Subject: RE: Test and Protect - Omicron Strategic Priorities - 17 December 2021

<Callum.Mccaig@gov.scot>; Communications Health & Social Care

Thanks, [Redacted]

[Redacted]

**Deputy Private Secretary to the First Minister Office of the First Minister** 

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From: [Redacted] < [Redacted] @gov.scot>

Sent: 17 December 2021 23:18

To: First Minister <firstminister@gov.scot>; Deputy First Minister and Cabinet Secretary for Covid

Recovery < DFMCSCR@gov.scot>; Cabinet Secretary for Health and Social Care

<CabSecHSC@gov.scot>; Cabinet Secretary for Finance and Economy <CabSecFE@gov.scot>

Cc: Cabinet Secretary for Rural Affairs and Islands < CabSecRAI@gov.scot>; Minister for Public

Health, Women's Health & Sport < Minister PHWHS@gov.scot>; Permanent Secretary

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Subject: Test and Protect - Omicron Strategic Priorities - 17 December 2021

PS/First Minister
PS/Deputy First Minister
PS/Cabinet Secretary for Health and Social Care
PS/Cabinet Secretary for Finance and the Economy

CC: Cabinet Secretary for Rural Affairs and Islands

## Minister for Public Health, Women's Health and Sport

Priority: Urgent

Please find the attached submission setting out:

- a recommendation to accept NIMT advice of 16 December that proposes prioritising two
  public health objectives protecting the vulnerable and dampening population level
  transmission and changes to the model of contact tracing for implementation from
  Monday 20 December to meet those objectives in light of rising case numbers;
- a proposed approach to Critical National Infrastructure (CNI) Exemptions to minimise the impacts of isolation on key sectors and to improve the sustainability of the exemptions process;
- a direction of travel for isolation policy in light of the anticipated uptake of 'booster' vaccinations, subject to further evidence on vaccine efficacy

Kind regards,

[Redacted]

[Redacted]| Head of Contact Tracing and Supporting Isolation Policy | Testing and Contact Tracing Policy Division | COVID Public Health Directorate| DG: Health & Social Care | Scottish Government |

m: [Redacted]|email: [Redacted]@gov.scot

Pronouns: [Redacted]

#### 5.1 Document 5.1 - Attachment to Document 5

First Minister
Deputy First Minister
Cabinet Secretary for Finance and the Economy
Cabinet Secretary for Health and Social Care

## **CONTACT TRACING AND ISOLATION POLICY - NEXT STEPS**

## **Purpose**

[Redacted – out of scope]

 moving to a policy position, once a high proportion of the population (eg 80% of those eligible) have received their booster vaccine, of household contact isolation no longer being required on receipt of a negative PCR test if triple vaccinated and asymptomatic.

[Redacted – out of scope]

## **Isolation Policy Next Steps**

- 1. In light of the emerging evidence on the reduction in vaccine efficacy against symptomatic disease in Omicron, and increased household transmission, isolation policy changed on 11 December to require all household contacts of confirmed cases to isolate for ten days, irrespective of vaccination status, age, or PCR result.
- 2. Significant efforts are underway to accelerate the booster campaign, with the stated aim that 80% of the eligible population will have received their booster by the end of December 2021.
- 3. Evidence is still building on the vaccine efficacy of third doses against Omicron infection, symptomatic disease, hospitalisation and death. Early data from the most recent UKHSA Vaccine Surveillance report of 16 December<sup>1</sup> indicates that while vaccine effectiveness against symptomatic disease with the Omicron variant is significantly lower than compared to the Delta variant, nevertheless, moderate to high vaccine effectiveness of 70 to 75% is seen in the early period after a booster dose.
- 4. If this evidence continues to build, it may support reverting the current isolation policy for household contacts to a position where household contacts who are vaccinated with three doses are no longer required to isolate once they receive a negative PCR result. Given ongoing risks of transmission, these contacts would be advised to remain vigilant for symptoms, test regularly with LFDs, and avoid vulnerable places and people for the duration of what would have been their isolation period.
- 5. This position could be reached as soon as early-mid January. In the meantime, to balance economic and social harms of isolating large parts of the population, we could maximise the

<sup>&</sup>lt;sup>1</sup> COVID-19 vaccine surveillance report - week 50 (publishing.service.gov.uk)

current exemptions policy of using daily contact testing as an alternative to isolation to support the resilience of critical national infrastructure (widely defined) and the sustainable operation of public services.

- 6. The initial view of the Chief Medical Officer and advice from several Directors of Public Health is that isolation for 10 days is, in general, preferable to daily testing as an approach to containing infection. CMO has indicated though that with the potential for huge amounts of contacts being asked to isolate due to modelled numbers, there may be a point where daily testing as an alternative is necessary for system resilience.
- 7. The two key concerns regarding the feasibility of daily testing as an alternative to isolation and maximising this for critical national infrastructure sustainability are 1) whether the delivery channel logistics, including online ordering, would be sufficiently robust to enable those exempt to access the tests they require, and 2) whether the supply of LFD tests available in the country would be sufficient.

[Redacted – out of scope]

#### Recommendations

[Redacted – out of scope]

- at the point where 80% of the eligible population have received their booster vaccination, note the recommended direction of travel of removing the requirement for household contacts to isolate, subject to further evidence on vaccine efficacy and further advice nearer that point in time; and
- agree to the introduction of sector based exemptions for CNI industries to
  minimise the impacts of isolation on key sectors and improve the sustainability of
  the current exemptions process, noting that officials will take forward guidance
  to be agreed with Cabinet Secretaries with lead portfolio interest for each sector.

[Redacted]
Testing and Contact Tracing Policy Division
17 December 2021

[Redacted – out of scope]