

Minutes of SPI-M meeting: 28 June 2023

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Meeting details

The meeting was held on 28 June from 3pm to 4.30pm on Microsoft Teams.

The co-chairs were Graham Medley (academic chair) and Thomas Waite (executive chair).

Attendees

From the Scientific Pandemic Infections group on Modelling (SPI-M):

- Daniela De Angelis
- Marc Baguelin
- Paul Birrell
- Declan Bradley
- Ellen Brooks-Pollock
- Andre Charlett
- Louise Dyson
- Jessica Enright

- Thomas Finnie
- Christophe Fraser
- Julia Gog
- Michael Gravenor
- Ian Hall
- Thomas House
- Rowland Kao
- Matt Keeling
- Nick Watkins

Observers:

- John Bates (Department of Health and Social Care (DHSC))
- Sarah Deeny (UK Health Security Agency (UKHSA))
- Nick Taylor (Office for National Statistics (ONS))
- Richard Vipond (UKHSA)

There were an additional 16 observers whose names have been redacted as well as 8 members of the secretariat.

Participant apologies:

- John Edmunds
- Neil Ferguson
- Christophe Fraser
- Adam Kucharski
- Steven Riley
- Chris Robertson

Christopher Williams

Introduction

This meeting marked what was expected to be Graham Medley's last SPI-M meeting as co-chair, and Graham was thanked for his significant contributions as co-chair of SPI-M and SPI-M-O.

The chairs noted that some participants may be receiving media attention due to the ongoing COVID-19 Inquiry hearings and reminded participants of the support available to them should it be needed.

The chairs invited comments by email on the minutes circulated from the previous meeting.

Avian influenza updates

Following presentations at the last meeting, DHSC policy leads and UKHSA provided an update on pandemic preparedness in relation to the risk posed by H5N1 avian influenza and testing within the UK for H5N1 avian influenza.

The DHSC policy update covered priority work areas on countermeasures to be used in the event of a pandemic.

The UKHSA update gave an overview of their diagnostics capabilities and asymptomatic testing programme. The diagnostic capabilities included a summary of the types and quantities of testing available. SPI-M participants discussed the choice of individuals for testing and where a human transmissible strain may emerge from. Participants provided feedback that when R is low ineffective tests can still be effective at breaking transmission chains.

UKHSA noted that a technical briefing of the asymptomatic testing study design was due to be released shortly which would enable academics to review the approach in full.

Centre for Pandemic Preparedness (CPP) updates

The CPP provided 2 updates on programmes of work in development, starting with the 'pandemic phases framework'. The CPP introduced the existing phases under consideration and, for each phase, gave information on:

indicators for the phase

- the data likely to be available
- markers of a successful response

The CPP invited comments from participants on areas for improvement, barriers to decision making in movement between phases and additional data that would have been helpful during COVID-19.

Participants noted the need to clearly demonstrate that the phases were not necessarily sequential and movement back to a previous phase was possible. It was also noted that good surveillance would be necessary to determine whether containment was possible even after human to human transmission had been established.

Participants commented that they were pleased to be engaged in this work and saw value for UKHSA in collaborating with specialists in disease dynamics.

Action: SPI-M secretariat to share the 'data lessons learned' paper with the CPP.

The second update by the CPP covered work on 'guiding lights' principles for a future pandemic. The CPP explained that these are to provide a high-level short list of principles for consideration in decision making for an unknown future pandemic. The CPP invited feedback on whether these were the right points to consider and what might be missing.

Several participants expressed a view that modelling benefited from having a clearly defined objective function determining how the needs of different groups are to be balanced. Participants also suggested the need to consider the future implications of decisions taken at different stages in a pandemic and what information policy makers would need.

Action: SPI-M participants were invited to submit further comments on both areas of work by email over the summer.

Winter planning scenarios

UKHSA introduced work on winter planning scenarios for 2024 commissioned by DHSC, explaining that this work focussed on the impact on hospitals. UKHSA requested views from SPI-M participants on:

the expected trends in respiratory syncytial virus (RSV) and flu

- pressures from COVID-19 cases
- the degree of independence between the peaks of different diseases

Participants noted the high number of strep A cases last year and that this was potentially caused by an increase in the number of swabs being taken; this would suggest an impact on primary care, but not on hospitals. Participants also noted work conducted in Manchester considering the cumulative cases of RSV (respiratory syncytial virus) over the previous 2 years, which roughly matched expectations, suggesting a reduced likelihood of a surge in cases next year.

Participants discussed the strength of evidence on seasonal flu severity from the Southern hemisphere and agreed that previous work suggested this had limited predictive power.

Participants had differing views on the degree to which the peaks in diseases would be independent of one another. However, they recommended that previous papers by the Scientific Pandemic Influenza Group on Modelling, Operational sub-group (SPI-M-O) discussing this issue may be of value.

Participants suggested that these questions would also be of interest to the wider scientific community.

ACTION: SPI-M Secretariat to circulate UKHSA's winter planning scenario questions to participants for further comment.

It was agreed that developments in this area of work would be reviewed again in September.

Any other business

The chairs thanked SPI-M participants for their input throughout the academic year. The next meetings are expected to take place in September and November. Overall meeting frequency is expected to reduce slightly for the following year.

A new version of the 'Social gatherings' paper is to be circulated in due course. Participants were thanked for their contributions to this paper.

The government chair expressed a desire to see any early work on the impact of non-pharmaceutical interventions and vaccines on hospitalisations and deaths, and thanked participants who had already shared their work.

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