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From: (10)(2e) (10)(2e)
Sent: Thur 5/21/2020 8:54:17 AM
Subject: OFFICIAL: RE: modelling work RIVM Dutch Caribbean, for PHE internal use; please do not circulate further
Received: Thur 5/21/2020 8:56:01 AM
[Note for UKOTs.docx](#)
[UKOT COVID-19 modelling summary_23March2020.pdf](#)
[ModellingEpiBriefing16042020PHE.docx](#)

OFFICIAL

Dear (10)(2e), many thanks for your email and apologies for my delay in replying.

Thank you for this, I will take a look through.

In return (for internal consultation only!), here is what we have produced.

Note for UKOTs: this was the original work done by our national modelling team for the smallest population size they could run their model to and give robust parameters.

UKOT COVID-19 modelling summary: this summarised the above in a more accessible way and included key findings from the Imperial paper guiding the UK response about intervention impact which was published then.

ModellingEpiBriefing: this is some information sent to our UK stakeholders to update once the impact of social distancing etc was a bit better understood and in the context of what was being seen in the territories at that time.

The territories used these with some data from UK NHS patients on length of hospital stay etc. to work out expected peak healthcare capacity/demand and a rough impact of interventions like social distancing given how early on these were implemented in the territories. This was then corroborated by colleagues in Ministry of Defence who did more detailed medical planning modelling and came up with similar figures.

Given there are now very few active cases across our territories, we are focussing now on helping them assess phasing the lifting of their lockdown through analysis of their lab data and % positive now they are starting to screen a sample of individuals and their local epidemiology. Some of (10)(2e) have been looking at locally calculating the time-varying reproductive number using the EpiEstim R package. There is a nice summary by colleagues in Jersey below:

<https://www.gov.je/SiteCollectionDocuments/Health%20and%20wellbeing/R%20Estimates%20of%20Rt%20preliminary%20report%20Statistics%20Jersey.pdf>

But as mentioned we are also encouraging looking at a range of epi-measures such as doubling times, % cases outside of known clusters and severity to fully inform risk assessments.

I look forward to further discussing and sharing experiences!

Best wishes

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Dear (10)(2e)

Thank you for your thoughts this morning, it was good to hear about your experiences with modelling (and testing) on the small islands.

Enclosed is a selection of my slides; needless to say, they are for internal consultation only.

Best regards,
(10)(2e)

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