

There have been concerted efforts to conduct mass testing, which to-date have been actively repelled by those of us at CPS, namely because of the low accuracy of rapid tests at present, and the wider dearth of PCR capacity on the island. I suspect that there are financial agendas behind these proposals, and fully expect mass testing to be continually pushed from various actors for the duration of the outbreak.

Caseload and Trends

Upon arrival, the caseload was on an upward trajectory (20 per day), but since the recommendation and implementation of additional public health measures on the 15th August (nightlife closures), and in spite of a limited nightlife reopening on the 15th September, cases have remained relatively flat for some time (trending ~3-5 per day). We expect an increase in the number of cases as we move into the tourist season, and as nightlife interventions are scaled back at some point in the future.

CPS

In general, the AMI staff and Dutch staff working at CPS have been of enormous help, particularly early on in the 2nd wave when local staff did not have the additional resources to manage the caseload. During this time and beyond, we have managed to refine data entry, processing and flow, complete regular follow-up of cases and contacts, follow up clusters and advise workplaces accordingly, conduct more timely contact tracing, update health guidelines, conduct outreach (live radio and in-person), train local staff and produce numerous reports for Ministers and Dutch stakeholders. These inputs have helped steer the COVID-19 response in a positive direction. NB: Local staff respond well to incremental change, engagement and empowerment. Active listening and collaboration is key.

As cases have since subsided, core staff are now returning to their original roles (Baby Clinic/ Health Promotion etc.) while leaving the AMI/ Dutch team to coordinate more of the COVID-19 response. That said, some core staff remain in roles central to COVID-19 response, and we are cross-training all core staff on the various aspects of the response: call centre (914), testing, source and contact tracing, isolation/ quarantine follow up, data entry and data manipulation using GoData.

There is planned recruitment of additional core human resources for CPS by the end of the year. While the lower skillsets might be easier to source, recruitment of the higher skillsets (e.g. nurses for contact tracing) might prove difficult, especially as I hear the wage on offer is not particularly high (slightly above minimum wage). Also, the timelines for recruitment are often cited as months rather than weeks. I suspect that these lead times can be reduced where central government processes can be avoided.

Hospitalisations

AMI staff are now working in a purpose-built COVID-19 'hospitainer' since transitioning from a much smaller temporary structure (tent), where they care exclusively for COVID-19 patients. I am of the understanding that the case definition used to admit patients is relatively broad, so there is a chance that the beds allocated for 'persons under investigation' will fill quickly. I have sent across the CPS case definition to ensure alignment and reduce the burden on the AMI clinical team. The rate of hospitalisations, morbidity and mortality have been significantly lower during the 2nd wave.

Labs

There are two laboratories on the island, SLS and HCLS. SLS is the designated public health lab, HCLS is private. By law, all public health samples must be sent via SLS, even if processing is then outsourced to HCLS. SLS charge a fee per sample for this service.

There have been constant bottlenecks with this process, largely due to late payment to the labs and communication in silo. Relations between the two labs and government are sometimes strained. Many conversations have taken place, often in parallel. We are doing our best to bring these conversations together.

Capacity is now at around ~240 per day; 200 at HCLS; 40 at SLS.

On 15 Oct 2020, at 18:39, [REDACTED] <[REDACTED]> wrote:

Dear [REDACTED]

Once again, thank you very much for your information and frankness! Would it be possible to for you to send me a few bullets with lessons learned since you are on the island. I will only use it for internal use. I won't communicate to larger groups.

Kind regards,

[REDACTED]

Verzonden met BlackBerry Work
(www.blackberry.com)

Van: [REDACTED] <[REDACTED]> <[REDACTED]> <[REDACTED]>

Datum: donderdag 15 okt. 2020 5:24 PM

Aan: [REDACTED] <[REDACTED]> <[REDACTED]>

Kopie: [REDACTED] <[REDACTED]> <[REDACTED]>

Onderwerp: Re: Update

Hi [REDACTED]

My phone just sent me a missed call - I am also on Zoom.

Best wishes,

[REDACTED]

On 15 Oct 2020, at 16:03, [REDACTED] <[REDACTED]> <[REDACTED]> wrote:

Dear [REDACTED]

Just writing to let you know that I am online.

If WhatsApp does not work, we can use the Zoom link below.

Best wishes,

[REDACTED]

[REDACTED] is inviting you to a scheduled Zoom meeting.

Topic: [REDACTED] Personal Meeting Room

Join Zoom Meeting

[REDACTED]

Meeting ID: [REDACTED]

Passcode [REDACTED]

On 15 Oct 2020, at 03:01, [REDACTED] <[REDACTED]@gmail.com> wrote:

Hi [REDACTED]

Yes, tomorrow at 11:00 works for me - and happy to video call via WhatsApp [REDACTED]

I will wait for your call then.

Best wishes,

[REDACTED]

On 14 Oct 2020, at 08:27, [REDACTED] <[REDACTED]@minvws.nl> wrote:

Hi [REDACTED]

That is not possible for me. 17hrs/11hrs? Is that an option for you? Shall we VC via whatsapp? In that case I need your mobile number.

Best,

[REDACTED]

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(www.blackberry.com<<http://www.blackberry.com>>)

Van: [REDACTED] <[REDACTED]@gmail.com> <[REDACTED]@gmail.com> <[REDACTED]@gmail.com>>

Datum: woensdag 14 okt. 2020 12:02 AM

Aan: [REDACTED] <[REDACTED]@minvws.nl> <[REDACTED]@minvws.nl> <[REDACTED]@minvws.nl>>

Kopie: [REDACTED] <[REDACTED]@minvws.nl> <[REDACTED]@minvws.nl> <[REDACTED]@minvws.nl>>

Onderwerp: Re: Update

Dear [REDACTED]

Apologies for the delay, it has been very busy today.

Certainly happy to discuss, though could we push back to 13:00 BST (14:00 CET) on Thursday 15th?

Best wishes,

[REDACTED]

On 13 Oct 2020, at 07:50, [REDACTED] <[REDACTED]@minvws.nl> <[REDACTED]@minvws.nl>>

Dear [REDACTED] 5.1.2e

Yesterday AMI called me in for an impromptu call on lab capacity. I gave some of the existing context, and suggested that they cost their lab on the basis of single unit cost per BD Max, along with the necessary test kits, reagents and human resources. This could then easily be multiplied up to cover whatever demand St Maarten needs.

I also suggested that they provide a couple of different models, such as a loan-based system, as well as one that increases capacity sustainably for the long-term.

They also mentioned that they knew I need to fly home for a period of time (this was the first time I had heard of this). I now realise that this may have come from VWS as a means to explain the flight home at the end of my contract. My response was that from a working perspective, I do not need to be in the UK (I cited my reduction in hours with Imperial College). However, I did not speak to a personal perspective, so this remains a possible reason for my flight home.

Happy to discuss any of the above.

Best wishes,

[REDACTED] 5.1.2e