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# STATES OF JERSEY



## **SAFER TRAVEL GUIDELINES REVIEW: INTERIM REPORT (S.R.2/2020) – RESPONSE OF THE MINISTER FOR HEALTH AND SOCIAL SERVICES**

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**Presented to the States on 16th September 2020  
by the Minister for Health and Social Services**

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**STATES GREFFE**

**Introduction:**

I welcome the Panel's interim review of the Safer Travel Guidelines and thank members for the opportunity to comment and respond to the Report's findings and recommendations.

**Findings:**

	<b>Findings</b>	<b>Comments</b>
1	Members were not afforded adequate time to properly consider P.84/2020 and the information contained within the report was conflicting and inadequate.	<p>The Assembly was asked, and agreed, to debate the proposition at the sitting commencing 1 July, following lodging on 25 June.</p> <p>It is not accepted that the information provided in the report was conflicting or inadequate. The Panel report identifies a minor discrepancy as to whether pre-departure certification would be accepted 72 hours from departure to or arrival in Jersey. It is unreasonable to take this as a basis for the claim that the Council of Ministers' report in support of P.84/2020 was conflicting or inadequate.</p>
2	The Council of Ministers had already decided on the format and content of the Guidelines without any input from the Assembly (including its Scrutiny Panels).	Guidelines are developed by the relevant policy team and are normally signed off by the Consultant in communicable disease control/Deputy MOH as the majority have an infection prevention/control aim. Consultation with STAC is often part of the process. Such guidelines would be based on the Consultant's medical and public health professional opinion and informed by international evidence and epidemiology, including the spread of the virus in Jersey. The draft guidelines were published to help inform the debate and interpret the Safer Travel policy.
3	Although P.89/2020 (as amended) improved the Council of Ministers' original proposition, it still relies heavily on guidelines that are outside of the direct influence of the Assembly (including its Scrutiny Panels) and on the goodwill of arriving passengers to follow self-isolation rules rather than compulsion of law.	<p>The requirement to follow extra testing and self-isolation rules extends from the Safer travel policy (P.84/2020). P89/2020 is given effect through the border testing programme, policy and guidance established by P.84/2020.</p> <p>Where self-isolation is required, it is monitored through a Monitoring and Enforcement team, which includes Police and Authorised Officers (Environmental Health Officers), who have legal powers. Individuals who fail to adhere to self-isolation requirements may be subject to a fine of £1,000.</p>
4	While the integrity of STAC is not in question, until recently its composition was not clear. It is perceived by the public as a medical advisory body whereas in reality it could also have other policy advisors as part of its membership depending upon the advice being sought. It is also unclear whether STAC can offer	<p>The membership and terms of reference (ToR) for STAC were published in the <a href="#">COVID-19 Strategy</a> on 3 June and make clear that the Cell is not a solely medical body.</p> <p>The ToR set out that <i>STAC ensures that coordinated, timely health, scientific and technical advice is made available to decision makers during emergencies</i>. This establishes a duty on STAC <i>to ensure</i> that advice is provided, and not only to respond to requests for advice.</p>

	Government unsolicited advice or whether it can only respond to government proposals.	
5	The balance of evidence from public hearings and STAC advice can be interpreted as the Government placing economic interests (e.g. flight connection) above the health of Islanders when considering whether or not to open the borders and issue the current guidelines.	The Government's COVID-19 strategy is to respond to the pandemic in a way that causes the least overall harm to Islanders. Both Ministers and the advice received from STAC are clear that economic factors and the ability to reconnect with wider family are directly linked to Islanders' individual and public health and wellbeing. The COVID-19 strategy was based on a balance of health and wellbeing factors for Islanders; the MOH and STAC have provided professional medical advice throughout its development and, as clinicians, the health and wellbeing of Islanders is their top priority.
6	The potential number of COVID-19 cases that will be detected from incoming passengers appears to be incorrect, casting doubt on the risk assessment used to justify the guidelines. This evidence was also used in the debate regarding safer travel propositions.	The government shared, in briefings and press commentary, an estimate of the potential for onward infection, of around 1 case per 7,000. This assessment was explained in a letter to Scrutiny on 27 May. It did not claim to be an assessment of the likelihood of detecting positive cases. The estimate of potential infection was calculated by the Deputy MOH, based on local and international data.
7	Faster and higher-capacity testing is due in August. Definite dates are not yet available.	<p>Faster and higher capacity testing will be achieved by a new on-island laboratory. This lab is now in place, installation is complete and clinical validation is progressing. The new on-island lab will be fully operational in September.</p> <p>In advance of the on-island laboratory becoming active, actions have been implemented which have reduced the turnaround times of tests, in particular to reduce transport times for tests which are sent to the UK for processing.</p>
8	The border may have been opened too soon, as the risk of an incoming passenger spreading COVID-19 would be reduced through faster and higher-capacity testing and the Monitoring and Enforcement Team was not yet in place.	<p>The nature of available testing was made clear when the Assembly voted to support the introduction of the Safer Travel policy from 3 July.</p> <p>Monitoring and enforcement activity was underway across more than one team, working closely together – including Environmental Health, the Contact Tracing Team, Honorary Police and States of Jersey Police. The establishment of a unified monitoring and enforcement team was a sensible operational improvement, but was not the start of this activity.</p> <p>To give an idea of the scale of the activity, 3,598 monitoring and enforcement actions were undertaken between 12 and 18 August, consisting of proactive visits, phone calls and e-mails.</p>
9	The level of accessibility of the Guidelines is mixed. While information is available in other languages, the pre-departure registration and declaration form is only available online making it difficult for those without access to, or unfamiliar with, computer technology to access.	<p>The vast majority of travel is booked online, making it reasonable to make use of an online pre-departure registration and declaration.</p> <p>Anyone needing support with pre-departure registration and declaration can phone the Helpline, which will complete the form for them.</p>
10	The Government is projecting that up to 110,000 passengers will visit Jersey by the end of August.	Forward passenger projections are prepared by Ports of Jersey. These are adjusted based on actual numbers arriving.

		Ports of Jersey and Government continue to work closely together to share information about potential demand in order to ensure the testing programme has sufficient capacity and is available for arriving passengers.
11	The Government has put a flexible set of guidelines in place with systems that can easily adapt to changes in Ministerial direction, such as decreasing the time between follow-up text messages or requiring quarantine for passengers awaiting test results.	The Safer Travel policy is intentionally adaptive. It is important to note the comment in response to finding number 2 (above) regarding the provision of guidance.
12	The Government's rating system relies on UK data, rather than Jersey-specific data. This leads to a favourable rating for the UK which may endanger Islanders.	<p>The risk assessment of countries made some use of UK data in the first iterations. More consistently, the primary quantified consideration has drawn on data from the European Centre for Disease Control (ECDC) and local analysis.</p> <p>While the first iteration did draw a parallel between UK safe travel provisions and Jersey's green rating, subsequent iterations have since departed from this alignment. For example, Jersey moved earlier than the UK to re-classify the risk posed by France; and departed from the UK position in risk assessing Spanish islands separately from the mainland. There is no UK equivalent to the regional risk assessment recently introduced by Jersey for the UK, France and Republic of Ireland.</p>
13	The majority of the 39 responses received by the Panel's call for evidence are of the opinion that incoming passengers should be required to self-isolate whilst awaiting test results, with many also citing fear of a second wave and the mental health implications that this would bring. A minority of respondents are supportive of the Government's Guidelines.	<p>Understandably, different Islanders will hold differing opinions and will have different levels of enthusiasm in terms of communicating those opinions. Whilst I understand that some individuals will not agree with the medically-advised Government guidelines, this is a small and self-selecting sample.</p> <p>Information regarding numbers of tests completed and positive cases is published daily, along with other Government communications regarding staying safe and well, in order to assist Islanders to understand the level of risk associated with COVID-19 in Jersey.</p>
14	Island nations are approaching entry and quarantine requirements differently the world over and there is no one size fits all policy. However, it is clear that Jersey is in the minority in this sample in allowing incoming passengers into the community without a negative test result.	By investing in a world-class testing and tracing system, Jersey is able to better contain the spread of COVID-19, allowing Islanders and visitors to enjoy greater freedoms while protecting public health.

### Recommendations:

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
1	Any proposition coming to the Assembly must not be taken as a fait accompli and all relevant consequential information should be provided to the Assembly (including its relevant Scrutiny	MHSS	Partially accept	This is accepted and was adhered to in this situation to the fullest extent possible in the circumstances. It is of course true that matters may require urgent consideration and it is for the Assembly to determine its business in any given situation. The Minister does	

	Panels) accurately and with an appropriate amount of time for review.			not consider any Proposition he brings to the Assembly as a fait accompli.	
2	The Government should monitor and report on compliance with the Guidelines to Scrutiny and the wider Assembly and, if passengers are not complying, change the wording from <i>should</i> to <i>must</i> .	MHSS	Partially accept	Government will be happy to share monitoring information with Scrutiny. Conclusions drawn from that information will depend on the findings at the time.	
3	The independent role of STAC, its composition and its relationship to Government must be clear and transparent to avoid any perception of undue influence. Consideration should be given to having a separate medical advisory body to that of policy advisers so that their views are separately recorded and the Government should publish how all decisions have been reached, what part all groups involved have played and the reasons the Government has either agreed or disagreed with the expert advice. The medical advisers should also be able to give the Government unsolicited advice on medical matters in addition to responding to policy proposals from policy advisers.	MHSS	Reject	Clearly STAC must perform its role in a clear and transparent manner. The Panel's report notes that the Chair of STAC is confident that this is presently the case.  While consideration can be given to a medical advisory body, a public health emergency response requires a synthesis of clinical medical advice and wider public policy advice.  Under the STAC ToR, the Cell is able to commission its own research, while there is also a duty on STAC <i>to ensure</i> that advice is provided; it is therefore not only responding to requests for advice.	
4	The Guidelines should require all incoming passengers to Jersey to isolate in Government-provided facilities until they have received a negative test result.	MHSS	Reject	The States Assembly rejected this proposal. Guidance is under continual review but, as yet, the Government has not been advised to make such a change.	
5	If the Government is to continue with its position of not requiring isolation whilst awaiting test results under the Guidelines, then every resource should be put into increasing on-Island testing capacity and reducing test turn-around times.	MHSS	Accept	Improved testing, tracing and isolation monitoring resources are in place and improvements continue to be made.	
6	The Government should make the pre-departure registration and declaration forms available in a non-computerised format.	MHSS	Accept	Individuals are already able to provide this information if they do not have a computer, by telephoning the Helpline, which will input the information for them. Information on paper forms would have to be input into the IT system with the process much slower and less efficient than calling with the information.	
7	The Government should reduce the time between follow-up text messages for those that do not respond from 3 days to 1 day.	MHSS	Reject	Text messages are sent daily.  There may be instances where an individual is unable to respond on a particular day, or where they intend to reply but then forget to do so. If an individual fails	

				to respond for three days, a telephone call is made. If additional intelligence suggests the need for earlier intervention then this is undertaken.	
8	The Government's rating system should be independent of UK data.	MHSS	Accept	The risk assessment of countries and districts within them is an entirely independent judgement informed by a wide range of public health evidence.	

**Conclusion:**

I am pleased to accept the majority of the Panel's interim findings and recommendations and thank the members of the Panel for their interest in this important area. The testing and tracking arrangements, alongside the Safer Travel guidelines, have helped the Island contain the spread of Covid-19, while allowing Islanders and visitors to enjoy greater freedoms at the same time as protecting public health. However, I am not complacent and continued vigilance will be required, with arrangements under constant review by STAC and our public health team. I look forward to assisting the Panel with its continuing review.