

MINUTES OF THE MEETING

DATE: 22/07/2020

HOURS: 16h-18h

AGENDA	DISCUSSION	DECISION/TO DO
1. Approval agenda and report		
1.1. Report Previous meeting (<i>approval</i>)		<ul style="list-style-type: none"> Report approved
1.2. Agenda (<i>approval</i>)		<ul style="list-style-type: none"> Agenda approved
1.3. RMG Dashboard (<i>information</i>)		
2. Situation overview (information)		
3. Prevention		
4. Surveillance and detection		
4.1 IFC Testing & Tracing (<i>information/discussion – Karine Moykens</i>)	<p>A state of play of the contact tracing was presented by the coordinator of the IFC Testing & Tracing.</p> <ul style="list-style-type: none"> In general, contact tracers are able to reach most of the individuals concerned. However, contact details of a minority are missing, which complicates the tracing process. Additionally, the data shows that the number of contacts stabilizes around 4 reported per contact which is clearly to less and not in line with the expanding contact bubble. Moreover, the traced contacts have not yet been matched with their respective COVID-19 test, thus it remains unknown whether traced individuals tested positive or not. Calls with returning travelers from red zones and thus considered high risk 	<p>The RMG takes note of the update on contact tracing by the coordinator of the IFC Testing & Tracing: an overview of the recent achievements and the upcoming challenges. The RMG follows the advice of Celeval to choose NUTS 2 regarding the PLF's for travelers, except NUTS 3 in the case of travelers returning from France, Spain, Portugal. The RMG agrees upon the PLF-procedure that everyone who stayed in or visited a red zone the last 14 days has to be tested and go in quarantine upon return.</p>

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	<p>contacts are currently not registered amongst the listed high risks.</p> <ul style="list-style-type: none"> • Recent updates of the digital PLF will facilitate the tracking and reporting of highrisk passengers and contacts of indexcases during travel.. The system had some functional problems but there were no data lost. Currently additional efforts are made to further secure and support the system. • In the next weeks the system should provide more frequent and adequate information exchanges with Sciensano in a more efficient manner. Functions will be added to collect the 'whereabouts' of contacts as to locate clusters. • The question was raised whether <ol style="list-style-type: none"> (1) passengers should be able to provide location information based on NUTS-2 or NUTS-3 (the latter currently solely for France, Spain & Portugal) details and (2) what period that needs to be taken into account; (cfr. sending a message to travelers from a 'red zones' to be quarantined and tested mandatory); the system will ask travelers to report where they stayed/which places they visited with also mentioning the time period and this during the 14 days before traveling to Belgium. • The federal Cabinet did not consider it appropriate to send also quarantine and test messages to travelers coming from an orange zone (for which there is currently a strong recommendation). • The development of the application is on track, and will be completed by September. A project manager still needs to be assigned, who will be responsible for the communication campaign. 	

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<p>4.2 Outbreaks sitrep, measures taken, bottlenecks, way forward (<i>information/discussion – Communities</i>)</p>	<p>The question was raised to the communities to brief discuss the current epidemiological context, the bottlenecks, the problems, and especially what the federal level can do to support?</p> <p>Elements of discussion:</p> <ul style="list-style-type: none"> • Sciensano and the federal level provides information and coordinates the management of the different outbreaks and clusters (Aubange, slaughterhouse,...)The RMG reports on a regular basis to the federated entities and vice versa. • It is clear that some clusters appear in different cities, among which Antwerp where these clusters are mainly found within certain communities. It remains uncertain, however, what the actual reason is for these communal clusters (apartments, playground, vulnerable population groups,...) . Research in some clusters is achieved. Thus, it is a necessity to gather information at the local level and examine these from a more 'global' point of view. This requires adequate and clear information flows between federal, regional and local levels. • It is key to observe closely and react rapidly; control tower is running a little late. • The federal and regional levels should share their experiences and best practices in managing and tackling local outbreaks and clusters among each other. In this way the different entities can learn from each other and act similarly in specific cases or adapt their methods. • In the case of local outbreaks and clusters, a case by case approach is used, contacts are identified and quarantined/tested; a generic testing strategy is not seen as feasible. It is useful to exchange best practices for certain specific cases (e.g. cases in an apartment building, a certain district etc.). 	<p>The RMG takes note of the current situation in the different federal entities: the epidemiological context, the bottlenecks, and problems. The RMG proposes to share information and best practices among the entities to learn how to tackle and manage specific clusters (e.g. cases in an apartment building, a certain district etc.). The RMG reiterates the major importance of clear communication at the federal, the community and the local level to the general public and specific target groups as one of the essential measures.</p>

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	<p>The federal level can support by raising awareness, sensitization, enhancing clear communication at the federal, the community and the local level to the general public and specific target groups as one of the essential measures.</p>	
<p>4.3. Quarantine: law enforcement, housing</p>	<p>The question was raised</p> <ol style="list-style-type: none"> 1) whether compliance with the quarantine measures should be checked and, in the event of non-compliance, should be fined; currently it comes out a bit ridiculous in the long run that a lot of measures are mandatory but not controlled and that new contaminations occur precisely by not following the measures. 2) what is the procedure in the case a foreign traveler is suspect with Covid-19 or has contracted Covid-19 and has to be placed in quarantine in Belgium? <ol style="list-style-type: none"> 1) Concerning the question on law enforcement: <ul style="list-style-type: none"> • The RMG reiterates the importance of information and sensibilization in order to enforce the quarantine measures. It is apparently not possible to impose controls and sanctions for reasons of medical confidentiality and lack of manpower.. • In case of the detection of a cluster, the quarantine imposed on a person that has contracted Covid-19 can be controlled. The health inspection services may intervene in consultation with the local authorities. The public prosecutor needs to be contacted. • The mayors need to be informed on the epidemiological situation on their territory and should be supported in safeguarding the public security. 2) Concerning the question on housing foreign travelers contracted Covid-19: <ul style="list-style-type: none"> • International health law states that the person should be treated as a Belgian citizen. Different questions can be raised: 	<p>The RMG agrees to focus on information and sensibilization in order to enforce quarantine measures. The RMG states that the mayors need to be informed and supported, so that they can safeguard public security on their territory.</p> <p>The RMG agrees that Phe will prepare a draft concerning foreign travelers with (suspicion of) Covid-19 and need to be</p>

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	if a person is already residing in Belgium (e.g. in an hotel room), does the person stay there? If this is not the case, can a mayor request a hotel room? What happens to the fellow travelers? Who needs to financially cover this? Phe will prepare a draft that needs to be answered by COFECO.	quarantined/isolated on Belgian territory. This draft will be transmitted at COFECO afterwards.
4.4. Doc Brussels Airport Rescue-Team (information/discussion)	The RMG takes note of the “Doc Brussels Airport Rescue Team”, the agenda point is postponed to Friday the 24 th of July 2020.	
5. Health care		
6. Stocks and shortages		
7. Communication		
7.1. Press Conferences (information)		
8. International		
8.1. Travellers: procedure for testing in the context of a foreign government requirement (approval - Annelies Wouters)	The following documents are presented concerning the procedure for testing in the context of a foreign government requirement: <ul style="list-style-type: none"> ○ Example of an foreign demand for a PCR test ○ Application form for a PCR-test ○ List of laboratories with molecular diagnostics for covid-19 ○ Letter for the laboratories ○ Procedure in case of a foreign demand for a PCR-test 	The RMG approves the “procedure for testing in the context of a foreign government requirement”.
9. Date next meeting / agenda (approval)		The next RMG-meeting will take place on Friday July 24 th 16h.
10. AOB		

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10.1 Cross border workers (particularly Luxembourg)	The RMG takes note of the question regarding cross border travel between Luxembourg and Belgium. The discussion will be placed on the agenda of the next RMG meeting Friday he 24 th of July 2020.	
10.2. Testing	<p>The current situation regarding testing was outlined.</p> <ul style="list-style-type: none"> • Currently there are problems due to the closure of testing centers. Many people currently need to be tested, often with asymptomatic characteristics, but the reagents are running out. Questions were raised about the testing limits of the laboratories and testing centers. • Because of the automation of the PLF's, many more people will be referred for a test to the GP and laboratories, which puts even more pressure on the testing system. • Laboratories are concerned about a lack of sufficient swabs, especially in the autumn. • It is worrying that there is already an imminent shortage of sufficient materials when testing asymptomatic people. It seems this will be a big problem if symptomatic people also need to be tested. • This issues need to be taken into account within the elaboration of the future testing strategy by Sciensano/RAG 	The RMG takes note of the current problems concerning the testing of asymptomatic people, and the workload of the testing system.
10.3. Mandatory testing (mayor Tienen)	The question is raised if a mayor can impose mandatory testing, and who needs to financially cover this?	The RMG stipulates that mayors have not to impose mandatory tests.

List of participants

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