

MINUTES OF THE MEETING

DATE: 25/08/2020

HOURS: 16h00 – 19h00

AGENDA	DISCUSSION	DECISION/TO DO
1. Approval agenda and report		
1.1. Report Previous meeting (<i>approval</i>)		<ul style="list-style-type: none"> The report (with adjustments) was 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)		
2.1 Epidemiological overview + state of play (cases, actions, measures) in federated entities	<p>Sciensano discussed the recent corona figures:</p> <ul style="list-style-type: none"> The downward trend continues in Belgium and Antwerp returns to a more or less normal situation. Nevertheless, the RMG stresses the need to remain cautious as, for example, the amount of cases in Brussels is still on the rise and many travelers will return from red zones over the weeks. The RAG will make an analysis of the epidemiological situation on a weekly basis, but the colour codes for the schools are not adjusted every week in order to obtain some stability. The analysis of the RAG will be validated by the RMG, afterwards the NCCN communicates this to the local levels. The local authorities take measures (fex changing the colour code regarding schools) in cooperation with the Minister of Education. The improvement of the communication flow/whereabouts will be discussed within the Sciensano working group. 	<p>The RMG validates the procedure (RAG – RMG - NCCN – local authorities in cooperation with the Minister of Education) regarding the local application of colour codes with an impact on schools. Next to this the RMG takes note of the current epidemiological situation.</p> <p>The improvement of the communication flow/whereabouts will be discussed within the Sciensano working group.</p>

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3. Prevention		
4. Surveillance and detection		
4.1 Implementation of contact classification and organization of testing schools – HR, logistics, capacity (<i>information, discussion – the federated entities</i>)	<p>The National Security Council (NSC) asked the RMG whether there exists guidelines regarding schools and testing in order to facilitate standardization. Members of the RMG confirm the existence of such protocols at the regional level. Among others, there is also cooperation between the Brussels and Walloon region.</p> <p>The CLB of schools affected by the coronavirus will redirect cases to local doctors or triage centers. Thus, this approach assumes the 'normal flow' and suggests that no immediate and large outbreaks in schools are expected. The discussion concerning the practical aspects of the testing in schools will take place within the IFC.</p> <p>The RMG notes that in case of a major outbreak in schools, there is most likely a more general outbreak occurring in the population (overall higher incidence). As such, the demand for tests will increase sharply.</p> <p>The testing strategy concerning small children must be taken into consideration: the new classification (high risk-low risk) and the indications for the age of 0-6 year old.</p>	<p>The RMG stresses the uniform implementation of the existing guidelines of the federated entities. The RMG takes note of the further discussion at the IFC concerning practical aspects.</p>
4.2 RAG advice colour codes/thresholds (<i>information, discussion, approval – Sciensano</i>)	<p>The RAG extensively discussed the advice on the harmonization of the colour codes/thresholds (GEES, ECDC, schools).</p> <p>The RAG proposed following scheme:</p> <ul style="list-style-type: none"> • Pre-alarm • Level 1 (15-30) • Level 2 (31-50) • Level 3 (51-100) • Level 4 (>100) 	<p>The RMG validates the RAG advice on the use of colour codes/thresholds, without the application of colour codes, because the use of colours, once more and in another context seems too confusing.</p>

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	<ul style="list-style-type: none"> The RAG suggests having an additional level (level 4) with an incidence level of 100 per 100,000 still over 14 days (except for the general public Epistat that is over 7 days) . The quantitative thresholds are just a first indicator; a more thorough analysis needs to follow. The RMG agrees that it is impossible to manage the application of one specific colour code for all other levels because of the use of different scales for geographical regions, for example, or the epidemiological context related to the school regime. The colour code for the European countries/regions is determined by ECDC and cannot be changed, the same applies to schools. The best way to evaluate the situation in Belgium would be not to use the method of colour codes and instead use descriptive terms (cfr.: pre-alarm, alarm...). Because the colors are confusing to the population as they do not refer to the same degree of severity or epidemiological situation in every case. 	
<p>4.3 RAG advice testing and sampling (<i>information, discussion, approval</i> – Sciensano)</p>	<p>The RMG stresses the generally high quality of the documents transmitted and congratulates Sciensano/the RAG especially for the outstanding quality of this document.</p> <p>The RAG extensively discussed the advice on testing and sampling: pooling of samples, saliva sampling and testing, self-collected swabs, RT-Lamp (as alternative to RT-PCR), rapid antigen tests and multiplex tests.</p> <p>When found positive, these methods can be included in future strategies. Currently the research suggests that pooling of samples may be used in specific circumstances while saliva may also be used when the testing capacity allows so. More profound discussions will follow about the circumstances in which alternative testing and sampling methods can be used.</p>	<p>The RMG validates the RAG advice on testing and sampling.</p>

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<p>4.4 Seasonal workers testing, quarantine – ca 200 workers from red zone (Romanians, e.a) Arcelor (Flanders)</p>	<p>The question was raised whether a test, conducted in the respective workers' home countries, can be accepted in Belgium. Moreover, it is questioned whether seasonal work is regarded as essential. Firstly, the RMG refers to its reports of 13/07 (stressing the role of occupational doctors) and 31/07 (suggesting to involve the social inspection), as well as Ceval's advice from 13/08 to underscore the need to test and quarantine seasonal workers and, lastly, the police decree from Flemish Brabant of 19/08 which demands seasonal workers to respect quarantine until the results of the tests are known and to live/work in groups of 10.</p> <p>The issue is raised to what extent it is necessary to test this group of workers and how quarantine fits in the overall approach. It is agreed that, in general, any approach must be attainable. Correspondingly, the RMG requests the workers coming from a 'red zone' to take a test before arriving in Belgium to prevent that the virus is transmitted during transport to Belgium. The RMG suggests that any test taken within a period of five days before arrival should be regarded as valid. Upon arrival, the workers need to take another two tests. Those who test negative may work and the RMG request additionally the workers to work in groups of ten and respect quarantine for the first fourteen days after arrival as to avoid spreading as much as possible. A second general test will be conducted several days after arrival. Quarantine, in this regard, is considered as staying in the workers' respective housing and work place.</p> <p>Those who test positive on arrival are obliged to be put into isolation. Finally, the RMG considers pooling of samples as a possible and interesting option next to a general test.</p>	<p>The RMG proposes the following procedure:</p> <ul style="list-style-type: none"> • Mandatory test in home country before departure (test not older than 5 days before arriving in Belgium) • Quarantine upon arrival (14 days), working is allowed (in bubbles of 10 persons) • Two tests in Belgium

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4.5 Testing refugees – Syrians 100-150 September, December	postponed	
4.6 Testing MR Brussels – procedure, capacity labs (<i>Brussels</i>)	<p>The question has been raised if the federated entities possess lists for the preventive screening of the personnel in the residential care centers?</p> <ul style="list-style-type: none"> • Brussels has launched a mass screening in the residential care centers, but there are no comprehensive results yet. They will inform the RMG as soon as results are available. • The French-speaking Community are currently drafting the lists, they hope to have it tomorrow. Until now for the staff it was the occupational health that did the tests. But there are financial concerns: the conventions with them need to be renegotiated because the bill for the nursing homes is very important... • The German-speaking Community supposes every procedure stayed the same, as soon as there is a case in a nursing home everyone, residents and staff, get tested. Information about the preventive testing of the staff must be checked first and will be provided. • Flanders will check whether they possess such lists (NB: list is communicated on 27.08.2020) 	The federated entities will request/prepare the lists with the data regarding the preventive screening of personnel in residential care centers.
4.7 Brussels Airport – procedure sitrep, quarantine, dashboard nr ... (<i>Flanders, Wallonia</i>)	postponed	
4.8 Outcome EWRS notifications (<i>Federated Entities</i>)	postponed	

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<p>4.9 Wastewater monitoring (traces of COVID-19 in wastewater) state of play by Wallonia (<i>information, discussion – Wallonia</i>)</p>	<p>The SPGE presented their study on the presence of novel coronavirus in wastewater.</p> <p>The study shows that in Wallonia the virus is present in the wastewater treatment plants but in a non-infectious way. An epidemiological follow-up based on wastewater is carried out in order to detect any significant change in the circulation of the virus. This is done twice a week at 8 wastewater treatment plants in Wallonia. In order to progress in their study they need Sciensano to provide epidemiological data to improve the correlation between the detected viral load and the contamination rate.</p> <p>The objective of this type of monitoring is to be able to detect novel coronavirus recirculation in the population whose wastewater arrives at the sampled treatment plant at an early stage. The study shows that the coronavirus can be detected in the wastewater several days before the appearance of the first symptoms, and therefore before the confirmed diagnosis of COVID-19 cases in the population.</p> <p>In order to be more efficient in the information given to the Walloon government, SPGE is working with Sciensano, however SPGE is encountering problems with the working methodology, hopes to be financed by the federal government and wishes that an agreement with Sciensano will be found.</p>	<p>The RMG takes note of the presentation by SPGE on wastewater monitoring.</p>
<p>5. Health care 5.1 Exception for caregivers to work with PCR +, as high-risk contact (<i>Celevel</i>)</p>	<p>postponed</p>	
<p>6. Stocks and shortages</p>		
<p>6.1 Public procurement masks/FFP-2/aprons (<i>information</i>)</p>	<p>postponed</p>	

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7. Communication		
8. International		
9. Date next meeting / agenda (approval)		The date of the next RMG-meeting will be communicated later.
10. AOB		
10.1 Development operational plan	The Strategic Plan, as shared over the last weeks, will be updated further on a regular basis (every 2-3 weeks) and needs to be validated by the RMG accordingly. In addition to the Strategic Plan, an Operational Plan is expected. The Operational Plan suggests a list of useful actions in line with the Strategic Plan. The respective Excel file presents the proposals of the administrations and is open to any potential corrections or additions in the proposals already written and can be completed by new actions and proposals from the different entities. The federated entities will submit their feedback by the 2th of September, so that a writing session can be organized by the 4 th of September. The plan will afterwards be presented to the IMC.	The RMG takes note of the procedure regarding the development of the operational plan. The federated entities will submit their feedback by Wednesday the 2th of September 2020.
10.2. Serology test in companies before PCR-test (discussion – Sciensano)	postponed	
10.3 Workshop on contact tracing	The RMG will organize a workshop on contact tracing on the 9 th of September (at 16h). 2 elements will be discussed: 1) A Belgian part in which the different federated entities will present their best practices and lessons learned (among others Karine Moykens, Dirk De Wolf, K. Jacob, A. Baudine, Patrick Van Der Kar)	The RMG takes note of the workshop on contact tracing that is planned on the 9 th of September.

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	<p>2) An international part with a comparison between different European and non-European countries will be presented (e.g. Ireland, the Netherlands, the UK, Germany, France, Denmark, Sweden, Switzerland, South Korea, Singapore, New-Zealand, Vietnam)</p>	

List of participants

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