

5. The Minister for Health and Social Services will make a statement regarding the pandemic flu outbreak

5.1 The Deputy of Trinity (The Minister for Health and Social Services):

I know it is a long statement but it is an important one, so I hope Members will bear with me. As Members will be aware, pandemic flu - swine flu - has spread across the world rapidly and has reached our Island. Swine flu is highly transmittable, but even so it has surprised the international authorities as to how quickly it has spread and continues to do so exponentially. On 11th June the World Health Organisation declared a pandemic and it was the following day, 12th June, that the first case of swine flu was confirmed here in Jersey. As I now speak to Members, the number of confirmed cases of swine flu in Jersey was 24 but as of 9.00 a.m. this morning the number is now 38, although the number changes, as I said, almost daily. It has now been confirmed that the United Kingdom is one of the countries of the world with the highest level of infection, so much so that the Chief Medical Officer of England announced last week that the policy of his government is no longer one of containment but one of treating people as they become sick. This high level of infection together with this change of government policy on the mainland does not bode well for the Channel Islands given the transportation links and the pattern of travel between the jurisdictions which is likely to lead to further infection. As Members will readily appreciate, my department is tasked with leading on the management of pandemic flu. My department has been planning for the outbreak of pandemic flu for a number of years and we all envisaged that the pandemic threat would take the form of avian flu, H5N1. I must at this stage thank Members for voting significant resources for the pandemic flu preparedness plan which contained the States response to a pandemic focusing on getting ready to respond robustly to a human variety of avian flu. The decisions taken by the House then were very wise and prudent. Resources made available and the plans that were coming into place at that time have been redirected to this new threat. Many of the products which we have been able to purchase, the purchase of Tamiflu being the most noteworthy, are now being deployed to tackle this H1N1 threat. Again with great prudence we have entered into what we technically term advanced procurement agreements with 2 of the global pharmaceutical companies which will mean that when the H1N1 specific vaccine is manufactured Jersey will be one of the first jurisdictions to receive it. I will speak further about that specific vaccine later. An important task for clinicians and managers has been to predict what will be the pattern of infection here in Jersey. This is of vital importance if we are to plan effectively. Unless we can predict the pattern then we cannot plan for it; it is just as simple as that. It has been a very difficult task to predict the pattern of infection because patterns of previous pandemics here in Jersey and elsewhere cannot easily be transferred to what now might befall us. Of course, as cases increase across the world, the international authorities are coming to understand more and more about the scope and nature of this pandemic. Here in Jersey we are constantly updating the predicted pattern and will continue to do so. The prediction of the pattern of infection here in Jersey is something I want Members now to consider. What our experts believe, with some caveats and qualifications given the uncertainty of what they are predicting, is that the most likely scenario is that cases will present in low volumes throughout the summer and then we will see a significant level of infection in the September/October period. This will last for 4 to 6 weeks' duration. I shall be making a further statement on the detail of this pattern at a later time. I will now turn to advise Members of the nature of our plan to meet this predicted pattern. While the U.K. Government has now decided to abandon its plans of containment, here in Jersey we will continue to contain the infection. I trust that we will be as successful in future weeks as we have been in the preceding period. Containment means that we will ask Islanders to stay at home if they have flu symptoms and that Islanders who are deemed to be suspected cases are administered the antiviral drug Tamiflu as are the close contacts of those suspected cases. I am very grateful to those Islanders who have either been suspected or confirmed of having swine flu for the high level of community responsibility they have shown in following this policy. The

entire Island benefits from this behaviour. It is the department's intention to do what we can to contain swine flu until a pandemic specific vaccine is manufactured and delivered to Jersey in such quantities that all Islanders will receive it. It is possible for us to contain swine flu until that pandemic specific vaccine is available and administered to us all. This represents the best possible outcome for the Island as it confronts this illness. While this is our department's plan, other contingency plans exist in the event that this prediction is incorrect. The House will expect such contingency plans in such circumstances given the magnitude of what will confront us. Of vital importance to the containment of swine flu is the extensive campaign which Members will now be aware of. The basic message is to catch it, bin it, kill it. This extensive campaign is focused on adults and upon children at school. In this regard, I would like to place on record my thanks to the Minister for Education, Sport and Culture, his officers and the teachers for so ably and comprehensively delivering this message in schools well in time for the summer recess. We should all set an example by following that campaign and ensuring that we catch it, bin it, kill it. We should all be pleased and proud of the fact that the Jersey pandemic flu preparation plan is one of the most comprehensive in the world. We have stockpiled Tamiflu and other similar drugs. We have purchased equipment such as masks and breathing apparatus. We have plans to both mobilise the community and the general hospital and we have received tremendous support in this regard from Health and Social Services staff, G.P.s (general practitioners) and such other organisations as Family Nursing and Home Care. Very specific plans have been put in place to manage the demand which we believe will be placed upon the general hospital. In this regard, may I draw Members' attention to the written question put forward by Deputy Rondel. My answer is something that I would ask Members to consider and reflect upon. While a great deal has been done and we have a high level of preparedness, we should be in no doubt that managing the impact of swine flu will be a difficult task. If the predicted pattern of infection is confirmed, then my department as well as other important services such as Education, the Parishes and other supportive charitable agencies will have to work very hard, well beyond the call of duty, for a considerable period of time if the impact is to be minimised. It will be my intention to ensure that Members remain informed of developments throughout the summer months, and I shall be making a number of significant statements on exactly what we might expect, but I am confident of the facts and feel confident that I can share them with Members and the rest of our community. Thank you.

5.1.1 Deputy R.G. Le Hérissier:

I wonder if the Minister could say if it is to break out from this containment policy what planning is being done in co-operation with the Parishes and the Emergency Management Office should there be a high degree of absence from work by people like essential employees and so forth?

The Deputy of Trinity:

I would like to thank the Deputy for that question. I start with saying that is why it is so important that we all try and maintain the containment period. The pandemic flu planning group meet very regularly, not only with other staff within Health and Social Services but with Family Nursing Services, the police and the Parishes and other charitable organisations, and good preparedness is in place.

5.1.2 Connétable J. Gallichan of St. Mary:

Bearing in mind the emphasis that is still being placed here on containment and the second part of the phrase "Catch it, bin it, kill it", will the Minister go so far as to recommend the use of disposable tissues over and above handkerchiefs which, presumably, continue to harbour germs throughout the day and act as vectors for the spread of the disease?

The Deputy of Trinity:

Yes, I do. That is a very important message: “Catch it, bin it, kill it.” The use of disposable tissues is paramount in trying to maintain that.

5.1.3 Deputy K.C. Lewis:

I believe the Minister said that at the moment the cases are 38. Heaven forbid this should escalate to vast proportions, but are there plans to maybe close schools and public buildings should this turn into a real epidemic?

The Deputy of Trinity:

As you know, the schools are finished this week and we hope to continue that kind of public health education throughout the summer. If it is looking likely that schools may be closed, that will be done with full negotiations with everyone involved, including the Minister for Education, Sport and Culture, because that is a very big step.

5.1.4 Deputy I.J. Gorst of St. Clement:

I would like to congratulate the Minister and her department on getting the message out, as we discussed last time this Assembly assembled. Her Assistant Minister pointed out that any Islanders with flu-like symptoms should phone their G.P. for a home visit. I just wonder if she could reiterate and confirm that message by saying not only should they not go into their G.P.’s surgery but nor should they go into the accident and emergency with such symptoms; they must stay at home and call their G.P. for a home visit.

The Deputy of Trinity:

Absolutely, and I thank the Minister for bringing that up. That is extremely important that people should contact their G.P., stay at home and not go into the surgery and certainly not go into the A. and E. (Accident and Emergency) department.

5.1.5 Deputy J.B. Fox:

Not specifically to the Minister but to the Emergency Council which includes the Minister, with the increase that appears to be escalating, has the Emergency Council and the Minister considered the valuable skills that many retired people have in this Island and whether they will be drawing up a list of these skills which might benefit us all as a whole later should the situation get worse?

The Deputy of Trinity:

I am sure that the pandemic flu group have considered this. I am very much aware that there are added skills around the community and some of them may have now retired, and their skills can certainly be used. There is a community officer who will organise all that in the community.

5.1.6 Senator A. Breckon:

In her statement the Minister mentioned Tamiflu being used and also a specific vaccine becoming available. Can she explain what the difference is?

The Deputy of Trinity:

The Tamiflu is a drug that you give once it is confirmed that you have swine flu. Some patients, for whatever reason, are unable to take those tablets, because it is in tablet form. There is a drug called Relenza which is more of a vaccine but is very specific.