

Situation Center of the RKI Agenda – Agenda of the COVID-19 crisis unit

Agenda for crisis unit meeting „Novel coronavirus (COVID-19)“

The „COVID-19 crisis team“ is convened to make strategic decisions in the field of crisis response. It meets at regular intervals.

Situation: *Novel Coronavirus (COVID-19)*

Date/Time: *March 16th, 2020, 13:00h.*

Meeting location: *RKI, Situation Center, conference room*

Participants: *FG14, FG17, AL1, FG32, FG36, FG37, AL3, IBBS, ZBS1, ZBS-L, INIG, ZIG-
L, Press Office, Vice President, President.*

TO P	Input/Topic	Submitted by
1	Current Situation <ul style="list-style-type: none"> • International <ul style="list-style-type: none"> ○ Cases, severity, risk factors • Risk areas <ul style="list-style-type: none"> ○ Switzerland? • National <ul style="list-style-type: none"> ○ Case numbers/deaths ○ Situation in Baden-Württemberg is escalating ○ Update field operations ○ Particularly affected regions • Source for case numbers reporting 	ZIG1 FG32
2	Findings on pathogens <ul style="list-style-type: none"> • 	all
3	Current risk assessment <ul style="list-style-type: none"> • Assessment of Egypt and the Netherlands • Assessment of Switzerland and Austria • New risk areas in the USA 	All INIG
4	Communication <ul style="list-style-type: none"> • Media coverage for the change in reporting of the figures from Tuesday on • Communication on digital projects • Instead of „social distancing“ rather simply „keep distance“, „reduce contacts“ 	Press
5	RKI strategy questions <ul style="list-style-type: none"> • Dealing with BMG-tweets (Bundesministerium für Gesundheit – Federal Ministry of Health) dated March 14th/15th on the self-isolation of travelers returning from Austria, Switzerland and Italy. 	President/Vice President

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	<ul style="list-style-type: none"> Serosurveys: Decision exclusively Survey FG37 by Gerard Krause or second serosurvey by an own organization (FG36, FG37, FG35, AK Blood Vors by RKI) 	FG37
6	Documents <ul style="list-style-type: none"> Preparation of all papers from the perspective of particularly affected areas Adaptation of the guidelines for travelers from risk areas with regard to contacting the GA (Gesundheitsamt – local health authority) – NRW (Northrhine-Westfalia) is in favour. General principles and recommendations for state-ordered quarantine measures. 	FG36 FG36
7	Laboratory diagnostics <ul style="list-style-type: none"> Offer by Berlin scientific institutions for diagnostics 	President/Vice President
8	Clinical management/discharge measures <ul style="list-style-type: none"> 	FG36/IBBS/FG32
9	Measures to protect against infection <ul style="list-style-type: none"> Significance of contact tracing, especially in forward direction and the support of the GÄ (Gesundheitsämter – local medical authorities). Contact minimization for young people – do not got from the club straight to corona parties, avoid travelling if possible. Decision on KoNa (?) flight 	President/Vice President FG32
10	Surveillance <ul style="list-style-type: none"> Dashboard – Online launch/date Contact tracing: SORMAS-DE-COVID Digital communication 	
11	Transport and border crossing points <ul style="list-style-type: none"> 	FG32
12	International <ul style="list-style-type: none"> 	ZIG
13	Information from the Situation Center <ul style="list-style-type: none"> Request by BMG: Second liaison officer for BMG Situation Center 	
14	Any other business <ul style="list-style-type: none"> Next session: Tuesday, March 17th, 2020, 11:00-12:30h. 	

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Situation Center of the RKI Agenda – Protocol of the COVID-19 crisis unit Crisis unit meeting „Novel coronavirus (COVID-19)“

Results protocol

(Reference Number: 4.06.02/0024#0014)

Reason:	<i>Novel Coronavirus (COVID-19)</i>
Date/Time:	<i>March 16th, 2020, 13:00h.</i>
Meeting location:	<i>RKI, Situation Center, conference room</i>

Moderation: Lars Schaade

Participants:

- Institute Management
 - o Lars Schaade
 - o Lothar Wieler
- FG12
 - o [REDACTED]
- FG14
 - o [REDACTED]
- FG17
 - o [REDACTED]
- FG21
 - o [REDACTED]
- AL3
 - o Osamah Hamouda
- FG32
 - o [REDACTED]
 - o [REDACTED]
 - o [REDACTED] (protocol)
- FG36
 - o [REDACTED]
- FG37
 - o [REDACTED]
- IBBS
 - o [REDACTED]
- Press
 - o [REDACTED]
- ZBS1
 - o [REDACTED]
- ZV1
 - o [REDACTED]
- INIG
 - o [REDACTED]
- BGZA: [REDACTED] (by telephone)
- German Federal Armed Forces (Bundeswehr): [REDACTED] (by telephone)

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TOP	• Input/topic	Submitted by
1	<p>Current situation:</p> <p>International</p> <ul style="list-style-type: none"> • Cases <ul style="list-style-type: none"> o Worldwide: 157,044 (+9,587), of which 5,839 (3,7%) deaths (+257). o China (incl. HK Hongkong, Macau): 80,996 (+25) cases, of which 3,203 (4,0%) deaths (+10). o International (excl. China, incl. Taiwan): 146 countries with 76,048 (+9,557) cases, of which 2,636 (3%) deaths (+247); more than 3,200 severe cases. o WHO Euro region: 47,248 (+8,333) cases, of which 1,817 (3,8%) deaths (+223); more than 2,000 severe cases. • Trend analysis (slides here). • <u>China</u>: Most of the new cases in China are imported cases (e.g. from South Korea, Italy). • <u>UK</u>: has a new strategy, neither schools nor borders have been closed; every person showing respiratory symptoms should stay at home and not go to the GP (general practice – family doctor) or hospital. Only severe cases should go to hospital, i.e. only severe cases are tested and recorded in the UK. For a complete picture of the situation however, it is important to count not only the effectively ill people, but also the infected people. The total number of cases in the UK is lower than in Germany, but the number of deaths however is higher. <p><i>ToDo: INIG should, as for China and per country, present incidences etc.</i></p> <ul style="list-style-type: none"> • <u>France</u>: Only the Grand Est region has been declared a risk area. However, there are other regions with high incidences (Bourgogne-Franche-Comté: 14,7/100.000). The term risk area should be used with caution. It should comprise only areas, that have a higher incidence than particularly affected areas in Germany and from which a high number of infected travelers returning to Germany can be observed. • <u>Spain</u>: 2,000 new cases (7,753 cases in total, of which 288 deaths; proportion of deaths 3,7%). 	ZIG1

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	<p>Mostly affected are the cities of Madrid (3,544 cases, 213 deaths), País Vasco (630 cases, 23 deaths) and Castilla La Mancha (401 cases, 10 deaths).</p> <p><i>ToDo: INIG will calculate the incidences for the individual Spanish provinces.</i></p> <ul style="list-style-type: none">o <u>Austria</u>: The majority of cases originate from Tyrol. Addendum: In SurveNet there are 348 cases in Tyrol, 14 cases in Vorarlberg, 7 cases in Salzburg and 3 cases in Upper Austria, one case in Lower Austria (Austrian federal states) and one case in Vienna as the probable place of exposure. Regarding the remaining 527 cases with Austria as the place of exposure, there is no precise information about the location.o <u>Switzerland</u>: There are more than 1,300 cases in Switzerland, 30% of them come from Ticino. Special measures have been adopted there (e.g. only grocery stores and pharmacies are open; no more church services; funerals only in the closest family circle; cantonal administration closed; senior citizens should avoid public places and keep their distance when walking). Switzerland no longer tests slightly symptomatic contacts, but recommends, that they stay at home. Addendum: In SurvNet there are 15 cases with a probable place of exposure Switzerland without further details of the location.o <u>Italy</u>: 22,512 cases, of which 2,026 HCW – Health Care Workers; 1,625 deaths (proportion of deceased 7.2%); 6.7% symptomatic; 4% severely ill.o <u>Egypt</u>: There have been 110 cases in Egypt so far. Egypt seems to be a country where there is transmission despite the dry heat (in South Africa too). It may also be that there is only transmission among tourists (ship, hotel). Addendum: (ZIG) is in contact with the the laboratory in Egypt and will try to get an get an overview of the number of tests. <p>o Risk areas: No changes</p>	
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	<p>National</p> <ul style="list-style-type: none">o Cases, incidences, epicurves by federal state (slides here).<ul style="list-style-type: none">o Changeover to SurvNet tomorrow will work without negative delta.o All federal states affected; also all districts affected soon.o Incidence nationwide is 5,5/100,000 inhabitants (lecture: 5.0/100,000)o Baden-Württemberg, Bavaria (BY), Northrhine-Westfalia (NRW), Berlin (BE) and Hamburg (HH) show an exponentially increasing trend; the eastern federal states are not yet as affected, the incidences are:<ul style="list-style-type: none">▪ NRW: 8,6/100,000 (Heinsberg approx. 253.2/100,000).▪ Bavaria: 7.4/100,000 inhabitants▪ Baden-Württemberg: approx. 9.6/100,000▪ Berlin: 8.0/100,000▪ Hamburg: 13,9/100,000o Freising has the strategy of immediatly smear testing, symptomatic patients are taken to hospital immediatlyo Austria has overtaken Italy as a possible location of exposure (Austria: 901, Italy 866).o Addendum: In SurvNet there are 348 cases with Tyrol, 14 cases with Vorarlberg, 7 cases with Salzburg, 3 cases with Upper Austria, 1 case with Lower Austria and 1 with Vienna as the probable place of exposure.<ul style="list-style-type: none">o There are 25 districts from which more than 10 cases have been spread. Most experts are from the district Heinsberg (n=369), the district Aachen (n=152), the district Freising (n=59) and from the district Berlin Mitte (n=52). <p><i>ToDo: Put up incidences and trends for German districts (selection of top ten) to identify particularly affected areas.</i></p> <ul style="list-style-type: none">o There are few documents specifically for measures in particularly affected regions (e.g.	
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	<p>what is Heinsberg supposed to do?). This should be included in the flow chart, which will be discussed in the crisis meeting tomorrow and will be put online towards the end of the week.</p> <ul style="list-style-type: none">o Identification of affected risk areas: This is important in principle for the definition of suspected cases and the associated probability of testing. It would be rationale to encourage increased testing within the area rather than warning other districts/federal states of regions. Criteria for selection could be incidence, trend analysis, exported cases etc. The incidence in Freising is high, but the trend analysis is not. Therefore, it would not be a particularly affected area. <p><i>ToDo: in tomorrow's crisis team meeting, the incidences , trend anslysis and exported cases für the districts Aachen, Hamburg, Munich will be looked at in order to decide which of these regions could be affected.</i></p> <ul style="list-style-type: none">o The reporting of suspected cases will be discontinued. This information was circulated via info letter. Situation in the health authorities: There are many (also large) health authorities (e.g. Düsseldorf, Frankfurt) reaching the limits of their capacities. A contact tracing often is no longer possible and the concept of quarantine for medical staff can no longer be maintained. There is a request to adapt the documents/recommendations. However, a reallocation of resources is preferable to changing recommendations.o ZV has already received positive feedback from the BVA that it can take care of recruitment and contracts for the mobile recruitment and contracts for the mobile teams. A job advertisement text is being prepared by the RKI. <p>Requests for administrative assistance:</p> <ul style="list-style-type: none">o Personnel from the RKI for technical support is still in Berlin and Nuremberg. In Berlin there is good support from other authorities. Nuremberg is supported by the RKI from Berlin additionally with the telephone survey of contact persons.	
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	<p>Numbers of cases:</p> <ul style="list-style-type: none"> o There is a total of 12 deaths; the press is already reporting 13. The deaths come from Baden-Württemberg, Bavaria and North Rhine-Westphalia. o As BNO News tends to focus on the Asian region, in the future, the case numbers for international reporting will be obtained from the WHO. 	
2	<p>Findings on pathogens</p> <ul style="list-style-type: none"> o Nothing to report on 	All
3	<p>Current risk assessment</p> <ul style="list-style-type: none"> o A new risk assessment was prepared last weekend. Risk is to be scaled up this week. The risk assessment will be published as soon as Mr. Schaade gives a signal for it. 	Vice President
4	<p>Communication</p> <p>RKI Press Office</p> <ul style="list-style-type: none"> o There are FAQs for the magazine “Ärzteblatt” that will be published soon. o On the RKI website there is not yet a sentence on the deaths in Germany. A sentence on this is to be added. o The task of organizing a sign language interpreter for the daily press briefing at 10 a.m. has been assigned. It should be a professional. The costs will be borne by the BMG. <p>Central Authority for health related education - BZgA (Bundeszentrale für gesundheitliche Aufklärung)</p> <ul style="list-style-type: none"> o Together with the Federal Office of Civil Protection and Disaster Assistance a leaflet of recommended behavior will be coordinated and published soon. Further leaflets are planned. o Please ask the BZgA to send all leaflets to the RKI for review. o There are already many recommendations, what is missing are recommendations on presenteeism (not going to work sick or using public transport). Although this is noted on leaflets, but as this is a very important message to the population, there should be a separate campaign. There was already a major presenteeism campaign for the flu/pandemic, which can be adapted. 	Press

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	<p>Federal Armed Forces:</p> <ul style="list-style-type: none"> No new information available. <p>Any other business</p> <ul style="list-style-type: none"> A tool ("chatbot") is being worked on, which is a digital solution to communicate with the population and report dangers in a low-threshold manner. The BZgA has been informed about the tool. The tool will be published independently of the RKI. It will take another 2-3 days before the tool is ready. A content-related check by the RKI and structured testing are still pending. The provider is a private company that also stores user data. Both the RKI and the BZgA have examined this with regard to data protection law. The BMG is to formulate a written accountability/acceptance of responsibility, as the company was chosen for the project without a tender offer. In addition, there are other projects that may be reported by [redacted] to the crisis unit in the future. The term "social distancing" led to confusion. It should therefore be rather said "keeping distance and reducing contacts". 	<p>FG21</p> <p>FG32</p>
5	<p>RKI Strategic questions</p> <ul style="list-style-type: none"> Closure of schools and daycare centers - organization at the RKI: Initially there was an appeal by ZV1 to the self-organization of the RKI staff, as not all needs can be covered. Kindergartens and schools offer emergency care for special groups of people. From ZV1 the staff can receive confirmation that they belong to a special group of people. In addition, there may be support from the RKI for crisis-relevant personnel (cab costs, childcare, shuttles if public transport is no longer available, supplies). ZV1 will plan an overall package. There are also templates from the printing company for people who do not have an official service card and have to identify themselves in case of a curfew. Mobile working is also possible, but there is only a limited number of places, which are already in short supply. <p><i>ToDo: ZV1 forms a working group with representatives from the departments in order to identify "crisis-relevant</i></p>	

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	<p><i>personnel".</i></p> <ul style="list-style-type: none"> o <u>Support</u>: has a list of employees who have employees who have already left the company who are to be contacted for support. The 43 employees in the GERN study are to support the contact tracing (mobile teams). ██████ is to talk this over with ██████. o <u>BMG Tweet</u>: There was a BMG tweet dated March 13th/14th about the self-isolation of travelers returning from all over Austria, Switzerland and Italy. This also caused a stir in the BMG communication team. It was a personal statement by Mr. Spahn. The documents and assessments of the RKI will therefore not be adjusted. o <u>The new strategy</u> is online since Friday. One key statement is that the phases interlock and do not replace each other. The term "change of strategy" should therefore be avoided. o <u>ECDC (European Centre for Disease Control) - scenario for COVID-19</u>: The ECDC presents recommended measures for a COVID-19 scenario, which is divided into 4 stages. ██████ analyzes, which measures are already being implemented by Germany. It shows that Germany has already implemented many measures from scenario level 4, but not measures from the previous scenario levels. Especially measures at workplaces and public places are still lacking. The document has already been shared with the BMG and will also be sent to the federal states with the following instruction: first establish measures of the scenario, that have not yet been implemented, before radical measures (such as a curfew) are imposed. o Serosurvey: The HZI – Helmholtz-Zentrum für Infektionsforschung – Helmholtz Center for Infection Diseases (g. Krause) is already conducting a study with the DRK – Deutsches Rotes Kreuz (German Red Cross) a study on the number of seroconverted persons. The RKI (FG36, FG37, FG35, AK Blut Vors) is to carry out its planned study on serological testing nevertheless, because with a higher number of data, the information becomes more valid. It is particularly useful if different regions in Germany are covered. For the study, you would first need a neutralization test. Positive sera from Aachen and Heinsberg could be used to validate the test. 	<p>FG 32</p> <p>FG37 (for FG 35)</p>
<p>6</p>	<p>Documents</p> <ul style="list-style-type: none"> o The adaptation of the handout for travelers from risk areas with regard to contacting the health authorities will be discussed with the AGI 	

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	<p>tomorrow. "General principles and recommendations for collective quarantine measures ordered by the state": This issue is still being worked on. The aim is that the recommendations e.g. become more specific through certain criteria.</p> <ul style="list-style-type: none"> o A proposal on the options for contact persons among medical staff was sent by FG37 to FG14. The comments will be finalized today. IBBS will adapt the infographic based on the document. o The paper on discharge criteria was sent to the AGI. There was only one response from Bavaria. The old version was replaced by the new one on the website. o A rationale for school closures was sent to the federal states. An article on this is to follow in EpiBull. 	
7	<p>Laboratory diagnostics</p> <ul style="list-style-type: none"> o There is an offer from Berlin scientific institutions to support in the field of diagnostics. RKI supports contacting the Charité. Outside of Berlin there are probably even more scientific institutions that could be involved in the testing. There are also capacities on the veterinary side (state examination offices). <p><i>ToDo: Mr. Schaade discusses with... how the integration of other scientific institutions as well as the billing of the tests etc. can succeed.</i></p> <ul style="list-style-type: none"> o ZBS1: The first samples arrived from the Berlin health authorities last weekend. There was a total of 56 patient samples on Sunday (1-3 samples per patient), of which 5 people have tested positive so far. The public health department has so far used the specimen form of the Berlin laboratory; an RKI specimen form was posted online and shared. <p><i>ToDo: FG36 will get together with ZBS1 to see how the data from the specimen collection form (e.g. symptoms, contact persons) can be used.</i></p> <ul style="list-style-type: none"> o ZBS1 has received feedback from various OUs for support so that capacities can be expanded. capacities can be expanded. Material has also been ordered. The aim is that up to 1,000 samples a day can be examined. 	<p>Vice President</p> <p>ZBS1</p>
7	<p>Clinical management/discharge management</p> <ul style="list-style-type: none"> o The tool for recording the capacities of intensive care units of the DIVI will be launched tomorrow. 	IBBS
8	<p>Infection prevention measures</p> <ul style="list-style-type: none"> o The importance of contact tracing was emphasized once again in the press briefing. The 	FG32, IBBS, Pres, Vice Pres

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	<p>webinar this Wednesday will be used on the one hand, to present the mobile teams and on the other hand to emphasize the importance of contact tracing. We should look less backwards in order to understand transmission chains, but in particular forward in order to provide people with targeted information. [REDACTED] has offered, that the RKI can organize regular webinars with ÖGD – Öffentlicher Gesundheitsdienst – Public Health Service (every Wednesday from 2 p.m. to 3 p.m.).</p> <ul style="list-style-type: none">o There are numerous requests from the federal states for modeling. Mr. Wieler has already presented the results of [REDACTED] in the Chancellery. The ministries have been informed about the dimensions. The BMI – Bundesministerium des Innern (Ministry for Internal Affairs) is preparing its own modeling. Tomorrow, [REDACTED] will meet the people working on this in the BMI for an exchange. Mr. Wieler has been commissioned to say something about the results of the modeling in tomorrow's press briefing. This will then be written up for publication and shared with the federal states. The need for more intensive care and ventilation beds was already communicated last week at the ministerial conference.<p><i>ToDo: FG37 and [REDACTED] find out for tomorrow's press conference press conference tomorrow, how many more beds are needed.</i></p><ul style="list-style-type: none">o There are 2 approaches to crisis management: 1) Planning with figures and scenarios; 2) Increase capacities as far as possible. For the second approach ("impact management paragraph"), maximum care providers are asked to what level they can increase their staffing. The federal government is providing support with materials and training. A proposal is to be made to the BMG to start with 5 maximum care providers (large hospitals that already have ECMO – Extrakorporale Membranoxygenierung – Extracorporeal membrane oxygenation places).o The proposal to stop contact tracing for flights has been with the BMG since last week. There has not been any feedback on this yet. To relieve the burden on the health authorities, the decision has now been made to stop contact tracing on flights.o FFP 2 masks: The veterinary sector is said to have a large stock of FFP2 masks. The BMG has already been informed about this in a TK.<p><i>ToDo: An e-mail should be sent to the LZ BMG (in cc:</i></p>	
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	<p>██████ and ██████ with a request to contact the BMEL in this regard.</p> <ul style="list-style-type: none"> ○ After consultation with the federal states, SORMAS as a tool for contact tracing in the is to be deprioritized in the current situation, as it would tend to reduce the input in SurvNet. ○ For 3 weeks, 25 people from, among others, the RKI, the BMI, the Heinrich-Herz Institute, 3 other Fraunhofer institutes etc. have been developing a tool (CGA - Corona Health App) to track who a person has talked to for at least 15 minutes in the last few weeks. As soon as the financing is clarified, this can also be used. 	
9	<p>Surveillance</p> <ul style="list-style-type: none"> ○ Not discussed separately 	
10	<p>Transportation and border crossing points</p> <ul style="list-style-type: none"> ○ The health issues for travelers returning from China are not yet abolished. The BMI-BMG crisis team has already discussed that this should no longer be done. With increasing numbers of cases in Germany, the focus should be less on focus on returning travelers. Germany is now closing many borders now. However, there is no recommendation yet cancel private vacation trips. 	FG32
11	<p>International</p> <ul style="list-style-type: none"> ○ Not discussed. 	ZIG
	<p>Information from the Situation Center</p> <ul style="list-style-type: none"> ○ The situation center will be more spacious, from tomorrow there will be 4 more workstations in the situation center meeting room. ○ For the crisis management team meetings, each FG should consider who has position 1., 2., 3. etc. with regard to the participation in the meetings. ○ From tomorrow, the meetings of the crisis unit will take place via Vitero. The conference room will be available from 10:30 am. 	FG32, IBBS
12	<p>Next meeting</p> <ul style="list-style-type: none"> ○ Next meeting: Tuesday, March 17th, 2020, 11:00 a.m., via Vitero. 	