

Adviesaanvraag

Vraagsteller	Regeringscommissariaat Corona	
Datum van adviesaanvraag	3/01/2022	
Onderwerp	Considerations and recommendations for OCC 06/01	

Adviesverstrekking t.a.v. het Overlegcomité

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Dit advies werd opgesteld met dank aan input van	De volgende leden van de expertgroep beheerstrategie: Isabelle Aujoulat, Philippe Beutels, Caroline Boulouffe, Steven Callens, Mathias Dewatripont, Niel Hens, Lode Godderis, Tinne Lernout, Romain Mahieu, Geert Molenberghs, Céline Nieuwenhuys, Pierre Van Damme, Dimitri Van der Linden, Steven Van Gucht, Yves Van Laethem, Marc Van Ranst, Maarten Vansteenkiste, Erika Vlieghe, Dirk Wildemeersch

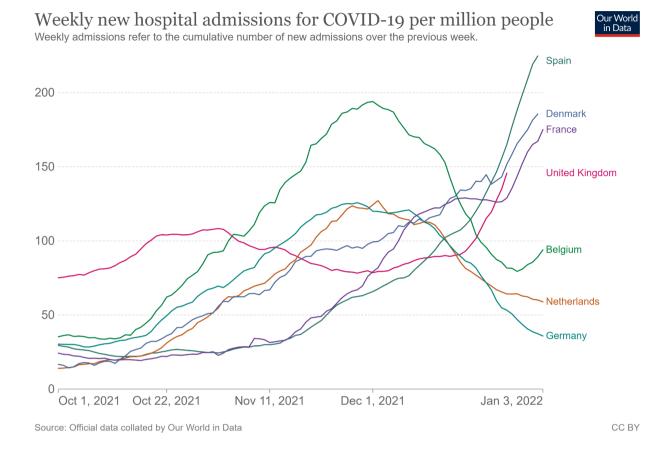
Executive summary (04/01/2022)

a. Epidemiology situation

The epidemiological situation is not reassuring, in spite of a possible lower virulence associated with the omicron-variant. The number of cases has very steeply increased over the past few days (the number of cases over the preceding week is about 80% higher than the week before), and the number of hospitalisations has restarted to increase as well, in addition to already rather saturated hospitals. The number of occupied beds has started to increase again on 02/01/2022 (ICU 504 - HOSP 1882; 04/01/2022).

Internationally, hospitalisation rates have increased in a number of countries:

Country	Hospitalizations pe		
	01/12/2021	01/01/2022	Ratio
Spain	66	225	3.4
France	79	167	2.1
Portugal	14	12	0.9
Denmark	99	186	1.9
United Kingdom	78	146	1.9
United States	141	314	2.2



On a positive note, the vaccine booster has brought important risk reduction (10-fold for hospitalisation, 20-fold for ICU). Nevertheless, the duration of the booster protection against hospitalisation is not known yet.

When comparing omicron with delta, and based on the available data, the burden of disease is roughly half for hospitalization and one third for ICU admission. While this decrease of the relationship cases/hospitalisations/ICU is favorable, the residual risk for the healthcare system (including first, second and third line) remains considerable, as evidenced by the above table, and as observed already in the first line (cfr. quickly increasing burden of infections and testing).

Modeling results on the foreseen impact of the omicron-wave on hospitalisation and ICU in Belgium are to be expected by Wednesday (albeit with a lot of uncertainty regarding impact on hospitals).

The updated RSZ-ONSS-IDEWE-data on infections on the different economic sectors reveal the following:

- Highest incidences in the age group of 20 39 years old. With the reopening of schools, it is expected that the incidences among the younger age groups will increase.
- Overall decline in all working sectors (= holiday effect, cave restart work + New Year parties at work!!)
- The 14-day incidence rate in the working population has further declined and now stands at 1041 compared to 979 (per 100,000) in the general population, thanks to telework, cooling off week, vacation, booster vaccination and other

measures. It is also positive that the number of high-risk contacts at work reporting index cases has continued to decline over the past 8 weeks.

- The highest incidences (>1300) can be found in a number of well-known sectors with frequent high-risk contacts and contacts with young people, such as childcare, soccer and sports.
- In addition, some sectors already show an increase: mainly sectors which can be linked to the Christmas period, purchasing and travel behavior are also appearing: such as e.g. Passenger transport and services, Art, films, television and radio, Wireless telecommunications, Activities of member organizations, Organization of congresses and fairs, Retail trade of mail order, Wholesale trade.
- Finally, the incidences are above those of the working population in diverse sectors Manufacturing, Mixed facility services , Non-life insurance, IT and management consultancy, Water distribution, Architects, Public relations and communications, Other social services not involving accommodation and Lawyers
- In the health and care sectors, incidences continue to decline sharply, a likely effect of booster vaccination.
- Despite the decrease in these figures for the period 14/12-27/12, we continue to recommend that workplace measures be adhered to, given the daily rise in the infectious omicron variant. This variant is causing an increase in worker attrition in the UK and elsewhere. So to avoid a future massive drop in staff due to quarantine and illness, it is crucial to continue to adhere to the measures, including telecommuting, and to strictly implement recommendations of the generic guide in all companies and also have them adhered to.

b. Suggested measures:

- i. We suggest to maintain the overall set of measures and not to evolve into a complete lockdown. However we advise to strengthen the earlier taken (and suggested) measures so that they are maximally effective. (On a positive note: a strong increase in sales/use of self-tests reveals that people are willing to take responsibility for protecting themselves and others by engaging in risk-reducing strategies. Instead of moving to very strict measures). This means in concreto:
- ii. Private life: Even though most end-of-year parties are over, there is a need to communicate explicitly on the potential risks of omicron as a not-so-innocent variant which can still make a high number of persons ill, and some very ill, potentially leading to high numbers of absenteeism and saturation of the health care system. In addition, the more systematic use of masks (including FFP2 for the medically vulnerable and for those ending isolation and quarantine periods).

The population should receive more explanation regarding the very high contagiousness of the Omicron variant and how to protect themselves. The more contagious nature of the Omicron variant leads to a more rapid spread of the virus with ultimately an increasing number of individuals being hospitalized at the population level. So, separating the individual and population level in our communication may be important to promote a realistic (instead of too optimistic) perception of the situation. As indicated in our <u>last advice</u>, contacts at home should be limited to 2-3 households, with prior self-tests and good ventilation.

- iii. Work: we advise strictly to implement temporarily 100% telework and measures of the generic guide should be implemented (including correct use of masks, distance, ventilation,... and not be replaced by looser quarantine or testing rules), and should be explained as a measure to ensure the following:
 - minimizing the number of high risk contacts as well as the need for quarantine and isolation for those who can't telework
 - reduce sickness absence due to infectious diseases (including both covid-19 and flu)
 - enable business continuity.

For those who cannot telework: work should be organized in separate, stable groups that are not mixed. Previous more stringent measures must be considered while not ignoring the mental wellbeing at the workplace.

<u>All new year-parties and gatherings at the workplace or among colleagues should be banned</u>. While the booster vaccination decreases the risk for hospitalisations and ICU's, but the amount of sick workers is increasing and can influence the business continuity of different sectors.

- Public transport: as advised earlier, <u>a 50% capacity reduction</u> (e.g. including use of additional buses where needed) <u>and better ventilation</u> should be implemented. FFP2-masks should be advised at least for the most medically vulnerable groups.
- v. Schools: Without the utmost care, restart is likely to fuel the 5th wave, so very strict measures are needed (as in previous <u>advice 30</u>; <u>advice 31</u>): employ (and make available) masks, sufficient ventilation, maintained testing and quarantine measures as well as implementation of pro-active (self) testing, restricted groups and further vaccination of the 5-11 years old age group as well as further increasing coverage of vaccination in 12+ group.
- vi. Respect/enforce earlier taken decisions
 - e.g. in culture and all activities with audiences: keep distance between households in audience, ventilation, mask wearing, capacity
 - e.g. implement sufficient anti-crowding measures in crowded outdoor settings,...).
- vii. Communication: The population should be informed that the next few weeks will be unpleasant and that the situation will first become worse before improving again. <u>A clear</u> communication on how to best protect oneself and others must be spread out to inform our population. On the other hand, positive messages on positive experiences (e.g. use of self-tests) and mid long term perspective (including barometer) should be included as well. The communication messages should inform people about the importance of:
 - teleworking;
 - masks;
 - quarantine;
 - self-tests;

- reduction in private contacts;
- booster (40% of the Belgian population received their booster);
- ...
- viii. Horeca: given the staff infection rate remains under control, the current measures including closing hour, ventilation and CO2 monitoring, seated dining should be maintained for now.