

**From The Chief Medical Officer:
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To:
Chief Executives, Health & Social Services Boards
Chief Executives, Health & Social Services Trusts

5 June 2003

Dear Colleague

PLANS FOR DEALING WITH CASES OF SARS IN NORTHERN IRELAND

1. The purpose of this letter is to ensure that planning and preparation for SARS is given a high priority by HPSS Boards and Trusts. Due to the serious nature of SARS and its potential to severely disrupt health services it is important that every effort is made to be prepared.
2. To date over 8,000 cases of SARS have occurred worldwide, including 700 deaths. Worrying features of this outbreak include the rapid transmission within health care settings and the resurgence of SARS in Canada, where it was previously thought to have been contained.
3. Although strenuous efforts have been made regionally and nationally to ensure that we do not see cases of SARS in the UK we have already seen 4 probable cases in England and over 150 suspect cases. In Northern Ireland we have seen 5 suspect cases to date, none of which have turned out to be SARS. However, the advice of international and national experts is that SARS has the potential to spread from the Far East to involve more countries in Europe including the UK in the coming autumn and winter. For this reason it is essential that Boards and Trusts are fully prepared to deal with this scenario.
4. This Department is currently leading the regional approach to SARS and is participating in the National Taskforce. In addition, a Regional Taskforce is being established which will continue to develop and disseminate appropriate policy and guidance. The Minister has indicated that Boards and Trusts should ensure that they plan for SARS as a priority over the next few months.
5. HSS Boards have a clear responsibility to protect the health of the local population and, in order to prepare for SARS, should ensure that planning for SARS becomes a key public health priority for the next 6 months. This may mean releasing staff from other duties to work on SARS planning. It will also mean ensuring that primary care services are adequately informed and prepared.

6. Similarly Chief Executives of HSS Trusts will need to ensure that their organisation can deal with all aspects of the diagnosis and management of SARS cases should they begin to present. This will require careful contingency planning and may require releasing certain key Trust staff from their current duties to work on SARS planning. The Department will expect Trusts to take this forward as a priority within their ongoing risk management and clinical governance responsibilities. We will be regularly seeking assurance from Trusts that planning and contingency arrangements are well under way.

7. The Department will continue to issue regular updates and guidance on SARS in line with advice from the Regional and National Taskforce. Regular updates on SARS will be made available on the Department's website – www.dhsspsni.gov.uk/publichealth

Yours Sincerely



HENRIETTA CAMPBELL (Dr)

cc: Mr Gowdy, Permanent Secretary, DHSSPS
Miss J Hill, Chief Nursing Officer, DHSSPS
Medical Directors, Health & Social Services Trusts
Nursing Directors, Health & Social Services Trusts
Directors of Public Health, Health & Social Services Boards
Directors of Primary Care, Health & Social Services Trusts
Dr Clive Russell, Chairman RACCDC