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To: FEMS

Regarding: Interim Report FEMS – The Netherlands

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From: Mrs. Hanneke Verheijde / mr. Christiaan Keijzer

Halfway through January 2020 the Municipal Health Service (GGD) started testing on COVID-19 in the Netherlands. The criteria for testing were: have you been in Wuhan and do you have any symptoms/complaints. As time passed other geographical areas such as Iran were added to the criteria. On the 27th of February the first COVID case was confirmed in the Netherlands. Until the beginning of March all confirmed COVID cases were linked to people that came back to the Netherlands from infected areas. Later in March we started seeing infections of people that did not travel outside the Netherlands.

Approach to control COVID-19

The Dutch approach of coping with the virus is named by the Dutch government an 'intelligent lockdown'. The core of the approach is the idea that without physical contact people cannot infect other people with the virus. It aims to protect vulnerable groups and to make sure that all patients receive medical care in the hospitals, nursing homes etc. The basic measures are stated by the government:

- stay at home as much as possible, work from home if you can and keep 1.5 metres away from others.
- closing of all schools,
- closing of sports facilities
- closing restaurants and bars, museums, theatre, cinemas etc.
- ban on all events local, national and international
- downsizing public transportation
- practicing contact jobs, such as hairdressing, are forbidden

The government has extended most measures until 19 May inclusive. Primary schools, including special primary schools, and childcare centres for children aged 0 to 4 and childminders will reopen on 11 May. The ban on events that require a permit has been extended to 1 September 2020.



Decision making

In the event of an outbreak the Dutch National Institute for Public Health and the Environment(RIVM) convenes the Outbreak Management Team (OMT). This emergency response team brings together specialists from various backgrounds. After every meeting of the OMT, RIVM drafts an advisory report for the Ministry of Health. Then the recommendations from the advisory report are discussed in various governmental consultative bodies and by the Ministers. The Cabinet ultimately decides what happens with the recommendations and whether measures are implemented.

ICU capacity

The ICU capacity in the Netherlands is 1150 beds. This is approximately 6,4 critical care beds per 100.000 inhabitants. This number is quite low compared to the European average. In normal times approximately 70-75% of these beds are used. Now in COVID times the number of beds is increased to 2000. At the top of the outbreak on the 7th of April 1324 COVID cases were reported on the ICU's. This does not include other critical care patients. Cumulative the number almost reaches 3000 patients since the outbreak.

It has been an enormous undertaking to reorganise the ICU, hospital care and other care in the Netherlands. The Ministry of Defence, independent clinics and organisations abroad all helped to make this happen. To staff the ICU's doctors and nurses were taken from their normal specialties to work on ICU wards and in other COVID wards. 40-60% of regular care and treatments has been cancelled since the outbreak.

Shortage of personal protective equipment (PPE)

At this moment we see a shortage of PPE in some areas of healthcare, such as elderly care and home care. In hospitals PPE is mostly sufficient but there is scarcity, but this depends per day. The Royal Dutch Medical Association (KNMG) believes that care providers cannot be asked or expected to provide care without PPE to (presumed) COVID patients. Care providers have an individual duty of care but they also have a responsibility for their own health, and coresponsibility for the continuity of care in a broad sense.

Data 29th of April

Today we are slowly seeing a decrease in the number of new COVID patients, the number of COVID deaths and the number of people admitted to the ICU. In total 38.802 people were tested positive for COVID. 10.685 people have been admitted into hospitals. 4.711 people are deceased.