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SIR PATRICK VALLANCE (affirmed)

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THE WITNESS: I fear not.

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Q. And the transcript of that evidence is of course available on the Inquiry website.

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Is that statement also true to the best of your knowledge and belief?

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Q. Sir Patrick, very briefly, a few questions about your career. It's right, isn't it, that your initial training was as a medical doctor, you then spent some time practising as a general physician in NHS hospitals in London; is that right?

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A. Yes.
can you just expand on that slightly and give us an idea
of what the purpose of this document was?

A. The purpose of this document was to try to understand
a few things about what had happened during the current
pandemic from a technical perspective, and to try to
draw from that and other evidence what useful things
might be for a future, as it says, Chief Medical
Officer, Chief Scientific Adviser, or others, to be able
to look at it and say: well, there are some things there
that we need to take notice of. So some of them are
recommendations about what should be put in place now in
order to make sure that you get the preparedness and the
structures right, and some of them are things that we
think would be useful for people to look at, should
there, which I'm afraid there will be at some point, be
another pandemic, not because you can predict what that
pandemic would look like, because each will be
different, but there are some generic lessons in there
that we thought would be helpful for people to
understand.

Q. Yes. So this document, if you like, sits alongside your
witness evidence as drawing on some very similar themes?
A. It does.

Q. Thank you.
Let me move on to a different set of documents by
the following day.

These were private thoughts, they were instant
reflections from a day, and once they were written,
I actually never looked at them again. I mean, they
were put in a drawer and that was that, and I certainly
had no intention of doing anything else with them
either.

Q. Just on that last point, no intention to publish them or
use them as a basis -- we've seen various people who
were involved in the pandemic, including some of your
scientific colleagues, have written memoirs or accounts
of their time; did you think you might draw on those
notes in such --
A. I had no intention whatsoever of these ever seeing the
light of day or me looking at them again and sort of
felt the world had probably had enough of books of
reflections of people's thoughts during Covid.

Q. If we can go over the page, please, at paragraph 478,
that's the bottom of the next page, you make the
point -- you've already said these notes were written
quickly at the end of the day, but you then add the
perhaps obvious point that they weren't intended, they
couldn't perhaps have been, a considered analysis of
events. Reading on, you say you have never gone back to
them, you didn't edit them, you didn't, as it were, add

Q. You describe something about those notes in your witness
statement, and I wonder if we can go to paragraph 474,
please, on page 157.

You describe here, Sir Patrick, that your practice
of writing these notes started as a means, essentially,
of protecting your own mental health, given the stress
that you were experiencing on a daily basis. You wrote
them, the term has been used, as something of
a "brain dump" at the end of each day. Is that right?

A. Yes. At the end of each day, often quite late in the
evening, I would just spend a few minutes jotting down
some thoughts from that day, some things and
reflections, and did it as a way to get that, in
a sense, out of the way so that I could concentrate on

way of introduction, and that is the evening notes that
the Inquiry has already heard something about.

It's right, Sir Patrick, isn't it, that in response
to a disclosure request made by this Inquiry, you
produced a lengthy set of personal notes that you wrote
during the pandemic. You produced them to us and, just
to be clear about this, although those notes contained
some very sensitive and personal entries, you disclosed
the notes in full to the Inquiry, as it were, at the first
time of asking?

A. Yes, I did.

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(2) Pages 5 - 8
an observation. So they were very much instant thoughts.

Q. And we will bear all those things in mind when, as we will, we look at some of these notes later today.

May I just ask a rather practical point about these notes: I think there is at least one section of the notes which actually are notes that you took during a meeting, the meeting of 20 September, with Professor Gupta and others, but by and large, as you've said, is this right, you remembered things that took place during the day and then wrote about them in the evening?

A. Yeah, I might have described the occasional thing down on a bit of paper during the day and then looked at it in the evening, but -- so they're a mix of things that I noted at the time and things that I noted in the evening, and, as I'm sure you've had the pleasure of realising, my handwriting is not exactly excellent.

LADY HALLETT: You're a doctor, Sir Patrick.

A. I know.

MR O'CONNOR: I'm glad to say that is a task that others in our team have had to grapple with, Sir Patrick.

But I just wanted to pick up the point you made about making notes during the day, because when we look at the notes, we see that quite often there are direct quotations that people who you were in meetings with said. Might that then be something that you made a note about at the time and then put into your notes later, or would that just be your best memory later in the day of what they said?

A. It could have been either of those things and I might have just jotted down the quotation on a bit of paper during the day.

Q. Yes. You've mentioned your handwriting, Sir Patrick, and just for clarity, in terms of the process, you provided us, didn't you, with your manuscript notes, the originals that you wrote? Those have then been transcribed into a typed version, and a further exercise has taken place to capture certain excerpts which have been put into a schedule. And during the course of today we will be looking mainly at the schedule of excerpts and a little bit at the transcript, but happily not at the manuscript version at all.

I'm going to move on, and again by way of introduction ask you something about your role as Chief Scientific Adviser before the pandemic, in peacetime if you like.

We've heard that you were appointed in April 2018, and one assumes that the first year and three quarters

or so of your term was very different from the latter period?

A. Yes, it was.

Q. You have set out in your first witness statement for Module 1 a degree of detail about all the things that the role of Government Chief Scientific Adviser entails, and I'm not going to go to that statement in any detail, but it is apparent from that statement that there is far more to that role than the fairly narrow function --

very important function, but fairly narrow function --

that you performed during the pandemic.

Can you, in a few sentences, give us an idea of the breadth of the role that you were performing, perhaps particularly in that first year and a half or so?

A. The role of the Government Chief Scientific Adviser is to provide science advice for policy rather than policy for science. So it's to try to ensure -- and the job reports to the Cabinet Secretary and is accountable to the Prime Minister and Cabinet -- that areas of policy consideration and thinking can be informed by science advice, whether short-term or long term.

That means areas like climate were a big focus of my attention, areas like what the science system was in government and was it adequate to provide that right the way across every department, and areas like how the science base could be best harnessed to think about innovation and areas that might be relevant to the economy, were the sorts of things that I was involved with, and indeed even during Covid those things continued, so I was the Chief Scientific Adviser for COP26 in Glasgow as well on behalf of the government at that stage.

So there are many different areas that this role covers, and there's a separate Chief Scientific Adviser in each department as well.

Q. Yes. It's a very important fact for us to bear in mind, is it not, that although, of course, so much of your work during the pandemic was based on medical matters, which tallied with your own training, the role of Chief Scientific Adviser covers a far broader canvas: you've mentioned the environment, I think there's a reference in your statement or possibly the notes to matters to do with space exploration, dams overflowing, Novichok in Salisbury, a whole range of scientific matters in normal times?

A. Yes, and I would characterise that in three blocks: the science for everyday matters of policy in government, which covers everything, as you've said, from things like space exploration to transport or other areas; there's a second block, which is in emergencies, and in
my time there was an emergency obviously relating to
Novichok in Amesbury in Salisbury, there was one
relating to the potential collapse of the dam at
Toddbrook Reservoir; and the third is science as it
relates to economic matters as well.
6. DURING THAT FIRST PERIOD OF A YEAR OR SO BEFORE THE
pandemic, you were involved with, and I think
commissioned, something called the Science Capability
Review and this is something you discuss in your witness
statement.
   Can you give us a little detail of that exercise and
also can you tell us whether there were any issues that
emerged from that exercise that subsequently you felt
were relevant to the way in which the pandemic was dealt
with?
16. A. Yes. That was an exercise undertaken together with
Jeremy Heywood, who was the then Cabinet Secretary, and
the Treasury, to ask the question: was science
capability adequate in the government for what I saw
then as a central plank of what all modern governments
need to know about?
And the work which was published in 2019 identified
a number of areas: first that the funding for science
had decreased across many departments, and that left
departments somewhat disabled in their ability to use
information. But the second is that it also meant that
there isn't always a good receiving system for science,
because, a way of thinking, it's different from perhaps
how others approach a problem, and that meant it wasn't
always easy to get the right sort of pool for science
across the civil service. And I'm really pleased to
say, I should say, that as a result of that report there
is now a target to have 50% of the intake with a STEMM
degree, which I think is about right, it shouldn't be
90% the other way either.
13. Q. Yes, do you know whether that target has been reached or
how it's doing?
12. A. The target is set for -- to be reached by 2024, and I'm
going to look with interest from the sidelines to see
whether it's achieved.
15. Q. All right.
17. Turning then to your role during the pandemic,
Sir Patrick. At a very high level, those who have been
following this Inquiry, reading the documents and so on,
might think of your role as falling into three parts:
first of all, your management role at GO-Science,
managing, providing structure to those generating
scientific advice, in particular of course chairing
SAGE; secondly, a role providing personal advice to the
Prime Minister and other key decision-makers; and,
thirdly, a presentational role, explaining scientific
advice to the public, of course in the press conferences
that we're all familiar with.
In broad terms, does that capture it, or are there
other important aspects that you think we need to think
about?
10. A. I think in terms of the work during the pandemic, those
three categories are reasonable, although of course
they're all quite broad.
11. Q. Yes. Yes. I mean, we won't be saying very much today
about your role regarding vaccines, because of course
that's going to be the subject of another module, but
particularly given your background and your work with
GlaxoSmithKline, you had a considerable role to play, did you not, in the development of the vaccine
programme?
16. A. Well, I set up the Vaccine Taskforce in order to get the
appropriate skills and focus on what I saw as a major,
major issue for the world, to get vaccines in time and
of the right type, and to get them available, in this
case, into the UK.
21. Q. In terms of the second of those three limbs, the role
providing personal advice, and, as we will see, usually
that was orally to the Prime Minister and his advisers,
initially, is this right, that was a function you
performed at COBR meetings, we’ve all seen the COBR meetings that took place in the early stages of the pandemic, and latterly it became something that you did at other committee meetings and also less formal occasions at Number 10?

A. Well, the personal advice element of course went to the Cabinet Secretary and others as well, it wasn’t just to the Prime Minister. The COBR system really was a place where the output from SAGE came into a ministerial forum, and where other outputs would come as well. So that is the place where -- certainly in other emergencies, I’d seen it work well -- where different inputs, whether it’s economic, whether it’s science, whether it’s something else, come together, ministers make decisions, and there’s an operational structure, which is the Civil Contingencies Secretariat, that would then make sure that the output of that was properly handled across Whitehall. So that had worked well in the previous emergencies I’d talked about, and that was the structure that was in place at the beginning of Covid.

Q. Yes. We will come back to explore in a bit more detail how well that worked, and issues around how your advice is to be docked and how that might be reflected in future occasions.

on three occasions, and I think I’m right in saying that my predecessor Mark Walport actually didn’t have a meeting directly with Theresa May. So it wasn’t as though the Science Adviser is in and out of Number 10 the whole time. That obviously came to be the case during Covid but it was for specific purposes.

Q. We’ll come to see that there certainly were times where you were meeting the Prime Minister on a daily basis?

A. Yes.

Q. But not all day, and there would be some meetings that you attended and then you were asked to leave and other meetings would go on in your absence; is that fair?

A. Yes.

Q. You’ve mentioned already, but for completeness, although of course your work was so heavily focused on the pandemic during this time, were you in fact also required to perform some of those other duties we mentioned about matters completely unrelated to Covid?

A. Yes, there was a Chief Scientific Adviser network that continued, that obviously kept that going in departments. As I’ve said, I was asked to lead science for COP26, the climate conference in Glasgow, to make sure we had that side of things right, and there was work going on on things like the Integrated Review, the position of the UK in the world, which had a big science theme in it as well. So work like that continued and GO-Science continued to produce other reports, but was -- of course the absolutely major focus was at all times on the pandemic, and that took precedence over everything else.

Q. Yes.

Could I ask you to look at paragraph 13 of your witness statement on page 9, please. Picking it up about half the way down, you say:

"It was by chance that as [Chief Scientific Adviser] I had a background in medicine and pharmacology."

You say that, as we’ve already noted, the person filling that role could come from any scientific discipline and is expected to cover all scientific areas, and you say it would be wrong to expect, and this perhaps follows from what you’ve said, that any future scientific adviser would have specialist knowledge on medical or epidemiological matters.

First of all, given your no doubt fortuitous experience in medicine and pharmacology matters, on reflection do you think that you played a greater role in responding to this pandemic than perhaps you might have done if your speciality had been different?

A. I think the role of the GCSA would still be to chair SAGE, and during a health emergency that’s done together
A. With the Chief Medical Officer. I think that would have continued. I think inevitably there were some aspects of what I did when I was called in because of my particular knowledge, particularly, as you’ve mentioned, around vaccines, where I had a role, which I don’t think in any way would be something which the GCSA would normally necessarily do, and I think probably -- no, not probably, definitely I had more knowledge of some of the areas that were being discussed than a GCSA would have in day-to-day SAGE activities for this particular emergency.

Q. Looking forward, Sir Patrick, given, first of all, the profound effect that the pandemic had on this country, and also, as you’ve said, not the likelihood but the certainty that there will be another pandemic in due course, do you think it’s right that the Chief Scientific Adviser should continue to be selected as someone who may or may not have a medical background, or do you think that in fact the person fulfilling that function ought to have some relevant expertise that would be useful when the next pandemic arrives?

A. I don’t think the GCSA role is set up primarily for pandemic preparedness; it’s set up to provide science advice across government. The great crisis that all governments face for the next many decades is the profound effect that the pandemic had on this country, probably, definitely I had more knowledge of some of the areas that were being discussed than a GCSA would have around vaccines, where I had a role, which I don’t think is his background.

Q. When you say “this”, you mean?

A. Pandemics and epidemiology and the spread of infections, that is his background.

Q. Yes. Let’s turn, then, if we may, to that early period.

A. And by the way, he’s very good. He’s very good. Well, if he is watching, I’m sure he is grateful for that.

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A. January to March 2020, Sir Patrick. I’d like to start if I may by looking at an email that Professor Woolhouse sent and which the Inquiry has seen before. He didn’t send it to you, he sent it to two people that you knew, Jeremy Farrar and Neil Ferguson.

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A. I don't remember a specific conversation, but I had many conversations with both of them and others around that time, and it was very clear from the numbers that we'd already looked at in the first SAGE meeting we'd called that this had the potential to be really quite devastating, and the numbers or potential deaths and infections was extremely high, so I don't think there's anything in here that's terribly surprising, and it was indeed the case that we knew that if this got to the UK, if this spread around the world, that this would have a large effect.

Q. I don't want to split hairs, Professor, but you've used the word "potential" there. The point that Professor Woolhouse makes in his email is that it's not a scenario, it's not a worst case, it's something that -- again, I don't want to get into technical terms, but he seems to be trying to convey the impression that it's more likely than just something which is a scenario or something which might happen. Is that sense something that you shared at the time or not?

A. Well, I don't think at that stage this had escaped China in a sort of uncontrolled way, so the first question was: would it fully escape China in an uncontrolled way?

Q. All right.

Let me move on. I want to ask you some questions about this whole question of NHS capacity. As we know, and the Inquiry has heard detailed evidence, the strategy which was adopted over this time, the mitigation strategy as it's been described: contain, delay, mitigate. And within that context, if we can look, please, at paragraph 204 of your statement, page 65 I think it is.

A. The second thing is that we didn't really know on the overall transmissibility as to whether this would be contained in the way that SARS and MERS had been contained at that stage. And so I don't think it was inevitable at that moment that this would spread, and you can see lots of opinions being expressed quite forcibly by people around then as to whether it would or wouldn't reach right the way across the world, and WHO I think at this stage hadn't declared it as a public health emergency of international concern, certainly hadn't declared it a pandemic.

So I think if it escaped and if it continued to behave with the numbers he said, then yes, that's true, but we didn't know that at that stage. And I think you can see actually by people's behaviours and even senior scientists' behaviours over the next few weeks that not everyone was behaving as though this was going to happen necessarily.

Q. Do you think they should have been?

A. Well, I think -- it's very difficult to know whether this was going to be contained in China and elsewhere, and had it been then it could have been shut down. And it wasn't. And it became spread much more easily than I think anyone had anticipated, much more easily than SARS and MERS, which were containable. And that's what was not known at the time.

Q. No minister defined a cut-off point for the number of infections or deaths other than by reference to avoiding the NHS being overwhelmed.

A. Two points to pick up on that. Firstly, an issue you raise at various points in your different statements is that there was, I think, generally throughout the
pandemic and certainly in this early stage, a lack of clear understanding on the part of the scientists of what the government policy was. And to put it another way, the scientists lacked a baseline against which they could do their modelling and provide advice. Is that fair, is that something that you raised and which applies at this time?

A. I think in a sense there were three broad possibilities: one, that the disease could be contained and eliminated; the second, that the disease would run wild and not be controlled at all and people would make no effort to do anything; and the third was to try to control it in some way to minimise the impact. And we didn't know at that stage whether it was fully containable or not, but once it breaks out -- and by the way, the break-out of containment domestically is dependent on the infrastructure you have, so the test, trace and isolate infrastructure -- but once it breaks out, then my understanding, from the beginning, was the government did not want to do anything other than to make -- it didn't want it let it run riot, it didn't think it could get to zero Covid, and therefore it was to control it and suppress the numbers in reference to the NHS being overwhelmed. That was the closest we got to sort of understanding the aims, coupled with, as you will see later, a desire from the government not to impose overburdensome restrictions on liberty.

Q. Yes, so my question is, on that first point, and maybe this wasn't a moment where you might have wished for greater understanding of policy, but might you have wished for more detail from the government about precisely what they were prepared to accept or not accept in terms of mortality, or was it enough simply to be told, “We just don't want the NHS to be overwhelmed”?

A. Well, I think it would have been helpful to have that, but I also think, and I think I say this in my witness statement, we asked at several times to try to define a number, and nobody would give that number. I do think that's a very difficult question to answer. So mathematically it's rather helpful to have it, it's actually a difficult question to answer. But what we had at this stage was NHS not being overrun.

Q. So moving from there, given that that was what you were being told, do you think that enough was done during February to understand what that meant and what an NHS overwhelm would look like, what the numbers involved were?

A. I think the numbers -- well, there was a lot done in terms of what needed to be -- what the options were to reduce the spread. So quite early in February work started on non-pharmaceutical interventions.

Neil Ferguson in particular drew up a lot of modelling around that, what the different options were, and came up with a figure that others endorsed as well of needing to get the 75% reduction in contacts in order to try to really suppress this to the right level.

So there was a lot of work done on the modelling, there was a lot of work done exposing those options into COBR, including with the behavioural science input on that, and there was a discussion -- which I think Boris Johnson puts in his statement -- which he had with the CMO at the end of February on lockdown options and what the implications of those would be.

So I think there was a lot of evidence that there were things that needed to happen in order to achieve this aim of suppressing the curve. I'm not convinced that there was a very effective operational response to that.

Q. A lot of work you've described on understanding the growth rate of the pandemic and different NPIs that might be used to suppress it. My question is: running alongside that, if the policy direction was "yes, you must suppress it but the target is to keep it below the NHS", was there enough work going on in parallel to understand what that cap actually meant?

A. Thank you. Sorry, I didn't answer that part.

We had great difficulty -- when I say "we", the modellers had great difficulty in getting clarity on the NHS numbers. What we did know was that the NHS runs at pretty much 100% capacity, which is quite unlike most other countries. So we knew that the NHS capacity was likely to be very full anyway, and trying to get precise numbers on ICU beds and occupancy of other types of high-dependency beds was pretty difficult during February, and I think it culminated in a meeting which I think I asked to be set up on the first day of March with the NHS modellers to try to see if we could resolve this logjam, why was it so difficult to get the numbers.

Q. Let's look, if we can, at an email exchange you had with Ben Warner.

So this is INQ000195863, please.

LADY HALLETT: Mr O'Connor, you're coming back to what Sir Patrick meant by the operational response being not very effective?

MR O'CONNOR: Yes, my Lady, I will, I think.

LADY HALLETT: Thank you.

MR O'CONNOR: This is an email exchange, Sir Patrick, late in February, 27 February, so a month or thereabouts after the email we saw with Professor Woolhouse and well into the time, judging by your statement, that it was (8) Pages 29 - 32
understood that NHS overwhelm was the policy aim, what you were supposed to be avoiding.

Ben Warner says to you, he's a little concerned the NHS didn't seem to know what they needed for their models, didn't seem to have started modelling, and then your response, you have been "pushing them on this for the last 10 days or so", you think they've now grasped it, there's a "meeting planned for Monday", "they haven't defined [their] input variables well enough".

Taking a step to one side, Sir Patrick, you've already mentioned issues such as NHS capacity, was it really a complicated modelling exercise that was needed or was there simply a sort of basic mathematical exercise of: how many beds have they got, at what point, on our understanding of the pandemic, will they be overwhelmed? Is it that complicated?

A. Well, in one sense, no, it's not that complicated, and in Exercise Nimbus, which I think took place in the middle of February, the question of NHS capacity inevitably being overrun was discussed, and Simon Stevens I think has referred to that, so it was very clear that the projections, the worst-case scenario, would overrun the NHS. That was clear and discussed all the way through February. What is being asked for here is the point that the modellers needed

Q. I think you said there was a meeting in early March, and when we look at some of the data that was provided, the modelling from the NHS -- if we can look at INQ000146571, please.

This is 9 March -- and if we could just zoom in on those bottom two graphs, please -- the essence of it seems to be that there's a peak, this is the unmitigated peak, and that what someone has simply done is drawn a line relating to total NHS beds on the left and critical care surge beds on the right, and said: well, there you go, that's the point of overwhelm.

Just for completeness, perhaps we'd better look at the next page, please. A different graph there, that's the mitigated peak, the same lines are drawn.

It doesn't look, at first blush, as though that is an exercise that really needed to take weeks and weeks and weeks, and we don't know what the variables are, we don't know what the inputs are. It looks like somebody has just said, "Well, this is how many beds we've got, we'll draw that line on the graph"?

A. Well, that's fine for this, and that's not what the modellers were asking for, but this is absolutely understood, and it was understood in Nimbus in mid-February that in a big peak the NHS would become overwhelmed. What it doesn't tell you is at what stage you think you need to act in order to do something. That's what the modellers were trying to understand and why they needed more precision. But, I mean, on a basic level, anyone could see that with the -- if you had a huge wave of infections it would cause this problem.

Q. The reason I'm asking, Sir Patrick, is that as we know, and we'll come to this, when the weekend of 14/15 March came around, one of the reasons why it felt necessary to take sort of dramatic steps or change direction, depending on which way you look at it, was a new understanding that the NHS was going to be overwhelmed. I suppose my question is: is that -- was that part of the analysis something that could have been understood earlier if only more urgent steps had been taken in February to do this sort of analysis?

A. Oh, I don't think there's any doubt, if you look at the CRIPS in February, that the people understood the NHS could be overwhelmed. So I don't think that's a new understanding. I think the new understanding on the weekend of 14 and 15 March was that we were much further ahead in the pandemic than we realised, and the numbers that came in that week showed that there were many more cases, it was far more widespread, and was accelerating faster than anyone had expected. That's what triggered an urgent recognition that this was an imminent problem of the NHS collapsing, not something that was weeks away, with the possibility of introducing measures at a more leisurely rate.

So that weekend was an intense acceleration and indeed intensification of the measures that were required to stop this.

Q. Let me turn, then, and ask you some questions about that weekend, and by way of introduction it's well understood that different people who were there seemed to
understand the events in perhaps a slightly different
way. Some people regard it as being a time when
measures were fast forwarded or accelerated, other
people regard it as a change of direction.

But certainly I think, do you agree, it was on any
view a time when decisions were either made or started
to be made that a suppression policy, a policy of trying
to keep the pandemic -- the R number below 1, needed to
be introduced whereas previously that point hadn't been
reached; is that fair?

A. Well, the plan right from early February was to keep
R below 1 to stop it growing, but this was a recognition
that this had to be really implemented very, very hard
at that weekend in order to achieve that. So all of the
measures needed to be put in place.

Q. Is that right that the plan from the very start had been
to stop the pandemic growing? We looked at those charts
and we see a curve. I mean, flattening the curve is not
the same as suppressing the virus, is it?

A. I think ultimately it is. It's a question of how far
you want to suppress it. So you could suppress down to
zero, which was never the aim. You could suppress
a little bit, but you couldn't do that if that was going
to overwhelm the NHS. And so the question was how far
you needed to suppress it and at what stage you needed

Q. Yes, we'll come to that idea of yours which you repeat
in your witness statement.

I want to ask you about a passage from Ben Warner's
witness statement, please, so if we can look at
paragraph 303 -- yes, we have it there -- on page 78.
It's the final sentence -- no, sorry, the final two
sentences, he says:

"Changing from a mitigation strategy to suppression
midway would have been the worst of both worlds. From
early 2020, we should have developed alternative
explains (for example lockdowns), after seeing the
actions in China or at least after northern Italy."

So his reflection, and it's one which is shared by
some others in Number 10 who we've heard from, is that
the events of that weekend in hindsight suggest that
they had previously been on the wrong plan, and that
they should have been thinking about a different plan,
a suppression plan, earlier. Is that your view? Do you
think that is a valid criticism of the science, or not?

A. I'm not sure that he's criticising the science,
actually, I think he's talking about the operational
plan to deliver, so that the notion that you had to
intervene, and there are multiple emails and charts and
things that were presented at COBR meetings as well,
talking about the combination of NPIs that would be
required to reduce the spread and to get R below 1. The
question was when and how much to do it. And this
unfortunately wasn't mirrored by an operational
readiness. So the bit that I think is missing is
whether the operational development of plans to do that
at short notice were as advanced as they should have
been, and they weren't.

Q. Are you there talking about things like test and trace
or --

A. Well, test and trace for sure, we had a -- and isolate.
We had an inadequate scale of facility to do that
through Public Health England, but also the plans for
introducing the NPIs. I think, given that they're
described quite early on, there should have been
an operational plan to have those ready to pull the
trigger on as soon as they were needed, and what we see
is it takes quite a long time to get those actually
working and to get the process in place to do that.
I think that is a sort of learnable lesson, that you

Q. You've focused your remarks very helpfully, very clearly
on the operational, if you like, the implementation
aspect of this. It may be that Mr Warner was also
directing at least some criticism towards SAGE and
saying that SAGE should have thought more about
lockdowns and more severe, more stringent NPIs earlier.
As you say, it's ambiguous, but is that a fair criticism
to make?

A. Well, I think if you look at it, we thought a lot about
NPIs, there's lots of work on NPIs, lots of work on the
notion that you had to have lot so NPIs, you had to use
them together probably, that this was going to be
behaviourally difficult, it was -- links to the
behavioural science group to look at that, all of that
was done through February. Where we were wrong, and
I think it's very clear, is our belief that we
understood when to do that. It wasn't that we hadn't

Q. And I do think the focus on trying to get that
timing exactly right was incorrect. It was an error to
think that you could be that precise. That's a really
important lesson that came out of this, I'm afraid: you
need to go early.
said do it and that this is going to be needed, it was
that we thought we could understand when to do it.
The data that came in during the week leading up to
the 14th and 15th showed clearly that we were much
further ahead, it was much more likely to be needed
urgently than anyone had realised. That's a data
problem, but it was also, I think, a scientific problem,
in that you can't manage this with the precision that
you think you can, and you therefore have to take
different actions.

Q. I'm going to come back to the ultimate -- the decisions
taken over that weekend briefly in a moment, but I'd
like to take a step to one side before I do that, and
ask you some questions about your relationship with
Professor Whitty at this time and the extent to which
your views differed.

If we can look, please, at INQ000214802, this is an extract from Jeremy Farrar's memoire -- one of those
memoires from scientists that you referred to,
Sir Patrick -- giving us an insight into events.
Sir Jeremy, of course, was a member of SAGE during this
time, was he not?
A. Yes, he was.
Q. And he describes, we see the second paragraph there,
a "friction", as he describes it, "between waiting and

At the end:
"... more cautious than me."
If we can go to page 3, please, the last few -- the
last sentence or so:
"[Chris Whitty] worried about pulling trigger too
soon -- 'cause harm' & introduced some stuff on
[behavioural] 'fatigue' if you started too early ..."
Then on page 582 of the schedule there is an entry
that you made much later on but reflecting on the early
events, so we're now in February 2021, but Sir Chris
talking afterwards about the Inquiry:
"... was lockdown too late in March, could we have
known ...
And then this:
"... (he was a delayer of course)."
So help us, Sir Patrick, was there this tension or
friction between the two of you about how quickly to
proceed with NPIs in that first period?
A. Well, I think Chris Whitty is a public health specialist
and he was rightly, in my opinion, concerned about the
adverse effects of the NPIs. He was concerned that
there would be more than just the issue of the direct
cause of death from the virus, that there would be
indirect causes of death due to effects on the NHS, that
there would be indirect harms due to people isolating --

wading in". He says it "led to a palpable tension
between Patrick and Chris in the early weeks of 2020,
particularly given the apparent absence of political
leadership in that period". And he refers to the fact
that Boris Johnson didn't attend the first COBR
meetings, as we have seen.

So it's what he describes as a "palpable tension",
"between waiting and wading in", and there are some
references, Sir Patrick, in your notes which would seem
to support that suggestion.

If we can look, please, at INQ000273901, this is the
schedule, and I just want to show you a few references,
Sir Patrick.

In January -- perhaps we ought to say that you
weren't in fact writing these notes contemporaneously
for the first three months or so of the pandemic, were
you?

A. Correct.
Q. You wrote a sort of catch-up section, in March or
thereabouts, looking back to the early months.

But relating to January 2020, you said:
"Chris thought would be contained [...] PM 'my gut
tells me this will be fine' ..."
But then:
"... [Chris Whitty] ..."
A. We got information on 13 March which unambiguously showed that the pandemic was far more widespread and far bigger and moving faster than we had anticipated, and that came from a number of sources, including surveillance systems that we’d set up to look at people who had pneumonia, hospital-based surveillance, and some work coming in from the initial sporadic surveillance systems and NHS numbers. That was unambiguous, and extremely worrying. Over that weekend, it became very clear that much more stringent measures would be needed to control this and they needed to be introduced quickly. I made my views known about that, that that was the view of the SAGE committee and the modellers, and it was my view that we were in a position now where we had to move quickly. That decision, I believe, was understood. On the Sunday of that weekend I was unambiguous in the meeting that much more stringent measures would be needed now, I think that’s recorded in Imran Shafi’s notebooks, and the following day when the Prime Minister announced that there would be voluntary measures to keep people from making contacts, I also suggested on that day that London was so far ahead that it would be necessary to possibly lock down London. So those were my views over that weekend. I think frankly on that weekend an in principle decision was taken that lockdown would be required. It then took several more days to work that into a full mandatory process. But whether it’s mandatory or voluntary is a political issue, not a scientific one.

Q. We know and we’ve heard from others that the term "lockdown" may not have been one that was in play then, but you have said that your view in essence was that that was what you were campaigning for at the weekend and there was at least an understanding that that was where things were headed as early as that?

A. Well, I wasn’t campaigning, I was trying to point out what the evidence was and how I interpreted it and what SAGE thought. And Neil Ferguson’s work and others’ work during February had shown that in order to really get this down to the levels that it would need to be reduced by, you needed to reduced contacts by 75%. That is a huge reduction, requires all sorts of interventions. I’m not even sure we ever really achieved much more than 75% at the peak of the interventions. And that’s what I was arguing for on that weekend, that if we wanted to now stop this from becoming devastating we needed that degree of reduction of contacts.
You, as I understand it, in your statement say that you think the lockdown, this first lockdown, was imposed a week too late, and I think you're referring there to the delay, as you would put it, from that weekend, when the discussions we've just been covering were had, and the mandatory lockdown which was introduced a week later. The word you use is "implementation", so a delay in implementing the decision. First of all, is that a fair summary of your witness statement?

A. Yes, I think that's probably the earliest at which that decision could have been made. Maybe a few days earlier, if we'd got the information. I remember at the time Neil Ferguson wrote that we were taking actions earlier than other European countries relative to where we were in the pandemic. But I think that weekend was in principle a decision that all these measures would be needed, and I think it would have been sensible to have got on and done those as quickly as possible. But, you know, I'm not an expert in how you implement these things, how you operationalise them, what the legal requirements are, and there were some very significant legal requirements around that, and that took another week or ten days for that to be in place.

Q. So those are the operational implementation type matters which in fact we touched on when we were discussing measures to restrict contacts worked, and we did know that you had to move early. And the number of infections and deaths at every stage for subsequent decisions were orders of magnitude in some cases higher than at that period in March. So I think in retrospect, you know, the March decision was earlier than some of the later decisions, even with the knowledge that came with that. So I think ... I think it's difficult to conceive that that decision would have been made much before the -- that weekend, as I say, possibly a few days.

A. Well, I've just said I think it could have been a few days earlier. I think it's -- it's difficult to know, if you look at the numbers of cases and the numbers of people who, even by then, were beginning to show how serious this disease could be. The measures themselves are not neutral, they're harmful, and so the question is around timing, it's around when you're prepared to take an intervention, accepting that you're about to use definite harm. Because we knew the interventions would cause harm, we didn't know exactly how many of them would be needed to stop the spread of the disease.

Q. So, sorry, that's a long answer, but I think with that, even with that, because we got seeded so widely across the UK, not from China, not from the countries where people thought this would come from, but from Europe, with huge importations, and we can see this in the genomics --

A. This is half term. And we had a huge influx from Spain, France and Italy over that half term and beyond which meant that we probably had lost control, and test, trace and isolate system at scale, and we were unable or PHE and the organisations seemed unable to operate that, and that would have required a lot more planning over previous years than had occurred.

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Q. This is half term?
LADY HALLETT: Yes.

Just before we break, Sir Patrick, as you know we take breaks for everyone just to take the opportunity to take a breather.

When you had this so-called reprimand, you said it was the permanent secretary at the DHSC, Sir Christopher Wormald, and the Cabinet Secretary. Were they really more concerned about the process aspect of what you were saying than the substance, which was basically the dam has burst?

That's what they said to me after. I spoke to Chris Wormald about it and said, "I hear you're very cross with me for what I said". His response was, "There are ways of doing this that we need to do to make sure it's structured and ordered and it goes with the proper process", rather than the fact that I'd said it as statement and --

LADY HALLETT: I won't ask you --

A. We agreed to differ a bit on that. But I mean --

LADY HALLETT: I should say, I won't ask you for your reaction to that.

Very well. A 15-minute break.

(11.46 am)

(A short break)

(12.01 pm)

This is an issue that you touch on in your witness statement but you don't perhaps go into it in quite as much detail as there. Do you agree with these sentiments?

A. I do, and I didn't when it first happened. In other words when it was first said "We're following the science", my reaction was: good, they're listening to us. Because that's not always the case in government, for the reasons I've laid out. But I think that the way in which this was both heard and possibly meant in terms of slavishly following the science, obeying it at all times, is completely wrong. I mean, you can't -- and I can also totally agree there is no such thing as "the science". I mean, science by its definition is a moving body of knowledge that tries to overturn things by testing the whole time.

Q. You say when it was first used you weren't opposed to it. Was it then something about the number of times, the repetition of it, or perhaps the circumstances in which it was used? I mean, at what point did it become a negative thing for you?

A. Well, pretty quickly. I mean, initially I thought: good, they're listening to us and they want to hear the science, that is the right thing for them to do. But I think it became taken, both interpreted I think widely in the press and again possibly inside government as well, as a sort of direct following the science, a slavish following of it, which -- I agree, these are difficult ministerial decisions, they are precisely what needs to be taken by ministers to integrate the different forms of evidence and make those almost impossible judgement calls which the science can't make and shouldn't make.

Q. Did you speak to Boris Johnson or others asking them not to use that phrase?

A. I can't remember whether we did. They knew that this was damaging at one point and I think they did -- it did get sort of softened to "we're being informed by", and I think the Prime Minister at the time actually says that at some point, that "we're being informed by the science", quite early on, in March or April, I can't remember when.

Q. In her witness statement, Helen MacNamara made the observation in this context, that you would never hear a politician saying that he or she was following the economics, and drawing that distinction. Do you think that one of the reasons why this phrase may have been used was because the politicians didn't feel comfortable about their understanding of the science and so, if you like, they said they were following the scientific
advice in a way that, as Ms MacNamara said, they would never say they were following economic advice?

A. I think that is true. There’s a great variability and largely an uncertainty and unfamiliarity with science in government, and my experience is that many people who haven’t had a scientific training also view science as giving immutable facts. You know, they remember at school they were taught a lot of facts about science.

The truth is that science is a process: it’s a way of testing what you currently know, experimentally or observationally, overturning hypotheses, advancing and trying to increase your knowledge base, and it’s a description of what you currently have, which can easily be overturned by new evidence. And I think that’s not widely understood -- I mean, "understood" may be the wrong word, but it’s not intuitive to many people. And therefore I think there was a bit of dependency, that this was a scientific problem and people would listen slavishly to this and wanted to sort of slightly hide behind this at times.

Q. Just going down the page, let’s look at paragraph 122, please, a related but slightly separate point that Mr Thomas makes, he said that: "SAGE ended up filling a gap in government strategy and decision making. That meant that government..."

A. In your witness statement, perhaps we can go to page 207 of your witness statement, paragraph 642, you describe, if you like, your general experience of providing science advice to decision-makers. Picking it up about four or five lines down you say: "...I am not in doubt that the CMO [that’s of course Chris Whitty] and I gave advice from SAGE repeatedly and that it, together with the uncertainties, was usually understood by decision-makers. However it was often necessary to explain scientific concepts on many occasions. In my view, it is entirely appropriate for decision-makers to challenge science advice ..."

In the next paragraph you say you were asked a number of questions about whether the science advice that you provided to the Prime Minister and core decision-makers was understood. You make the point that others would be better placed to answer that question, and of course we can ask the Prime Minister and others. But you say, again, that you took care to explain these concepts in a way that was comprehensible, which was appropriate. Then a couple of sentences on:

"Some points had to be explained repeatedly and some areas proved more difficult to get across than others."

Just flicking on to the next page, you make the point that: "Some concepts were particularly challenging, for example absolute and relative risks in relation to comorbidities."

I just want to take you, Sir Patrick, to a few entries in your notes which touch on this subject, and try and get a feel for whether that is a general position and whether those reflections apply particularly to the Prime Minister or whether in fact the position was more marked with him.

So can we go, please, in the schedule, first of all, to page 42. So this is an entry on 4 May. And by this stage you are making the notes daily; is that right?

A. Yes.

Q. You say: "Late afternoon meeting with PM on schools. My God this is complicated and models will not provide the answer. PM is clearly bamboozled."

Page 53, please:

"PM asking whether we have ‘overdone it on the lethality of this disease’. He sways between optimism and pessimism ..."
Then this:

"PM still confused on different types of test (he holds it in his head for a session and then it goes)."

Page 93, please.

"Watching PM get his head round stats is awful. He finds relative and absolute risk almost impossible to understand."

Page 124:

"PM struggled with whole concept of doubling [times] ... just couldn't get it."

Then just two more, please, page 167, this is from later in the year, September:

"Clare Gardiner ... talked PM through the graphs (it is difficult -- he asks questions like 'which one is the dark red one? Is he colour blind?') Then 'so you think positivity has gone up overnight oh oh' then 'Oh god, bloody hell. But it is all the same stuff he was shown 6h ago.'"

Then finally 389, this is now going forward to 2021:

"PM Dashboard ..."

Is that a reference to a meeting, dashboard meeting?

A. Yes.

Q. "... Taken through the graphs but it was a real struggle to get him to understand them."

So the question then, Sir Patrick, is those paragraphs of your statement that we looked at, yes, you talk about sometimes needing to repeat things and needing to explain things in detail, help us, and tell us if this is an example of passages that you no longer want to support, but the message that we get from these repeated entries appears to describe something, at least as far as the Prime Minister is concerned, more serious: a repeated failure to understand graphs, scientific concepts and so on, forgetting things that had been explained to him only a few hours earlier repeatedly. Was there a more serious problem with him than that which you describe in the witness statement?

A. Well, I think I'm right in saying that the Prime Minister at the time gave up science when he was 15, and I think he'd be the first to admit it wasn't his forte, and that he did struggle with some of the concepts, and we did need to repeat them often. I would also say that a meeting that sticks in my mind was with fellow science advisers from across Europe when one of them, and I won't say which country, declared that the leader of that country had enormous problems with exponential curves and the entire phone call burst into laughter, because it was true in every country. So I do not think that there was necessarily a unique inability to grasp some of these concepts with the Prime Minister at the time, it was hard work sometimes to try to make sure that he had understood what a particular graph or piece of data was saying. And I'd learnt from a number of meetings, including around climate, where there were certain things that would catch his eye and would work for him and other things that wouldn't work for him, so there were ways of presenting the data that allowed him to get better access than others.

Q. Mr Johnson, it hardly needs saying, was the man who was making decisions that had incredibly broad impacts on the whole country, and it was critical, was it not, that he did understand the advice that he was being given?

A. Yes.

Q. We have been talking so far about the need to repeat advice sometimes or to, as you say, use particular techniques or tags to help him understand matters. Was it ever the case that you had the impression that despite repeating things or despite explaining things in a particular way, he actually had completely misunderstood some of the advice that you'd given him?

A. It's possible, but I think certainly when I left a meeting I would be -- I would usually be persuaded that we had got him to understand what it was we were trying to say. But as one of the extracts showed, that you put up there, that six hours later he might not have remembered what was in that presentation. So I can't be sure that he kept it in his mind all the time as he was going into whatever the subsequent meetings were that designed policy.

I would also say that I think, and I don't know, you'd obviously have to ask him, but I think he does have the technique of almost deliberately going to sort of a misunderstanding just to check that somebody isn't in a different position, and that was something he would use from time to time.

But I think there was a problem in scientific understanding and it's not unusual amongst leaders in western democracies.
"... -- 'Is the whole thing a mirage? The curves just follow a natural pattern despite what you do' Incredulity in the room [...] The whole meeting carefully manages the PM (is it always like this?) ...

Is that an example of him perhaps being provocative or did that demonstrate just a fundamental misunderstanding?

A. It was a point that he raised on several occasions and he would look at the peaks of waves of infection and ask: are the interventions we're making doing that or is this what would have happened anyway? And he did come back to that point often and we'd talked him through what the evidence was that the interventions had made the difference. And of course it is true that at some point the peak will come down because at some point public behaviour changes, the number of susceptible people changes, the amount of immunity in the population changes, they do go up and down, but the point was that clearly these were being manipulated down by interventions.

Q. Just before we leave this entry, do you see the last sentence there, and note that we're now in September: "CMO still keeps offering a slightly slower path ..."

We've talked already about the caution that Sir Chris had in March. It looks as though you're recording a similar issue later in the year. Was it something that continued?

A. Well, I think the point in brackets is important: "... (I think this is wrong and said it)."

And Chris and I discussed this sort of thing often. I still think that he, as the Chief Medical Officer with a public health accountability, was right to raise the problems associated with the measures being taken, and that appropriate caution I think was useful and it was very helpful for the two of us to be able to discuss that and understand why we were in positions of either greater or slower pace on some of these things. I think it's appropriate.

Q. One more of these references, please, page 190. So we're at very much the same time, September of 2020.

You record that the Prime Minister had come back from a Battle of Britain memorial service distressed by seeing everyone in masks, and then this: "Starts challenging numbers and questioning whether they really translate into deaths. Says it is not exponential etc etc. Looked broken -- head in hands a lot. 'Is it because of the great libertarian nation we are that it spreads so much.' 'Maybe we are licked as a species' ...

'...We are too shit to get our act together'.

He doesn't seem to have been the easiest of decision-makers for you to provide scientific advice to, Sir Patrick?

A. It was difficult at times, and this is an example of where I suspect in this meeting I would not have tried to get across too many scientific concepts, would have waited for a better opportunity to do so and to have spoken to some others.

Q. As you mentioned at the outset, you had worked with other decision-makers, Mrs May; was this reception of scientific advice that you were providing something you were used to or was it out of your experience?

A. Well, he, Boris Johnson, and Dominic Cummings, were extremely keen to get scientific advice, so they had, I would say, a disproportionate interest in getting science advice. But, as you can see, it wasn't always easy to provide it in a way that was understood and actionable by the Prime Minister. And I don't think -- I mean, I doubt that the sorts of things described in here are terribly surprising to most people.

Q. Just before we leave this, I want to add in one extra factor, which is of course we know the Prime Minister was unwell for some period sort of March/April time in 2020. The extracts I've shown you do have some in that period but, as we've seen, also later. Is that a factor that we need to bear in mind with all this?

A. I think he was -- there was a period, and I described that, when I think he was really unwell and was unable to concentrate on things. When he came back, he eased himself back into things over a few weeks and thereafter I think there was no obvious change between him and what he was like beforehand.

Q. Thank you.

I'd like to move on to a separate subject, please, and that is in the first instance about SPI-B, the behavioural science subgroup of SAGE. Perhaps we can start by looking at the SAGE minutes which record the decision to set up that group.

As we can see, it was SAGE 7 on 13 February. If we go over to the next page, we can see that you were there -- I don't know, did you in fact attend every SAGE meeting during this period?

A. I think I missed one.

Q. Right. Not this one?

A. Not this one.

Q. If we go on to page 4, please, we see the section of the minutes headed "Behavioural science", and this was a summary, was it not, of the discussions which led to the decision that a behavioural science subgroup would...
be a good idea and then we've heard from Professor Rubin and the way in which it was set up.

I wanted to draw your attention to one of these paragraphs without reading it out, which is that there is a repeated reference within them to messaging. Do you see that? I haven't actually counted, but most of these paragraphs refer to the importance of messaging and the link with behavioural science.

Is it a fair understanding, then, of these paragraphs that part of the purpose of setting up SPI-B was to assist with the exercise of providing the public with appropriate messaging during the pandemic? Part of the reason for having behavioural scientists there, and by the way I think James Rubin and Brooke Rogers, who were at this meeting, are absolutely exceptional, was to make sure that the principles underlying messaging were understood. So it wasn't to design the messaging, it was to make sure that principles like collective ownership of things was important, like don't drive fear as the messaging vehicle. And those sorts of things were important messages. And SPI-B produced some really important papers on that. It's because of that that around this time I introduced James Rubin and Brooke to both Dominic Cummings and to Alex Aiken, who was the head of government communications, to make sure that there was a vehicle for them to feed in their principles of messaging.

Q. Yes. This is really what I wanted to explore, Sir Patrick, because on the one hand, as we've said, we see great emphasis being placed on messaging, on the other hand we asked Professor Rubin about the fact that the forerunner to SPI-B, which had been set up during the swine flu pandemic, was called SPI-B&C, the C standing for communications, and I asked him whether the lack of a C this time round was accidental, he said: no, there was a deliberate decision taken that we weren't to be involved in communications.

It's fair to say, isn't it, that there is, if you like, an inconsistency there, to have on the one hand a committee which was, at least one of its main purposes, to be involved with developing messaging, and on the other hand to be told, "But you're not having anything to do with communications"?

Is that a fair point?

A. I'm not sure it is, actually, because the point that the behavioural scientists are trying to give is the principles behind messaging, not the actual construct of the communications, and I think that distinction is quite important. This is behavioural science advice into communications and messaging, beyond communications, messaging more generally. Those -- that link is an important one, and I think the ownership though of the actual communications had to be within Public Health England, within the public health system, within government communications, and where SPI-B could help was making sure that the principles were clear, and indeed on occasions I think they were brought in to help with specific messaging as well, as individuals, but I don't think it -- maybe I'm wrong, but I don't think it would be appropriate to have an academic group designing government communications.

Q. Well, I don't want to overstate this, of course one can see that in principle providing the academic sort of direction is one thing and designing the communications themselves is a different thing, but the evidence we heard from Professor Rubin and also Professor Yardley was that how it worked out was that, yes, they did the behavioural science work, but they couldn't see that being taken into account at all in the communications strategies, and in fact they disagreed, sometimes quite strongly, with several of the main strategies that were rolled out. I think when we spoke to Lee Cain, he said "Well, I really paid more attention to my focus groups than...
suggesting one thing and a group of communications people at Number 10 essentially ignoring them and getting on and doing their own thing? I mean, that can't be regarded as having been a successful outcome?

A. No.

Q. Are there lessons to be learned for next time?

A. I think there are lessons to be learned, and one of the lessons which is important is to get the advice and the papers out quickly in the public domain. Because then it's very obvious when ministerial decisions are deviating from that advice. Ideally you'd like to know what other advice they'd received that meant that they had gone down a different route, and you said that Lee Cain suggested it was focus group advice that he wanted to pay attention to. Again, that seems to me to be a decision that is one that the ministers and their officials can follow. But I agree with you that the advice from behavioural science needs to be prominent, clear and accessible to everybody, and it wasn't a good outcome that some of these things were ignored.

Q. Let me move on and in fact pick up that theme. One of the solutions to the problem you have suggested is transparency, which echoes an approach you took with SAGE, which we'll come to. But it may be that some of the documents suggest that precisely one of the problems that I think did occur was a very, very small number of people, one, two or three, made statements on existing and planned policy, including, on occasions, even discussions that had taken place in SPI-B, in the press.

Brooke was that it also undermined the way that SPI-B works sometimes, because people were concerned about expressing their views for fear that that was then going to appear in a newspaper.

So I think there was, and this is my personal judgement, there was too much policy, too much commentary on things that even weren't behavioural science sometimes, on other aspects, and too many individuals who didn't distinguish between them as an individual and them as SPI-B and SAGE.

And by the way they might have done that themselves, but it was not how it was ultimately portrayed, and I think it's very difficult to run a government advisory committee if things are perpetually being discussed in the press.

Q. Can I ask you about a different document but it touches on the same issue, but this time in relation to SAGE itself rather than SPI-B.

So this is INQ000232074, please.

So this is, if we have the bottom half, a Treasury email which summarises a SAGE meeting. It's a read-out.

We see the first bullet point there. We don't need to go back but we can see that the date was April 2020.

It says:

"Vallance started the meeting by highlighting he had..."
becoming very wary of putting anything to SPI-B because
and other areas because it then undermined trust in the
some departments and some ministers saying, "I won't
bring something to SAGE because it's just going to leak
and people will talk about it." And I know that, again,
the Science Media Centre felt that we'd got it about
right. So I'm not sure what more could be done here.
I definitely believe that people should be free to
speak about their own areas, and I also believe that
it's very difficult for a government committee to
operate if people are apparently reporting government
advisory views in the press outside the formal
mechanisms. It becomes really difficult to build the
trust that's required to get influence inside
government.

-- that that, and that's what you've just given us?
A. Yes.
Q. With that nuance, is it your reflection that that was
the best way of dealing with this issue of how
scientists should speak publicly without being able to
stop them completely?
A. Well, I don't know if it was the best. I mean, there
may be better ways of doing it. I did know that it was
very, very difficult when scientists spoke about policy
and other areas because it then undermined trust in the
committees, and we saw that later in the pandemic with
some departments and some ministers saying, "I won't
bring something to SAGE because it's just going to leak
and people will talk about it." And I know that, again,
the Science Media Centre felt that we'd got it about
right. So I'm not sure what more could be done here.
I definitely believe that people should be free to
speak about their own areas, and I also believe that
it's very difficult for a government committee to
operate if people are apparently reporting government
advisory views in the press outside the formal
mechanisms. It becomes really difficult to build the
trust that's required to get influence inside
government.

Yes, so if we look towards the ... I think if we can
And that seemed like quite a big worry, that we'd end up with a sort of policy advice organisation with direct links to some of the papers that had come confidentially to SPI-B. So I was worried about it, and there are some examples where there was a chilling effect, where people didn't want to bring things to either SAGE or to subcommittees as a result of either this or, indeed, the transparency of publishing all of our minutes and papers.

Q. Again, looking forward and thinking about how, as we stand now, some of these committees have been disbanded, some others are getting on with their work, but of course, in an environment which is completely different, there isn't the blaze of publicity, we don't hear scientists debating these issues in the press all the time. But as you have said, there will be another pandemic, and we can imagine that similar circumstances might well arise.

What have we learnt from this experience? Are there ways of controlling what scientists do? There was a reference to the NERVTAG arrangements. Are those different, and is that a blueprint for the future?

A. I don't know exactly what the NERVTAG arrangements were, but we have definitely, as part of the SAGE Development Programme developed guidelines on what you should and shouldn't do in terms of speaking to the press (and it's the rules that I've just said, speak about your own area, please do, that's helpful to inform, but don't go outside that) and about membership of other organisations (that it needs to be declared upfront and there needs to be discussion with the chair before it's agreed whether that's appropriate or inappropriate).

The difficulty here was it just happened without anyone knowing about it, and then it became public, and it became very difficult to deal with.

Q. Thank you.

Let me move on, although sticking with this theme of transparency, because, as you've said -- you talk in your witness statement about SAGE transparency. In particular we know that, at the outset of the pandemic, the SAGE minutes, indeed attendees of SAGE, was not something that was published, and this was something that you took on yourself and after a few months that changed and minutes and lists of attendees were published, and you describe that step in a very positive way in your witness statement.

Is this right, you regarded it as important both as a reputational matter but also, and I think this is the context in which you raised it with SPI-B, as a means of providing challenge and allowing people to understand very busy doing other things. It's the sort of thing that we -- I describe in the so-called 100 Days Mission is getting the rules of the road sorted out in advance, so you're not trying to sort them out during the pandemic.

Q. One can see and you've described very well all the advantages that flow from this policy of transparency, but there are problems that come with it, are there not, and one of them is the problem we've just been discussing in the context of SPI-B, which is a chilling effect, and if we look at your notes -- well, I will ask you, but at least on the face of it, it seems that this policy of transparency did indeed create this type of chilling effect with SAGE itself during the pandemic.

If we can go, please, to the schedule, and look at, I think it's three references, thank you, first of all this one, we're in June 2020, and you write, you refer to a paper from Number 10, you say someone has completely rewritten it:

"They have just cherry-picked. Quite extraordinary."

And then, for our purposes here:

"Note -- apparently Simon Case ..."

I'm afraid I can't remember now whether at that point he had -- no, he wasn't, he was
Q. -- isn't that something of an at least mixed situation?
A. If I may just, on the very first one you read out, about 85
1  someone rewriting the science, that was an internal
2  paper in Cabinet Office, and that rewrite never went
3  anywhere, so that I think is not -- but this is a very
4  important question, and there is no doubt that DfE took
5  this view at times and Cabinet Office, there was
6  an alarm that that might happen.
7  I don't think in the end it stopped us doing
8  anything on schools that we wanted to do, but it did
9  mean we sometimes didn't get precise questions. I do
10  think it's a problem, and I don't know what the answer
11  to it is, but I believe there is a cultural issue which
12  can be overcome, which is the more the principle is
13  accepted that the evidence is published, not the advice,
14  not the policy position but the evidence is published,
15  the better government decision-making would be, and the
16  more that happens during normal time as well as during
17  emergencies like this, the more it will become
18  a culturally accepted and reasonable thing.
19  There is a fear sometimes that if the evidence is
20  out there it's going to force a minister's hand, and, as
21  I said, I do think you need to give ministers time to do
22  things before it becomes public, but my approach has
23  been, and I've had this discussion during peacetime in
24  government as well as during the pandemic, is the
25  evidence itself can neither be harmful or beneficial, it

Q. Sir Patrick, you emphasise evidence in contrast to 87
1  advice, but what we've seen in these extracts is
2  a concern, in this case emanating from the Department
3  for Education, about the SAGE minutes being published.
4  Surely those minutes contain advice?
5  A. The minutes usually are containing evidence and have it
6  couched in terms of "if the aim is to do X, then the
7  following would be necessary", or "given the state of the pandemic at the moment, without a decrease, it's likely to lead to the following situations". It is usually not the case that it's giving direct advice on
8  precisely what the science is suggesting a minister
9  should do.
10  Q. Sir Patrick, we don't want to split hairs about this,
11  but thinking about the practical situation that, in this
12  case, the Department for Education seemed to have been
13  in, the thought process appears to be: "We have this
14  policy that we're considering, why don't we ask SAGE
15  about it, one reason not to ask them about it is that if
16  we do their minutes will record their discussion" -- and
17  you can call it evidence if you like, but anyone reading
18  it will see, if this is the view they took, that they
19  think it's a bad idea -- "and that will mean that if we
20  go ahead with it people will criticise us". I mean,
21  that's the problem, isn't it?
22  A. It is the problem. And again, I think the more you
23  focus on evidence rather than advice, the easier it is.
24  It is a problem. I don't know what the answer to it is.
25  My instinct is that greater transparency is helpful all round and my experience from the pandemic was that, in the end, none of these came to be a problem. In other words, DIE did try and not bring things to SAGE, we overcame that and they did in the end bring them, and we also did work on it. So they were -- they were bumps in the road, they weren't blocks. And I think Stuart Wainwright laid out the sort of pros and cons out very nicely in his evidence. I would not wish to see
26  less transparency of the science evidence.
27  Q. Let me ask you briefly if I can about a similar but
28  slightly different issue. Here we're discussing the
29  question of whether SAGE were asked at all about issues.
There is another issue which emerges from the notes where SAGE were asked but their advice was either ignored or even apparently attempts made to change their advice.

Can we look at some entries in your schedule, please. First of all, page 56. So here we have your comment that:

"We have been excluded from the PM's strategy meeting. Chris [that's Chris Whitty no doubt] is sure it is because the economic secretariat in [Cabinet Office] want to be able to present things about re-opening without us contradicting them."

That's perhaps a little like the other ones we were looking at.

At page 94, please:

"... the 2 [metre] rule meeting made it abundantly clear that no one in no 10 or [Cabinet Office] had really read or taken time to understand the science advice ... Quite extraordinary."

Page 98, please:

"No 10 pushing hard on releasing measures ... They are pushing very hard ..."

And then this:

"... and want the science altered. We need to who would on to our hats. There will likely be a second peak."

Then lastly page 112:

"In economics meeting earlier in the day they didn't realise CMO was there and [Chancellor] said, 'It is all about handling the scientists, not handling the virus.'

They then got flustered when [he] chipped in ...

So a collection of entries, all of them, to be clear, in terms of date, around sort of May, June, July, re-opening in 2020, the common theme is that either SAGE is being ignored or it's not being asked or even a suggestion that the SAGE scientists should be handled in some way or that their advice should be altered.

Help us, was there a feeling, perhaps particularly at that time, that perhaps you weren't being asked for your advice in good faith?

A. I think there were definitely periods when it was clear that the unwelcome advice we were giving was, as expected, not loved, and that meant we had to work doubly hard to make sure that the science evidence and advice was being properly heard.

Now, it doesn't surprise me that there were meetings that we were not included in. That's normal. We were, as I said, in Number 10 probably for 45 minutes or an hour and there were things going on all day and political decisions as well, so it's not surprising that...
Mr Sunak’s statement where he says that you never objected to it.

A. Well, we didn’t see it before it was announced and I think others in the Cabinet Office have also said they didn’t see it before it was formulated as a policy, so we didn’t -- weren’t involved in the run-up to it. And around that time lots of measures were being released, and you will see repeated references in various minutes and notes and emails, and indeed, I’m sure, in my private notes, to our concern that people were piling on more and more things and that this would come to drive R above 1, and I think that was discussed at Cabinet as well, that was the concern we had. So I think it would have been very obvious to anyone that this was likely to cause -- well, inevitably would cause an increase in transmission risk, and I think that would have been known by ministers.

Q. And Mr Sunak?

A. If he was in the meetings, I can’t recall which meetings he was in, but I’d be very surprised if any minister didn’t understand that these openings carried risk.

MR O’CONNOR: Yes. Thank you, Sir Patrick.

LADY HALLETT: My Lady, I’m about to move on to another topic, if that’s a convenient time.

MR O’CONNOR: Certainly, Mr O’Connor.
gap in the larger picture. That may be very much the same point that you were making in one of your notes. If we can look, please, at the schedule, page 522, this is late, this is an October 2021 entry, where you say: “Economic predictions! HMT saying economy nearly back to normal [and] plan B would cost 18 [billion]. No evidence. No transparency. Pure dogma [and] wrong throughout.”

Now, Sir Patrick, that may be one of those comments which is INQ000235261, please. Yes. Well, then let's look, if we may, at an email the representation I was getting from various rather economic body would be helpful. And certainly that was an economic SAGE, I just thought that an external yes you suggested an economic SAGE?

And that, as you say, is perhaps one of the reasons why I did think it wasn't there, rather than you -- you thought it wasn't there, rather than you --

So I didn't see evidence of a very strong analytical basis, but -- it may have been there, I just never saw it.

Q. When you talk about here, for example, “no evidence”, “pure dogma”, that does at least seem to suggest that you thought it wasn't there, rather than you --

A. I did think it wasn't there.

Q. And that, as you say, is perhaps one of the reasons why you suggested an economic SAGE?

A. Yes, and I wasn't even necessarily suggesting an economic SAGE, I just thought that an external economic body would be helpful. And certainly that was the representation I was getting from various rather eminent academic economists, who felt that that would be helpful.

Q. Yes. Well, then let's look, if we may, at an email which is INQ000235261, please.

It's dated 5 June 2020. It's in fact an internal Treasury email from Clare Lombardelli to her colleagues at the Treasury, but it describes a meeting at which you were present, Sir Patrick, and I think in fact this may have been a meeting that you were -- convened or were instrumental in organising. We've asked Mr Warner about this email as well. You refer in your witness statement to having convened a meeting. Do you think this was it?

A. I wasn't sure, reading this, whether it was that meeting, but --

Q. All right.

A. -- it was probably in or around this time.

Q. In any event, we see Ms Lombardelli recording what had taken place at that meeting, we see it was at Number 10 and chaired by Mr Warner, but I think we know, and this is right, isn't it, that you were there?

A. Again I wasn't quite clear from this whether I was at this meeting or not. It refers to a follow-up with me. I certainly don't think Ben Warner would have been chairing a meeting that I organised, I think that was a separate meeting probably, because it was chaired by --

Q. Yes.

A. -- possibly Claire.

Q. Well, if it helps, if we look at the bottom of this
having a group that tries to integrate the very thing
that ultimately is a ministerial trade-off decision and
one that is an important democratic area. So I would
not be in favour of having an integrated single model,
for the reason that it then tends to put out the answer,
which it can't possibly do. And given what I know about
the uncertainties in infectious disease mathematical
modelling and the uncertainties in economic modelling,
I suspect there would be one almighty uncertainty that
came out at the end of it.

Q. So just to be clear, I think what you're saying is that,
as far as the modelling is concerned, that is something
that should and could be pursued to see whether it's
possible?
A. Yeah.

Q. And certainly the evidence we heard from the modellers
was that if that is to be pursued then, I think their
phrase -- it should be done between pandemics rather
than during a pandemic. And that may take us back to
the type of institution or academic body that you
described.

Switching focus to the SAGE idea, I think what
you've said is that you are against the idea of, as it
were, adding an economic strand to the existing SAGE; is
that --
work for pandemic preparedness and I think a single centre with a sort of hub and spoke model would work extremely well in the UK, and it could look at all the things that you would like to have looked at during normal times to make the input much more effective during a pandemic, and that could include everything from evaluating the effects of NPIs, which ones work, which ones didn’t, how well do they work, what would you do differently, smart NPIs, different approaches to viral detection surveillance systems, ways to understand, pathogenesis of viruses. I mean, it should be a very broad activity, in my view, which should draw on existing groups rather than necessarily bring everyone into something which is only working on that, because you then have a huge amount of expertise brought into an area that’s focusing on how one thinks about pandemics. And Oxford and Liverpool and others have suggested doing this and I’m a strong supporter of the idea that this would be a useful thing.

Q. Would it involve government funding?

A. Well, I think it should, and I think it should also involve UKHSA, because UKHSA is the body with the statutory responsibility for this area, and one of the things that I observed during this pandemic was that Public Health England didn’t have the strong connections well, if we’ve got an economic SAGE and an epidemiological SAGE, why don’t we have a sociological SAGE or — and one creates sort of too many advisory bodies. Is that something which you think would have any force?

A. I think — I mean, a lot of social science was included on SAGE and would be included on the economics SAGE as well, and I certainly asked the British Academy to do a piece of work in, I think, June 2020 looking at the Covid decade, trying to understand all of the ramifications, and there are other ways to get that, so I think you’re right, it is a risk that you end up with a sort of plethora of these things, but I think that one and a science one does seem like a sensible approach, provided Treasury want it and will make it work, otherwise it will be not effective.

Q. Yes.

Before we leave this subject, you mentioned the academic centre for pandemic preparedness a moment ago and it’s something you’ve referred to more than once in your witness statement. Is there anything else you want to say about that in terms of how you imagine it, what it would cover, what it would address, how it might be set up?

A. Well, there are several universities that are developing and science base that were needed. It had some very strong ones, but it wasn’t — you know, it wasn’t as robust as it should have been during that time, through no fault of their own, but there was inadequate funding and inadequate links to various academic groups.

Q. Let me move on to another subject, Sir Patrick, although it’s related, which is a sort of structural SAGE question of how the advice which is generated within SAGE and the subcommittees is communicated to ministers.

There are perhaps two linked issues: one is by what means is that advice communicated and the other is sort of to whom or to what body should it be communicated.

And it may be that we need to bear in mind the distinction between, if you like, the typical short-term emergencies for which the COBR system was designed on the one hand and the type of pandemic that we’re addressing on the other, because in that first category of case, I think we can see that the existing system worked well. You have SAGE, it discusses issues that it’s asked to discuss, it can produce a minute, and then the chair of SAGE, you or another, can convey that information in a fairly straightforward way to a COBR meeting. And both of those issues, therefore, that I’ve mentioned are addressed.
The difficulties perhaps come from the pressure that was put on that system by the much larger scale and the much longer duration of this pandemic. Before I go on, do you agree that those are the issues?

A. Yes.

Q. So starting with the question of the means by which the advice is communicated, several witnesses who have given evidence to the Inquiry have commented on the great pressure that was put on you and Professor Whitty as, as it were, the conduit for advice from SAGE to decision-makers. All of them, I hasten to add, endorsed your hard work and ability to undertake that task, but they have said that both because of the enormous amount of work that was being done by SAGE and all of the subcommittees that were sort of corralled underneath it, and the duration, that in fact it was really an enormous task, perhaps too big a task, to expect the two of you to be that very narrow point of connection in terms of explaining and passing on that advice orally to decision-makers.

What are your comments on that, and should we be thinking of a different model for the future?

A. I think you have to have a point of connection from SAGE which is one or two people into the system. You have to understand this, which is why the lead government department idea does have some importance to it. I don't -- I don't have concerns there. I think it's highly likely that the GCSA wouldn't, and that has advantages and disadvantages. What the GCSA would need to do would be to make sure that they had the right advice around them so that they could undertake that function, but I suspect there would be more weight on the CMO's shoulders in that sort of situation, and it may be that one of the deputy CMOs or one of the other people in that sphere would step up as well.

Q. I wasn't really suggesting an alternative, I was asking if there was one, but I think your broad answer is that more or less the system that existed at the time ought to carry on.

Just to press you on that, we've already noted that we as a country were very lucky that the two individuals who were occupying the two posts of Chief Medical Officer and Chief Scientific Adviser were so well qualified by their experience and training to deal with the pandemic. If one imagines another pandemic where the CMO and the GCSA are not specialists in epidemiology, pandemics, vaccines, pharmaceuticals and so on, but come from completely different specialisms, would that be an extra problem in those individuals bearing the weight of conveying SAGE advice to decision-makers?

A. I think the CMO will always be an expert in this area in some form or another, and the CMO will always have around him or her a group of people who really understand this, which is why the lead government department idea does have some importance to it. So I don't -- I don't have concerns there. I think it's highly likely that the GCSA wouldn't, and that has advantages and disadvantages. What the GCSA would need to do would be to make sure that they had the right advice around them so that they could undertake that function, but I suspect there would be more weight on the CMO's shoulders in that sort of situation, and it may be that one of the deputy CMOs or one of the other people in that sphere would step up as well.

Q. I've focused up to now on the first part of the equation in terms of who is -- what's the conduit from SAGE into the decision-makers, and I want to move on and ask you for the other end, which you've referred to as the docking point, because it's right, I think we can see, that although at the start of the pandemic you were conventionally feeding into COBR, once the COBR meetings ceased to certainly take place regularly you were then providing advice to a range of committees, whether it was Covid-S to dashboard meetings, the Covid Taskforce, and so on.

Do you think that there is a need to be clearer about, your term, the "docking point" for SAGE advice?

A. I do. I think it was very clear when it was CCS, the lead government department idea does have some importance to it.
Civil Contingencies Secretariat, for COBR. It then became very unclear. It became clearer again when Simon Case came in to lead the Covid Taskforce, it narrowed down to a more sensible system, and that then improved quite a lot over time in terms of them being able to ask better questions as well and frame them more appropriately. But I think there needs to be a system that swings into action immediately in the case of a pandemic that says: here is a structure which will stay constant and it's properly populated with people who can both look at the operational needs that come out of that, so they can co-ordinate that across Whitehall, and have enough scientific understanding and data analysis understanding to be able to absorb the evidence and understand the implications.

Q. Would that system be an expanded CCS or something completely different, do you think?

A. It's always easiest I think to build off things that are used routinely rather than to stand up something that is completely special for one event, and so I think building it from some expanded CCS, which is then exercised regularly in other forms, but knowing that you're going to have to increase the scale of this and the duration of this very dramatically at the time of an event, would probably work.

In terms of the blurred line, a lot's been written about press conferences before we're done, Sir Patrick, to me, "Don't worry, you don't need to cover any more of that, it need to be recognised. And if somebody had said to back that, and there are clear risks associated with it that need to be recognised. And if somebody had said to me, "Don't worry, you don't need to cover any more press conferences", I wouldn't have lost any sleep over it.

Q. Thank you.

Let me ask you briefly just about one other, a rather discrete point, which is about press conferences. Can we look, please, at paragraph 743 of your witness statement, page 235.

We of course all, Sir Patrick, remember your appearance --

A. I don't have anything on my screen.

Q. No, we have confidence that it's coming. There it is.

We all remember, Sir Patrick, the press conferences at which you and Sir Chris Whitty were regular, albeit not permanent, attenders. In this paragraph of your witness statement, you say, and we can see here, picking it up at the end of the second line and going on, this was not a role that you sought, but you were asked to do it and you did.

The question I want to ask is whether, looking back over the whole run of the couple of years when you undertook this task, you think that it was a role you

A. Yes, I think -- exactly, there's risk on both sides. And I think marginally I'm in favour of saying, yes, that was beneficial, but I don't have an evidence base to back that, and there are clear risks associated with it that need to be recognised. And if somebody had said to me, "Don't worry, you don't need to cover any more press conferences", I wouldn't have lost any sleep over it.

Q. Well, I may come to ask you one or two more questions about press conferences before we're done, Sir Patrick,
1 but --
2 LADY HALLETT: One of the risks too, presumably, is the risk
3 of abuse about which Sir Christopher Whitty spoke during
4 Module 1, the abuse that you and some of your colleagues
5 suffered because you had been associated with the policy
6 decisions.
7 A. Yes, I think that's a risk that's going to occur anyway
8 and it was very real during this pandemic for a lot of
9 us, and something that needs careful thinking about in
10 the future, and for -- certainly some members of SAGE
11 had that as well even though they were somewhat distant
12 from the direct association with politicians.
13 MR O'CONNOR: Sir Patrick, I want to move on and ask you
14 some questions about events in the latter part of 2020
15 and to start with questions about the segmentation
16 policy or suggestion.
17 As an introduction to that, really just to take you
18 back to the line which you mentioned earlier and which
19 is repeated several times in your witness statement
20 about the learning you took from that whole experience
21 about -- well, I'm not going to say it, because there
22 are some quite careful words you use in your witness
23 statement, I'd like to show you them, it's page 71.
24 paragraph 225, please. We see about four lines down you
25 say:

26 argued that their area shouldn't be in a higher tier,
27 they should be in a lower tier. So everyone is arguing
28 to do things just a little bit less than they should do.
29 The result of that, particularly -- and this is
30 important -- particularly when there is a high
31 prevalence -- and it's worth remembering there was
32 a high prevalence for a lot of that period -- means that
33 you tip over into an R above 1, and then you grow.
34 So I think this is an important thing and it's
35 partly my psychology, which is "than you like to", and
36 partly just the reality that these things need to be
37 taken into account.
38 Q. Yes. I said that we were starting a discussion about
39 segmentation, which was a suggestion championed by,
40 amongst others, Professor Woolhouse, and you will know
41 that his -- he has another sort of approach which is
42 similar perhaps to what you've described and I want to
43 explore how different it is.
44 His approach is: the earlier you impose an NPI, the
45 less restrictive it needs to be. And therefore he is
46 very much in favour of imposing moderate NPIs as early
47 as possible.
48 Now, at first blush that's not the same as "go
49 sooner than you like, harder than you like". How much
50 difference is there between those two ideas?

51 "The most important lesson that I learned and stated
52 repeatedly from the first lockdown onwards in respect of
53 the timing of interventions was that you had to go
54 earlier than you would, harder than you would like, and
55 broader than you like."
56 Sometimes people talk about that as "go early, go
57 hard", but it's not quite what you say there, is it?
58 And I think the difference is important. Can you just
59 in a few sentences explain this thinking and how your
60 thinking about this developed during the pandemic?
61 A. Well, as I mentioned, in the first wave I think we
62 didn't go early enough, and I absolute -- and there was
63 a trickle in of measures when I think we should have
64 gone with more measures simultaneously, and at various
65 other times when geographical areas were put into
66 certain measures the temptation was always to make it as
67 limited as possible and then that failed because the
68 surrounding areas immediately got very overwhelmed.
69 So my rider that it's "than you would like to" is
70 very clear, and that is because the observation I made
71 was that everyone's instincts is to not to do any of
72 these things, it's to delay just a bit too much, it's to
73 argue that the measures shouldn't be quite as strict at
74 the moment, or to argue -- and we saw this very clearly
75 during October, I think it was October, where every MP

76 Q. And I'm sorry if this is sort of a very obvious
77 point but I think it's just worth thinking about: there
78 is a lot of focus on the R value but actually it's the
79 prevalence that matters as well. So if, to take
80 an extreme, the prevalence in the UK was only ten people
81 had Covid, you could keep R at 1 and feel perfectly
82 happy, and if it went up to 1.2 you'd be able to see it
83 and deal with it. When you're dealing with 50,000
84 people or 100,000 people with Covid and you're keeping
85 that level R about 1, the moment you break the 1, so
86 people or 100,000 people with Covid and you're keeping
87 that level R about 1, the moment you break the 1, so
88 you're now growing, you're growing in huge numbers.
89 So this is even more important in a situation where
90 the prevalence is high and you don't want to allow
91 escape from what is a controllable situation to one that
92

(30) Pages 117 - 120
Q. Does this point about prevalence help us, in turn, understand the floating of the segmentation idea and perhaps one of the reasons it wasn't pursued? Because it would have been a proposal that would have been much easier to follow at a time of low prevalence whereas in fact, as we know, it was proposed and discussed over the summer and into the autumn of 2020, which was, of course, a time of rising prevalence?

A. So segmentation, the idea of sort of having one part of the population heavily shielded in some ways, was inherent right from the very beginning. Yes, it works much better at low prevalence, just as test, trace and isolate works much better at low prevalence. I think, though, it's worth remembering that we never found a form of shielding, and Mark Woolhouse may argue, well, it never went far enough, and he may be right, but we never found a form of shielding that meant that the prevalence didn't increase in that population at the same time that it increased in the general population.

So the risk of running at very high prevalence and shielding is that the moment that prevalence goes up in the general population, it's probably going to go up in your shielded population, you've now put them at risk as well.

Q. I'm going to come back to the question of Long Covid in particular in a moment, but just sticking with the segmentation proposal for a moment, with hindsight do you think that it might have been a proposal that could have been made to work if it had been introduced earlier, or do you think that the objections you've just really identified, which after all -- I mean, we looked at this with Professor Woolhouse at the SAGE minutes where it was discussed and refused -- do you think that those objections really would always have counted against it?

A. We never really had a really low prevalence situation, and I think we -- I mean, that proposal of segmentation was there right from the beginning, it was discussed a lot in April, it was re-discussed in great detail in June and July, and at that point I think Professor Woolhouse was also suggesting a sort of supershielding idea, which is a very interesting idea, which is that not only the vulnerable person but all of their carers and family all get shielded in a group, and we were worried there that the added complication was that would place most burden on multigenerational households, very often in poor situations and, indeed, ethnic minorities, where we know multigenerational households are more common. So we were worried that there were all sorts of problems with this, in terms of how you would do it, that would ultimately lead to a worse outcome for the shielded population not a better outcome.

But I think the idea of segmentation is a very interesting one, it's the sort of thing that needs to be looked at, and my view is it's much better to try to get that in at a low state of prevalence than at a high one.

Q. Now, you mentioned Long Covid, the discussion about segmentation, for and against, is very -- or certainly is capable of being based on Covid itself and the risk of catching the acute symptoms or disease, but, as you said, the concern about Long Covid is a slightly separate factor, is it not?

We can see, if we look at the schedule of your notes, if we go to 159 -- yes -- this was something that you were concerned of at the time. You say:

"No 10 team segmentation meeting. Pushing really hard on segmenting and allowing people back. We explained (i) young still get ill and may get long-term effects ..."

Is that a reference to Long Covid there?

A. Yes.

Q. Then we see that you refer to some of the other problems that you've just identified. And indeed you also refer to Long Covid, we see another reference in your notes, if we look at page 210.

Now here you are addressing the Great Barrington Declaration, which, just to be clear, is a very different beast to the segmentation ideas that were being developed by Professor Woolhouse; is that right?

A. Well, they are related. I mean, there was -- part of what was being suggested was segmentation, then allowing the levels to rise in other groups. The Barrington Declaration was at one end of that, which was a complete let it sweep through everybody else, and I think Mark Woolhouse was not in that position.

Q. No. So a much less nuanced approach but nonetheless Long Covid was an objection to the Great Barrington approach and one which you've identified here, we see the numbered point 4.

That is on 6 October, a note that you make. We know
the Great Barrington Declaration was current at the
time.

If we go on three pages in the notes, please, to
to page 213, we can see that very much at that time you are
also making a note that the Prime Minister was very
sceptical about Long Covid:

“...'It's like Gulf War syndrome,' he says.”

We've seen other records from around this time and
indeed later where he made this or a similar comment.

Help us with what your understanding of the
Prime Minister's view about Long Covid was at the time,
and also whether, as you understood it, it actually had
any impact in terms of policymaking or whether these
were really just noises off?

A. I think he didn't really think it was a big -- big
problem. I mean, he recognised, because we described,
three different long-term consequences: there was the
post-intensive care syndrome that some people get,
that's a well recognised problem; there was organ damage
that some people got from Covid, that's a very well
recognised clear problem; and there was Long Covid,
which is much more ill defined. And I think he was --
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I don't think was keen to take that into account for
policy making.
rule of six and so on, you make clear in your statement that from sort of late September the view that SAGE was expressing was that there autumn to be some sort of circuit breaker, at least to try to create a pause and to reduce the prevalence. Is that a fair summary of the sort of general position --

A. Yes.

Q. -- towards the end of the year?

Then what I want to do now is look at a series of entries in your notes to try to understand the sequence of events running up to the second lockdown. So if we can start, please, by looking in this schedule that we have up at the moment, at page 245, this is Sunday 25 October, and, I mean, before we even look at the content, what we will see is that you were attending meetings, giving advice every day of the week over this period, Sir Patrick, seven days a week.

A. Yes.

Q. Presumably at least some of it working from home, but nonetheless attending meetings, advising. Was it a very high tempo situation?

A. Well, I think the seven-day-a-week working started in February 2020 and didn't end till end well into late 2021. I mean, possibly later than that actually.

Q. Working -- were you advising and having meetings with circumstances or that they should -- not so much concern should be had about casualties of that age; is that really what he was trying to say?

A. I think it's important to note that he might easily have said the following day "I want no deaths at all".

Q. We'll come to that.

A. So, yes, he must have said that on that day.

Q. We see a few lines down you've put: "PM then back on to 'Most people who die have reached their time anyway'."

Would these be examples of perhaps little notes you made at the time and then --

A. These are probably scribbled notes I wrote on papers of this meeting.

Q. A few lines down:

"PM concludes, 'Looks like we are in a really tough spot, a complete shambles. I really don't want to do another national lockdown!'"

This 25 October, so about -- for about a month would it have been by then that the SAGE advice essentially had been that a circuit breaker lockdown was needed?

Then you -- "DC", I'm looking at the last line now: "DC [Dominic Cummings] says 'Rishi thinks just let people die and that's okay.' This all feels like a complete lack of leadership."

...
Prime Minister -- you've recorded in fact -- he's in a "different mood":

... terrible, terrible, terrible numbers.

"Says 'we need to do local lockdowns fast.'

"Foot to the throttle', 'accelerate' ... He is so inconsistent."

So previous day letting it rip, this day something very different, by the look of it?

A. Yes.

Q. Then if we can go on to the next page, please, there is a similar observation:

"On Sunday all [Prime Minister] wanted was a sense of mutually incompatible outcomes -- says Simon Case privately."

That's to you I take it?

A. I think that must have been in a call with me.

Q. "Owns something for a day and then changes."

That's his comment.

A couple of lines further down, we're now into the next day, the Tuesday, you record the number of deaths.

This takes us back perhaps to a comment you made this morning, which is to compare what was happening in October with what was happening in the run-up to the first lockdown, when of course there were far fewer deaths at that stage than there were by then.

which was a good one, on mass testing as a way to reduce the incidence in the population, which was everybody would test on one day and then everyone who is positive would isolate, and that would definitely have cut things down a bit. But of course you've then got to repeat it and you've got to do it several times. And as that was being worked up as a sort of moonshot, it just wasn't feasible at that time, there weren't enough tests, the right sort of tests, it wasn't practical to do it. And I worried that as people were looking at that as the absolutely, we were seeing numbers go up anyway and that there were some other things that could happen to try to get the numbers down.

Q. Then if we look further down the page, we can see a line saying -- it's a bit further than that, no, sorry, that's fine, three lines up:

"[Prime Minister] resistant to national lockdown & wants to continue with regional."

But then both above that and below it, there are observations by you that it's not enough to deal with the areas in the higher tiers, you need to deal with what you describe here as lower prevalence areas as well.

You mentioned earlier the issue with lower prevalence areas having their incidence rising; is that what you're referring to here?

A. Yes. Because test, trace and isolate has a limited capacity, and it's actually rather effective when you have low prevalence, so you can keep a lid on low prevalence with that. Once it get swamped it becomes totally irrelevant because it's been swamped and the prevalence will increase.

I was worried at this time that, for all sorts of reasons, test, trace and isolate was being surged into high prevalence areas where it wasn't going to make any difference and it would have been more effective to have used it widely in low prevalence areas to keep them low and dealt with the high prevalence areas with other means.

Q. So there is a passage in your witness statement where you say that SAGE urged the government to look beyond current prevalence as the trigger point for moving between tiers. So is this really making the same point, that one should try and keep the low prevalence areas low rather than just allowing them to move up?

A. Yes, because unfortunately the tier system was such that, and as I said already, many people were arguing that their own area should be in the lowest tier possible; well, that was the surest way to end up in a high tier.
that concern. Did you in fact think that at this time
there were things that you might have been asked about
but weren't because of this caution?
4. I suspect and, I'm sorry, I can't remember, that I would
have had a direct conversation with Simon Case and said
"That's not okay, we've got to see things". And I don't
think that they -- I don't think Cabinet Office ever did
not bring something to us because they were worried
about it, but clearly there was a mood that it might
happen.
5. Then just above that we see you have referred to the
press and then said "we have a weak indecisive PM".
Again, is that something that, on reflection, you stand
by or was that a late night brain dump?
6. Well, it was definitely a late night moment of
frustration. I do think that the Prime Minister was
influenced a lot by the press.
7. Let's go over the page, please. We are on now to the
Thursday of that week, 29 October, and you make
a reference immediately under the date to a call with
the Cabinet Office, I assume, and you say:
"I argued strongly for [Prime Minister] to set out
his aims. What does he want to achieve.
"Protect NHS? Something else? Emergency care, all
care etc."
138

And this takes us back, does it not, to a point we
raised earlier about scientists needing to understand
exactly what the government was trying to achieve, other
than perhaps just stopping the NHS being overwhelmed?
That was in March where we were talking about it
this morning. It looks as though that concern arose
again at this time.

Yes, possibly even intensified at this time.

Just help us, I mean, what would you have liked to have
been told that you weren't being told?

I think it would have been very useful, for example,
they might have said "All we care about is NHS collapse,
just work to only that", but that isn't all they cared
about, because on some days it was "We can't stand the
numbers of deaths and we want to have this lower". So
that then begs the question: so what is the target if
that's not the target? Is it that you want to have all
routine care in the NHS running properly and cope with
Covid? Or is it something else, which is "We'd like to
manage the NHS as effectively as we can but with the
economy being in a stronger position with more things
open"?

I mean, there are several different permutations
that one could think of that would have been helpful to
then be able to ensure that we tailored the advice
accordingly.

In your witness statement you describe a feedback
session or -- with some of the scientists who worked on
SAGE and its subcommittees, and this feeling that they
didn't have a clear understanding of government policy
was one of if not the sort of top issue that you heard,
and in fact it's something that we've heard in evidence
ourselves. So is that a learning point for next time?

It is a learning point, to lay that out as clearly as
possible.

I do want to offer one slightly pragmatic
observation, though, which is: I've worked in global
multinational companies and many other things, and
everyone always says, "I don't think the strategy is
clear enough", wherever you are.

So I think we shouldn't dream that setting out the
policy clearly is going to be something that satisfies
this need, but I don't think it was clear enough at that
point.

Yes.

We can go on two pages because the next one is
a blank but it takes us then into the Friday of that
week, and in fact -- yes, at page 246, that's it -- and
we can see towards the bottom of the page again the same
point:
"We have pushed all week that the key is for the PM to define his aims but he still hasn't done that."
And a similar point raised, clearly a matter of continuing concerns; is that fair?

Then at the bottom of the page, we know that there was a lengthy meeting on that Friday or possibly more than one meeting, we see "PM meeting" at the bottom there, do you see that, and then if we scroll on to the next page there is a few entries and then about halfway down the page "PM Dashboard Meeting". Would that have been a separate meeting or a continuation of the first one or --

A. A separate meeting, I think.

Q. Were these meetings taking place remotely or would you have been in Downing Street or can't you remember?

A. They were a mix. I can't -- I can't remember this one.

A lot of the meetings were taking place in person.

Q. Now, we're now on the Friday of that week and we know that there were events over the weekend when this lockdown was announced, and I think what we see in the next few pages is a fairly lengthy debate, is it not, about whether a national lockdown should or shouldn't be imposed? And you obviously sat down that night and wrote quite a lot of notes just at the end of that day.

Let's go over the page, please, to 248. You've made an entry just under the first redaction that Simon Case sent you a WhatsApp to say "national lockdown on Monday -- French style". Well, we know -- we saw that the French had just imposed a lockdown. And you say: "I wonder what that really looks like ..."

So do you think you were being told there that that decision had been made?

A. Yes.

Q. Would that have been during the meeting that you were in or --

A. No, it must have been in another meeting that I didn't know about.

Q. I see, I see. Because you then carry on describing the meeting with the PM, and we see that you refer there to:

"... graphs on projections that suddenly got given to [Cabinet Office] without me seeing them."

And they will become significant over the next day or so, will they not?

And then, a couple of lines further down:

"[Prime Minister] says -- we need to act. French style national lockdown ..."

So again it appears that a decision has been made but the notes that follow suggest that there may have been a certain amount of toing and froing. Can you help us?

Q. Because if we go over the page again, and we're still on that Friday --

A. I think that's "Homeric logic". at the bottom of that page, it's a mistake, not "Humeric".

Q. Yes. There's then a discussion about -- amongst other things the Prime Minister talks about a painting, but about four lines down you see: "[Prime Minister] then argues that letting it go may be better economic route."

And further down the page, just falling off the bottom at the moment:

"So the case is weaker if we are just arguing about saving lives, as they are all very old anyway." So on that argument -- on that basis it would seem that a decision hadn't been made at that point or is that not right?

A. That's what it looks like.

Q. Were these records recording the sort of toing and froing or the -- of the arguments at the meeting?
unacceptable ..."

And so on.

Although then, further down the page again, "28 day lockdown".

We're obviously just looking at your notes,

Sir Patrick. The notes convey a suggestion of a great deal of indecision on that day. Does that align with your memory, your understanding?

A. I think this was a time of -- I mean, this was almost a microcosm of what had been going on for the previous weeks with the incidence, prevalence and R changing a bit and people moving from one position to another, and the Prime Minister would take a certain position in one meeting and then perhaps another one later on, and sometimes I think was also trying to test people's positions and find out whether they really held to what they were saying.

But these meetings largely look to me like they were meetings that probably Chris Whitty and I were there to provide information as requested rather than as active participants in what was a policy discussion.

Q. What we know, and you describe this in your witness statement, is that that Friday night there was a leak, and so the next morning, on the Saturday, there were reports that a lockdown was going to be ordered, and

six-week medium-term projections", which was showing exactly where things were going and were much more reliable examples of what was happening, which was pretty grim.

Then overnight on Friday, having had the policy -- having made the decision they were going to do a lockdown, that was leaked, so the decision was leaked to the press.

Q. Yes. Then if we look on the next page, we come back to this slide point, that it says:

"The PM has latched onto that & the one of NHS collapsing as the reason for doing it."

And he was "furious" that he'd "based a decision on a slide that I [that's you] was now having to slightly row back from", and you describe there being a sort of demand, a requirement from Number 10 that the slide be used in the press conference.

You subsequently, in a subsequent note, say that you said it shouldn't be but in the end you were persuaded that it should.

Now, this instant has become the subject of some debate, so tell us in your own words what the rest of that part of the story was?

A. Well, so we were called in to do the press conference, Chris Whitty and I, and we were then in a room for there was then a sort of hastily arranged press conference.

If we go over to the next page, you record that in your notes. This is now Saturday the 31st:

"Frantic day, whole thing leaked into the media."

"Everyone can see action is needed ... some [people] are pushing hard against it.

"We suddenly have to do a presser [press conference] today.

"... why not keep it quiet, get it right over weekend & then announce properly on Monday."

It's clear from the tone of this that you felt -- it had obviously been the case -- somewhat sort of bounced into making an announcement?

Q. Or being part of an announcement?

A. Yes, being bounced into the press conference.

So the sequence was that a graph that had been to SPI-M had been taken from SPI-M directly into Number 10 that we were unaware of. I think Ben Warner took it in.

And we got rather sort of blindsided by this having been shown to the Prime Minister and the Number 10 team on Friday, and we at that time said "I think you shouldn't take too much notice of this graph because it's a reasonable worst-case scenario, you should look at the three hours or four hours, I think, the Prime Minister was making calls to various backbenchers and other people and no doubt the press to try to get people on the right side to that decision.

As I said, we'd been clear the night before that this slide was a reasonable worst-case scenario, and that's not a good thing to show at a press conference because it's so complicated to explain what a reasonable worst-case scenario is and that we should simply only show the medium-term projections, six-week medium-term projections, which made the case, and Simon Stevens had also said the NHS is going to collapse if we don't do something. And we said that's an important statement, it would be good to have Simon standing at the press conference saying that if that's the case.

The -- those three or four hours we were in the room waiting, the message came back several times that the Prime Minister felt that as he had seen this slide it was only right that the public saw it, and that we had to show it, and I think in the end we agreed that I would show the slide but try to move on to the medium-term projections, which were the real thing. And I think that argument, "I've seen it, therefore the public should see it", carries some legitimacy.

Q. With hindsight, was this one of those moments that we
talked about earlier where you, as a sort of independent adviser to the government, were being drawn uncomfortably close to being aligned with certain policy decisions?

A. Well, maybe. I mean, it was a slide -- I did check because this slide had appeared from, as I say, nowhere into Number 10. I did check with the SPI-M people that they would stand behind this slide, and it was the right slide and it had got the right validation through SPI-M, so there was nothing wrong with it in terms of its sort of scientific origins and its validity, it was more just I didn't think it was a sensible they think to show at a press conference because these are complicated things to explain, reasonable worst-case scenarios, and it wasn't really the issue. The issue was what's going to happen in the next six weeks, not what the theoretical unmitigated scenario looks like over the next several months. So I think it was -- I think I made a mistake to agree to show it, and I think in retrospect probably what I should have done, maybe I even did do this, I can't remember, is phone Simon Case and say that, "I'm being put under a lot of pressure to do something I don't think I want to do". But I didn't have any worries about its sort of scientific legitimacy; it had come through a proper process and was a reasonable slide. I just thought it was not a sensible slide to show.

Q. Subsequently did the modellers, the people who had provided you with that information, did they stand by that slide or did they subsequently start to suggest that maybe their modelling wasn't quite what you had thought it was?

A. Well, they stood behind the fact it was the reasonable worst-case scenario from three weeks before and that's what it showed and, like me, thought that's not the one you'd want to be showing today. And then of course, inevitably, the reasonable worst-case scenario evolved and changed subsequently. But it was, as I say, it was not a slide that they said is not correct, it was correct, for what it was.

Q. Yes. Right.

Sir Patrick, just finally, I want to move on to one final point, which is perhaps something we haven't dealt with as fully as we should have done, which is I've asked you a lot of questions about the SAGE structure, committees, the advice and so on, you of course were a paid civil servant, you were doing your job in everything that we've described, but it's also right to say, isn't it, that that whole structure of advice below you relied on voluntary assistance from expert scientists who took time away from what they would otherwise have been doing voluntarily, unpaid, to feed into that system and, as you said to my Lady, in some cases at least suffered some difficulties as a result of that.

As with other aspects of the SAGE system, this was another example of the system being tested in a way it hadn't been tested before. Is that element of the system, the dependence on unpaid voluntary assistance, viable in another pandemic?

A. Can I just make one other comment about the slide, which is after the press conference the Prime Minister said to me "You skipped over that pretty quickly and went on to the other ones, didn't you?"

Q. Was he right?

A. Yes, and I cavorted it very heavily.

I do think that there was an extraordinary effort of altruism from scientists right the way across the country to work on this, unpaid, gave up their normal work, all hours of the night and day some of them, and some of them subject to abuse and physical threat. And it was extraordinary to see it, and a fantastic example of why funding a broad research base in the UK, both academic and industrial, is important for the resilience and success of the country. So I thought they were fantastic.

I think we put too much on them, and some of them we needed to I think give more breaks than we did, and we should have implemented a payment system to backfill teaching commitments and so on, which we did, but it was difficult to get that going in the middle of a pandemic.

We did get it going.

All that said, I think the mechanism, ie to pull on world-leading, active academic researchers, is the right one, rather than to build a big intra-government infrastructure to do this. I think that worked, and we were very fortunate to have the level of input skills, debate, dissent, challenge that we had as a result of that. So I'm not sure I would dramatically change that beyond things like: make sure we get the diversity right, make sure we get the geographical diversity right, make sure we have way to pay people so they can backfill teaching and make sure we provide both psychological and security support for people.

MR O'CONNOR: Sir Patrick, thank you very much.

LADY HALLETT: Thank you very much.

We will take a break now, and I shall return at 3.30. And I can undertake, Sir Patrick -- I can almost do a United States Supreme Court, can stop people...
in mid-sentence -- we will definitely be finished by
5 o'clock at the very latest. I'm sorry it's such
a long day for you.

(3.18 pm)

(A short break)

(3.30 pm)

LADY HALLETT: Mr Weatherby, are you going first? I meant
to check when we had the break, and I'm afraid I forgot
to do so.

Questions from MR WEATHERBY KC

MR WEATHERBY: Thank you very much.

Sir Patrick, I represent the Covid Bereaved Families
for Justice UK, representing bereaved families from
across the UK.

There are just two topics that I'm going to cover,
and I'll be well within the time estimate. I was going
to share my time with Mr Wilcock, my Lady, but in fact
Mr O'Connor has covered his questions --

LADY HALLETT: Oh, I see. Right, thank you.

MR WEATHERBY: -- and I'll be within the time.

LADY HALLETT: Thank you, Mr Weatherby.

MR WEATHERBY: I want to return to a point that Mr O'Connor
raised about -- and I'm quoting here -- how many deaths
were acceptable. I just want to explore that a little
more with you.

just for the record, paragraph 406, you're dealing with
the lessons learnt in fact from the second lockdown, and
your first observation is that the first lesson that
should have been learned was the same as should have
been learnt from the first wave: go earlier, harder, and
broader on the introduction of NPIs; yes?

A. That's a clear lesson that --

Q. Yes. And then your second lesson was where you returned
to this issue and you say there was a need to establish
some greater "degree of clarity on the level of
mortality or morbidity the government and society were
willing to accept for an epidemic". And that there is
bookending it, February, and then, looking at your
observations on the second wave, the same concern:
you're not being provided with the strategy and that
makes it much more difficult for you as advisers to give
advice in good time so that swift, real-time, efficient
and effective decisions can be taken; is that a fair
summary?

A. I think it was illustrated in the quotes that
Mr O'Connor showed of me asking: what is the
Prime Minister's aim and objective?

Q. Yes. So the answer to my question is yes?

A. Yes.

Q. That's the problem.

I'm going to come to just one more of those messages
in a minute, but before I do, in order to give proper
scientific advice, you've got to research, you've got to
model and that's the only way that you can provide very
fast real-time advice; is that right?

A. Well, the only way to provide real-time advice is to
build on the knowledge you have at that moment.

Q. Yes, but in the context of an overall strategy?

A. Yes.

Q. So Eat Out to Help Out, you've already told us that you
didn't know anything about this policy decision until
after it had been taken?

A. Correct.

Q. You've also told us that it inevitably increased the
number of infections, and therefore it must follow,
mustn't it, it must have increased the number of deaths?

A. It's highly likely to have done so.

Q. Yes, and you say at paragraph 348, just for the record,
that you have "no doubt that the decision-makers would
have understood from the general advice that I and
others had given before the introduction of the scheme
that it would increase viral transmission and
potentially quite substantially". So you're saying
there that, although you weren't asked to advise, you've
no doubt that those who took the decision understood the
general points about the increase of transmissibility; is that right?

A. I think I answered that earlier on as well, that it must be the case because it was the complete sort of turn on its head of the public health advice.

Q. Yes, and then in the next paragraph you go on to say that these principles, and I'm quoting: "These principles were clear and had been discussed with ministers and at Cabinet."

A. And that "It was entirely predictable".

Q. So you're not leaving much room for doubt about not only the effect of Eat Out to Help Out but also the fact that ministers were aware of what its likely effect would be when they took the decision?

A. Well, that was certainly my view when I wrote that, yes.

Q. Yes, that's very clear, thank you very much.

The second point relates to a notebook entry, your diary entry of 11 October, and it's again picking up from a topic that Mr O'Connor's dealt with, and I do want to put this on screen, please, it's INQ000273901 at page 220. I think it bears reading:

"Press conference tomorrow."

11 October 2020.

"Press conference tomorrow. I am now dropped in favour of Cx ..."

exponential resurgence of Covid at that time; is that right?

A. I think this is a discussion of tiers, if I'm --

Q. Yes.

A. -- correct, and it's a very clear statement that the tiers were not going to be strong enough to keep R below 1, as the Prime Minister says.

Q. So your frustration here is that SAGE has given forceful advice that what is actually required is a circuit breaker and Covid-O are still discussing with ministers directly involved about trying to make an alternative suite of measures work, and your frustration is that they're ignoring SAGE and trying to follow a course that won't work?

A. I think the message is not so much around a circuit breaker as the tiers need to be stricter at the top end if they're going to have an impact, and this is me in the evening referring my frustration that that's very clear, and the Prime Minister says as much, R will not go below 1 unless local leaders go further than the tier system.

Q. Okay, so, but you're expressing a very strong view here, aren't you, first of all that the press conference which you thought you were down to do was now going to be dealt with by a minister, the Chancellor, Mr Sunak, and that's the Chancellor of the Exchequer?

A. Yes.

Q. "... - good. They need to understand and own the decisions they are making [...] Covid O [...] Being asked to 'approve the measures knowing that it is not enough'. Gave the example that Bolton worked but only because hospitality fully closed. This is a massive abrogation of responsibility."

A. Then I won't read the next bit but you go on to deal with individual ministers and what you thought their position was. Then you refer to the fact that -- this is relating to I think a Zoom meeting, and you say:

"Whilst waiting someone clearly not on mute -- baby crying and then she starts singing 'the wheels on the bus' -- somehow symbolic of the shambles. PM said on call, 'The package we have as a baseline is unlikely to get R < 1 unless local leaders go further' ... Hancock says this is our last shot at avoiding national lockdown...meek as mice from Cabinet ministers."

A. Again, for context, this is referring to the fact that Covid-O, the ministerial and officials' meeting, had been looking at a package of measures which were not consistent with the September SAGE 58 meeting, advice, and that advice had been this robust call for a circuit breaker, and a suite of NPIs, given the exponential resurgence of Covid at that time; is that right?

A. I think these are different sections stitched together, so I'm not quite sure how they flow on in terms of -- but yes, I mean, I wouldn't have want to be in the press conference and I would have said R will not be brought below 1, and I think I did at other press conference --

Q. Yes, so you're clearly saying that ministers should own the decisions where they're standing away from the scientific advice that you were being -- had been conveying to them?

A. That is the case.

Q. Yes, and you were saying it in forthright terms, "a massive abrogation of responsibility"; that's the only way you can read that, isn't it?

A. Yes. I mean, again, that's obviously what I thought that night when I wrote these notes.

Q. Okay. Well, again, that's very clear, thank you.

Finally this, can you just help us with the last sentence. The baby crying and the wheels on the bus might be quite clear, but what did you mean by "Hancock says this is our last shot at avoiding national lockdown ... meek as mice from Cabinet ministers"?

A. Again, it's a bit difficult to know because these are --
Mr Weatherby: Yes.

Lady Hallett: Thank you, Mr Weatherby. So no questions, Mr Wilcock?

Mr Wilcock: No, thank you, my Lady, they were covered by Mr O’Connor.

Lady Hallett: Ms Gowman.

Questions from MS GOWMAN

MS GOWMAN: Thank you, my Lady.

Sir Patrick, I ask questions on behalf of Covid-19 Bereaved Families for Justice Cymru. My questions are centred around the interactions with the devolved administrations and in particular Wales.

Firstly focusing on your role as chair of SAGE, please can we bring up exhibit INQ000216615.

Now, on 26 May 2020, the First Minister for Wales, Mark Drakeford, wrote to you in your capacity as the chair of SAGE requesting the ability to engage more directly in the work of SAGE and specifically in respect of the development of the evidence base, and looking to commission work directly from SAGE.

Of the development of the evidence base, and looking to commission work directly from SAGE.

Please can we bring up exhibit INQ000216616.

Here we see the list of modelling questions that accompanied that letter that the Welsh Government wanted SAGE to answer, and my questions are these: to your knowledge, had any requests been made by the Welsh Government to commission work directly from SAGE prior to 26 May 2020?

A. I don’t think a direct request -- well, I know a direct request hadn’t come from the First Minister before then.

It’s possible that the representatives from Wales had got pieces of work done through subcommittees before that.

Q. Are you aware whether SAGE complied with the First Minister's requests of 26 May?

A. I replied a few days later and said that Rob Orford, then Acting Chief Scientific Adviser for Health, I met with him, went through all of these requests, made sure he was linked into SPI-M, which was the modelling group, and that he’d realised the papers which had gone before, which were in the public domain, that he’d seen anyway because he was on SAGE --

Q. Yes.

A. -- and that these were very, very specific modelling requests, probably -- no, definitely too granular to answer properly with modelling and that there may be some advice that could be given, but it was not going to be possible to model this sort of degree of granularity, all you’d end up with is spurious accuracy.

Q. And insofar as the second point raised by the First Minister within his letter, did SAGE take up the Welsh Government’s offer to support the development of the evidence base?

A. Yes, we got a lot of very useful information fed in through Rob Orford and Fliss Bennee who were the two people from Wales on SAGE. There are references several times to the useful information. And it was also very helpful because there were minor differences in policies between devolved administrations that did allow to us andtry to look and see what effect things were having.

Q. Thank you, Sir Patrick.

A. Moving on to your role as the Government’s Chief Scientific Adviser, what was the role, if any, of the Chief Scientific Advisers across the devolved administrations, including yourself, in the co-ordination of advice and policies across the four nations?

Q. Thank you, Sir Patrick.

A. Well, the four nations worked very closely together at a scientific and medical level. The Chief Medical Officer met with the CMOs of the four nations very regularly, at least once a week, I think, right from the very beginning, and we had representatives on SAGE. I also had a direct long-standing relationship with the Chief Scientific Advisers for Scotland and Wales, one of whom was involved in Covid and one of whom Wales decided wasn’t involved in Covid and suggested Rob Orford and Fliss Bennee be linked to SAGE.

So I think we had them involved in SAGE. We also created a SAGE chairs’ meeting where specific things were brought up relating to devolved administrations and others that could then be put into the work plan, and separately I had regular meetings with the overall Chief Scientific Advisers for the devolved administrations except Northern Ireland who didn’t have one.

Q. And it follows from that question, my next question: where there were proposed divergences in policy between devolved administrations, were these ever discussed between the Chief Scientific Advisers across the devolved administrations in advance of implementation?

A. The science advice was uniform, pretty much, across the four nations, the policy decisions diverged, and I think there was probably more discussion amongst the CMOs, because most of the decisions were more in their territory than in the CSA territory, but they were...
obviously regionally important distinctions and policy preferences that altered between the nations.

Q. Thank you.

A. Finally, did the Chief Scientific Advisers from the devolved governments have access to information, including data, on an equal footing to yourself to enable the fully informed exchange of views in any meetings that you had with them across the four nations?

Q. So, from your perspective, you didn't consider that the devolved administrations were disadvantaged in their access to data?

A. I don't think so. I mean, there may be specific examples but I don't know of any where there were certainly many examples where the data that came from the devolved administrations was incredibly important. I'd single out Scotland in particular there, with some of the work, with their electronic health databases and the EAVE study, which was incredibly important.

indications of changes, through to very important data on the vaccine efficacy, which led to multiple publications in top tier international journals, and was a continued source of helpful information into SAGE and to other bodies.

Q. And am I correct in saying that some of the data comes from GP notes and indeed the data was able presumably then to cover what is approximately 98% of Scotland?

A. I think Scotland has done, over the years, a brilliant job of getting health records, both primary and secondary care health records, and linking them, and that's been a piece of work that was done a long time ago, and it really came into its own during this, to be able to provide very useful information.

Q. Thank you.

A. I wonder if I can now turn to your role in SAGE and ask you some questions about that.

The first thing I want to ask you about is, I suppose, it would be informing the policymakers.

We've heard this morning the job that you went to to try to ensure policymakers were well informed before taking decisions, and you said, neatly, that you provided science for policy rather than policy for science.

You said and I caught that you did teach-ins, and those were large, you said, in fact, up to 170 people -- I'm obviously assuming these are all online, was that correct?

Q. Yeah, well, they -- I'm pretty sure they were all online. I didn't take part in them, they were various chairs of subcommittees. So Cath Noakes, who chaired the transmission subgroup, was absolutely brilliant at giving tutorials inside Whitehall. I think they were probably all virtual.

Q. My question then really focuses on that particular issue. Were these teach-ins only given within Scotland, and it was a very effective way of looking at electronic databases held in Scotland and health records to give early signals on things, so we got information from there, everything from rates in Scotland, early...
what I just don't know is whether the chief scientific
advisers from the devolved administrations that to make
it happen or not, but it was there and available if
people wanted it. And I certainly had a discussion,
I can't remember when now, with one of the Scottish
ministers directly who wanted to speak to me about
something.

Q. And was that in relation to finding out more about
a particular topic to inform themselves?
A. Yes, and I can't -- I'm sorry, I can't remember what it
was now. It was during a visit that I made.

Q. Well, we will hear from Scottish politicians in
Module 2A, so perhaps someone will be able to advise us
at that time.

In relation to discussions with politicians or
indeed others, I would like to move on to the next
topic, which is the issue of borders.

Now, in your statement you speak of borders and
you're discussing them in relation to international
borders. What I am wanting to ask you about is whether
or not there were any discussions about border controls
between the borders of Scotland and England or England
and Wales?

A. Our science advice on borders was very clear to stick
away -- to stay away from policy, and our advice was
really quite simple, which is border control measures
are of importance when the country that you are talking
about has a much higher prevalence than the current
prevalence in the UK or in one of the nations of the UK,
and that's when border measures could make a difference,
and that in order to be effective border measures needed
to be extremely stringent and, even if extremely
stringent, would delay rather than stop importation of
cases and -- particularly variants is what we were
thinking of. So that, pretty much, was the science
advice, summarised rather briefly, but it didn't go
further than that. We never said what you should do in
any particular border. That was a policy decision.

Q. So, for example, when the prevalence of Covid was almost
totally London-based to begin with, based in England,
there was no discussion about the possibility of closing
the border in Scotland or in Wales?
A. I don't recall that being a discussion, but there may
well have been policy people thinking about that,
I don't know.

Q. But certainly you weren't part of that --
A. I never heard that suggestion.

Q. Moving on to my final issue, and that is in relation to
the issue of masks in schools. You made a call,
Sir Patrick, that the Scottish Government decided masks
would be used in schools and thereafter England followed
suit at some point in August of 2020; do you recall
that?

A. I recall that happened, yes.

Q. I wonder if we can have up INQ000273901, pages 148, do
we see your entry records:

"Scotland breaks ranks over face coverings and
schools despite CMO having worked hard to get all CMOs
aligned to a very good statement released the day
before."

Now, I just want to check, that's your personal
observation, I take it, and not anyone that you're
recording?

A. That is my personal observation as what happened.

Q. I see. And why do you use the phrase "break ranks"?
What I'm really trying to explore is: why was it a good
idea to ensure that everybody was doing the same thing?

A. I think this was a CMO to CMO thing. I wasn't really
involved in this discussion, but I think the CMOs were
very keen that the four nations worked together and that
the advice was similar across the four nations. This
was medical advice being given, didn't come from SAGE
and didn't come from me, but they wanted to work
together, they'd reached an agreement and they'd given
consistent advice across all four nations. That's
obviously advice; the policy was clearly different.

Q. So from a scientific perspective, from your perspective,
there wasn't a necessary need to keep all four
consistent?

A. We always anticipate -- there was a very important need
to make sure that we had appropriately aligned science
advice, where it was right to do so. I mean, it was
highly unlikely the science advice would be different in
the four nations, in fact it was hardly different across
the whole of Europe. The policy choices are obviously
for politicians and they will differ as politicians wish
them to differ.

Q. I wonder if we could have that same inquiry document,
page 151. Now, this reads:

"Hancock -- praising himself for mask decision. He
know that Scotland decision was not based on medical
advice (ie it was totally political)."

Now, can you assist the Inquiry with whether or not
you are simply recording what his view was or what your
view was?

A. Well, it's certainly not my view. I mean, my view was
the advice had been given and it was consistent across
the four nations, anything else was politics.

Q. So if we see here, just to be clear, if we see here "He
knows that Scotland decision was not based on medical
MR DAYLE: I was the third person.

Q. I don't think I was appearing at that conference. Maybe I was, but I can't remember it. Those two were, maybe...  

A. No, the issue was the previous day we'd received preliminary information from a study called CO-CIN about disproportionate proportions of different ethnic minorities in hospitals and outcomes and they weren't quite sure exactly what was happening and why they were seeing it, and they'd gone away to undertake some more work urgently to try to understand whether this was a difference in admission to hospital, a difference in outcome in hospital, a different pathway that people were following during treatment, or whether it was related to pre-existing comorbidities and underlying illnesses. So there was a piece of work that we'd just seen literally I think on the afternoon before, on the 16th, that was due to be updated with the information as to what was causing it so we could actually give proper information as to what might be done.

Q. Okay. So it was a very specific set of facts or...
Questions from Mr Menon KC

Mr Menon: Thank you, my Lady.

Good afternoon, Sir Patrick, I ask questions on behalf of a number of children’s rights organisations.

I have a few questions on three topics.

Firstly, the Inquiry has heard evidence from a Dr David Taylor-Robinson, a public health expert, to the effect that social isolation for children is totally different than social isolation for adults as there are critical and sensitive periods in children’s development and windows of opportunity, as he called it, in children’s lives that you can never get back.

Are you aware of any scientific research done for the government during the pandemic on the specific impact of the lockdown rules and restrictions on children as compared to adults?

A. I don’t know of the specific pieces of research that may have been done. We set up a Children’s Task and Finish group to look at the question of impacts on children which involved people from the Royal College of Paediatrics and Child Health, and various other organisations, and was chaired by the Chief Scientific Adviser in the Department for Education, to try to understand exactly these questions of disproportionate impact, risk to children, and it became the basis of,

And I think quite early on -- I don’t remember the date, I’m sorry -- we came to the conclusion that the likely causes was to do with inequality and to do with issues of health related inequality, rather than to biological differences which were driving this outcome at that stage.

Q. Very well.

A. No, I think I was asked by the public health people very much as an issue of public health, and that there were obviously pre-existing structural inequalities that were causing a problem and, as I’ve already said in a previous quote, I was worried that not only was there inequality in terms of what the effect of the virus was, but the virus itself was then driving even further inequality because of that. So I think I was seen as absolutely a public health issue.

A. Mr Dayle: Very well, thank you for that.

Lady Hallett: Thank you, Mr Dayle.

Mr Menon.
A. No, that came later, I think, and was part of the --
what started, I think, as a task and finish group to try
and undertake a piece of work, and then it morphed into
SPI-Kids, which brought together lots of the people who
had worked on that to become a more regular way of
looking at things relating to children.

Q. And SPI-Kids, for example, produced a paper on the role
of children in transmitted Covid; is that right?

A. Sorry, in what?

Q. Transmitted Covid.

A. Yes.

Q. Transmission.

A. Yes.

Q. Do you know whether SPI-Kids ever researched or
considered the wider impact of the government's
non-pharmaceutical interventions on children and their
long-term social and psychological wellbeing?

A. Yes, there was a very extensive report published by them
on the negative effects of NPIs, and there were some
very vocal inputs from people around that subject.

Q. I think there was -- I'm not sure about this, actually,
there may have been a report from Public Health England
as well but, yes, it was a topic that was -- the reason
that group was set up was exactly that sort of risk

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Q. And that's your view, isn't it?

A. And that was the view of that group as well, and that's
precisely why it was set up, because in all of these
cases -- I'll just take a step back, if I may.

All the NPIs carried risks as well as the obvious
benefit of stopping the spread --

Q. Yes.

A. -- and it's often perceived that somehow they were
an easy option, whereas stopping the spread was the
priority. But we were aware at all times that these
carried significant risks, and they carried particular
risks for children.

Q. Thank you.

Thirdly and finally, I have a question for you about
something that appears in your handwritten notes.
I don't think I can put this on the screen, I don't
think I'm allowed to, but I'll just give the reference
for the record. It's INQ000280061, page 223. It's
a note of yours -- I'll just read it to you -- dated
15 October 2020, and it reads as follows:

"SAGE pushing for 'can't we exempt children from
rule of 6 -- we said no not unless CO wanted to
revisit."

Can you explain that note, please?

A. I don't know what context that was in, but it sounds
like it was a SAGE meeting where people wanted to think
about whether the rule of six should or shouldn't
include children, and Cabinet Office didn't want to
revisit that policy.

Q. Would that view of SAGE have been communicated to the
Prime Minister or any other government minister at the
time?

A. I think --

Q. This is October 2020.

A. Well, I think on the rule of six, we were pretty clear
that we didn't actually think that that had an enormous
basis in anything. In other words, it was: why six?
Why not eight? Why not ten? We couldn't tell anyone
which was better or worse, only that the more contacts
you had, the more likely it was to create a spreading
environment. Exactly how that was organised was
a policy matter.

Q. Would that -- can you assist as to what the government's
response was, if any, to that view that SAGE apparently
held in October 2020?

A. I can't recall. I think, if I remember correctly, the
government had made a decision that it wanted to stick
with six, and that was the policy decision.

Q. And it wanted to stick with six in England, without
making any exemption for children, unlike Scotland and
Wales --

A. Yes.

Q. -- who took a different approach. You know that, don't
you?

A. Yes.

MR MENON: Thank you very much.

LADY HALLETT: Thank you, Mr Menon.

Mr Friedman.

Questions from MR FRIEDMAN KC

MR FRIEDMAN: Sir Patrick, I act for national disabled
peoples organisations.

Can I ask you about representation on SAGE and
related expert groups. Mr Dayle, to my left, for FEMHO
has asked you today about your statement at
paragraph 552, that it was entirely foreseeable in
effect that pandemics as a rule have the greatest impact
on those who suffer from pre-existing structural and
health inequalities, and we would take it disabled
people fall into that category, and today you've called
that "an historically true statement".

In your Module 1 oral evidence, we needn't go up to
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should, though, have looked at it more in SAGE, I think.

Q. Yes. So in effect you should have and, as it were,
HM Government as your client should have pushed you more
to consider it?

A. Well ... yeah, definitely this is an HM Government issue
because they have a unit that focuses specifically on
this, and so I think could have fed us a question.

In terms of the science, though, the two areas that
I think are most important that were repeatedly covered
was: keep the prevalence low, and look out for special
institutions. And I'll pick up one example: in
May 2020, we received a piece of work that had been done
by a subgroup on forgotten institutions that was
specifically looking at those institutions where spread
might occur, including residential homes for people with
disabilities. That's a sort of science question we can
address, but I would argue it's primarily a policy and
operations question for the Cabinet Office unit to think
about that.

Q. Yes.

Well, can I move on about, as it were, prompts,
then, that came within the course of the work. You've
just referred to one.

Can I just then ask you about the work of the Office
for National Statistics that the Chair has seen, that in
it, but it's Day 8, 22 June 2023, at page 165, lines 5
to 23, you told the Chair on reflection that it was:
"... a terrible, terrible truth, and it's something
that we all need to reflect on, which is that all
pandemics feed off inequality and drive inequality."
And you added that awareness of issues of inequality
ought to have been:
"... embedded right from day one, it needs to be one
of those questions on the first SAGE, you know: what are
the issues around inequality that you should be thinking
about now? In terms of science advice."
And you added:
"Others need to think about it in terms of
operational planning."

Now, given that foresight, why was there not more
representation of those with insight into the
predicament of those groups embedded from day one into
SAGE?

A. Well, I think the insight was that that would have been
helpful. We didn't do that on day one. We had a number
of scientists looking at specific areas. I think my
statement actually is that there is a policy and
operations group within Cabinet Office that deals
specifically with disabilities and inequalities, and
that's really where this should be driven from. We
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effect showed disproportionate impacts upon mortality
rates and quality of life for disabled people becoming
apparent from their papers from June 2020 onwards.

Again it may be a similar answer, but can I just ask
you: why, when it was recognised by that time or
thereabout that time that SAGE standing committees could
benefit from a wider diversity of expertise in terms of
inequalities, was no dedicated expertise sought
regarding disabled people?

A. I think that ONS survey came out of discussions probably
at SAGE, that piece of work --

Q. Yes.

A. -- because Ian Diamond was part of the SAGE -- he's the
National Statistician -- part of the SAGE group. That
clearly is a report that needs to go into central
government to deal with. As I said, I think -- and
I said this in my Module 1 -- I think this is an area
where it should automatically happen in SAGE going
forward, and it didn't.

Q. Is that the answer to my question about: why no
dedicated expertise? Because I just want to push you on
that. My question is: why, when this kind of data is
coming out, whether you have been involved in
commissioning it or not, is thereafter there's no
dedicated expertise sought regarding disabled people
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A. I think the dedicated expertise needed to sit somewhere else and ask questions of SAGE, which we can then potentially bring people in if we needed to. But I think there’s a danger, I mean, SAGE is not the operational or the policy organisation, and it’s not the place where these sorts of things need to be turned into action.

Q. That may then follow on to my next question, which is: in effect the work that is commissioned of SAGE, and I take the answers you’ve already given about this. You’ve given a list of not all, but many of SAGE commissioned pieces of work. Just for the record, at page 180, at paragraph 554, and it’s (a) to (p) of your statement subparagraphs.

Now, none of the list there is dedicated in its focus to the disproportionate impacts of the Covid-19 pandemic upon disabled people, and we found no dedicated SAGE paper of that nature.

Now, we understand that SAGE supplies the advice it’s asked to supply from HM Government, but again why no dedicated focus? Is it simply that you weren’t asked?

A. Well, I’ll go back a bit to an answer that Professor Kamlesh Khunti gave in relation to a similar question,

Q. Finally, may I ask you about the risk posed by a Covid-19 virus to the learning disabled and particularly those with Down’s Syndrome. Professors Watson and Shakespeare have given evidence to the Inquiry to the effect that prior to Covid-19 pandemic, it was well established that respiratory disorders are the predominant cause of death for people with an intellectual disability, and hence those experts on disparities relating to disabled people regard the failure to identify those with intellectual disabilities and particularly those with Down’s Syndrome early on as a missed opportunity.

Now, again, acknowledging to you and reminding myself, SAGE is not directly responsible for these lists of clinically extremely vulnerable and the like. Others are, and they’re medical matters. But should those with Down’s Syndrome have been on the clinically extremely vulnerable list throughout the pandemic and, if not, should they have been added sooner than

Q. We understand that, and we’ve heard from the Minister for Disabled People in terms of what was done or not done by the Disability Unit. But if we stand back and we think of the problem, for whatever reason, that HM Government is the client and its dedicated units don’t ask the question or seek the advice from SAGE, then again does that not underscore that sometimes the expert adviser needs to have people with that focus on its main groups or subgroups in order to prompt its client to think about those kind of matters?

A. Which is why, in statement 1, I said: yes, I think that
1 Down's Syndrome, should there have been speedier ways to
2 process that recognition of risk from June 2020 to
3 November 2020 when we know the nature of the clinically
4 extremely vulnerable list changed to include
5 Down's Syndrome?
6 A. Well, NERVTAG is a committee of DHSC, and therefore its
7 outputs fed directly into DHSC. I think these questions
8 are really best addressed to somebody in the DHSC or the
9 CMO, they weren't SAGE questions, they were very
10 important clinical questions and very important
11 operational matters, but I wouldn't expect them to come
12 to SAGE and I don't think putting SAGE in the middle of
13 any future plan around this would be a sensible action.
14 MR FRIEDMAN: Thank you.
15 Thank you, my Lady.
16 LADY HALLETT: Thank you, Mr Friedman.
17 MR Jacobs, I'm sorry, last again.
18 Questions from MR JACOBS
19 MR JACOBS: Thank you, my Lady.
20 Sir Patrick, I ask questions on behalf of the
21 Trades Union Congress.
22 It is important that when giving your answers at
23 least you do speak into the microphone so it can pick
24 your voice up.
25 I'm going to ask a few questions about decision
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1 making in respect of schools, of course the detail will
2 be the subject of a future module but I have a few
3 questions about the general approach to decision-making.
4 I'd like to start, if I may, with an entry in
5 the Inquiry's schedule of your notes at INQ000273901,
6 and in particular page 139. So when it arrives, we're
7 going to be looking at an entry from 6 August 2020:
8 "PM Covid (S) meeting on schools. 'Don't want to
9 hear about plan B and C for failure. I just want all
10 pupils back at school' ..."
11 And then a further quote:
12 "... 'We are no longer taking this Covid excuse
13 stuff. Get back to school'."
14 Firstly, are those quotes from the Prime Minister --
15 or quotes of what the Prime Minister had said?
16 A. It looks like it.
17 Q. The context, of course, Sir Patrick, is looking forward
18 to schools reopening that September. Is it right also,
19 as a point of context, that at that time you and others,
20 in around July and August 2020, had been raising some
21 concern about the potential path of the virus over the
22 winter months and the risks associated with lifting
23 various NPIs at around that time?
24 A. Yes. We had raised the risk that prevalence was
25 increasing and would continue to increase, and I had
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1 commissioned a piece of work from the Academy of Medical
2 Sciences -- I'm sorry, I'm going to have my back to you.
3 Q. Not at all.
4 A. -- Academy of Medical Sciences on -- just called
5 "Winter" to take into account that this -- all of the
6 things that government needed to consider, and our view
7 was that the increased lifting of measures would drive
8 an increase in prevalence and that inevitably that
9 starts to put pressure on the remaining things that were
10 open, and therefore, in a sense, there's a trade-off
11 between schools and other things and certainly, for the
12 reasons discussed earlier, our belief was that schools
13 should usually be the last thing to shut, because of all
14 the knock-on consequences for children.
15 Q. Yes.
16 Sir Patrick, given those consequences, schools
17 opening, being open is obviously hugely important, but
18 given also the context around prevalence and R rate,
19 were you concerned, on listening to that observation
20 from the Prime Minister, that it was a little, perhaps,
21 reckless to discourage any careful focus on when
22 a plan B might be needed and focusing exclusively on
23 a plan A?
24 A. Well, as you might imagine, I was rather focused on
25 evidence-based plans and that there needed to be
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1 a series of scenarios not a single option.
2 Q. Yes. So, and give us a sense of the importance of those
3 scenarios being considered in advance rather than just
4 holding tight to the plan A of schools open?
5 A. Well, these are very difficult operational questions
6 that require planning, and we're now straying outside my
7 role, but it's pretty clear that you can't just flip
8 from one plan to another without preparing.
9 Q. Sir Patrick, you spoke earlier in your evidence about
10 meetings going round in circles. Is it quite a simple
11 consequence of having plan A but no plan B or C that one
12 ends up, in the face of very difficult issues, just
13 going round in circles?
14 A. It makes it much more of a binary choice, and it makes
15 it much more difficult, I imagine, to operationalise if
16 you do need to change.
17 Q. With that in mind, I'm going to look at just, I think,
18 two entries in your notes in which you describe
19 subsequent decision-making. The first, in the same
20 document, is page 181, and this is from 16 September, so
21 just six weeks or so after the "have a plan A but no
22 plan B or C". There is a reference to the PM saying:
23 "... 'Maybe we should blame ourselves'."
24 And a reference to moonshot, which you have given
25 evidence about.
"A rare moment of truthful insight."

And then you say:

"Complete chaos over schools and what they should do. No one had any answers."

Sir Patrick, give us a sense of what the complete chaos was and why it was that no-one had any answers?

A. I really don't know, I mean, that was my observation that day. There was obviously a meeting where it didn't sound like they were getting anywhere and there were a lot of things that needed to be addressed but I'm sorry I don't think I can add anything to what that scribbled note said.

Q. Might it have been early indications of the R rate going up?

A. Oh, we knew by then the R was increasing and the prevalence was going up and we were worried about it.

Q. Were you particularly worried, Sir Patrick, in the absence of a plan B?

A. We were worried that action would need to be taken of some sort and that needed to be defined, and I think I'm right in saying that five days after this, Sir Chris Whitty and I held a press conference where we described what we saw as a dangerous emerging situation.

Q. Yes. The next entry is at page 339 of the same document. 197

impression from the meetings that took place that day.

Q. In terms of your impression of meetings not necessarily that day but over the course of that first year of the pandemic, did you form a view as to the effectiveness of the working relationship between Number 10 and the Cabinet Office and the Secretary of State for Education?

A. I had many discussions with the permanent secretary at DfE who was really trying to get on top of this and to understand the advice on schools, and I know there were some very strong views held by the Secretary of State there, and those views were discussed and sometimes taken up and sometimes not by Number 10. It didn’t seem to me that there was necessarily an alignment between what was going on at the political level, and there was attempts by the permanent secretary to try and draw some structure to what was happening in DfE around this area.

Q. You described there wasn’t necessarily an alignment, is that a slightly delicate way of putting it? How would you describe the extent to which there was a sense of coherent planning between Number 10 and the Secretary of State for Education?

A. I was worried that the schools planning was not under control and that there wasn’t a very clear plan as to what would happen and why it was going to happen and how it would be implemented.

It's an entry of 3 January 2021. That was the day before primary schools were sent back for one day, wasn’t it, Sir Patrick?

We see it says:

"The NHS in London is in real trouble. The govt needs to lock down more firmly & to take the advice on schools...Called Chris & agreed he should pull a group together to listen directly. He is worried about individual extremist views."

"...Schools is a complete mess largely due to [Department for Education]."

Why did you make the observation, at that stage, that "Schools [was] a complete mess [and] largely due to the DfE", the Department for Education?

A. I really can't -- I mean, I was obviously frustrated that evening, I was obviously very concerned about the rising rates and that London, I do remember, really looked like it was in big trouble at that moment. And that schools were considered to be an important part of the spread of what then, I think, was the Alpha variant that was spreading very rapidly throughout the younger part of the population. So I think that's the background to this. I really don't know why I said schools are a complete mess largely due to DfE, all I can say is that's clearly what I came away with, an
A. I wasn't in lots of meetings to do with schools at this operational level, so I wouldn't have seen this, I think this is Jonathan Slater talking to me as he is trying to get some science advice, so I wouldn't have seen that.

Q. Okay. If we return finally just to that entry, it finishes:

"I don't know what Gavin's plan for schools is but probably pretty feeble' PM."

Is that the Prime Minister stating, in a meeting in June 2020, his view of his Secretary of State for Education?

A. Well, that's a quote which I wrote down on that day from the Prime Minister about the Secretary of State, from a meeting. So I think I can't say any more than that, other than that's what presumably was said.

Q. To the extent that you were aware, from being present in meetings, is that indicative of a confidence or lack of confidence that key people such as the Prime Minister had in the Secretary of State for Education?

A. I think that's a question that really needs to go to the Prime Minister, but I have to say a lot of these statements seem to fly around Number 10 about a lot of people.

MR JACOBS: Which we may have seen.

Those are my questions, thank you very much.

LADY HALLETT: Thank you very much, Mr Jacobs. That's all for Sir Patrick.

Sir Patrick, again, extremely grateful to you for all your help and your insight and for your patience in staying with us all day today. I'm sorry I can't say goodbye as yet -- I'm sorry from your point of view.

(The witness withdrew)

LADY HALLETT: Tomorrow we'll sit again at 10, and then, just so people can make their plans, because we have got so much to do this week, I'm sitting at 9.30 on Wednesday and Thursday.

Thank you very much.

(4.42 pm)

(The hearing adjourned until 10 am on Tuesday, 21 November 2023)
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