

Coronavirus (COVID-19) (/coronavirus)

Guidance and support

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3. SAGE 57 minutes: Coronavirus (COVID-19) response, 17 September 2020 (<https://www.gov.uk/government/publications/sage-57-record-of-meeting-on-covid-19-17-september-2020>)
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Transparency data

SAGE 57 minutes: Coronavirus (COVID-19) response, 17 September 2020

Published 30 October 2020

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Fifty-seventh SAGE meeting on COVID-19.

Held via Video Teleconference.

Summary

1. Incidence across the UK continues to increase rapidly, and data now show clear increases in hospital and ICU admissions. Medium-term projections indicate a rapid increase in hospital admissions in the coming weeks, and in a scenario where there were no interventions, this would have the potential to overwhelm the NHS.
2. The latest estimate of R for the UK is 1.1 to 1.4. Non-pharmaceutical interventions (NPIs) on local and national scale are needed to bring R back below 1. Individual NPIs are highly unlikely to achieve this, and a package of measures will be needed. In choosing options it is important to recognise that NPIs will likely need to be in place for a significant length of time.
3. A 'circuit-breaker' type of approach, where more stringent restrictions are put in place for a shorter period could have a significant impact on transmission. Modelling indicates that a 2-week period of restrictions similar to those in force in late May could delay the epidemic by approximately 4 weeks.
4. Adherence to any measures put in place will be central to their effectiveness. Support to enable and promote adherence will be needed, including clear, simple messaging, removal of disincentives, and explanation of the rationale behind guidance or restrictions.
5. In addition to NPIs, the effectiveness of other operational response measures will be absolutely critical, particularly in care homes, hospitals, workplaces and Test, Trace and Isolate (TTI) systems. SAGE advises that excellent operational effectiveness will be required in all these areas.
6. Current rates of full self-isolation of people with symptoms including cough, fever or anosmia are likely very low (moderate confidence). A package of support measures including financial and non-financial support; improved communication and advice; and greater access to social or psychological support should be considered to address disincentives to self-isolation and quarantine. Clear explanation of why self-isolation and quarantine are needed is required to encourage better adherence.
7. Use of face coverings should be considered in situations where they may be required for longer periods, though tolerability and equity need to be considered. Levels of adherence to guidance around when and how to use face coverings are likely to be a more significant factor in effectiveness than the duration of wearing.

Situation update

8. Incidence across the UK continues to increase rapidly, and data now show clear increases in hospital and ICU admissions (high confidence). Transmission has changed from localised hotspots to a more generalised epidemic (high confidence). It is certain that increases in infections will lead to further increases in hospitalisations and deaths (high confidence).
9. The latest estimate of R for the UK is 1.1 to 1.4, while the daily growth rate estimate for new infections is +2% to +7%. The latest estimate of R for England is 1.2 to 1.4, while the daily growth rate estimate is +3% to +7%.
10. As previously noted, these estimates do not fully reflect recent changes from the last 2 to 3 weeks such as the reopening of schools in England and SAGE expects the current growth rate and R to be higher than this (moderate confidence). The growth rate estimates equate to a doubling time for