

Witness Name: Damon Poole

Statement No.: 1

Dated: 21 July 2023

UK COVID-19 INQUIRY

WITNESS STATEMENT OF DAMON POOLE

I, Damon Poole, will say as follows:

1. I make this statement in response to a request from the UK Covid-19 Public Inquiry ("the Inquiry") dated 12 April 2023 made under Rule 9 of The Inquiry Rules 2006 ("the Request") asking me to provide a witness statement setting out the key aspects of my involvement in core political and administrative decision making relating to the UK's response to the Covid-19 pandemic. The Inquiry wishes to understand the role I played in relation to the Department of Health and Social Care ("DHSC") to support that decision making process from 1 January 2020 until 24 February 2022 ("the Specified Period") with a particular focus on the period 1 January 2020 to 26 March 2020.

INTRODUCTION

2. I attended Durham University from 2012-2015 where I studied for a degree in philosophy and politics.
3. My career to date since graduating from university has mainly been in political communications, although not exclusively. My first job was working on the Vote Leave campaign from March - July 2016 in the lead up to the Brexit referendum before becoming Head of Research at a pressure group called Change Britain from September 2016. I then worked on a voluntary basis for the Conservative Party during the 2017 general election.

4. I then went to work in the private sector at The Brunswick Group from June 2017 to May 2019 advising clients on media and communications before returning to political campaigning to work on Boris Johnson's leadership campaign as a Communications Advisor from May - July 2019.
5. When Boris Johnson was elected Conservative Party Leader and appointed as Prime Minister in July 2019, I became the Lead Special Advisor ("SPAD") for broadcast media at No.10 working for the Prime Minister. I worked in this role until September 2020, except for a brief period from October to December 2019 where I resigned from this role to work for the Conservative Party during the 2019 general election.
6. I was therefore working as a SPAD in No.10 for the first 9 months of the pandemic. I wanted to move to a departmental role, so I joined DHSC in September 2020 as a SPAD to the Secretary of State for Health and Social Care ("the Secretary of State") specialising in communications. I worked in that role under both Matt Hancock, until his resignation in July 2021, and then Sajid Javid, until his resignation in July 2022.

ROLE WITHIN DHSC DURING COVID-19

Appointment as SPAD at DHSC

7. As noted above, I was working in No.10 at the start of the pandemic but was keen to move to a departmental role. I spoke with Jamie Njoku-Goodwin who was the incumbent Communications SPAD at the time and I knew the Secretary of State from my previous political and campaigning experience. They were keen for me to join DHSC, and I joined in September 2020.
8. There was a handover period of approximately 3 weeks to 1 month when both Jamie and I were in the post. Jamie helped me get to grips with the role of Communications SPAD in a department which is different to the role I had in No.10 where there is a much larger political team. In a department you have broader responsibilities (compared to the broadcast role in No.10). It was especially important to get this handover right given that we were in the middle of a pandemic.

Role – Overview

9. My role as a Communications SPAD at DHSC was multi-faceted and involved advising the Secretary of State on all aspects of communications. This included, but was not limited to, how to make the best use of a range of different media channels, helping him to prepare for set-piece media events, working with the rest of government to ensure clarity of messaging and directly briefing the media to make sure that previously agreed messages were being effectively communicated.
10. Fundamental to my role was the ability to provide a political lens and angle that the civil service cannot because they must remain politically neutral.
11. Directly dealing with media enquiries was a significant part of my job. In addition, I played a role in the development of communications plans, clearance of departmental lines and communications materials. I also spent a lot of time in meetings and provided advice when communications matters arose, leading internal communications meetings with the DHSC communications team and project-based work.
12. I also supported Nadim Zahawi when he was the Covid-19 Vaccines Minister as well as the wider departmental ministerial team and senior officials such as Chris Whitty (CMO), Jonathan Van Tam (Deputy CMO) and Jenny Harries (Deputy CMO and subsequently Chief Executive of the UK Health Security Agency (“UKHSA”)). They all had their own officials and press teams, but I would sometimes help them prepare for large set piece media events such as press conferences and media interviews.
13. I worked with a team of around 30 colleagues in the DHSC media relations and external affairs team and the social media team which sat under the marketing team. There was an overall headcount of around 60 communications staff. A significant amount of content ultimately came to me for sign-off. I worked closely with the Head of Media Relations, Head of Marketing and Director of Communications for DHSC, amongst others within DHSC. As appropriate, the

Secretary of State would sign off on content bearing his name. I would work closely with his Private Office to be a conduit to the Secretary of State.

14. There was a team of SPADs advising the Secretary of State during my time at DHSC. We had as many as six at one point and as few as three but there was always a Communications Lead (me), a Parliamentary Lead and a Policy Lead.
15. I did not have a significant role therefore in advising the Secretary of State on policy, but I would certainly advise him on how policy proposals were likely to 'land' with the media and wider public and test these proposals in meetings where it was appropriate to do so.

Key responsibilities

16. In addition to the above, I was heavily involved in helping the Secretary of State prepare for televised presentations, either in press conferences and TV interviews or in parliament. I also accompanied him during most of these engagements.
17. I would assess media coverage daily and advise the Secretary of State accordingly. This was done formally and informally to make sure the messages we wanted to get across were 'landing'. I would speak regularly with No.10 and other departments or organisations to see if their assessment was the same, if any communications output had gone wrong and if so, what we need to do to correct. There was a constant process of assessment and feedback. Most nights I was on the phone with the Secretary of State once the press front pages had become known to brief him. I would then brief him the next morning on what the media were saying and how any story had developed. The impact of social media content, either government channels, departmental channels or the Secretary of State's personal accounts, was easier to quantify than other content. We were constantly trying to produce useful content to be disseminated across a range of channels.
18. We received regular polling which tracked people's views and public attitudes towards policies. We used these to support message development. We also received a weekly report on the top performing social media content so that we understood what was working and what we needed to produce more content on.

19. Communications plans were generated by DHSC to support the various avenues of communications with the public on issues. The DHSC communications team would generally draft these, and I would feed into them before they were developed into formal plans for sign-off.
20. For example, I worked with DHSC, NHS England, UKHSA and No.10 communications teams to develop a vaccines communications campaign plan from the day of the Pfizer vaccine announcement onwards.
21. There was then the government wide communications grid which was controlled by No.10 but for which, understandably, DHSC provided much of the content. This is a day-by-day plan of communications activity over the course of the upcoming week or so. This grid was the central hub of communication activity and was used for forward planning.

Role of DHSC as Lead Government Department ("LGD")

22. My understanding is that the designation of LGD is a formal one that was assigned to DHSC in responding to the pandemic. In any event, I have reviewed the Third Witness Statement of Sir Christopher Stephen Wormald dated 29 March 2023 ("DHSC Corporate Statement") and on this topic have nothing further to add.

Relationship between DHSC and Public Health England ("PHE")

23. I worked closely with the press teams both in PHE and the UKHSA, which superseded PHE in April 2021. Initially communications around NHS Test and Trace were the focus of my work with PHE and UKHSA. As the pandemic progressed, this focus would shift onto other issues, particularly the emergence of other variants.
24. I saw part of my role as making sure communications going out from DHSC and PHE / UKHSA were all aligned. I was a link to the Secretary of State and, in essence, an extension of him so I was making sure that the media plans and

communication lines reflected his position by giving steers. I would provide assurances back to him accordingly.

Relationship between DHSC and other government departments, agencies and decision-makers

25. My general recollection is that there was constant information sharing and communication going in all directions between all government departments. People were speaking both formally and informally with a whole host of information being shared. Over time, the processes did improve as the unprecedented nature of the pandemic put enormous pressure on existing ways of working. Great importance was placed on sharing daily data on a range of issues from daily infections to daily vaccines administered.

26. The quality of information flow between government departments improved over time and across various streams.

27. There was a non-existent capability for test and trace initially but that was set up and scaled up quickly. The quality and availability of the data that flowed out of that over time allowed much more effective briefings of ministers and communications to improve. We had a much clearer picture of the situation on the ground as time and capabilities progressed.

First awareness of Covid-19

28. I was working at No.10 when I first became aware of Covid-19 during the period January to mid-March 2020. I cannot remember precise dates but the attention and focus on dealing with this issue ramped up quickly over a short period of time. It got to a point in No.10 where there were daily meetings being held by the Director of Communications which included representatives from DHSC, PHE, NHSE and the FCDO.

29. I attended some of those meetings which were a forum to try and understand what was going on, exchange information between various government departments and executive agencies and to coordinate our communications response.

Decision-making committees, groups or forums

30. I attended some of the formal decision-making committees, groups or forums when I was a SPAD at DHSC such as the daily dashboard meeting or some of the Covid-O cabinet meetings. However, it is important to note that I was only accompanying the Secretary of State at his request and was not contributing to those meetings – I was there in a listening capacity only to understand what was being discussed. I would provide advice to the Secretary of State ahead of his attendance at these key decision-making meetings and help with the action points assigned to the Secretary of State and DHSC.

31. There is a substantial process around the taking of significant decisions by the government. There are formal cabinet committees with pre and post meetings. Formal minutes are recorded, and formal advice is in place to support those meetings.

Devolved administrations and regional / local authorities

32. I didn't have significant involvement in communications between DHSC and the devolved administrations. The Secretary of State was speaking to his opposite numbers in the devolved administrations, but the official channels led on this work to deal with any communications issues.

33. The main difficulty around the policy of tiering was the perception and at times reality that local authorities were saying one thing and central government was saying another on how the tier system worked and should be applied.

Daily meetings between DHSC, PHE, CMO and CSA

34. I can't remember there being a daily meeting between representatives from DHSC, PHE, the CMO and CSA whilst I was a SPAD at DHSC. I did attend meetings where Chris Whitty and Patrick Vallance were in attendance but, as for the more formal decision-making committees, I would usually only be there at the request of the Secretary of State and in listening mode.

ROLE IN RELATION TO NON-PHARMACEUTICAL INTERVENTIONS (“NPIs”)

National lockdown

35. My understanding as to why the UK Government decided to impose a national lockdown at the end of March 2020 was because at the time the consequences of not going so would have been catastrophic in terms of the number of deaths in the population and the collapse of the NHS. This decision was taken before I became a SPAD at DHSC.

Role in decision-making on NPIs

36. I had a very limited role in relation to the decisions that were taken around NPIs when I was working at DHSC. My role was broadly limited to the provision of advice to the Secretary of State on the media and public perceptions of various NPIs.

37. With regards to the second lockdown in November 2020, I recall there was a meeting, and it was leaked that another lockdown was going to be imposed. That made the media management and communications around that decision a lot more challenging.

38. The public debates around the second (and third) lockdowns were about the balance to be struck in protecting both the economy and public health. There were prominent figures on either side engaging in that debate and the government had to communicate a decision to the public in that context.

39. I saw an important part of my role as helping to communicate to the public the decisions taken in the clearest and most effective way possible so that people could understand the decisions taken and the reasons behind them.

Impact of NPIs in decision-making

40. In my experience, consideration was always given to how a policy might impact certain groups within the formal policy process. Clearly some policies have a

greater impact on some groups than others, and a fundamental obligation of the system is to consider that impact.

'Herd immunity'

41. To the best of my knowledge, a policy of 'herd immunity' was never adopted by the UK Government and I refer to the content of the DHSC Corporate Statement in this regard, the content of which I agree with.

Covid-19 Action Plan

42. Similarly, I was not involved in preparation of the Covid-19 Action Plan published by DHSC in March 2020. In any event, this was published before I joined DHSC as a SPAD.

ROLE IN RELATION TO MEDICAL & SCIENTIFIC EXPERTISE, DATA AND & MODELLING

Provision of information and advice to key decision-makers

43. I would have advised the Secretary of State on the polling information we were receiving at the time relating to public perceptions of government policy. We had a team within DHSC focused on data presentation and our overall approach to communicating the data was very transparent. I spent a lot of time considering the data around vaccinations and would have sent some of this to the Secretary of State.

Provision of advice, risk assessment and daily situation reports to the Secretary of State, Prime Minister, Cabinet and Cabinet Committees

44. I was in regular, daily contact with the Secretary of State to provide him with advice in my role as his SPAD. I attended meetings where the Prime Minister was present and some Cabinet committee meetings, all at the request of the Secretary of State.

As noted above, I attended in a listening capacity so was not providing any advice during those meetings to these senior members of government.

Development of testing, vaccines, and therapeutics

45. My role as a SPAD at DHSC was focused on communications and media management and so was concerned with the communications around the roll-out of these programmes.

46. When I first arrived at DHSC the hope was to develop an effective vaccine. Preparations for roll-out to ensure we were ready to operationalise as soon as the vaccines were approved were already underway when I joined DHSC. We tracked lots of polling data which demonstrated a huge increase in public confidence over time in what we were doing on vaccines. I would therefore point to polling data and uptake rates as good evidence of the public's confidence in this aspect of the response to Covid-19.

47. In relation to testing, the system got to a position of real scale. We ended up in a position where most people were comfortable using a test on a regular basis. I would also point to the success of the booster campaign and the speed that this was rolled out in the face of the Omicron variant. We applied the lessons we had learned from the success of the initial vaccine roll out. Our approach to communications around the rollout was to get into the public domain as much information as possible.

48. A good example of our approach was to stage a live Q&A with Jonathan Van Tam, the Deputy Chief Medical Officer. We worked with the BBC to broadcast that across as many channels as possible. We wanted to make it as easy as possible for the public to access information so they could come to their own decisions.

Operation Moonshot

49. This was a programme aimed at mass testing by shifting away from lab tests to rapid turnaround tests. One of the first announcements I handled at DHSC was

around Operation Moonshot but I wasn't aware of it at all until I joined DHSC, discussion around its development was kept tight.

Scientific and advisory groups

50. I would see the output and modelling from groups such as NERVTAG, SPI-M and SPI-M-O but I didn't work with them directly in my role as a SPAD at DHSC. They had an important role to play in providing expert advice, so I was of course very aware of their work.

Joint Committee on Vaccination and Immunisation ("JCVI")

51. UKHSA was responsible for providing the secretariat to the JCVI and I would liaise with the UKHSA press team on communications relating to the JCVI. The vaccine programme was my central focus for much of my time at DHSC and I was often concerned with the sequencing of announcements between JCVI, DHSC and wider government on vaccines. It was a case of coordinating the choreography of all relevant announcements to ensure effective communications with the public.

ROLE IN COVID-19 PUBLIC HEALTH COMMUNICATIONS

Role in development of DHSC communications

52. I refer to the content of my statement above so far as my role in the development of DHSC communications was concerned.

DHSC public health messaging

53. I have reviewed the content of the DHSC Corporate Statement and agree with what has been stated there so far as countering disinformation and monitoring the effectiveness of different forms of communications is concerned. We took a considered and deliberate approach to be transparent and get as much positive information out as possible, particularly on vaccines.

54. We made use of regular public opinion research regarding public health messaging and monitoring its success. I refer to the content of the DHSC Corporate Statement in this regard, with which I agree.

Behavioral management

55. We undertook extensive research into public attitudes to understand key concerns around vaccines and we had an Insights Team within DHSC who helped to manage the polling.

Effectiveness of public information sharing

56. Broadly speaking, I think the way information was disseminated or communicated to the public when I was working at DHSC was effective. Not everything was communicated as effectively as it could have been and over time our ability to communicate in the middle of a public health emergency improved, we were transparent, and we tried to establish feedback loops to iterate and improve the sharing of information with the public over time.

ROLE IN PUBLIC HEALTH & CORONAVIRUS LEGISLATION & REGULATIONS

Advice and briefings to the Prime Minister, Office of the Prime Minister, Cabinet or related Cabinet committees.

57. I had no or very little involvement in providing advice and briefings to the Prime Minister, Office of the Prime Minister, Cabinet or related cabinet committees with regards to coronavirus legislation and guidance. My involvement was principally advising the Secretary of State on how this legislation and guidance was likely to land with the public and media. In any event, there is a formal process around the advice and briefings given on those decisions.

Preparation of submissions and advice

58. To the best of my knowledge, I was not involved in any discussions around why DHSC took over responsibility for preparing submissions and advice on coronavirus legislation and guidance from DLUHC, I would therefore defer to DHSC Corporate Statements on this point.

59. What I am clear on though is that the advice and formal submission documents form the bedrock on which decisions are made in government. These provide a clear record of what advice has been given, what the options are and what decisions are taken. Substantive policy decisions are formally recorded with ministers across government relying on official advice from experts to come to those decisions.

Proportionality

60. With regards to the proportionality of the coronavirus legislation and guidance, it's not an area that fell within my responsibilities to consider. It may have come up in my conversations with the Secretary of State but again, this is why there is a formal process to make sure that this kind of advice is obtained and put to decision-makers.

61. I had access to submissions, but I wouldn't review every one, the other SPADs with a focus on policy and parliamentary affairs would review and provide advice. If people wanted my view on any part of it, then I would feed in. That could be anyone from the Secretary of State, his Private Office or other SPADS.

Reflections on key areas of legislation and guidance

62. In terms of challenges or obstacles relating to the coronavirus legislation, that was around interpretation. I would be getting regular calls from journalists enquiring as to the meaning of aspects of the legislation. These enquiries would sometimes lead to a reissuing of statements to the public and media having fed back concerns and obtained any clarification on legal interpretation from others.

63. The other challenge was around landing messages with different parts of the UK when this was a global pandemic with a national response. When certain parts of the UK had to have different rules or requirements, that always presented a communications challenge.

KEY CHALLENGES & LESSONS LEARNED

Lessons learned

64. I have read the DHSC Corporate Statement which covers this in a comprehensive manner and with which I agree. What I would add here is that the quality of data and the centrality of having quality data to inform decision-making cannot be overstated. As the quality of the data improved, that had such a positive impact on the ability of the government to formulate a response.

Key challenges

65. One of the biggest challenges was that Ministers were having to make huge decisions which affect the whole population on vastly incomplete data and information and under time pressures.

66. I wasn't close to the decision making within DHSC around the first lockdown. We had very patchy data on infection rates which improved over time. Decisions were therefore being made, and having to be made, without a full and clear picture and at pace.

H. GENERAL

67. There is nothing further of importance or interest to the Inquiry to what has already been stated that I wish to add to this statement.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed:

PD

Dated: __21 July 2023__