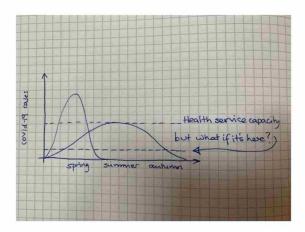
1. There is a discussion that I missed at Sage if it has occurred; where on the "cases through seasons" graph does health service capacity lie? I do not think I have heard a view from SPI-M or NHS about where we think NHS capacity lies relative to the forecast number of cases. I know there are very many uncertainties. I'd like to know about realistic, current NHS capacity versus reasonable worst-case epidemiology with various controls all in place (home alone, home with family, cocoon the vulnerable).



- 2. If capacity is nearer the low line what other combinations of options are there?
 - a. Lockdown
 - b. Intermittent lockdown
 - c. Spread out time to achieve immunity
 - d. Continue contact tracing
 - e. Others?
- 3. I think SPI-M's modelling is very useful and will continue to be so. However, in order to get my head round the size of the problem I find it useful to do back-of-an envelope calculations to think through options.

Ignore dynamics and calculate the average number of cases and deaths per week it will take to get to a given % of the population immune. This requires just multiplying a few numbers together. I've taken an England population of 68m.

Α	В	С	D	Е	BC/E	BCD/E
Immune	Number	Proportion of	CFR for	Number	Average	Average
target	immune	infections with	those with	of weeks	cases	deaths
	A * 68m	symptoms	symptoms	to target	each	each
					week	week
50%	34m	.5	2%	26	650,000	13,000
50%	34m	.25	2%	26	325,000	6,500
50%	34m	.25	2%	52	163,000	3,300
33%	22m	.1	2%	26	85,000	1,700
33%	22m	.1	2%	52	42,000	850

I believe the last two rows of this table have very optimistic assumptions.

I would find it helpful to have a Sage discussion about the tolerable numbers of cases each week. That would help us plan what level of interventions we need.

- 4. I think we should discuss the point that John E. raised about not overshooting the herd immunity target.
- 5. I remain unclear about Covid-19 infections acquired by patients after they enter ITUs. I would like to know if Sage (particularly the SPI-M x clinician axis) think this is likely to be an important effect.