

Exercise FAIRLIGHT - Summary of outcomes and proposed action

Observation	Next steps
<i>A. Strategy & Communications</i>	
<p>i) A restatement of the overarching strategy with clear priorities and trade-offs for the winter would help the government focus its efforts and increase alignment and coherence between departments' objectives and plans. For example, "Protect the NHS" and "Back to school safely" are widely understood priorities which have provided focus within and across departments. Further priorities might include protecting the vulnerable, but there is a need to address the trade-offs between economic and health outcomes.</p>	<p>No 10 and C19 TF to consider opportunities for restatement of strategy through PM announcements and campaigns. PM Statement on 9 September set out clear messages ahead of the winter. The PM announced further national restrictions on 22 September, and the Chancellor announced further economic schemes on 24 September.</p>
<p>ii) The public needs simpler and more emotionally compelling communication of NPIs that accelerates and sustains behavioural change. Participants reported that neither public (e.g. police, teachers) nor private individuals (e.g. bus drivers, shop staff, bar staff) could or would effectively enforce coverings, distancing or other NPIs. Public information campaigns (similar to those for drink driving and passive smoking) that create peer pressure to change individual behaviour are critical. There is an argument for sharing the principles that underlie NPIs with communications experts and ask them to develop suitable communications.</p>	<p>PM's 9 Sept statement amplified through the launch of the Hands, Face, Space, campaign focusing on the simplicity of the three essential behaviours. PM statement on 22 September reinforced this message, and announced increased legal requirements on face covering usage, alongside increased enforcement.</p>
<p>iii) Communication needs to better target specific cohorts and communities with targeted messages through alternative or local channels. For example, participants emphasised the need to adapt communications to influence those that are 'hard to reach', such as convincing students to social distance and minority communities at particular risk. One example of recent best practice was reaching a tight-knit community in Swindon through a religious leader.</p>	<p>In train- renewed focus on localised and targeted communications using all available channels, influencers and stakeholders to reach harder to engage audiences.</p>
<p>iv) NPIs need to be based on sound epidemiology to be effective and proportionate in their time and place. Participants emphasised that NPIs were only as effective as compliance and communications - and proposed building a communications strategy based on the principle behind NPIs, rather than individual NPIs.</p>	<p>C19 TF is working with SAGE, Go-Science and JBC to incorporate epidemiological input into the NPI playbook. SAGE have set up a working group on NPIs, and lessons from the effectiveness of local NPIs are being fed in.</p>
<i>B. Command & Control</i>	

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<p>i) Bronze/Silver/Gold is well-established but capacity may be overwhelmed by multiple outbreaks and conflicting priorities under the RWCS. For example, DHSC Gold was reported to be at capacity when it reached 30 outbreaks in early September, and does not have a settled approach to taking non-health issues into account below COVID-O. C19, CCS and end of EU Transition Period decision-making structures also need to be aligned ahead of concurrent crises.</p>	<p>DHSC, JBC and C19 TF developing proposal for tiered interventions. This would standardise interventions and create a regulatory framework through which LAs could be moved up or down tiers rapidly.</p> <p>Work is underway across Cabinet Office to align decision making structures across the concurrent risk factors ahead of winter.</p>
<p>ii) National and regional/local command and control structures need to be better understood to ensure local context informs central decision-making. Participants highlighted that regional and local command and control were highly varied, poorly understood and not consistently informed or consulted. For example, greater clarity about decision-making and dispute resolution between NHS and Local Resilience Forums. Participants emphasised local engagement would lead to more effective interventions, e.g. avoiding the imposition of restrictions ahead of Eid, or unnecessarily closing down leisure centres in Leicester. An example of better practice was DfE's structured engagement with local authorities via REACT Teams.</p>	<p>C19 Taskforce will work with CCS to better understand and integrate national and local decision making structures. CCS are leading on aligning decision making fora across the winter.</p>
<p>iii) There needs to be clarity on how data is being used for decisions and where overall responsibility for data sits. The lack of clarity raises questions about its coherence and comprehensiveness. For example, participants reported issues with the obtaining and analysis of data, competing data sets at local and national level, and the fusion of quantitative and qualitative data. There should be a single recognised data picture from which all Departments draw.</p>	<p>C19 Taskforce will brief SROs on current responsibilities for data and how it informs decision making. Covid-S to take a weekly data pack on health, social and economic data as appropriate.</p>
<p>C. Capability & Capacity</p>	
<p>i) Public sector workforce will be under severe stress in the RWCS, both from known gaps, resilience across the winter and the effects of an already tired workforce after the first pandemic wave. Police and healthcare workers are under particular stress. For example, participants reported that while we are well-provisioned for ITU beds and equipment there are not enough NHS workers to staff them in the RWCS across the winter. This situation has endured since March for many sectors.</p>	<p>Depts should address and address these gaps and pressures as part of their winter planning. For Civil Service resource departments should engage with the cross Whitehall exercise led by Civil Service HR.</p>
<p>ii) As things stand, current and planned testing capacity will be exceeded in the RWCS but is not reflected in</p>	<p>Departments need consistent assumptions about use of</p>

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<p>departmental plans - departments need a 'Plan B'. There needs to be consistent assumptions about test capacity and prioritisation for symptomatic and asymptomatic testing at national and sub-national level.</p>	<p>testing in their plans and messaging about use of testing. C19 Taskforce has picked up with NHS Test and Trace to get clear messaging and consistency.</p>
<p>iii) JBC's capabilities and role (particularly in decision-making and in relation to the roles of PHE and Test and Trace) needs to be clarified and communicated to SROs to be properly reflected in their plans. For example, participants are looking for clarity on how JBC will support the imposition of NPIs, e.g. predictive analysis. Moreover, JBC will not be at full operating capability before NIHP has been established, and will need other bodies to fulfil its functions in the interim, e.g. PHE, DHSC, T&T. Participants were concerned that the JBC will be focussed on imposing restrictions without balancing impact on other priorities.</p>	<p>Briefing for SROs held 15/9</p>
<p><i>D. Planning</i></p>	
<p>i) A significant amount of effort has been put into winter planning, however 9 of 44 plans¹ have not yet completed their planning through winter – this should be completed by end September.</p>	<p>C19 TF to convene star chambers to resolve outstanding areas of concern for winter preparation.</p>
<p>ii) There are several areas where plans as a whole should be strengthened:</p> <ul style="list-style-type: none"> § Government faces a confluence of risks around Christmas (e.g. returning students, financial distress, public discontent, preparations for D20) but plans do not yet have a coherent approach to these. For example, HMT's support measures are due to end between September and November, which may require renewed efforts to maintain restrictions, protect children etc; § Specific cohorts and communities are particularly vulnerable to financial, health and social risks but the approach to these vulnerable groups would benefit from a refresh. For example, contingency planning for vulnerable groups in the event that local authorities move to statutory services only; § Plans are not robust to concurrent events, including flooding, transition and civil unrest , and would benefit from being tested and aligned to specific planning assumptions and associated plans; 	<p>As above C19 TF to convene star chambers to identify and resolve outstanding areas of concern for winter preparation.</p> <p>Cx made a statement on HMT support measures for a Winter Economic Plan on 24 Sept.</p>

¹ 9 plans remained below Stage 3 planning maturity as at the 18/09 C19TF PMO Delivery Report

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<p>§ Local observers felt that planning was overly centralised and would benefit from greater engagement by local actors, and would benefit from increased sharing of best practice between the devolved administrations.</p>	
<p>iii) Many opportunities to improve individual planning and preparations were also identified, including prioritisation and distribution of vaccines, more flexible deployment of contact tracers, and contingency preparations for schools.</p>	<p>Summary of FAIRLIGHT will log these, and C19TF to follow up with SROs.</p>