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Minutes

#### **CABINET**

Minutes of a Meeting of the Cabinet held in the Locarno Suite in the Foreign, Commonwealth & Development Office on

> TUESDAY 13th October 2020 At 0930 AM

> > PRESENT

The Rt Hon Boris Johnson MI Prime Minister

The Rt Hon Rishi Sunak MP The Rt Hon Dominic Raab MP

Chancellor of the Exchequer First Secretary of State, and Secretary of State for

Foreign, Commonwealth and Development Affairs

The Rt Hon Priti Patel MP The Rt Hon Michael Gove MP

Secretary of State for the Home Department Chancellor of the Duchy of Lancaster, Minister for

the Cabinet Office

The Rt Hon Ben Wallace MP

The Rt Hon Alok Sharma MP

The Rt Hon Robert Buckland QC MP

Lord Chancellor, and Secretary of State for Justice Secretary of State for Defence

The Rt Hon Matt Hancock MP

Secretary of State for Health and Social Care Secretary of State for Business, Energy and

Industrial Strategy, Minister for COP26

The Rt Hon Elizabeth Truss MP

Secretary of State for International Trade, and

President of the Board of Trade, and Minister for

Women and Equalities

The Rt Hon Dr Thérèse Coffey MP

Secretary of State for Work and Pensions

The Rt Hon Gavin Williamson CBE MP

Secretary of State for Education

The Rt Hon Robert Jenrick MP

Secretary of State for Housing, Communities and

Local Government

The Rt Hon Grant Shapps MP

Secretary of State for Transport

The Rt Hon Brandon Lewis CBE MP Secretary of State for Northern Ireland

The Rt Hon Alister Jack MP Secretary of State for Scotland

The Rt Hon Simon Hart MP Secretary of State for Wales

OFFICIAL-SENSITIVE

The Rt Hon Baroness Evans of Bowes Park Lord Privy Seal, and Leader of the House of Lords The Rt Hon Oliver Dowden CBE MP Secretary of State for Digital, Culture, Media and Sport

The Rt Hon Amanda Milling MP Minister without Portfolio (and Conservative Party Chair)

#### ALSO PRESENT

The Rt Hon Stephen Barclay MP Chief Secretary to the Treasury

The Rt Hon Jacob Rees-Mogg MP
Lord President of the Council, and Leader of the House of Commons

The Rt Hon Mark Spencer MP
Parliamentary Secretary to the Treasury (Chief Whip)

The Rt Hon Suella Braverman QC MP Attorney General

Baroness Sugg CBE
Minister for the Overseas Territories and Sustainable Development and the Prime Minister's Special Envoy on Girls' Education
(Item 4)

Professor Chris Whitty CB
Chief Medical Officer for England and the UK
(Item 2)

Sir Patrick Vallance Government Chief Scientific Adviser (Item 2)

Secretariat

S Case H MacNamara M Sweeney J Glover

Name Redacted

**OFFICIAL-SENSITIVE** 

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OFFICIAL-SENSITIVE

I&S

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I&S

Covid-19 Response

THE PRIME MINISTER said that the set of measures that he had announced the previous day provided a balanced approach to tackle the rise in Covid-19 (coronavirus) cases. It was not a return to a full national lockdown of the kind that would be detrimental to the economy, and ultimately the health of the nation. Nor was it allowing the disease to let rip, because the sheer number of casualties that would result was intolerable in a democratic society. 'R' (the rate of transmission of the virus) was between 1.2 and 1.5 and needed to be reduced to below one. This could be done provided local and national government and the public and private sectors worked together. Defeating coronavirus was a team game, and the entire population were part of the team. The Government would provide support for local leaders to strengthen the test and trace system, enforce local measures and use the military if that was wanted. There would be financial support that equated to £8 per person in affected local areas.

Continuing, THE PRIME MINISTER said that he was grateful for the work done by his Chief Strategic Adviser and his team, the Chancellor of the Exchequer, and the Secretaries of State for Health and Social Care and Housing, Communities and Local Government, to get a deal with the Liverpool City Region over the line. The Metro Mayor of Liverpool City Region had stepped up to the plate and endorsed the package for his region at the previous day's COBR meeting. It was time for other local leaders in the North West, North East and the Midlands to do the same.

Continuing, THE PRIME MINISTER said that the number of coronavirus cases in the North West of England and in Northern Ireland was worrying. But some things were better than they had been in the spring, including an improvement in the effectiveness of treatments in intensive care units, and a reduced likelihood of going into an intensive care unit in the first place. It was a myth that this wave of coronavirus was just affecting the young; it had spilled over into older groups.

Concluding, THE PRIME MINISTER said that the Government would be punched by all sides for its approach, but colleagues had to stick to the message and stay the course. The end may not come until the following spring, but he was full of confidence that technological solutions may bring improvements before then. With confidence, toughness and resilience, there would be public support for local measures.

THE SECRETARY OF STATE FOR HEALTH AND SOCIAL CARE said that now that the three tier structure had been set out and broadly welcomed, and financial support was in place, further measures to get the virus under control were needed. That morning, he had asked his Department and the NHS to prepare for the fact that the health system may be under strain, as it had been in March. From the following week, it was likely that elective surgery in Liverpool would have to stop. Unless local leaders in more areas agreed that their localities were at 'very high' risk, and the public bought into the measures and complied with them, there was a very great risk that some parts of the NHS would be overwhelmed.

In discussion, the following points were made:

- a) some areas had already been subject to measures similar to those at the 'very high' risk level for a number of weeks. Where local leadership was strong and supportive - such as in Bolton and Great Yarmouth - this had made a difference to the transmission of the virus. This was because there was higher compliance. In Bolton it looked as if the closure of the hospitality sector had made an impact. In other areas - such as Preston and Northern Ireland - local leadership was lacking and there was less effective compliance;
- b) those areas with stricter regulations would benefit from knowing the signposts of success, such as a lower 'R' or a lower hospitalisation rate. This would allow them to understand better what they were working towards, and create more buy-in;
- c) despite the support packages announced by the Chancellor of the Exchequer, those on the lowest wages would be hit hard economically;

- d) some people did not have a positive view of Universal Credit. The Department of Work and Pensions would use commercial radio advertising to communicate its benefit more widely; and
- e) some people were still suggesting that the elderly and vulnerable could shield themselves and others could go about their lives as normal, and others were citing Sweden as an example that the UK should follow.

Responding, THE CHANCELLOR OF THE EXCHEQUER said that the approach taken to giving economic support was compassionate, and was similar to other European countries: equivalent support schemes in France, Germany, Spain, Italy and Ireland all equated to similar levels of income protection. This was despite the fact that these countries had a higher pre-coronavirus tax burden than the UK, and a more generous welfare system. Schemes in other countries had been less generous: the US had only given eight weeks of support. Colleagues should be proud of the changes that had been made to Universal Credit; it was a dynamic system which increased payments to individuals as their income fell. A series of case studies had been published which showed that various individuals would still receive over 90 per cent of their income should their working hours be reduced.

Continuing, THE CHANCELLOR OF THE EXCHEQUER said that the State was providing extraordinary levels of support: in addition to the increases that had already been made to Universal Credit and the Local Housing Allowance the Government was funding the track and trace system, supporting Local Authorities and providing grants to businesses. Public finances were already stretched. Ministers should be proud that the Government had put in place something that supported the most vulnerable. Local leaders should not be allowed to use the excuse of inadequate support to refuse to do the right thing; this simply was not the case.

Responding, THE GOVERNMENT'S CHIEF MEDICAL OFFICER said that the Prime Minister had given a good summary of the state of the infection rates in the country. The Prime Minister was right to highlight that there were some who believed the UK could use different strategies to deal with the crisis. The Great Barrington Declaration proposed that only those who were at high risk of dying from coronavirus should be shielded. This was the fringe view of a small minority of scientists and was based on two misconceptions. The first was that viruses always ended up with herd immunity. This was not

true; many major infections never approached herd immunity. It was also incorrect to say that those who were vulnerable could reliably be shielded because there was no way of knowing who would do badly from coronavirus and contact between younger people such as carers and older people would need to happen anyway. It was a proposal with many other scientific flaws, as the Academy of Medical Sciences had pointed out and had been examined by the Government's Scientific Advisory Group on Emergencies.

Continuing, THE GOVERNMENT'S CHIEF MEDICAL OFFICER said that he had great respect for what Sweden was doing to tackle coronavirus, and for its lead epidemiologist with whom he spoke regularly. Sweden was making remarkably similar decisions to the UK. Differences included the use of masks, and a strictly enforced two metre social distancing rule in the hospitality sector in Sweden. Those who had visited Sweden would be aware that it was culturally different to the UK.

Responding, THE GOVERNMENT'S CHIEF SCIENTIFIC ADVISER said that shielding the most vulnerable would have a disproportionate effect on the most deprived and black and minority ethnic communities in the UK as they were most likely to live in multigenerational households. Another argument against shielding only the elderly was that many young people were being hospitalised with coronavirus, or suffered from 'long Covid'. It was noteworthy that Sweden's death rate was ten times more than its neighbouring countries.

Summing up, THE PRIME MINISTER said that for those in the 'very high' risk areas there would be light at the end of the tunnel if they had done what they needed to do and 'R' went below one. Shielding the elderly would not work: it would cause misery as it would apply for a long period of time; if the virus took hold in the general population then it would inevitably spread to the self-isolating vulnerable; and there were people under 65 years old who would also be vulnerable and who may end up hospitalised. The logic of this position should be set out in a government publication. It may be necessary to do more to tackle the virus; colleagues should brace themselves for the inevitable. It would be tough for the whole country and there would be bumps in the road ahead, but the public were in favour of tougher measures and the Government would stick with it.

The Cabinet:

- took note.

I&S

# **Irrelevant & Sensitive**

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**Irrelevant & Sensitive** 

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