

Message

From: Whitty, Chris [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0B3EE62E0CA04E978730B14F9B416A1E-WHITTY, CHR]
Sent: 12/07/2020 22:47:58
To: Oliver Ilott [oliver.ilott@cabinetoffice.gov.uk]; Emma Payne [emma.payne@cabinetoffice.gov.uk]; Simon Ridley [simon.ridley@cabinetoffice.gov.uk]; Tom Smith [tom.smith1@cabinetoffice.gov.uk]
CC: Simon Case [SCase@no10.gov.uk]; P.Vallance1@go-science.gov.uk
Subject: RE: Speech

Dear Ollie

I think previous emails cover this, but to be clear:

- 1) Many technically highly competent countries that tried significant relaxation after a fair degree of control have had resurgence, some major. This is a matter of fact, not modelling or supposition.
- 2) We have just done several things that favour the virus, and intend to do several more in short order. It is unclear how much of an advantage opening schools and universities is the virus, but the clear answer is not zero. So all other things being equal the likelihood of R going above 1 in the next 3 months (to late Oct) is non-trivial. We are not so far from R=1 already this is a largely academic; the possibility of a return to exponential growth pre winter is significant.
- 3) Winter (which for practical purposes for respiratory viruses means Nov to late March) will either have no effect or favour the virus. I expect it to favour the virus, so a strategy which works until then may cease to do so over winter; we probably have a 3 seasons strategy.
- 4) The probability of a breakthrough vaccine drug or vaccine before next spring is not zero, but not high enough to base planning on. It should be seen as a potentially pleasant upside surprise at best.

Given these points, informing people they will return to normal before next spring seems optimistic. I consider a return to complete normality pre spring highly unlikely (whilst not completely impossible).

Chris

From: Oliver Ilott <oliver.ilott@cabinetoffice.gov.uk>
Sent: 10 July 2020 09:39
To: Whitty, Chris <Chris.Whitty@dhsc.gov.uk>; Emma Payne <emma.payne@cabinetoffice.gov.uk>; Simon Ridley <simon.ridley@cabinetoffice.gov.uk>; Tom Smith <tom.smith1@cabinetoffice.gov.uk>
Cc: Simon Case <SCase@no10.gov.uk>; P.Vallance1@go-science.gov.uk
Subject: Re: Speech

Dear Chris,

Thank you for this structure and for laying this out so clearly. Simon C will have comments, but I had one point on which it would be useful to get more colour from you and Patrick.

You set out the risks over the next few months, but note that even if these do not materialise "a complete return to normality this year is not a realistic prospect". Can I check how much work 'complete' is doing in that sentence?

What might be possible in a (possibly very unlikely) scenario in which, at the end of October: prevalence is very low (0.01%?); TTCE is significantly improved (80%); the infection rates in hospitals, care homes and among disadvantaged groups are not significantly higher than among the general population; the international situation is not alarming; and the early evidence is that the seasonal risks are not materialising? Is it feasible to think that those conditions would

facilitate a step *towards* normality, noting that it is not a 'complete return'. And how far might we get? Or is your and Patrick's advice that the state of affairs reached when schools return must persist until the spring?

I am anticipating that the PM will have in his mind things like commuting to work, increased physical contact, large crowds and greater mixing indoors over Christmas.

Best,
Ollie

On Fri, 10 Jul 2020 at 07:50, Whitty, Chris <Chris.Whitty@dhsc.gov.uk> wrote:

Dear Simon

You said the PM was intending to make a speech about the next year and COVID-19, which is great as this will make it possible to lay out the strategic framework into which tactical decisions and announcements fit. He will want to be both optimistic and realistic, and chart a course back to normality.

I have framed this optimistically within the realities of the virus; there is a darker version. If the speech can be used by the press to imply we can just return to normal, or does not warn of the risks of winter, it is unlikely to wear well. And if it can be used to justify a reckless approach to lifting or flouting restrictions it will be a serious problem for our ability to combat the virus and for the PM. Resurgences are likely, and there will of course be people wanting to point to the PM's speech as a cause of them even when there is no causal link.

As you know I think there are 4 risks that are the short term backdrop, and several opportunities from science in the longer term. Resurgences may occur in winter/early spring (seasonal advantage to the virus and disadvantage to the NHS test and trace), autumn (schools + season), because we lift restrictions too fast or too completely, or because another global wave hits us. On the other hand we will get more drugs, and may get a vaccine, fairly soon and incrementally science will give us enough tools to get on top of this. But fairly soon in science terms does not mean before spring next year. So up to next year it is hard to paint a particularly optimistic picture; from next spring that becomes a lot easier to sustain.

Therefore for the speech the following points are probably worth making:

-The UK has got through the first wave through collective action, cases are massively down from their peak, and mortality rates are now back to their seasonal normal for summer. The NHS has responded magnificently. This form of collective action to combat a virus has not been attempted on this scale before and was a remarkable national effort.

-In the short to medium term (next 9 months) it will be necessary, and possible, to find a balance between letting the virus back to growth, and changes to our way of life.

-We all want to minimise the social and economic disruption, but a return to exponential viral growth will happen if we collectively get this balance wrong. We can see around the world how different societies have tried to get a balance that works for them. A complete return to normality this year is not a realistic prospect; social distancing will be a feature of 2020.

-It may well be that the balance in the UK will have to be different at different times of the rest of this year, and late autumn and winter is likely to present a particular challenge. The combination of things we have to do to keep the virus at bay as we go about our lives may have to be adjusted if it looks as if the virus is escaping control, or gets a seasonal advantage in winter.

-Looking to the next year, once we are through the winter, which may require more restrictions to be imposed, we can expect a more complete return to normality. And eventually, and possibly as early as this time next year, a near complete return to normality.

-Science, at which the UK is a world leader, will ride to our rescue. Science has helped us defeat multiple infectious challenges- Ebola, HIV (etc, long list); it will allow us to defeat this one and return to our normal way of life. We will find tools to prevent disease, and to treat it, without having to resort to social distancing. The UK has probably the leading vaccine candidate in terms of time, and produced the first evidence of a drug that reduces mortality. Science is a global endeavour, and there is an unprecedented scientific effort around the world. The question is not whether we will find tools to defeat this, it is only what and when. It is likely that we will go into spring next year with the risks reducing and many more tools at our disposal, and although many currently promising vaccines and drugs will not in the end work, we will find ones which alone or in combination will. Whilst we cannot predict with certainty when developments will arrive summer of 2021 is likely to be a much brighter prospect than now.

-We will however have to assume we go into this autumn and winter with the tools we have now, and they are the societal restrictions which make it hard for the virus to get a hold. We must be self disciplined about social distancing, self isolation etc, because the virus certainly has not gone away, and as we see around the world a period after restrictions are eased has significant risks. Let down our guard too much or too fast and resurgence is not just likely, but inevitable. Local flare ups will occur, and need to be addressed as they arise, and a national surge may well happen at some point requiring a national response, and is particularly likely over the late autumn and winter months. In that case we will not hesitate to act. We need to think of this as a battle fought over many months, not weeks.

Chris

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Oliver Ilott
Deputy Director, Strategy
COVID Taskforce