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Boris Johnson MP, Prime Minister: Let's get a question from the, from the, the public first, Nicole from the West Midlands.

Nicole, West Midlands: Looking at the data, it would appear that Covid-19 hospitalisations are currently at a similar level to what we saw in October 2020, just before we ended a second lockdown. Should we now be putting in place more measures to protect the NHS?

BJ: Well, thanks, Nicole, I'm, I'm going to ask Chris and, and Patrick to, to have a go at that as well, but I, I will just say that the, the, the, the big difference between then and now, Nicole, is that the, the number of hospitalisations is, is on a clear downward trend, and the number of people in ICU is, is, as a proportion of those going into hospital, is much, much smaller and, and, you'll have seen the, the fatality numbers that we're, we're seeing, which are very different from what we experienced under, under previous waves. So, it's clear that Omicron is, is very different and, and, and, and milder in the way it behaves, and that's one of the reasons, in addition to the vaccines that we have, the high level of, of vaccine induced and other immunity, that's one of the reasons we can do what we're doing, but, Chris?

Professor Sir Chris Whitty, Chief Medical Officer for England: I mean I completely agree there with, obviously, the Prime Minister's answer. I mean, I think the two, there are three things to acknowledge. The first of which is, it is certainly the case that there are hospitals in the UK that, which are, still under significant pressure, as a result of Omicron, and I think we should be really clear about that. But, and this is the big difference, the trajectory, the first big difference, the trajectory is definitely down at the moment, and it is steadily down, and has been for some time, a way to go, but that is the direction of travel, very different to where we found ourselves in previous periods. And secondly, the number of, the proportion of those people who, having entered hospital, then end up in intensive care, or getting into deep trouble and, in some cases sadly dying, is a very, very much, much smaller proportion, as a result of vaccination, which we didn't have in October 2020, and of a less severe variant.

BJ: Thanks. So, Gemma from Greater London.

Gemma, Greater London: As a pregnant woman, I am told by the NHS website that I'm more likely to suffer a serious illness, if I catch Covid, and in the third trimester it could also affect my baby. With the plans to remove Covid restrictions being brought forward, what are the recommendations for women like me, and further clinically vulnerable people? For the

sake of removing social distancing, and wearing masks, are we effectively being told to stay inside and remove ourselves from the world?

BJ: Gemma, no, and I think that what everybody needs to do, is, is make sure that they treat people who may be vulnerable, in any way, with the utmost consideration and, and, and, you know, we've, we've got a, we've got a, if we, if we, if we're symptomatic with any disease, you should, you should, you should treat vulnerable people with, with, with courtesy and, and avoid, avoid spreading it. What we also want to make sure, is that people who are clinically vulnerable do continue to have access to, to tests, so that they can know whether they may have Covid, and, and also get the, the therapeutics that they, they need, depending on what their, on what their condition is. But...

CW: Could I just add one point, Prime Minister, which is, it is really clear now that vaccination in pregnancy is a very good thing to do for you, a very good thing to do for your unborn baby, and new data demonstrating that it's utterly also a very good thing to do for your newborn baby. There is now data that, that shows that it provides protection for newborns. So essentially, it's protecting both you and your baby, and I would really, really want to use the opportunity, in terms of your question, to encourage anybody who is pregnant and has not been vaccinated, please, to do so.

BJ: Yeah, that, that is a, a very good point, but I think there was a while when there was quite a lot of folklore against vaccination for pregnant women and that was really not, not right at all. Thanks very much. Laura Kuenssberg, BBC News.

Laura Kuenssberg, BBC News: Thank you, Prime Minister. You are scrapping free tests for all, but you're telling everybody they have to take personal responsibility. How can people take personal responsibility if they may not be able to afford to get a Covid test, even if they were trying to? And do you accept that you're giving Scotland, Northern Ireland and Wales really no choice but to do the same, because there won't be additional money for testing? And to Sir Chris and Sir Patrick, you know, many times you've talked about how a lack of testing early on hampered the attempts to save lives. Now there are enough tests, but the government is no longer going to fund free tests for all. I know that you've both emphasised the need for good surveillance, but testing is being scaled back. Do you worry that, in time, that could prove to be a mistake? And, just, forgive me, Prime Minister, as we've, as you've been speaking, President Putin has been talking. Could you respond to his claims to recognise the two separatist, breakaway republics?

BJ: Yes, sure, so, so thanks, Laura. Look, on, on, on testing, the only reason, and first of all, let's be clear, we're not ending it, ending free lateral flow tests now, there, there, there are several more weeks still to, to go. We won't, we won't do it until the beginning of, of April. We can only do that because of the reasons that Chris and Patrick have, have set out, the, the high level of, of immunity, the, the relative mildness of, of, of Omicron, the, the low level of, numbers of people in ICU, and the low mortality we're seeing. So that, that's the reason we can address Omicron in this way. But what we will do is make sure that there will be people who continue to get testing, vulnerable people, will continue to, to have access to testing.

And to free tests. The, the most important thing, is that, and I hope this is the big take out from this, it's, the sun is shining but we're keeping our umbrella, as, as Patrick said at, at the end of this, at the end of his remarks, we, we are going to make sure that we invest in, in surveillance, and the ONS survey is, it really is world class. It's admired around the world, it gives a lot of very granular data about where cases are, are, are, are breaking out, patterns across the, across the UK, we will keep that going, we will keep observing what is happening, because we want to have the, the, the keenest pair of eyes in the, in the crows nest, to, to watch for the, the iceberg in the form of a new variant, and that's, that's the thing, that's the thing we've really got to, to test for, and, and the, the big surveillance tests are the way to, to do that. And, if we see something like that, then, that's the moment to, to get to Patrick's point, that's when we ramp up, and we, we immediately go back to all the things that we have learnt to, to do so we'll have a stock pile of, of LFDs, of lateral flow tests, we, we can, we can make, at least some of them already in this, in this country, we have, we have labs that will keep going like the Rosalind Franklin lab, mobile testing units and so on. So what we want is to have a formula of, of surveillance, followed by surge, if, if necessary. But we, we can only take the, the, the strategy, only adopt the strategy we're adopting today, because of the success of the, of the, of the vaccines and the way Omicron is currently responding. Sorry, on Ukraine, I, just to say, I, I gather just as I came into this press conference that Vladimir Putin has effectively announced that Russia is recognising the breakaway republics of Donetsk and Luhansk. This is plainly in breach of international law, it's a, a violation, a, a flagrant violation of the sovereignty and integrity of, of the, of Ukraine. It is a repudiation of the, of the Minsk process and the Minsk agreements, and I think it's a very ill omen and a very dark sign, and it certainly does not seem to me, that, it's certainly an indication, yet another indication that things are moving in the wrong direction in Ukraine. The UK will continue to do everything we can to stand by the people of, of Ukraine, with a, a very robust package of sanctions, as you know, fortifying the eastern flank of NATO in all the ways that, that we have, but also being one of the few countries to have given the Ukrainians the defensive, I stress defensive, weaponry that we think is, is appropriate to their, to their needs, and we will continue to, to, to think about what more we can do to support Ukraine in what is clearly a, a very, very dark and difficult time. And there, there was a question for...

CW: In terms of on the testing, there's potentially three reasons for testing. There's surveillance, and I think the intention as the Prime Minister has said is to continue surveillance. There will be some modification to that but the aim is to have a good surveillance system because you need that for policy decisions. And the second reason is clinical, to guide treatment. Expectations continue with that in the NHS, there are questions about exactly how we do this in terms of getting anti-virals to the people who most need them and that's a key decision that needs to be taken over the next period. And then the third reason, and this is the one that is being scaled back but not yet, but will be scaled back, is the, is using them for control but as the Prime Minister said as and when the surveillance shows you need it, what everybody has stressed is the need to be able to stand things up again if necessary, were there to be something severe enough to need it. So it's that third area where the biggest changes will really occur.

PV: I mean I don't think anywhere across the world where restrictions are being relaxed you can have any other view other than that will increase transmission. So that is inevitable, as you go back to normal life, that transmission risk increases. At the beginning, we just didn't have tests. We've now got tests and fortunately we have got lateral flow tests which can be

stored and released very quickly. And so it's going to really have to be this rapid detection and response at scale in order to get testing into the right place, depending on what the circumstances are. And as Chris has indicated, at the moment with Omicron, I mean it spread very widely. It hasn't caused huge numbers, it has caused some and it has in other countries caused quite a lot, but in this country it hasn't caused huge numbers of very ill people or deaths. If that changes, then obviously testing becomes more important. In the meantime, the testing must be there for people who need it and that definition of people who are in that at risk group is critical for appropriate use of testing.

BJ: Thanks. Robert Peston, ITV.

Robert Peston, ITV: A couple of questions. On Ukraine, recognition of Luhansk and Donetsk it is a clear violation of international law as you say, it's accelerating the break-up of Ukraine. Surely this is the moment to introduce additional severe sanctions. The time for waiting must be passed. And on what you have announced today, a couple of questions. One is, after April the 1st, if you get Covid, will you isolate? Secondly, you introduced, sorry, you announced today the end of the self-isolation support package and within a few weeks you won't be able to get statutory sick pay on day one. You are making it harder for poorer people to do what you think is the right thing, which is to isolate if they get Covid.

BJ: So, fine, thanks Robert very much. So on, on the statutory sick pay issue first of all and, and we will continue with the day one payments for the next few weeks, but I think after that what we need to, to recognise is that we are effectively dealing with a, particularly in vaccinated people, with a disease that is, that is like norovirus or, or flu or any other infectious respiratory disease and people should think about how they interact with others and they should be respectful of other people's health and behave responsibly. And that, and that, and that and that goes for any, the point I'm trying to make is that goes for any infectious disease which you might be bringing into, into contact with people who, who are vulnerable. I think, you know, in this country I've often heard it said over the last couple of years, that we, that we have a habit of going back to work or going into work when we're, we're not well. People contrast that with Germany, for instance who, where I'm told they are much more disciplined about not going to work if you're, if you're sick and I'm just suggesting that that might be the, something we could, we could learn. As for me, I will, I will, I will, I will exercise restraint and responsibility in trying to avoid infecting, infecting other people. And on, on your point about sanctions. Look, we have to see exactly what has happened in Donetsk and Luhansk in the Donbas area. What I have said before about the package of sanctions is that they will be triggered with the first toecap of a Russian incursion or Russian invasion. But plainly what has happened is extremely bad news and we will be urgently talking to our friends and allies around the world, all of whom are jointly signed up with us in this package of sanctions because it is, it is, I mean I think the drift of your question is right, it is becoming clear that we're going to need to start applying as much pressure as we possibly can because it is hard to see how this situation improves. Let's go to Beth Rigby of Sky.

Beth Rigby, Sky News: Thank you. Prime Minister, just to follow up on Ukraine, ten days ago at NATO I asked you if you were coming to the conclusion that President Putin actually

wants this war. At the time you said, "I honestly don't think a decision has been made". What do you think tonight? How has that changed? And on the matter of Covid, Prime Minister, you've spoken about hope tonight and country getting its confidence back, but to Sir Patrick, Sir Patrick and Sir Chris, it seems to me that you're clear, you're making it clear that this pandemic is far from over. What are you feeling, are you more anxious than confident as these restrictions are dropped? And to the Prime Minister, you know, we've been doing these press conferences now on Covid for two years. Covid has dominated your premiership, it put you in hospital. It could bring about your downfall, depending on the outcome of that Met investigation, and today it seems that you're trying to turn the page. But would you be satisfied if your legacy ends up being Covid and your conduct during it? Thank you.

BJ Yes, thank you. First of all, on, on, on your, your, your question about, about Covid and I think maybe Chris and Patrick may want to talk about anxiety, look, I think that the, the country as a whole, when you look at the, the response to the Government was able to mount to Covid and you look at what the country has done, I think the two things have, have, have gone together and I think it's been quite remarkable. And if you look at the, the, look at the numbers at the back of living with Covid document about vaccination rates, roll-outs, what we've been able to do, we, we were incredibly fast. And that was joint work of the, of the British public and, and the Government. The public were absolutely heroic in what they did. And, you know, I will be very, very proud of, of what has been achieved, to be, to be frank with you. But on the anxiety point, I, I don't want you to think that there is some, you know, division between the, the gung-ho politicians and the, and the, and the cautious, anxious scientists, much as it may suit everybody to say so. We, we, we have a, a very clear view of this. This has not gone away. We're able to make these changes now because of the, of the, of the vaccines and the high level of immunity and all the other considerations about Omicron that, that you've seen. But we have to face the fact that there could be, likely will be, another variant that will cause us trouble, but I believe that thanks to a lot of the stuff we've done, particularly investment in, in vaccines and vaccine technology and, and, and therapeutics, we will be in a far better position to tackle that new variant when it comes. And, on your question about, about Putin, and, you know, I don't know what's in his mind. I can't read it. I think there's still a chance that he could row back from this, and we've got to, we've got to pray that that's the case.

CW: In terms of anxious or, or confident, I mean I come from a profession which tries to train you not to be either of those things and to go between the middle, and just have a plan and be steady about it, say these are the facts, this is the plan, this is what we're going to do, we will execute the plan and we hope that we go steadily in the right direction. So that's a very much the way I hope that we can think about this and present this, so neither of the extremes.

PV: So, I mean, just to quote again, the same American I quoted earlier on, he said this weekend the one thing this virus has taught you is not to be cocky.

BJ: Yeah.

PV: So I think we need to go very carefully, we need to monitor carefully and be prepared to react. And the other thing that I think is clear, which is important to bear in mind throughout, and we said this right the way at the beginning, this virus feeds off inequality and it drives inequality, and that needs to be borne in mind at all times during this.

BJ: It does. Martin Brown, the Express.

Martin Brown, Daily Express: Thank you Prime Minister. You've spent much of the last two years urging people to work from home to help the fight against Covid. As we move into this next phase, and with the economic recovery in mind, what is your message to those people who are still reluctant to return to their workplace, and what more should employers be doing to get their staff back?

BJ: Well thanks, thanks very much, Martin. Look, I've, I've, I've always been a believer in the importance of people getting into, into work, particularly for younger people who need to build up social capital and understanding of, of, of their, of their jobs, their professions and their, their place of work. And I think it is, it is invaluable, I think if people tried to do things remotely, they will, they will miss stuff out. And so I would, I would encourage people, they will, they will, they will lose out, and I would encourage people to, to, to get back to work with confidence. I think, you know, we have, we have the right now, we have the grounds now to be confident, and we should, we should be confident. I think that was it, wasn't it? Thank you. Brilliant, thank you. Thanks Martin. Dan Bloom, the Mirror.

Dan Bloom, Daily Mirror: Thank you Prime Minister. You've just talked about asking people to exercise personal responsibility, even to break the habit of going into work when you're sick, but you're also scrapping day one statutory sick pay and the five-hundred pound payments. So just to be clear, are you saying that a low-wage worker who has Covid should stay at home even if they're not going to get paid? And can you look people who voted for you in the eyes and tell them that that is an acceptable situation? And to the scientists, Sir Chris and Sir Patrick, two quick questions. Will you both continue taking lateral flow tests beyond April if you're going to a crowded gathering, like the pub or something like that? And are you satisfied that the plan announced today will not lead to a rise in Long Covid and keep immunosuppressed people safe enough? Thanks.

BJ: Thanks, thanks very much Dan. Well look, look, we want to make sure that, and, you know, I, I echo what Patrick just said just now, about the, the, the inequalities of, of Covid, and, and that's why we've done everything that we can throughout the pandemic to support people on, on low incomes, who've, who've been having it tough, with, with huge investments in, in hardship funds, increasing the, the living wage, all the, all the contributions that we've made and, and what we're doing now to tackle the, the cost of living. We, we, we totally, totally get how, how difficult it, it has been. I think it is still sensible for people to avoid spreading Covid and indeed any other dangerous respiratory disease and I just, you know, go back to what I was saying earlier on, I think, I think maybe we can, we can learn

something about the advantages of, of not spreading disease. Statutory sick pay is there and also of course people are entitled, many people are entitled to other forms of pay. I know that won't be everybody, Dan, I, and I understand that. But for those people that don't get enough support, we're trying to make sure that they get it in other ways and they get help in tough times through other, through other support we are giving through local councils or by other routes.

PV: In terms of the current situation, I mean I'd like the prevalence to be lower, the rates of infections to be lower and the SAGE advice, it's all in the public domain, shows that roughly somewhere between 20 and 40 per cent reduction in transmission because of our current behaviours so we're not back to pre-pandemic behaviours yet. And as those return, you would expect the pressure on transmission to increase. So there's something about cautious behaviour which remains. There's definitely the public health advice on isolation if you are positive with Covid, and I want to just re-emphasise the value of vaccination and the Long Covid point, there's now evidence that the vaccines don't just protect against infection and against severe disease but they also reduce Long Covid. So there's a very, very strong reason for everybody to be vaccinated, get up to first dose, second dose and third dose and of course for the immunosuppressed it's going to be or the people who are particularly vulnerable, they may need another vaccine at some point to get that up and they need access to anti-virals and they do need the access to testing in order to be in a position to be treated quickly. So I think there is a series of things that need to happen to keep everybody safe during what is inevitable, which is the world at some point needs to start returning to normal behaviours.

DB: On lateral flow tests, will you carry on taking them, even if you have to pay?

PV: Sorry, go on.

CW: Why don't I do that one, because I completely agree obviously with Patrick's other comments. And I think there are three things that I would be trying to think about. First question is how common is Covid at the moment, if it is very high, absolutely, that increases the probability. Second it is the environment you're in. If you are in an environment where you're a long way from others people then the risks are so small it probably makes no difference, if you're in a crowded environment, absolutely and the third and probably the most important one and it builds on what Patrick's just said is if I'm mixing with vulnerable people, if I was going to see an elderly relative, if I was going to go, go to let's say an emetology ward in a hospital, of course those are the kind of situations I would want to minimise the risk to other people because the point about the lateral flow is about minimising the risk to other people.

BJ: Thanks very much. Kevin Schofield, Huff Post.

Kevin Schofield, Huffington Post: Thanks Prime Minister. Are you not simply adding to the cost of living crisis from April the first, people looking at higher national insurance payments,

higher energy bills, rising inflation, rising interest rates. From April 1st, they're now going to have to pay probably about 20 quid for a box of lateral flow tests. Is that not simply adding to the cost of living crisis that people are already experiencing, and you talk about personal responsibility and people having to take on more personal responsibility now, isn't that slightly hypocritical when you're under investigation from the police for allegedly breaking your own lockdown rules. And to the scientists, public messaging has been very important throughout the pandemic, tonight you've said that the pandemic isn't over, and that future variants could be more serious than what we've seen previously but at the same time self-isolation rules are ending, and we're getting rid of free tests. Is there not a danger that we're sending mixed messages to the public and they might simply just switch off?

BJ: So Kevin, first of all so I can't, I can't comment on the allegations that you refer to, as I, as I've said before we will have to wait and see on that but I think the, the point remains very, very important, that we're moving away from, from legal compulsion to, to personal responsibility but on your, on, on your point about the cost of living, and just go back to where we were, this, this change in the testing regime won't come through for, for a few weeks to come, by which time we hope and expect that the incidents will have further declined, and so I, I hope that the impact on people will, will be, will be, will be minimal, but what we're also trying to do is abate that, deal, deal with the cost of living crisis in the most important possible way, and that's with helping people with Universal Credit, with lifting the, the living wage, but above all, getting them back into work with better paid jobs, by the way, which would not have been possible if we hadn't had the openings up we had in, in the summer and, and if we hadn't been able to keep going throughout Christmas and New Year, and it's that, it's that strength of the economy that is the single best protection for people, the single, the single best thing that we can do as a Government, to help them tackle the, the, the cost of living, and that is, is of course has been made possible by the, the, the vaccine roll-out and, and the way people have pulled together.

CW: Public messaging is, is important, obviously. It's much more difficult, practically, as someone who is trying to do it, when there's a transition than when you're giving the same message day in, day out, so, you know, we have to accept that we're going through a transition and an appropriate transition and that does mean we need to change the way we think about things and that needs to be communicated as clearly as we can and we do our best to do so, we don't always succeed perfectly. But I would make, sort of a general point on the point about mandation which is an issue absolutely for politicians and Parliament and public health advice, they are separate things. There are very few areas of public health which we give advice on which actually are subject to mandation, so it is a very atypical situation. What, what's happening is, in a sense, this is reverting away from an abnormal situation to a much more normal one. That doesn't mean that public health advice actually changes, in terms of what, in broad principles, we think people should do, and I'm not going to repeat them, I said them right at the beginning. But I think it is important that people realise this is a steady change, this is not a sudden move. Of course, you announce changes at particular points in time, but actually, what the Prime Minister has laid out, is essentially a stepped series of things, and the ability to keep looking at things, so that if there's a change in environment, then we can at that point respond to that change.

PV: Can I just refer you to, again, to SAGE papers released last week that looked at this question about consistency of messaging, and the point that, now, its health professionals, NHS, Chief Medical Officer, local directors of public health, that's where the clear, consistent messaging is going to come from, as Chris said, which is the advice that comes in, rather than legal mandation, but that needs to be clear and consistent, and aligned with overall government messaging, as you say.

BJ: Thank you, everybody, very much. I'm just going to go and talk to President Zelenskyy of Ukraine and offer him the support of the United Kingdom. Thank you.