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**Boris Johnson, Prime Minister:** I am now going to go to questions from the public. Can we have our, our first question please?

**Jake, Chester:** How many places under tier three restrictions would be needed before implementing a national lockdown?

**BJ:** Well I think what we're trying to avoid, is a, a national lockdown at all and that's, sorry, Jake, sorry I should say, that's Jake from, from Chester on the, on the, on the video. We don't rule anything out, Jake, but the, the difficulty is that the, the distribution of the virus, this time round, is very uneven by comparison with, with March and, and April. And so the right response, as many other countries are, are doing, is to go for this local and, and regional approach, that's what we're, that's what we're going for. Let's go next to Vicky from, from Lancashire. Vicky from Lancashire asks:

"My mother, my grandmother, has dementia, lives in a care home and has been in and out of hospital over recent months. Due to restrictions on visiting and local lockdowns, I've only been able to visit her once since March. Is there an opportunity for the restrictions on visiting care homes to be reviewed, which may enable an individual to visit their loved ones?"

Well I'm going to, I'm going to ask JVT, Jonathan Van-Tam to comment on that in a, in a second, but I just want to say, Vicky, that, you know, everybody sympathises deeply with, with you and, and your family and this is a, a situation that tragically is being replicated up and down the country. We do have to prevent the spread of the virus in care homes, you'll remember what happened in, in the early part of the, of the year, so we have had to take some steps to protect elderly residents from the possibility of infection by visitors. But we are certainly looking at what we can do to review the circumstances that might allow people to visit their elderly relatives in, in extreme circumstances, and on compassionate grounds, because, you know, this is, it is, I can see how, how absolutely wretched it is and I think many, many people across the country have, have now had experience of this, of this problem. JVT, do you want to add anything?

**Professor Jonathan Van-Tam, Deputy Chief Medical Officer for England:** Yes, thank you, Prime Minister. I mean, this is really extremely distressing and I know it's extremely distressing for relatives and for people who live in care homes. But the unfortunate and horrible truth about this virus is that when it gets into care homes, it can inflict really massive mortality very quickly. And the staff that go into care homes are being regularly tested. We can't get them to live in the care home as well, so they are in contact with the community, and there is this constant tension between wanting to see relatives, and not wanting to

witness catastrophic mortality in these care homes. I am hoping that some of the pilots, with rapid and novel testing methods, will eventually lead to a breakthrough, so that we can be more relaxed about visiting residents and, and our families in care homes in a much safer way. But for now, it is, I acknowledge openly, a very difficult situation indeed.

**BJ:** And, and thanks for mentioning that point, JVT, about the, the new types of, of testing systems that we're, we're hoping to, to bring in. And as I said in, in the press conference on Friday, we will be prioritising care homes for those tests, because it is a, a truly tragic and very, very difficult situation for, for many people. Let's go to Vicki Young of the BBC please. Vicki.

**Vicki Young, BBC News:** Prime Minister, in the last few hours, thousands and thousands of businesses in Greater Manchester have been told that they are going to have to close very soon. You've talked about 22 million pounds of help for the Greater Manchester area. Can you now clear up, because many of your own MPs in the area do not know, what are you offering to the area beyond that? Are you withdrawing the extra, what you called, generous offer, is that now off the table and what do you say to the Mayor of Greater Manchester, who has accused you of grinding down communities through these negotiations? And then to Professor Van-Tam, if I could, Northern Ireland and Wales have both now announced what they're calling a, a firebreak, a short period of severe restrictions, do you think that now should be the approach for England as well?

**BJ:** Well thank you, thank you very much, Vicki. Look, I, I bitterly regret any restrictions that lead to damage to businesses and to people's lives, of course I do, no, nobody wants to be putting people in Greater Manchester or, or anywhere through these, through the, the experience that they've been through. And frankly, Andy Burnham is, is right in what he says about the length of, of the endurance that Greater Manchester has, has shown and the, and, I've, I've simply got to, to look at the, the, the data, the, alas, the number of deaths, the hospital admissions and, and we have to act. And of course the, the package that I described, the 22 million of, of, that I described, that's additional to other support. You know, we're, we're always happy to continue to consider that. But then don't forget, Vicki, that this is a government that has put 190 billion pounds already in supporting businesses and jobs, livelihoods across the, across the country. We are investing huge sums to support local authorities and another, a billion pounds, as I said. And Greater Manchester will have access to all kinds of funds, particularly to help with testing and, and tracing and, and, and of course, with enforcement. So, the funds are there, they're, they're massive. And what we couldn't do, I hope people understand, was do a deal with Greater Manchester that really would have been out of kilter with the, the agreements we'd already reached with, with Merseyside and, and with Lancashire. That was the, that was the problem. But, you know, it's, I'm very very grateful to, to Andy and to his teams for going ahead now, as they have said they will, and implementing these measures, and, the most important thing now, is that people comply and that we get a high level of compliance in Greater Manchester and in all the areas that are currently in the upper tiers, because that's the way to drive the R down, Vicki.

**JVT:** So, so, I'll continue and answer my question, thank you for it. And it, the answer's kind of in four parts. First of all, I hope my opening slides were very clear that pretty much

everywhere in England is now heating up to some extent. And we are trying to walk a very fine line between getting the virus under control in areas where it is out of control, and incurring the minimum amount of economic damage in doing so. And it is clear that in the areas where it is out of control, and I have focused on those in the presentation, hard measures are needed. But do I think, right now, it is appropriate to insist on those similar hard measures in, for example, the south west of England or, or Kent, where levels of disease are really very, very much lower than in the north of England, in other words, the national firebreak you talk about, no, I don't think that's right and I don't think that's consistent with the epidemiological picture we're seeing, or indeed consistent with the pressures that are being seen in different parts of the health service across the country, which again are very different, and maybe Professor Powis might comment on that point?

**Professor Stephen Powis, National Medical Director, NHS England:** Yes, thank you, thank you, JVT. So, as JVT has shown with the epidemiology, there is variation among, around the country. And indeed, that is also reflected in the number of patients that we see in hospital. So if I give you an example of that, there are more patients in hospitals in Greater Manchester alone at the moment than there are in hospitals in the entire south-east and south-west of the country. So we are seeing variability in infection rates. Those infection rates inevitably lead to unfortunately more deaths. They lead to more hospital admissions and more people in hospitals. They actually lead to more long term symptoms, because we now also know that Covid can affect you beyond the initial acute illness, in what's becoming known as long Covid, and that's a condition that affects all ages, so it's not just the elderly. But it is variable throughout the country, so the key to this, as the Prime Minister and Jonathan has said, is to reduce infection rates and that requires measures to be put in place that will do that, but also crucially, for people to comply with those measures. The British public did that in April and May and we saw what happened, R came below one, death rates and hospital rates began to fall, so we know these measures work. And, and really, we can all play a part here, it's for everybody in, in the public to comply with the measures, to reduce the spread of the virus, and that will then reduce hospital admissions, it will benefit, obviously people with Covid, but it will also benefit other patients who don't have Covid, because the last thing we want to do is to eat into the capacity that we have in hospitals that we use to treat other conditions.

**BJ:** Thank you very much Stephen, thank you, thank you Vicki. Let's go to Carl Dinnen of ITV.

**Carl Dinnen, ITV News:** Thank you, Prime Minister. Will businesses in Manchester, like the pub where I am sitting now, have to close without any of the extra support that you were talking to Andy Burnham about earlier today, and is Manchester being made an example of? And if I could ask Jonathan Van-Tam as well two quick questions, are these tier three measures, with the added restrictions that come with them, enough to make a difference in Greater Manchester, and how damaging has the ten days or so of delay been?

**BJ:** Well listen Carl, thank you very much, and clearly, we wanted a, a, a deal. As I said, that was the, the best way forward. We've had to take action just because of the urgency of the, of the situation. I have described some of the funds that are already on the table, other

discussions undoubtedly will continue. But just, just so, just for your, for your, for your viewers, Carl, for our viewers, we've already for, in Greater Manchester provided 196 million pounds of additional Covid funding to local authorities in Greater Manchester, 663 million pounds to the Greater Manchester Local Enterprise Partnership through the Local Growth Fund to help them and, and 81 million pounds of shovel-ready projects to support business and growth in, in Manchester. We don't want to do this in the way that we've had to, obviously, we're going to keep talking to Andy Burnham and, and his teams, but, you know I am grateful to them, I am grateful to, to the leadership of the councils in Manchester now for getting behind the measures that we're putting in place because that's our best chance of, of getting the virus down.

**JVT:** So, to your question, Carl, about tier three measures. The nationally published tier three measures are the minimum national standard for hard measures, but there are other things that local authorities can consider on top, and I hope some do. What is really important is compliance, you know, everybody needs to accept that this is not a good place to be, if you're in tier three, but to get behind it and try and get the rate of disease falling, so that R in that area is falling, so that the pressure comes off the health service, particularly in those 60 plus age groups. And to your point about what's ten days delay look like, well I've got some data in front of me and I will just pick out three local areas, and I'll first of all give you the case rate per 100,000 in the age 60 plus, between the 1<sup>st</sup> and the 7<sup>th</sup> of October, and then I will fast forward to the 8<sup>th</sup> to the 14<sup>th</sup> of October, so that's not quite your ten days, but I hope it'll give you some idea. So Manchester, initial figure, 302 per 100,000, later figure, 326. Salford, 164, later figure 287. Wigan, 207, later figure, 399. So, I hope that gives you some kind of understanding of what we talk about when we talk about, you know, the doubling time, and when we talk about the rapid rate of progress of health service amenable problems in the elderly once this disease gets out of control in an area. And I hope that gives you some flavour of what that kind of time period produces at the moment.

**BJ:** Thanks very much, JVT. Stephen, anything you want to add to that?

**SP:** Well I think it's worth saying that, as JVT has said in terms of doubling rates of infection, that also plays directly into the effects on hospital admissions and hospital, patients in hospital, so, so we have made this point many times, and you alluded to it, that any measures that are introduced now, people comply with them, it will be up to two weeks before we see that having an effect on the NHS, because there is an incubation period for the virus of about five days, then there's five to seven days of symptoms before typically people present and have to be admitted to hospital for the, for the, for the small proportion that do. So to give you an example, in Greater Manchester, which, which illustrates that. So my colleagues in the NHS Greater Manchester are doing a great job at the moment, they are managing, they are working together as a, as a health care system to ensure they can manage the rising number of patients with Covid, but also keep services going for everybody who hasn't got Covid, and it's really important that people continue to access those services. But two weeks ago, there were just over 330 patients in hospitals in Greater Manchester. Two weeks further on, i.e., yesterday, there were just over 620, so that's a doubling. Another two weeks, if that doubles again, then we're into 1,200 or so. Now at the very peak in Manchester, Greater Manchester, on the 18<sup>th</sup> of April, there were 1,277 patients in their hospitals, so in two weeks' time, we could well be seeing, at the current rate of rise, the sorts

of numbers of patients in hospital in Greater Manchester that we saw at the peak in April. And that's why it's really important that measures are taken at the right time, and it's really important why everybody complies with them to get infection rates down.

**BJ:** Thanks, Steve, and, and thanks Carl. Let's go to Tom Newton-Dunn at Times Radio.

**Tom Newton-Dunn, Times Radio:** Good afternoon Prime Minister, thank you very much. Wales and Northern Ireland both have lower infection rates than England, sometimes considerably lower, yet both have voluntarily put themselves into regional lockdowns, pretty much everything closed apart from schools. Why have you decided to take a different course? Why are you not looking at regional or local lockdowns at the moment? And a question to Jonathan Van-Tam and Stephen Powis please. Jonathan Van-Tam, you just eloquently explained why national lockdowns, national circuit breakers may not be such a clever idea with varying infection rates, but can you confirm you are actively looking at local circuit breakers for these hotspot areas? And how long are you going to give tier three to work to reduce the R rate in Manchester, Liverpool etc. before you then advise the Prime Minister to move on to local circuit breakers?

**BJ:** Well Tom, thank you, thank you very much. First of all obviously, in the areas which are experiencing a particular surge of the virus, that, that, that, now in tier three or going into, to tier three, you know, we rule nothing out. If we have to take tougher measures, then of course we will. We think that that local, regional approach is, is right, but I just want to go back to the points that both Steve and JVT have been making, that the way to make this work with, with tier three is for everybody to comply, and I think the, the package of measures that we have in tier three, in these hotspot areas, if they are implemented, if they are implemented, will do the trick in those areas, and that can make a huge difference to the overall spread of, of, of the virus in the country.

**JVT:** So, thank you for the question. My retort is rather simple really, that, you know, we just can't afford just to let our elderly die. And we can't afford to allow our NHS to be completely consumed by looking after Covid so it can't do its other business as usual work. So, we will have to take as tough measures are necessary to stop that. And the typical lead time, the lag time, between doing something and beginning to see a discernible effect in terms of first case rates and then, maybe delayed by another week hospital admissions, is two to three weeks. And just to make a point that, again, that the Prime Minister made, you know, we are running now with the brakes partially on, and the R is 1.3 to 1.5 according to the latest SPI-M estimates, so, you know, we can't take the brake off on this and we may have to push on the pedal a little harder to get it back under control.

**BJ:** Thanks very much JVT, thank you Tom. Jason Groves of, of the Daily Mail.

**Jason Groves, Daily Mail:** Thanks Prime Minister. First of all, can you clear up once and for all whether Manchester is going to get this 60 million pounds that you offered earlier in the day? And more broadly, you seem to be facing a kind of Northern revolt, this isn't just Andy

Burnham. Your own ally, Graham Brady, says there's no evidence these measures will work and lots of evidence they'll wreck jobs. The leader of Middlesbrough Council says you're using bad data. The leader of Hartlepool Council says the Government can sod off if it wants to impose more restrictions. Why can't you convince Northern leaders of all stripes that you're doing the right thing? And does it matter if you can't, can you, can the country go forward together if you can't? And Professor Van-Tam, can I ask you very quickly, today's death toll is shockingly high, 241 people, is, is that a blip or you talked about things being baked in, is that what we're going to be seeing regularly over the next few weeks?

**BJ:** Well, Jason, first of all, let me just say, in respect of, of funding of Greater Manchester, obviously, we want to, to do more, we want, as, as we said earlier on today, but for the sake of fairness, it has to be, the deal has to be in line with the agreements we've, we've reached with, with Lancashire and, and Merseyside, for instance, where, where we have made progress. And I just, just to remind you that, in terms of, of business support, 46,700 business premises in Greater Manchester have received local authority grant payments of 546 million pounds, 96,100 people in Greater Manchester have received support under the Self-Employed Income Support Scheme. And the coronavirus, the furlough scheme has looked after 407,900 jobs so far in, in Manchester. I think that's, and I, I, I, I, I think that's just worth repeating, because all that's already gone in, but we're now offering more, but as I say, we had to act today because of the, the surge in, in cases that you, you know, you just rightly alluded to, in order to protect health and, and save lives.

**JVT:** Yes, so, thank you, Jason. Yes, 241 new deaths today. That's up 161 compared with yesterday. But, on a Monday or a Tuesday, we always get something of a catch up due to a delay in reporting deaths over the weekend. So, part of that surge in deaths is related to the weekly pattern of slightly lower figures at the weekend, and then a kind of catch up early in the week. But overall, is the trend upwards? Yes. Do I expect the trend in deaths to continue upwards? Yes, unfortunately, I do.

**BJ:** Thanks very much, JVT. Let's go to Dominic Yeatman of Metro.

**Dominic Yeatman, Metro:** Hello, Prime Minister. You said what we couldn't do is a deal with Greater Manchester that's out of kilter with deals struck with Merseyside and Lancashire. But, given that the 22 million pounds on offer is exactly half that offered to Liverpool, should local authorities be penalised if they do not agree with the settlement offered? And one to Professor Van-Tam, if I may. Is the argument for a short national circuit break now stronger or weaker than when SAGE recommended it on September the 21st?

**BJ:** Well, listen, thank you very much, Dominic. First of all, the, the 22 million that you, that you mention, that's, that's separate and additional to any other support that we were trying to agree with, with, with Manchester for, for, for business support. I've mentioned the figures that we've already, the support that's already gone in to support business in, in, in Manchester. Our, our, our door is open to, to, to continue that particular conversation, but for the sake of fairness, we had to keep it in line, as I said, with what we agreed with, with, with Lancashire and Merseyside and so forth.

**JVT:** Could you remind me of the question, please?

**DY:** Yes, is the argument for a short national circuit break...

**JVT:** Oh yes.

**DY:** ...lockdown now stronger or weaker...

**JVT:** Yes, yes.

**DY:** ...than when SAGE recommended it on September the 21st?

**JVT:** Thank you. So, I've already articulated the reasons why I think a national lockdown at the moment would be inappropriate for communities in Cornwall and East Anglia, for example. But it is a kind of scientific feature of the effect of a lockdown that if disease levels are higher when you effect the lockdown, the effect will be less overall than if the lockdown is inflicted at a point when disease levels are much lower. So, I suppose what I'm saying is, is that I wouldn't expect the same magnitude of effect if one were done now as if it were done early in September or mid-September. But I repeat the point that the epidemiology is so varied across England that I think it would be very difficult to justify for some communities.

**BJ:** Thank you, thank you very much, JVT. Last question is to Jen Williams of the Manchester Evening News.

**Jen Williams, Manchester Evening News:** Thank you. Prime Minister, Greater Manchester has been under constantly changing lockdown measures since the start of August, sometimes announced with just a few hours' notice, sometimes emerging late at night on social media. At one point, Bolton was under four different sets of restrictions in the space of a few days. Have you visited the region at any point to speak to people about what this has been like for them? Do you think you owe [inaudible] an apology, and do you think there's any connection between that approach and our current high infection rate? And secondly, you still haven't said exactly how much business support Greater Manchester is getting. Given that you're saying that it needs to be in line with Liverpool and Lancashire, does that mean it will be no more than 60 million pounds? And to the Deputy Chief Medical Officer, do you think that a more localised approach to contract tracing before now would have helped to keep some of these current infection rates down?

**BJ:** Well, Jen, let me just say, you know, to all those businesses, you, you asked for me to apologise, and I, I am deeply sorry that it is necessary to put these, these measures in place

and to everybody who's endured the privations and the difficulties of, of this period, of course, I'm, I'm, deeply, deeply sorry for, for what's been necessary, Jen. But, nobody wants to enact measures like this. I, I do think that there has that been some simplification thanks to the tiering system, that's a, that's a good thing. And, of course, we, we want to give Manchester, give businesses, people in Greater Manchester the proper levels of support, as I've said. Our, our door remains open to, to Andy to, to discuss that, though we've got to, we've got to keep it in line, obviously, with, with, with, with deals already done. And I just want to repeat my gratitude to the people of, of Greater Manchester for their willingness to help everybody in the country to follow the guidance, follow the rules and get this virus down. I mean that, it's in all of our hands.

**JVT:** So, on the question about contact tracing, I believe a blended approach of national contact tracing to, kind of, deal with the high volume, low, low complexity contact tracing is a good thing. But I think the local backup to deal with complex and difficult and hard to reach cases is a really good idea. I think you need both, to be truthful.

**BJ:** Dead right. Steve.

**SP:** So, I know how difficult it is at the moment in the, in the North West, and of course, from the NHS, I am particularly grateful to all the NHS staff in the North West who I know are dealing day by day with increasing number of patients with Covid, and at the same time are ensuring that all other patients, cancer patients, patients with heart attacks, with strokes, a whole range of, of things, are also being looked after and managed appropriately. But, but as I've said, the key to keeping doing that is to get infection rates under control. I expect that Liverpool University hospitals will have as many patients, well more patients, by tomorrow with Covid in, in their hospitals than they had at the peak in April, and I think that shows just how fast we can see infection rates and hospital admissions rise if we don't get this under control, so it's really critical, and as the Prime Minister has said, we're all grateful for everybody to comply with these measures, to maintain social distancing, and to ensure quite simply that the virus doesn't have a chance to spread.

**BJ:** Thank you very much, Steve, thank you, thank you JVT, and thank you everybody, for watching. Look I just want to repeat the central point that we're, we're walking a narrow path here today, because we, we don't want to go back into a national lockdown, with all the damage, social and economic, that that can do, unless we absolutely have to. We think that the local approach is the reasonable one given the, the way the virus is, is dispersed, and that's what we're going to, to do. And just to sort of give everybody some, some hope, if you, if you look at what is actually happening with the universities, for instance, they have done a great job, I think, in getting their virus under control. You saw how some of those lines are starting to come down. And I repeat the point that, that we made earlier, both JVT and I, that this, the R is currently above one, but it's not that much above one. And so if we all follow the guidance together and everybody gets together and complies with the, the tiers that we, the rules for the tiers that, that have been set out and that are on the, on the website, then I've no doubt that we can drive it down, particularly in those badly affected areas. Thanks very much everybody.