

COVID – Technical Advisory Cell: Briefing on Behavioural and Social Interventions

1. In the event of a severe epidemic, the NHS will be unable to meet all demands placed on it. In the reasonable worst-case scenario, demand on beds is likely to overtake supply well before the peak is reached. Currently the RWC is also considered within the bounds of a likely scenario.
2. There are a range of behavioural and social interventions that are evidenced as having been effective in responding to past epidemics. These interventions are well understood by the public and have been enacted in other countries. Modelling suggests as compliance drops so does impact, but there is no major inflexion point at which a drop in compliance leads to a disproportionate drop in effect.
3. Applying behavioural interventions could be helpful in containing an epidemic to some degree or changing the shape of the epidemiological curve, potentially making the response of the NHS and other sectors more sustainable.
4. The objectives of these interventions could be to:
 - Contain the outbreak so that it does not become an epidemic (note – this unlikely to be achievable);
 - Delaying the peak so it occurs when the NHS is out of Winter pressures;
 - Reducing the size of and/or extending the peak so that the response by the NHS and other sectors can be maintained more sustainably; and
 - Reducing the total number of deaths by limiting the number of cases in vulnerable groups.
5. Any intervention would need to be Government policy for a significant duration (2-3 months) in order to see the benefit, as removing and/or relaxing the intervention too early could result in a new outbreak and potentially extend transmission of the virus into Winter 2020. However, the timescale for this are uncertain and would need to be kept under review to provide confidence that these are in place to sufficiently cover the peak of the outbreak.
6. SAGE considered that measures relating to individual isolation will likely need to be enacted within the next 10 to 14 days to be fully effective, and those concerning household quarantining and social distancing of the elderly and vulnerable 2-3 weeks after this. However, the triggers for individual and

