

FURTHER MEASURES

1. This note sets out choices that are hard, whichever way they go. Perhaps unusually, and for that reason, it starts where the First Minister finished her statement on 22 September.

“Although we are all struggling with this – believe me, we are all struggling – let us pull together. Let us keep going, try to keep smiling, keep hoping and keep looking out for each other.” (*Official Report*, 22 September 2020, col.20)
2. Every government in the world is struggling with these decisions. We bring to bear our best assessments and judgements, but do not have perfect knowledge of the state of the epidemic, nor the effect of the measures we recommend and decide. Clarity of strategic intent – to suppress the virus – and the “four harms” approach are good guides to decision-taking; but there remains the risk that the tensions between harms lead to over-thinking assessments and advice (“polishing the problem”), sub-optimal compromises (the likely outcome of “fighting our corners”), and stress. We need to recognise the limits of our data, modelling and assumptions, accept that no one view-point lets us see the whole of the problem, and value creative co-operation and constructive challenge over conflict or compromise.
3. In short, this isn’t easy; and it’s a collective effort.

Summary

4. This note reviews the SG’s strategic intent to suppress the virus through a “four harms” approach, since the case for further measures follows from that position. It notes the importance of suppressing the virus by all possible means, including those other than guidance and regulations. It gives our present assessment of the effect of measures in place and our conclusion that further measures are required. It makes the case for further measures sooner rather than later, including additional measures during the October holiday period.
5. It then recommends a levels-based approach to escalation, as set out in a separate note, and comments on the aim and design of the levels. Finally, it recommends **moving to a higher level of restriction for two weeks from Monday 12 October, to “re-set” the virus; and, thereafter, to maintaining levels of restriction sufficient to sustain R just below 1**. This may include measures beyond those announced on 22 September.

Strategic intent and the “four harms”

6. **The case for further measures follows from the SG’s commitment to suppressing the virus**
This reflects what we know about the four harms it does. Six months on from the March “lockdown,” it is worth re-examining both points.
7. COVID-19 results in both morbidity and mortality. For every 100 people who catch the virus, 4 will be admitted to intensive care, and one will die. If everyone in a population of 5.5 million gets the virus, more than 50,000 will die (that is, in Scotland alone), and many who survive will suffer ill-health (harm 1). Letting the virus get out of control would also seriously disrupt wider health and healthcare (harm 2), wider society (harm 3), and the economy (harm 4). **The virus is a significant threat to human life, wellbeing and prosperity.**
8. **This assessment has not changed.** Though admissions to hospital, ICU cases and deaths continue to lag the rise in new positive cases, compared to March, this is likely to be because new cases are predominantly among younger age-groups, and a much greater proportion of the true number of new cases is being caught by testing, compared to March. As set out in material on “The State of the Epidemic”, experience in other countries suggests that rising numbers of infections among the young will spread to older age-groups, and the latest data for Scotland show that beginning to happen.

9. **Measures to control the virus themselves do harm, to wider health and healthcare, society, and the economy.** These harms are significant, interrelated, and non-linear, play out over time, and are hard to quantify and estimate in advance.
10. Further measures will increase harm done to broader health and healthcare services, wider society, and the economy. The crucial judgement is whether **greater harm would result from letting the virus get out of control.**
11. Uncontrolled growth of the virus would harm not just health but also healthcare systems, society and economy. **There is therefore no simple trade-off between harm 1 and harms 2-4.** If compromises in the design of measures to suppress the virus result in R remaining above 1, harm will still be done to healthcare, wider society, and prosperity; and more people die.
12. These considerations led Ministers to adopt the strategic intent of suppressing the virus, and the position set out in the *Framework for Decision-Making*, that:

“an assumption that there is a proportion or section of the population that it is safe or acceptable to allow to be infected forms no part of the Scottish Government’s policy or approach.”
13. Six months from the March “lockdown”, and to ensure that we do not limit our thinking, Ministers may wish to consider these judgements again, since the case for further measures follows from the strategic intent of suppressing the virus.

Suppressing the virus by other means

14. Further measures to reduce importation and transmission risk are not the only means of suppressing the virus. Test & Protect, numbers of tests, rapid turnaround of test results, the Protect Scotland app, enough capacity and capability for effective contact tracing, good incident management, good communications and marketing, and effective action on compliance and enforcement: all also bring R down by disrupting chains of transmission. We recommend that, **in addition to considering further measures, everything possible should continue to be done to suppress the virus by other means.**

Further measures are required in order to suppress the virus

15. Our present assessment is that that the measures announced on 22 September, along with others already in place, will blunt the growth of the virus, but that **further measures are required to bring R below 1 and to reduce prevalence.** For reasons set out below, it is better to apply these sooner rather than later.
16. Decision-making is complicated by the fact that **true, exact values for prevalence and R are unobtainable.** We don’t know what proportion of the true number of new cases we find by testing, and we don’t know until after the event how many people will be infected by people who presently have the virus. We have to estimate both prevalence and R; and R is a lagging indicator. The current (23 September) estimate for R for Scotland is in the range 1.2 to 1.6.
17. **We should (and do) seek the most accurate estimates possible,** and have work in hand to blend different sources to give a more authoritative and accurate data picture, to allow us to pinpoint more specific areas of risk by geography, sector, and demography. This may over time allow more precision in the application of a levels approach.
18. It remains the case that current decisions have to be taken on current estimates, especially when we estimate R is above 1: **delay risks letting the virus get out of control.** Exponential growth (R above 1) does not *itself* mean the virus is out of control; but it risks rapid acceleration of new cases suddenly overwhelming the capacity of testing and contact tracing to break chains of transmission, meaning the only way of getting the virus back under control is more severe restrictions.

19. It follows that **taking further measures sooner is significantly better**, not only to prevent the virus getting out of control, but because it is likely to mean they can be less severe, and/or in place for a shorter time, in order to be effective. This requires, however, that decisions are made on current knowledge, rather than waiting to see the effect of measures already taken, and means accepting the risk of going too hard, with excess impacts on harms 2-4. Waiting for better data risks excess deaths in the near term.
20. **Holiday periods carry particularly high transmission and importation risks**, associated with travel and household interactions, both in October and at the end of December. This justifies a higher level of restriction in those periods: the so-called “circuit-breaker.” We recommend below an approach in October designed to bear down on the virus without impacting unnecessarily on schools. Early decisions are required if that option is to be pursued in an orderly way. We have not made recommendations on the December holiday period, but flag it as a fast-approaching challenge requiring urgent work.

Further measures and a levels-based approach

21. What follows assumes **a levels-based approach to further escalation**. The rationale for a levels-based approach is set out separately. For the reasons set out there, **what follows refers to the “baseline plus 4” model**, and focuses on how these levels should be defined and applied. This work builds on the measures considered between 18 and 22 September. These, and others, are included in the illustrative tables of protection levels circulated with this note.
22. **The design and content of the levels should target the necessary suppression with the minimum additional harm**. The work to create these tables – which have not yet been worked through in detail with advisers and policy leads, and therefore remain illustrative – has drawn on the advice put to Ministers last weekend, including assessments of relative benefit and harm (the “green and red boxes”).
23. We recommend that **chief advisers, lead policy officials and portfolio Ministers should work together urgently to sharpen the detail of measures in the levels** to make them as focused as possible in their effect on suppressing the virus, while mitigating – not compromising – for effects on harms 2-4. The aim should be to draw on what we have learned from the work of the past six months, to get these measures as sharp and “smart” as possible, in contrast to the blunt instrument of March’s total lockdown.
24. This could include, for example, measures in hospitality which would get more R benefit, short of full closure; or increased physical distancing in non-essential retail, short of outright closure. This work will need to be done urgently in order to allow Ministers to reach final decisions on the recommendations set out below.
25. This pandemic impacts on everyone, but not equally. Some degree of inequality was inevitable as we acted in an emergency but we need to be mindful of inequalities as we move to medium term actions. **Work to define levels should be fully impact assessed so that any issues arising for specific groups can be identified and plans put in place to mitigate these**, particularly in relation to options that increase social isolation.
26. This work is intended to support two main recommendations for early application of a levels approach.

Recommendations

27. We recommend the following.
 - a. First, that Ministers consider announcing their intention to **move to a higher protection level for two weeks from Monday 12 to Friday 23 October, without unscheduled school closures** (that is, the normal holidays will apply, and schools remain open otherwise). The

two week period could be at level 3 or level 4. The final recommendation will be informed by updated four-harms and analytical advice.

- b. This version of the so-called “circuit-breaker” **does not require the standardisation of school holidays** because the higher levels are designed without including unscheduled school closures. Applying higher protection levels for these two weeks will mitigate the risks of the holiday period for all but four local authority areas. The exceptions, which would be partially covered, are Angus, Argyll & Bute, Dundee, and Perth & Kinross. These four authorities’ schools have a two-week break starting on Monday 5 October. Together, these authorities account for only 9% of Scotland’s population.
- c. **The aim of these two weeks at a higher level should be to “reset” the virus** by securing significant early harm 1 benefit, mitigating the significant transmission and importation risk from holiday travel and inter-household mingling, and reducing the infectious pool. The impact on harms 2-4, while potentially severe (for example, two weeks at level 4 would mean cancelling all holiday accommodation bookings in Scotland during half-term and annulling a key period for the domestic tourism sector), would be limited by the fixed duration and by giving at least a short period of notice in order to help people and organisations prepare. Alternatively, more targeted restrictions (level 3) could be applied, but with reduced impact in terms of viral suppression.
- d. Second, during this two-week “reset” of the virus, **we recommend preparing to revert to level 1 or level 2**, in order to keep the virus under control. The aim should be to define and select levels so as **to secure a sufficient and sustainable reduction in transmission, for example targeting R of about 0.9, while mitigating other harms to the greatest extent possible within that constraint**. The two-week period at a higher level creates time to work with sectors and stakeholders to mitigate harms 2-4 to the greatest extent possible in levels 1 and 2, while securing the required harm 1 effects. It will also give us further information on the state of the epidemic. Depending on the position in mid-October and the cumulative effect of recent measures, it might be possible to return to different levels in different parts of the country – as was the case, in effect, prior to 22 September.

Further considerations

- 28. Ministers may want to note the following points in relation to the design of the levels and the recommendations above on their early use. These points are reflected in the recommendations above.
 - a. **Senior clinical advisers recommend going further on hospitality than in the 22 September package, and would prefer full closure.** Economic advisers recommend, instead, further rapid work with the sector to reduce transmission risk further, including by stronger compliance; increased physical distancing; and further restrictions to opening hours. The recommendations above would result in further restrictions or full closure for a defined period, followed by the implementation of further work with the sector to secure safe and sustainable re-opening. Similar points apply to other sectors and activities, and the process proposed above gives opportunities for similar work.
 - b. This note does not address the question of financial support for individuals and businesses, the implications of the Chancellor’s recent statement, and the costs that may arise from further measures considered here, wither in practical implementation or potential calls from affected businesses for additional support. Ministers have a clear understanding of the current very challenging budget position. **Further work on financial implications will be necessary** as part of taking forward the recommendations made here.
 - c. Ministers have been clear that their priority is to keep schools open. Unscheduled closure carries additional healthcare, social and economic harm because it not only impacts

children's education, but limits parents' ability to work. School closures do not feature even at level 4 in the tables considered here. Closing schools, however, could well have the highest potential relative harm 1 benefit of any measure considered as part of this process. This is not just because of in-school transmission but because of all the wider interactions and hence transmission that opening schools enables or signals. Though we have set out to design a circuit-breaker that does not require *unscheduled* school closures, **we recommend Ministers should continue to keep open contingency options for blended or home learning**, in case they are required in future. Similar points apply to some non-COVID healthcare services, for example dentistry, which also do not appear as closures even at level 4.

- d. **Clinical advisers recommend travel restrictions in order to limit transmission**, particularly when incidence levels vary from area to area. Imposing nationwide travel restrictions effectively means closing tourist accommodation and visitor attractions. Both measures appear in level 4. If (in future) different protection levels were applied regionally rather than nationally, we would recommend discouraging travel into, out of, and within areas at the higher levels (as Ministers have advised earlier in the year, for example in relation to Gretna and Annan, and the north-west of England). This approach might, for example, allow restrictions to be eased for island communities, but with only essential travel to and from islands, with the potential to create perceived or actual isolation or unfair treatment. This needs further consideration, including with representatives of remote and island communities and providers of tourism and visitor services. This can be taken forward between now and the end of the proposed two-week period of greater restrictions.
- e. Alongside these measures, and the equalities impacts assessments mentioned above, **we recommend further urgent consideration of advice and support for those most vulnerable to all four harms**. This includes those in older age-groups and with pre-existing or developing health conditions, who are most vulnerable to the virus itself and to disruption to healthcare services; those in BAME groups who are particularly susceptible to the virus and its harms; those for whom restrictions result in isolation or deteriorating mental health, or who are more open to abuse; and those on low or precarious incomes, or whose security of employment is most at risk of harm from restrictions.
- f. Social policy advisers note that **the circuit-breaker option may be difficult for families who have already planned activities over the mid-term holiday**, to alleviate stress and worry. The public needs some relief as well as restriction, or resilience will be stretched greatly.
- g. Social policy advisers recommend that, if a levels approach including "circuit-breaker" periods at higher levels is likely to be part of the strategy for handling the virus over the coming months, as part of an approach more nuanced than the March lockdown, **this approach should be set out in public communications**, including through the publication of a strategic approach to escalation, as the First Minister intends.
- h. More generally, social policy advisers emphasise **the importance of maintaining public co-operation and trust**. The proactive publication of a levels document and clear explanation of how it will be used will give the public some sense of direction. It may make the bearing of bad news somewhat easier as people will be forewarned and have a better understanding of what lies ahead.

Timings

- 29. To hold open the options described above, we recommend the following, demanding, timetable.
 - a. **Decisions in principle on Monday 28 September** on (i) a levels-based strategy and (ii) early escalation, as set out above.

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- b. **Confirmation of these decisions at Cabinet on Tuesday 29 September**, with final decisions delegated to senior Ministers.
 - c. Finalising the definitions of levels and recommendations on the extent of early escalation through four-harms assessments by **Wednesday 30 September**.
 - d. Final advice and decisions on **Thursday 1 October**.
 - e. **Publication and announcements on Friday 2 October or Monday 5 October**,
 - f. In the **week beginning Monday 5 October**, work on guidance, regulations and communications, including engagement with delivery partners and stakeholders. We recommend that Ministers should be open to changing measures and levels before implementation, where this work identifies a good case for doing so.
 - g. A pre-announced two-week period at a higher protection level from **Monday 12 October**, followed by a return to lower, sustainable, levels.
30. If Ministers decide to proceed in this way, there would be advantage in signalling their intentions in advance, including through media briefings in the course of the coming week. Ministers are already giving a strong “stay at home” message for the October school holidays.

Conclusion

31. All of this is for discussion with Ministers on Monday 28 September. This note has been prepared by officials responsible for SG’s COVID-19 framework for decision-making and route-map, with input and comments from the chief medical, economic and social policy advisers and other officials across SG, to the extent possible in the limited time available. Chief advisers and lead officials will be on Monday’s call to support the discussion, and available to brief Ministers beforehand.

27 September 2020.