Witness Name: Professor Dame Jenny Harries
Statement No.: 8
Exhibits: JH8/01 – JH8/02
Dated: 13 December 2024

UK COVID-19 INQUIRY

MODULE FOUR SUPPLEMENTARY COROPORATE STATEMENT ON BEHALF OF THE UK HEALTH SECURITY AGENCY ("UKHSA")

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1. Introduction

1.1. I, Professor Dame Jenny Harries, of the UK Health Security Agency, 10 South Colonnade, Canary Wharf, London E14 4PU, will say as follows:

1.2. I am the Chief Executive of the UK Health Security Agency ("UKHSA"). I was previously Deputy Chief Medical Officer for England from 15 July 2019 to 31 March 2021.

1.3. This is the eighth statement that I have provided to the UK Covid-19 Inquiry ("the Inquiry"). This includes a corporate statement for this module which focused on the role of the Vaccine Task Force ("the VTF statement"), some of whose functions were transferred to UKHSA in October 2022.

1.4. The Inquiry has asked me to provide a further statement on behalf of UKHSA in response to a supplementary request for evidence dated 24 October 2024 and directed to two distinct matters as set out below. In responding to that request, I have drawn on my own experience, the records of UKHSA and its predecessor organisations, and the input from colleagues within UKHSA.

2. Termination of the Valneva contract

2.1. The VTF statement[1] sets out the history of the VTF's engagement with Valneva (paragraphs 5.75 to 5.81). The Inquiry has asked who made the decision to cancel that contract. It was made by the then Secretary for State for Health, the Rt Hon Sajid Javid MP. The advice given by the VTF as to whether the contract should be terminated is found in a submission dated 9 September 2021 addressed from the Director of Strategy at the VTF to the Secretary of State, as well as to the Rt Hon Nadhim Zahawi MP, Minister for COVID Vaccine Deployment **[Exhibit: JH8/01 INQ000514013]**.

2.2. As is usual practice before a submission is provided to a Minister, its content was cleared by the appropriate legal, commercial and financial colleagues and approved by the senior leadership team of the Vaccine Taskforce ("VTF"), including the Director General, Madelaine McTernan and Sir Richard Sykes, then Chair of the VTF. They were both copied into the email which sent the submission to the Secretary of State's private office **[Exhibit: JH8/02 INQ000514012]**, as well as the reply confirming his decision. The sensitivities around the decision meant the submission was not put before the Ministerial Panel.

2.3. The submission is headed Project Violet (the latter being the codename for the contract with Valneva). As it explained, the cancellation of the contract was based on Valneva's indication that it would be unable to meet its obligations on delivery of the vaccine, as well as recent data on the effectiveness of the vaccine. The submission noted that on present data there was a risk to the vaccine achieving successful approval from the Medicines and Healthcare products Regulatory Agency ("MHRA") at a later date. The submission also referred to the potential impact of the decision on the use of a manufacturing facility operated by Valneva in Livingston, Scotland and hence on local employment. The expansion of this facility had been facilitated by advance payments from the Government under the contract. It had been anticipated that this would result in 400 new jobs although at the date of the submission only 214 persons had been recruited. As the submission notes, the Treasury were supportive of a recommendation that the contract be terminated.

[1] INQ000492334.

2.4. In circumstances where the Government would be paying for vaccines which would no longer be required, the Secretary of State had ultimately to decide if the contract continued to provide value for money. Should the Inquiry require further information about the submission, then those leading the VTF at the time are best qualified to provide that information.

2.5. The Inquiry has asked for UKHSA's view as to whether the cancellation of the Valneva contract could have had an impact on the readiness of the pharmaceutical and bioscience industry to work effectively with the UK to develop and supply vaccines in a future pandemic. Our understanding is that the Valneva contract was terminated for specific reasons. Not every product developed by a pharmaceutical company will prove to be effective or satisfy regulatory quality and safety standards. Further, there may be a whole host of reasons why a company decides whether or not to invest in the UK, including the global economic environment.

2.6. UKHSA's experience is that the cancellation of the Valvena contract has not deterred other companies in the pharmaceutical and bioscience industry from investing in the UK. The UK-Moderna Strategic Partnership, for which UKHSA has continued to hold responsibility and successful programme delivery (see paragraphs 9.1 and 9.4 of the VTF statement) and the advance purchase agreement with CSL Seqirus (see UKHSA's Module 4 corporate statement[2], provided by Dr Mary Ramsay, on the role of Public Health England and UKHSA ("the PHE statement") at paragraphs 3.5 and 13.20) support that view. What is attractive to companies is the UK's strong science, preclinical and clinical research base. UKHSA continues to play an active role not only in undertaking funded research but also promoting links between academia and industry.

3. Data on deaths following the use of COVID-19 vaccines

3.1. The Inquiry has asked about the role of UKHSA in collecting and analysing data on the number of deaths that have followed from the use of COVID-19 vaccines.

[2] INQ000496177.

3.2. It is important not to conflate the collection of data on deaths from any cause (for example, because of underlying clinical conditions or accidental deaths), versus deaths caused by COVID-19 infection and deaths potentially caused by the administration of a COVID-19 vaccine. As to deaths caused by COVID-19 infection, PHE (and then UKHSA) collected data which informed published analysis of the number of COVID-19 infection related deaths. As to deaths potentially caused by the administration of a COVID-19 vaccine, MHRA, rather than UKHSA, is the agency with primary responsibility for vaccine safety. The MHRA therefore is the agency that collates and analyses deaths from other causes following vaccination.

3.3. The Inquiry will note that the Office for National Statistics ("ONS") and the Office for Health Improvement and Disparities also collect and/or analyse data on mortality, both overall, and from a broad range of causes, including non-infectious causes. Those agencies will be best placed to assist the Inquiry on their own work in this area.

3.4. During the pandemic, PHE and then UKHSA undertook surveillance and analysis of vaccine effectiveness and coverage (see the PHE statement at section 6). To support its analysis of vaccine effectiveness, PHE/UKHSA would link laboratory test results for COVID-19 infection reported to PHE/UKHSA to mortality data received from ONS and to deaths recorded on NHSE Personal Demographics Service. To support its analysis on vaccine coverage, PHE/UKHSA uses data from the National Immunisation Management System ("NIMs") obtained from NHS England ("NHSE"). NIMS contains data on individuals resident in England and includes their dates of vaccination and their vital status (including whether an individual is recorded as having a date of death recorded on the NHSE Personal Demographics Service). While this information comprises a large dataset, it is not one that can be used to draw a causal link between a death and the administration of a COVID-19 vaccine. As the information on cause of death is not provided, it is not possible to exclude whether a death occurred because of an unrelated event (such as an accident) or was caused by an underlying condition that existed prior to vaccination.

3.5. The Inquiry has also asked about data provided by UKHSA to vaccine manufacturers. UKHSA has not provided any individual record level data on deaths in vaccinated and unvaccinated populations to vaccine manufacturers. UKHSA has

supplied aggregate (grouped) anonymised data on the number of individuals who received the manufacturer's vaccine (specifically data on the number of people who received their COVID-19 vaccination by dose, age group and time period). This enabled the manufacturers to fulfil their obligations to report this to the MHRA to establish the correct denominator of doses administered to support interpretation of the numbers of reports of adverse events received by the MHRA.

3.6. UKHSA also provided vaccine manufacturers with a series of reports which included analysis of routine data to determine whether the vaccines were effective, including analysis by manufacturer. These reports were released to the manufacturers a few days before they were published to the public, under a non-disclosure agreement. The reports remain publicly available.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed: **Personal Data**

Dated: 13 December 2024