COBR(M) 10 MAY - APPROACH TO SOCIAL DISTANCING MEASURES

Summary

1. This paper sets out the steps that will be taken by the UK Government on social distancing, and seeks agreement for the implementation of plans at the UK border, and agreement to a four nations approach to social distancing measures.

Recommendations:

2. That COBR **agrees** to continue a UK-wide four nations approach to controlling the spread of the virus and moving into the next phase. This will be based on scientific advice and will acknowledge that the spread of the epidemic may mean measures being lifted at different times in different parts of the UK.

3. That COBR **notes** the UK Government will announce this evening updates to the existing social distancing rules along with a roadmap setting out a future phased approach.

4. That COBR **notes** that the UK Government would like to work with the devolved administrations to explore how the Joint Biosecurity Centre can operate most effectively across the UK.

5. That COBR **agrees** to the proposed announcement on UK borders and to work together on the implementation of measures.

SAGE assessment

6. SAGE assessment is reflected in Annex A.

UK-wide four nations approach

7. It may be, that as a consequence of both the practicalities of the devolution settlement and scientific advice including on varying levels of R across and within the four nations, that moving forward it will be necessary to keep measures in place in one nation (or region) of the UK while lifting them in others.

8. We therefore recommend that the UK Government and Devolved Administrations remain committed to the Four Nations approach to:
    a. suppress the virus, and see sustained falls in hospital admissions, death rates and the rate of infection; and preventing a second peak;
    b. protect the NHS and its ability to care for those who need it;
    c. ease restrictions carefully when safe to do so.

9. Consistent with this approach, we recommend that the UK Government and devolved administrations agree:
    a. that guidance and regulations should reflect local evidence and circumstances, and may therefore be different from one another, and may change from time to time;
    b. to continue to work together to align approaches, including in relation to the Joint Biosecurity Centre as set out in Paragraphs 12-13 and controls at the borders and within the Common Travel Area as set out in Paragraphs 14 - 16 below.

UK Government approach to sequencing of NPIs

10. The UK Government will set out a roadmap for the changes to social distancing measures on Monday 11 May. This will include a small number of steps which will take effect this week. These will be accompanied by an update in the UK Government's public messaging, reflecting that the UK is entering a different phase but emphasising the continuing need to be cautious and advising the public to "stay alert". The announcement will include:
    a. encouraging those in "open" sectors who cannot work from home to return to work if they haven't already, and supporting this with a comprehensive programme to ensure spaces are Covid secure;
    b. encouraging the parents of vulnerable children and key workers to send their children to school if they are are not already attending;
    c. clarifying in guidance that exercise can be done more than once a day and that people may drive to outdoor open spaces;
    d. easing the restrictions so that most outdoor activities may be resumed with members of the same household, subject to continued compliance with social distancing guidelines;
    e. confirming a number of relatively minor and technical changes including clarifications to put things beyond legal doubt (allowing people to leave home to use click-and-collect services and waste and recycling centres, ensuring key workers are able to stay in hotel accommodation, and being clear that garden centres can open) and easing restrictions to enable people to move home, and to facilitate doing so, in a wider range of circumstances;
    f. emphasising that when travelling everybody (including key workers) should continue to avoid public transport whenever possible.

11. The roadmap will set out two further steps where the UK Government will gradually replace the existing social distancing restrictions with smarter measures that balance the aims as effectively as possible. Under the second step the UK Government will set out its intention to re-open non-essential retail and support the start of a phased return to schooling. The third step will include the intention to reopen remaining closed premises including hospitality and places of worship, and to seek to permit larger gatherings. Each step will be based on an approach of 'maximum conditionality', with earliest possible target dates for each step but these will be conditional on the incidence of the virus and the R value.

Joint Biosecurity Centre

12. The UK Government will announce shortly the establishment of a new Joint Biosecurity Centre to ensure there is a clear picture of how the level of infection is changing as it begins to lift measures. Whilst initially operating in England only, we want to work swiftly with the devolved administrations to discuss how the centre can operate with benefits across the UK. The centre will:
    a. collect a wide range of data to built a picture of infection rates across the country;
    b. analyse that data to form a clear picture of changes in infection rates across the country, providing intelligence on both the overall national picture and, critically, potential community level spikes in infection rates;
    c. advise the Chief Medical Officer of a change in the Covid-19 alert level who would then advise ministers; and
    d. identify specific actions to address local spikes in infection in partnership with local agencies – for example, closing schools or workplaces where infection rates have spiked, to reduce risk of further infection locally.

13. In line with the four nations approach, the UK Government would like to work with the devolved administrations to explore how the centre can operate most effectively across the UK, including on building the data picture and providing information to all CMOs and administrations.

Measures at UK borders

14. As the level of incidence from within the UK declines further, we need to ensure that the UK is managing the risk of new transmissions from abroad. Therefore, in line with many other countries, it is proposed that a series of measures are implemented at UK borders. These measures will be introduced as soon as is feasible. It is proposed that the UK Government and devolved administrations continue to work together to develop the detailed approach to implementation, including exemptions and legislative requirements.

15. COBR is asked to agree the following:
    a. first, that there will be a significant increase in information on social distancing and public health guidance at the border, as well as a requirement on all travellers (other than a very small list of exemptions) to provide their contact information and details of their accommodation on a digital platform, and strong advice to download and use NHSX (or local) contact tracing apps;
    b. second, that there will be a requirement for all travellers (other than those in exempted categories) to self-isolate for 14 days in their accommodation, or to be asked to do so in accommodation arranged by the UK Government.

16. Proposed exemptions will be limited and designed to ensure these measures do not affect the UK's broader efforts to restart the economy or affect critical supply of goods into the country (for instance on goods hauliers); critical work in the national interest (for instance military operations; support to critical national infrastructure; or, to meet the UK's international obligations (such as diplomats).The Public Sector Ministerial Implementation Group will sign off the list of exemptions on Wednesday 13 May after further discussion, including with the devolved administrations. All journeys within the Common Travel Area will also be exempt from these measures. Both the measures and list of exemptions will be kept under regular review.

ANNEX A : SAGE advice: summary of advice provided

Level of transmission

1. The SAGE meeting held on 5 May 2020 concluded:

"This number is driven by transmission in the community, hospitals and care homes. The rate of decline of R is slowing as a result of this. As of now, R in the UK is influenced by transmission from care homes and hospitals. Estimates of R in the community range from 0.5-0.9, and there is a high degree of confidence in this. Behavioural data suggests that R in the community (taking out transmissions from health and care workers) could be at the lower end of the range. There is a lower degree of confidence in R in care homes due to limited data. SAGE reiterated that urgent steps should be taken to reduce transmission and within and between health care settings, care homes and the wider community."

	Overall	Community	Hospitals[1]	Care Homes
Best assessment of current reproduction rate (R)*	0.5-0.9[2]	0.5-0.9	0.1-0.5	Not possible to assess

2. UK-wide estimate as of: 04/05/20, calculated based on data from NHS, PHE and CO-CIN

Nation / Region	Range of estimates for <u>overall</u> R (as of 04/05/20)
East of England	0.6-1.1
London	0.5-1.0
Midlands	0.5-1.0
North East and Yorkshire	0.6-1.0
North West	0.6-1.0
South East	0.5-0.9
South West	0.5-1.0

[1] This R is estimated from patient data so does not directly include staff to staff transmission and so may be an underestimate of the R value in hospital environments. The hospital and care home effects will act to make overall R larger than community R.
[2] Figure provided by GCSA on 10 May 2020

England	0.5-1.0
Scotland	0.6-1.1
Wales	0.7-0.9
Northern Ireland	0.5-1.0

Assessment of impact of Step 1 on the incidence of COVID-19 in England

3. SAGE has assessed the impact of updates to social distancing guidelines under the following package.
    a. Work: Encourage those permitted to work (who cannot work from home) to do so subject to complying with the new 'safer spaces' guidance – with a moderate level of up-tick in return.
    b. Schools: Encourage more of those children currently permitted to attend schools and childcare to do so with a moderate level of up-tick in return.
    c. Exercise & leisure: Make clear that people can exercise more than once a day (as already legally permitted) and use outdoor spaces for leisure (observing social distancing).
    d. Outdoor workplaces: Opening some additional outdoor workplaces e.g. outdoor markets and garden centres.

4. For these measures SAGE advised:

"This package of measures will have a modest impact on R, with R remaining below 1 and with incidence continuing to fall in most areas, although with some regional variation. Impact depends on transmission within health and social care settings and export of infections to the wider community through workers in those settings."

5. SAGE also advised:

"That the triggers for moving between phases should not be based on a set date but rather upon reaching a predefined target incidence of new cases in hospital. There will be more room to make changes if the NHS and care home infection spread is controlled and diminished. The time between introducing the first phase and any subsequent phases must be used to effectively deal with the on-going sub-epidemics around hospitals and care homes".

6. On the impact of the minor and technical changes to the existing regulations (1) clarifications to put things beyond legal doubt - allowing people to leave home to use click-and-collect services and waste and recycling centres, ensuring key workers are able to stay in hotel accommodation, and being clear that garden centres can open; and (2) easing restrictions to enable people to move home, and to facilitate doing so, in a wider range of circumstances, advice drawn from SAGE advice and approved by GCSA, co-chair of SPIM and CSA for HSE is as follows:

"There is little relevant detail in the proposed measures on which to base scientific advice and the proposals are too granular for any form of modelling. As such we would reiterate previous advice including:

The overall reproduction number, R is in the range 0.5-0.9. In some parts of the country hospital admissions are no longer falling and there may be very little leeway to encourage additional social contacts. All of the proposed measures could potentially increase R and hence prevalence and this will be dependent on the scale and nature of additional social contacts that would arise as these measures were implemented.

Any practice that could lead to increased social contact should be accompanied by measures, guidance and communications to encourage social distancing and hygiene in line with previous advice regarding public spaces and work places. Risk assessments should be completed by those people responsible for managing the risk and this should be based on the exposure during different job activities carried out over a work day, rather than considering by location, organisation or industry sector."