A TIMELINE OF THE PLAGUE YEAR: A COMPREHENSIVE RECORD OF THE UK GOVERNMENT’S RESPONSE TO THE CORONAVIRUS CRISIS

IAN SINCLAIR
RUPERT READ

Edited by
JOANNA BOOTH
Endorsements

‘Sinclair and Read have done something really important here: they have assembled a detailed record of the responses to Covid since it hit the UK. Equipped with this information, readers can make their own minds up about who is responsible for the disaster that has unfolded since March 2020. This ’neutral’ fact-based approach might succeed where other approaches have failed: finding a way of convincing those who remain uncertain or skeptical about the Government's culpability for this monstrous tragedy. When you read this clear, factual timeline of events with an unprejudiced eye, it is impossible to avoid the conclusion that the Government response was often complacent, mistaken, delayed and flawed, causing tens of thousands of avoidable deaths.’ Peter Tatchell, human rights campaigner

‘This timeline is timely! We desperately need to examine and understand what the government did and did not do in the face of this pandemic. We need to know were they negligent, incompetent or worse - that is, guilty of pursuing policies that endangered the population? This book helps us decide. Please read it. Our lives depend on it. It might happen again.’ Michael Rosen, poet, and author of Many Different Kinds of Love: A Story of Life, Death and the NHS
'Rupert Read and Ian Sinclair clinically expose a failure of the state to protect the citizen through lack of preparedness, indecision and delay that has led to the worst loss of life in this country since the Second World War. Their timeline pulls no punches and spares no reputations. It will form part of the framework that will help us understand what happened to us and create accountability for those that held that power. The truth contained in this stark timeline is also a warning of how we must do so much more to prepare for the existential crises to come in future years. We are all survivors now and this contribution will support us on the road we will all have to take for truth and justice in our collective healing from the pandemic.'    

Andy Towler, retired senior police officer with a deep background in dealing with disaster and emergency who worked as strategic adviser to the police lead for Civil Contingencies and as part of the wider UK Govt response to Covid-19

'Sinclair and Read's timeline is a comprehensive, exhaustively documented accounting of the full history of the UK government's response to the global pandemic. Incorporating every significant event, incident, and process including facts often given little or no attention by traditional media outlets since the prior to the beginning of the pandemic until early 2021, this book is an essential resource for anyone who wants to understand exactly how the UK ended up with the worst of all worlds - one of the highest COVID19 death rates along with the worst economic performance in the world. It offers a simple, powerful and reliable chronology of events that transcends political polarities and ideological biases. A must read for journalists, policymakers, lawyers, concerned citizens, public health experts and future historians.' Dr Nafeez Ahmed, Special Investigations Reporter, Byline Times

'The UK handling of the COVID-19 pandemic has been nothing short of disastrous with many thousands of unnecessary lives lost and families left grieving for loved ones. At some point the British government will have to be held to account. Here, Sinclair, Read and Booth have provided what is destined to become a key source for the legal battles ahead and for historians seeking to understand how things went so badly wrong in the country that has always led the world in effective public health interventions. Never again must we be caught out as we were in
2020. This important work should enable the real lessons of the pandemic to be learned and an accountable and effective public health system rebuilt from the ashes of an avoidable catastrophe.’ **Professor John Ashton, author of Blinded by Corona: How the Pandemic ruined Britain’s Health and Wealth and What to do about it**

‘With the success of the vaccination programme, the fear of mass deaths is fading. But unless we know how we ended up with the highest death rate in the world we cannot hold our government to account or make the necessary changes to prevent another public health catastrophe. This detailed timeline of what went wrong and when is a vital part of the accountability process.’ **Professor Molly Scott Cato, former-MEP**
'The struggle of man against power is the struggle of memory against forgetting'

– Milan Kundera
About the Authors

Professor Rupert Read is an expert on the Precautionary Principle, and co-author with Nassim Taleb et al of The Precautionary Principle. He writes regularly on the pandemic from this perspective, most notably in Byline Times. His most recent book is Parents for a Future: How Loving our Children can Stop Climate Collapse, with UEA Press.


Joanna Booth is a book editor and freelance journalist working primarily on local council stories. She has worked in higher education and as a data analyst. She currently writes at ephemeraldigest.co.uk.
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<th>Abbreviation</th>
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<td>ADPH</td>
<td>Association of Directors of Public Health</td>
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<td>BAME</td>
<td>Black, Asian and Minority Ethnic</td>
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<td>BEIS</td>
<td>Business, Energy and Industrial Strategy</td>
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<td>BMA</td>
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<td>Care Quality Commission</td>
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<td>Department of Health and Social Care</td>
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<td>Do Not Resuscitate</td>
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<td>Data Protection Impact Assessment</td>
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<td>High Consequence Infectious Disease</td>
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RCN Royal College of Nursing
RCP Royal College of Physicians
SAGE Scientific Advisory Group for Emergencies
SARS Severe Acute Respiratory Syndrome
TTI Test, Trace and Isolate
TUC Trades Union Congress
UCL University College London
UEA University of East Anglia
UEFA The Union of European Football Associations
VCP Vaccine Confidence Project
WHO World Health Organization
Introduction

‘They really are scared that the verdict of history is going to condemn them for contributing to the deaths of tens of thousands of British citizens. They are desperately trying to rewrite the timeline of what happened. And we must not let them do that.’

Richard Horton, Editor-in-Chief of The Lancet, April 2020

The impetus for this book came from a sense Rupert had, in February–March 2020, of the then-emerging coronavirus pandemic in the UK as being, in the words of Richard Horton, a ‘national scandal’, especially when compared to the appropriately rapid and precautious response to Covid-19 that occurred in many other island states (such as Taiwan and New Zealand). After being invited by Rupert on 1 April 2020 to join him in compiling a timeline of the crisis, Ian led on developing the content of the timeline, and Rupert added to it and arranged for its publication in what is becoming a keystone of alternative media in this country, the Byline Times.

The original timeline published by Byline Times was also borne out of a realisation and frustration the media were failing to hold the government to account, and failing to educate the public about the dangers the
virus presented to the nation. Like many people, in the first weeks of the crisis, journalists and newspapers seemed stunned by the sheer speed of events and the paradigm shift politics and society were undergoing. Arguably too, as with previous national crises, much of the media were very sympathetic to the government’s position in the early part of the pandemic.

To highlight just one egregious example from the liberal, critical end of the mainstream press, on 14 March 2020, the *Guardian* published a full-page article titled ‘Which activities are safe and which should people avoid?’ written by science correspondent Hannah Devlin. Paul Hunter, professor in medicine at the University of East Anglia, is quoted extensively in the piece, saying he would not stop visiting his elderly relatives, that it was OK to visit the pub, and that from the perspective of individual risk there was not a strong argument for avoiding big sporting events. Just over a week after this reckless journalism was published, the Prime Minister announced an unprecedented national lockdown.

Of course, there have been many important and critical news reports – much of our timeline is made up of them, after all – but to quote Edward Herman and Noam Chomsky, ‘That a careful reader looking for a fact can sometimes find it with diligence and a sceptical eye tells us nothing about whether that fact received the attention and context it deserved, whether it was intelligible to the reader or effectively distorted or suppressed.’

After the *Byline Times* piece received a lot of positive attention on Twitter and elsewhere, Ian and Rupert agreed to continue to update the timeline. And with the media performance improving in March 2020, the aim shifted a little – from highlighting critical information being ignored by the media to compiling the most comprehensive record of the government’s response to the pandemic. The plan was to create a detailed account of the pandemic, which would be useful to anyone interested in following the key events of the crisis as it progressed, and also to historians studying the pandemic in the future. It was agreed the timeline would, as much as possible, be based on mainstream sources (the press, television and radio news, medical journals, health experts and organisations, trade unions, polling organisations, etc.), and presented in a broadly neutral manner to allow the reader to make up
their mind about events. Nicholson Baker’s 2008 book *Human Smoke: The Beginnings of World War II, the End of Civilization* was a key influence on Ian when it came to considering the format and tone of the timeline.

Accordingly, since April 2020 the timeline has been updated every week and, for simplicity and speed, published on Ian’s Medium blog.⁶ Others have compiled timelines at various stages of the crisis – Led By Donkeys created an impressive timeline,⁷ audaciously projecting it onto Barnard Castle – but true to our aim we are confident our timeline is by some distance the most comprehensive record of the government’s response to the pandemic in the UK.

Joanna contacted Ian and Rupert in late 2020 suggesting the timeline be made into an eBook. Documenting the events in a book was important not only as evidence but for posterity, Joanna believed. This was public knowledge that needed to be kept safe.

For context, this introduction has been added, along with short introductions, summarising key events at the start of each month, and a conclusion written by Rupert. The timeline ends at 30 March 2021. The entries in the timeline nearly all appear at the time they took place. Sometimes reports on events were not published until afterwards, so an event that took place in 2016, such as Operation Cygnus, appears in 2016, rather than when the report was published. To make the timeline more accessible and more navigable, key words and concepts have been highlighted throughout the text – e.g. ‘herd immunity’, ‘care homes’ etc. A glossary of these key words can be found at the back of the book.

There is a paperback and eBook version of the text available. Each entry in the timeline has a link showing where it was sourced. The eBook contains clickable URLs that link to the sources cited. On occasion there is a source that is not available as a web reference. The paperback contains references for each entry. Each link has been reproduced and referenced at the end of the book in the ‘Notes’ section.
As the pandemic began to spread in the UK and overwhelm the National Health Service, it quickly became apparent that the ability of the government and society to respond to the crisis was hampered by policies implemented over a decade ago. Sir David King, the former chief scientific adviser, explained how the public spending cuts imposed by the 2010-15 Conservative-Liberal Democrat government had cost lives, while the results of large-scale training sessions and reports on responding to a pandemic were repeatedly ignored by the government.

2010-19: ‘Several emergency planners and scientists said that the plans to protect the UK in a pandemic had once been a top priority and had been well-funded for a decade following the 9/11 terrorist attacks in 2001,’ the recent expose in the Sunday Times reports. ‘But then austerity cuts struck. “We were the envy of the world,” the source said, “but pandemic planning became a casualty of the austerity years when there were more pressing needs”’ (Sunday Times).1

‘It goes right back to 2010, when the government came in with a very clear policy to reduce public spending across the board, including the National Health Service,’ Sir David King tells LBC Radio when asked
about the UK’s response being slower than in other countries. ‘I’m afraid these austerity measures did lead to the cutting back on the risk management programmes.’ Presenter Nick Ferrari asks whether ‘austerity measures cost lives?’ Professor King replies, ‘Absolutely. That is what I’m saying’ (*Independent*).²

‘Bill Morgan, an adviser to then-health secretary Andrew Lansley, who sat in on many pandemic planning discussions in the UK’s 2010–15 coalition government, said, “I can’t recall anyone raising the possibility of a non-flu pandemic, and we need to understand why that was because our future contingency plans need to cover everything with pandemic potential”’ (*Financial Times*).³

Commenting on the challenge of Covid-19 to the NHS, Dr Samantha Batt-Rawden, co-founder of the Doctors’ Association, says, ‘we cannot ignore the state the NHS has been left in by this government. After years of short-staffing, our health service is much less equipped to deal with this pandemic while continuing to provide care for non-Covid-related illness or injury’ (*Guardian*).⁴

‘I think much of the readiness within the state had disappeared by the time the pandemic hit,’ Professor Gabriel Scally, President of Epidemiology and Public Health at the Royal Society of Medicine and a member of *Independent SAGE*, tells the first session of the People’s Covid Inquiry. ‘From 2010 onwards, in particular, there was a hollowing out of the state to the structures and organisation of many of the relevant services. And, the NHS of course moved too with the reforms to a commissioning and contracting model. The public health structure ... and local authority had a much-reduced role and much-reduced resources’ (*Morning Star*).⁵

After interviewing dozens of public health directors, politicians, experts in infectious disease control, government scientific and political advisers, NHS leaders and emergency planners, a *Guardian* investigation reveals that in the years leading up to the pandemic the ‘infrastructure that was once in place to respond to public health crises was fractured, and in some places demolished, by policies introduced by recent Conservative governments, with some changes going as far back as Labour’s years in power.’ Approximately 32,000 overnight beds had
been taken out of hospitals in England in just over a decade, including some lost under Labour. This number is roughly the same as the beds the NHS had to scramble to free up for Covid-19 patients, Allyson Pollock, Professor of Public Health at Newcastle University, notes (Guardian).  

October 2011: Boris Johnson says his political hero is Larry Vaughn, the fictional mayor of Amity Island in the 1975 film Jaws who keeps the beaches open despite evidence of shark attacks (Politico).

October 2016: Exercise Cygnus, a three-day training on how to deal with a pandemic, is carried out, involving all major government departments, the NHS and local authorities. ‘It showed gaping holes in Britain’s Emergency Preparedness, Resilience and Response plan.’ A report on the exercise has never been published, with a senior former government source with direct involvement saying the findings were deemed ‘too terrifying’ to be revealed. ‘There was not enough personal protective equipment (PPE) for the nation’s doctors and nurses. The NHS was about to “fall over” due to a shortage of ventilators and critical care beds,’ the Telegraph explains about the exercise. A senior academic directly involved in Exercise Cygnus and the current pandemic said, ‘These exercises are supposed to prepare government for something like this — but it appears they were aware of the problem but didn’t do much about it’ (Sunday Telegraph).

Publishing the report — which had been circulated within Whitehall — on 7 May 2020, the Guardian notes, ‘it contained 26 key recommendations, including boosting the capacity of care homes and the numbers of staff available to work in them. It also warned of the challenge facing homes asked to take in patients from hospitals.’ Martin Green, the chief executive of Care England, which represents the largest independent care home providers, commented, ‘It beggars belief. This is a report that made some really clear recommendations that haven’t been implemented. If they had put in place a response to every one, we would have been in a much better place at the start of this pandemic’ (Guardian).
**June 2017:** ‘The Department of Health rejected high-level medical advice about providing NHS staff with certain protective equipment during an influenza pandemic because stockpiling it would be too expensive,’ the *Guardian* reports. ‘Documents show that officials working under former health secretary Jeremy Hunt told medical advisers three years ago to “reconsider” a formal recommendation that eye protection should be provided to all healthcare professionals who have close contact with pandemic influenza patients. The expert advice was watered down after an “economic assessment” found a medical recommendation about providing visors or safety glasses to all hospital, ambulance and social care staff who have close contact with pandemic influenza patients would ‘substantially increase’ the costs of stockpiling’ (*Guardian*).¹⁰

**14 September 2017:** National Risk Register of Civil Emergencies published by the Cabinet Office. The report notes ‘there is a high probability of a flu pandemic occurring’ with ‘up to 50% of the UK population experiencing symptoms, potentially leading to between 20,000 and 750,000 fatalities and high levels of absence from work’ (*Cabinet Office*).¹¹

**2018:** The Association of Directors of Adult Social Services (Adass) warns the government, in a series of reports, about care homes’ exposure to a pandemic, the *Guardian* reports. ‘They called for better supply plans for personal protective equipment — warning that ‘demand for PPE could rapidly outstrip supply’ — plus improved infection control and a system to enlist volunteers to help services expected to be stretched to breaking point.’ Adass comments, ‘We are not aware of whether government departments picked up on any of the recommendations set out’ (*Guardian*).¹²

**30 July 2018:** UK Biological Security Strategy published, addressing the threat of pandemics. It ‘was not properly implemented, according to a former government chief scientific advisor... Prof Sir Ian
Boyd, who advised the environment department for seven years until last August and was involved in writing the strategy, said a lack of resources was to blame’ (Guardian).

2019: ‘Ministers were warned... the UK must have a robust plan to deal with a pandemic virus and its potentially catastrophic social and economic consequences in a confidential Cabinet Office briefing leaked to the Guardian.’ The report’s recommendations included ‘the need to stockpile PPE (personal protective equipment), organise advanced purchase agreements for other essential kit, establish procedures for disease surveillance and contact tracing, and draw up plans to manage a surge in excess deaths’ (Guardian).

July 2019: ‘Boris Johnson scrapped a team of Cabinet ministers tasked with protecting the UK from a pandemic six months before coronavirus arrived,’ the Daily Mail reveals. The group, officially known as the Threats, Hazards, Resilience and Contingency Committee, a subcommittee of the National Security Council and attended by senior ministers including Michael Gove, Matt Hancock and Gavin Williamson, was ‘disbanded without discussing virus control plans... as part of a vow to streamline Whitehall’ (Daily Mail).

31 December 2019: Reuters reports, ‘Chinese health authorities said they are investigating 27 cases of viral pneumonia in the central city of Wuhan, after rumors on social media suggested the outbreak could be linked to Severe Acute Respiratory Syndrome (SARS)’ (Reuters).

Officials in Taiwan begin to board planes and assess passengers on direct flights from Wuhan for fever and pneumonia symptoms before passengers deplane (JAMA).
January 2020

Following reports in early January of a deadly new virus emerging in China and the Chinese government introducing a lockdown in Wuhan province on 23 January, on 30 January the World Health Organisation declared the new coronavirus a ‘public health emergency of international concern’ - the highest level of alert that WHO can issue.

January–February 2020: Boris Johnson misses five emergency COBRA meetings on coronavirus (Sunday Times).¹

Responding to the story on 19 April on the BBC's The Andrew Marr Show, senior government member Michael Gove says missing COBRA meetings is normal for a Prime Minister. The Guardian notes, ‘Gove is correct in that prime ministers do not always, or even routinely, chair COBRA meetings. But it is common for them to do so during a major crisis’ (Guardian).²

2 January 2020: ‘Chinese authorities have launched an investigation into a mysterious viral pneumonia which has infected
dozens of people in the central city of Wuhan (BBC News).³

5 January 2020: The World Health Organization shares detailed information about a cluster of cases of pneumonia of unknown cause in China through the IHR (2005) Event Information System, which is accessible to all Member States. According to the WHO ‘the event notice provided information on the cases and advised Member States to take precautions to reduce the risk of acute respiratory infections’ (WHO).⁴

Officials in Taiwan begin monitoring any individual who has travelled to Wuhan in the past 14 days and has a fever or symptoms of upper respiratory tract infection at the point of entry. Suspected cases are ‘screened for 26 viruses including SARS and Middle East respiratory syndrome (MERS). Passengers displaying symptoms of fever and coughing were quarantined at home and assessed whether medical attention at a hospital was necessary’ (JAMA).⁵

Mid-January 2020: ‘From about mid-January onwards, it was absolutely obvious that this was serious, very serious,’ notes John Edmunds, a professor of infectious disease modelling and a key adviser to the government (Reuters).⁶

16 January 2020: Professor Devi Sridhar, chair of Global Public Health at University of Edinburgh, tweets, ‘Been asked by journalists how serious #WuhanPneumonia outbreak is. My answer: take it seriously bc of cross-border spread (planes means bugs travel far & fast), likely human-to-human transmission & previous outbreaks have taught over-responding is better than delaying action’ (Devi Sridhar).⁷

17 January 2020: Writing for Byline Times, Nafeez Ahmed and Rupert Read reveal an official Government document published on 17 January confirms that, by delaying action in response to the Coronavirus, officials breached their own internal cross-government standards
concerning risks to ‘human, animal or plant health’. According to the ‘internal guidance on assessing risks to health, the demand for scientific consensus or certainty sets the bar too high. In a situation where there is a potentially severe threat, the ‘precautionary principle’ indicates the need for a determination to act rapidly in taking far-reaching precautions against a threat’ (*Byline Times*).\(^8\)

21 January 2020: ‘**China’s health ministry has confirmed** human-to-human transmission of a mysterious Sars-like virus that has spread across the country and fuelled anxiety about the prospect of a major outbreak as millions begin travelling for lunar new year celebrations’ (*Guardian*).\(^9\)

23 January 2020: **China implements a lockdown in Wuhan** province, the centre of the outbreak. All transport into and out of the city is stopped (with no exceptions even for personal and medical emergencies), shops, schools and universities are closed, public transport halted, and private vehicles barred from the roads without special permission (*Guardian*).\(^10\)

24 January 2020: A group of **Chinese doctors and scientists** publish an article in the *Lancet* medical journal titled ‘Clinical Features of Patients Infected With 2019 Novel Coronavirus in Wuhan, China’ (*Lancet*).\(^11\)

According to Devi Sridhar, chair of global public health at the University of Edinburgh, the study showed ‘that a third of patients require admission to intensive care, and 29% get so bad that they need ventilation’ (*Guardian*).\(^12\)

‘The risk to the public remains low’ from coronavirus, Health Secretary Matt Hancock explains after the day’s COBRA meeting (*Reuters*).\(^13\)

Professor Neil Ferguson, from Imperial College’s School of Public Health, submits a report to ministers and officials estimating infectivity at 2.6 and possibly as high as 3.5. ‘The Spanish flu had an estimated
infectivity rate of between 2.0 and 3.0, so Ferguson’s finding was shocking.’ Ferguson’s report also said ‘there needed to be a 60% cut in the transmission rate — which meant stopping contact between people. In layman’s terms it meant a lockdown’ (*Sunday Times*).¹⁴

Ferguson’s report notes: ‘Given the increasing evidence for human-to-human transmission, enhancing rapid case detection will be essential if the outbreak is to be controlled’ (Imperial College).¹⁵

Taiwan announces a month-long export ban on surgical and N95 masks, which it renews over the coming months (*Taiwan News*).¹⁶

**26 January 2020**: Nassim Taleb and two colleagues publish a note with the New England Complex Systems Institute urging a robust precautionary response to the outbreak. ‘Policy- and decision-makers must act swiftly and avoid the fallacy that to have an appropriate respect for uncertainty in the face of possible irreversible catastrophe amounts to “paranoia”, or the converse a belief that nothing can be done,’ they conclude (New England Complex Systems Institute).¹⁷

Taiwan suspends travel from China, with some exceptions such as business travellers and people married to Taiwanese (*Star*).¹⁸

**28 January 2020**: Minutes from the day’s *SAGE* meeting notes: ‘There is limited evidence of asymptomatic transmission, but early indications imply some is occurring. PHE developing a paper on this’ (*Financial Times*).¹⁹

**30 January 2020**: The *World Health Organization* (WHO) declares Coronavirus a ‘public health emergency of international concern’ (*Guardian*).²⁰

‘That is the highest level of alert that WHO can issue, and it issued it on January 30. It made it very clear then — to every country in the world — that we were facing something very serious indeed’, says David
Nabarro, Professor of Global Health at Imperial College, London, and an envoy for the WHO on Covid-19 (Guardian).\textsuperscript{21}

The Government raises the threat level from low to moderate (Sunday Times).\textsuperscript{22}

\textbf{31 January 2020:} Professor Joseph Wu, from the School of Public Health at the University of Hong Kong, co-authors an article in the\textit{ Lancet} medical journal about the Coronavirus outbreak in China. The authors note, ‘Independent self-sustaining outbreaks in major cities globally could become inevitable because of substantial exportation of presymptomatic cases and in the absence of large-scale public health interventions. Preparedness plans and mitigation interventions should be readied for quick deployment globally’ (\textit{Lancet}).\textsuperscript{23}

‘British officials took part in four meetings where EU projects to bulk-buy medical kit were discussed – the earliest in January, according to official minutes … At this [31 January 2020] meeting, four EU member states said the virus could require increased stocks in Europe of personal protective equipment (PPE) such as gloves, masks and goggles, and the commission said it was ready to help if asked… the UK had decided not to participate in any of four EU procurement schemes to buy medical equipment in response to the coronavirus crisis’ (Guardian).\textsuperscript{24}

‘By this time… scientists at the London School of Hygiene and Tropical Medicine had confirmed to [chief medical officer Chris] Whitty in a private meeting of the Nervtag advisory committee on respiratory illness that the virus’s infectivity could be as bad as [Professor Neil] Ferguson’s worst estimate several days earlier [on 24 January]’ (Sunday Times).\textsuperscript{25}

\textbf{End of January 2020:} A senior politician tells the Sunday Times: ‘I had conversations with [chief medical officer] Chris Whitty at the end of January and they were absolutely focused on herd immunity. The reason is that with flu, herd immunity is the right response if you haven’t got a vaccine’ (Sunday Times).\textsuperscript{26}
The UK government’s response during the early months is emblematic of their (in)actions during the whole pandemic – arrogantly ignoring the dire warnings of their own scientific advisers, a disinterested and slow-to-act prime minister, and the concept of ‘herd immunity’ seemingly underpinning policy-making.

3 February 2020: Speaking in Greenwich, the Prime Minister says there is ‘a risk that new diseases such as coronavirus will trigger a panic and a desire for market segregation that go beyond what is medically rational to the point of doing real and unnecessary economic damage.’ At this moment, ‘humanity needs some government somewhere that is willing at least to make the case powerfully for freedom of exchange, some country ready to take off its Clark Kent spectacles and leap into the phone booth and emerge with its cloak flowing as the supercharged champion, of the right of the populations of the earth to buy and sell freely among each other... I can tell you in all humility that the UK is ready for that role,’ the Prime Minister says (Prime Minister’s Office, 10 Downing Street).
'Papers published by the SAGE group of scientific experts... showed that its modelling group SPI-M-O suggested... that restricting travel from badly hit areas, including China, could delay the onset of the disease in the UK by up to a fortnight' (Guardian).\(^2\)

Discussing potential travel restrictions, SAGE ‘estimates – with limited data – that if the UK reduces imported infections by 50%, this would maybe delay the onset of any epidemic in the UK by about 5 days; 75% would maybe buy 10 additional days; 90% maybe buys 15 additional days; 95%+ maybe buys a month...Only a month of additional preparation time for the NHS would be meaningful’ (SAGE).\(^3\)

6 FEBRUARY 2020: A BUSINESSMAN FROM HOVE IS IDENTIFIED AS the source of the second UK outbreak. ‘Public Health England failed to take advantage of our early breakthroughs with tests and lost early opportunities to step up production to the levels that would later be needed,’ the Sunday Times reports. ‘This was in part because the government was planning for the virus using its blueprint for fighting the flu [rather than a coronavirus]. Once a flu pandemic has found its way into the population and there is no vaccine, then the virus is allowed to take its course until **herd immunity** is acquired. Such a plan does not require mass testing’ (Sunday Times).\(^4\)

10 FEBRUARY 2020: THE SCIENTIFIC PANDEMIC INFLUENZA Modelling committee (SPI-M) warns there is ‘a realistic probability that there is already sustained transmission in the UK, or that it will become established in the coming weeks’ (Times).\(^5\)

11 FEBRUARY 2020: ROBERT PESTON, ITV NEWS’S POLITICAL Editor, reports that he emailed colleagues telling them a senior government source had told him ‘we should know within a fortnight or so if we are looking at a pandemic in the UK...The risk is 60% of population getting it. With mortality rate of perhaps just over 1%, we are looking at not far off 500k deaths’ (Robert Peston).\(^6\)
Steve Oldfield, Chief Commercial Officer at the Department of Health and Social Care, writes a letter reassuring staff that the ‘NHS and wider health system are extremely well prepared for these types of outbreaks’ (Financial Times).\(^7\)

**12 February 2020:** ‘A report presented to the Government’s Scientific Advisory Group for Emergencies (SAGE)... when the UK was still actively tracing contacts of those infected with Covid-19, recommended a 10-fold increase in Public Health England’s test-and-trace capacity in order to extend the number of cases that could be managed,’ the Guardian reports. ‘Scaling this response up, using for example a call-centre type system to support the local PHE teams, should be possible and feasible,’ the experts from Public Health England and the University of Cambridge recommended. The Guardian notes ‘this suggestion does not appear to have been pursued and contact tracing was abandoned in March’ (Guardian).\(^8\)

**13 February 2020:** Between 13 February and 30 March the UK misses a total of eight conference calls or meetings about Coronavirus between EU heads of state or health ministers (Reuters).\(^9\)

**18 February 2020:** Minutes from the day’s SAGE meetings note ‘Currently PHE [Public Health England] can cope with five new cases a week (requiring isolation of 800 contacts). Modelling suggests this capacity could be increased to 50 new cases a week (8,000 contact isolations) but this assumption needs to be stress tested with PHE’. The minutes also note, ‘To better understand asymptomatic cases, more comprehensive swabbing of returning global travellers during isolation would be useful’ (SAGE).\(^10\)

An NHS briefing for primary care workers obtained by the Financial Times says that PPE ‘should not be needed’ when dealing with Covid-19 patients, who would be isolated as part of a strategy to contain the spread of the disease. The briefing added that there was a ‘large stock of
face masks’ and that ‘additional orders for PPE’ had been placed with wholesalers (Financial Times).¹¹

**21 February 2020:** A ‘key government committee, the New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG), concluded on 21 February, three weeks after the World Health Organization had declared a public health emergency of international concern, that they had no objection to Public Health England’s “moderate” risk assessment of the disease to the UK population’, Richard Horton, editor-in-chief of the Lancet journal, notes in the Guardian. ‘That was a genuinely fatal error of judgement’ (Guardian).¹²

Minutes of the NERVTAG meeting suggest ‘that up to 1.3 million people could die in a “reasonable worst-case” scenario from the Covid-19 pandemic – yet no lockdown was declared until three weeks later,’ Nafeez Ahmed reveals (Byline Times).¹³

**24 February 2020:** At a press conference in Beijing the WHO-China Joint Mission on Covid-19 highlights how China ‘rolled out probably the most ambitious, and I would say, agile and aggressive disease containment effort in history’ to fight the spread of Coronavirus (WHO).¹⁴

PHE National Infection Service issues guidance for coronavirus ‘suggesting it was not safe to discharge untested individuals to care homes from hospitals where there was an outbreak of 5-25 cases,’ the Telegraph reveals. The guidance advises there should be ‘no discharges to care or residential homes,’ adding, ‘Patients who are not cases, do not have Covid-19 compatible symptoms and are medically fit for discharge could be discharged to own home with isolation/household quarantine’ (Telegraph).¹⁵

Rupert Read sends a briefing to a senior member of the government, urging the adoption of the kind of strong precautionary measures laid out in Taleb et al’s 24 January note. The government response to Read is non-committal.
25 February 2020: SAGE notes, ‘Evidence from social distancing and school closures implemented in Hong Kong, Wuhan and Singapore indicates that these measures can reduce the Covid-19 reproduction number to approximately 1 (a 50-60% reduction). Reduced spread in the UK through a combination of these measures was assessed to be realistic’ (SAGE).\(^{16}\)

PHE issue advice to care homes about the spread of coronavirus, noting ‘It remains very unlikely that people receiving care in a care home or the community will become infected.’ The advice is later withdrawn (Mirror).\(^{17}\)

The PHE advice also notes ‘there is currently no transmission of COVID-19 in the community’ and face masks ‘do not need to be worn by staff’ in ‘normal day-to-day activities’ (PHE).\(^{18}\)

26 February 2020: A memo from the government’s National Security Communications Team warns that in a worst-case scenario half a million Britons could die from Coronavirus (Mirror).\(^{19}\)

John Edmunds, one of the country’s top infectious disease modellers, and his team from the London School of Hygiene and Tropical Medicine, present their ‘latest “worst scenario” predictions to the Scientific Pandemic Influenza Group on Modelling (SPI-M) which directly advises the country’s scientific decision-makers on SAGE’, the Sunday Times reports. ‘It warned that 27 million people could be infected and 220,000 intensive care beds would be needed if no action were taken to reduce infection rates. The predicted death toll was 380,000. Edmunds’s colleague Nick Davies, who led the research, says the report emphasised the urgent need for a lockdown almost four weeks before it was imposed’ (Sunday Times).\(^{20}\)

A paper – titled ‘Potential effect of non-pharmaceutical interventions (NPIs) on a Covid-19 epidemic in the UK’ – prepared for SAGE highlights a strategy of shielding vulnerable groups from the virus: ‘The majority of the population would then develop immunity, hopefully preventing any second wave, while reducing pressure on the NHS. However, SPI-MO [Scientific Pandemic Influenza Group on Modelling
- Operational sub-group] has not looked at the likely feasibility or effectiveness of such methods' (SAGE).

**27 February 2020:** The minutes from the day’s SAGE meeting note that ‘SAGE reviewed Covid-19 planning assumptions and advised that, in the reasonable worst case scenario, 80% of the UK population may become infected, with an overall 1% fatality rate in those infected. Only a proportion of those infected will experience symptoms. This fatality rate represents a reduction in the number of excess deaths relative to previous planning assumptions (in which a case fatality rate of 2-3% was based purely on identified cases rather than all infected individuals)’ (SAGE).

The minutes also conclude, ‘Modelling suggests that earlier and/or combined interventions will have more significant impact. Such interventions would have to be maintained for an extended period’ (SAGE).

**28 February 2020:** An article published in *Lancet Global Health* concludes, ‘In most scenarios, highly effective contact tracing and case isolation is enough to control a new outbreak of COVID-19 within 3 months. The probability of control decreases with long delays from symptom onset to isolation, fewer cases ascertained by contact tracing, and increasing transmission before symptoms (*Lancet Global Health*)).

‘An early study from China submitted to the World Health Organisation was published and linked to on its website, which indicated that the coronavirus can be transmitted by asymptomatic carriers’ (*New Statesman*).

**29 February 2020:** First recorded case of local transmission in the UK (*BBC News*).

France bans all indoor gatherings of more than 5,000 people (*BBC News*).
Late February 2020: According to a Sunday Times report, at a private event Dominic Cummings, the Prime Minister’s chief adviser, outlined the government’s strategy at the time in a way that was summarised by someone present as ‘herd immunity, protect the economy, and if that means some pensioners die, too bad’ (Guardian).28

Speaking to the Times ‘a source who was advising Downing Street... said that herd immunity was central to the government's plans in late February and early March.’ The source noted, ‘There was always this message coming straight down of, “We’ve all got to get it”’ (Times).29
With the virus spreading quickly across the UK and the government’s scientific advisers and independent experts repeatedly warning the cost of inaction would be 100,000s dead, the government eventually institutes a national lockdown on 23 March. In addition to locking down too late, the government implements a number of fatal policies. On 12 March it announces it would no longer try to ‘track and trace’ everyone suspected of having the virus. The next day it ends the quarantining of people arriving at UK airports from coronavirus hotspots. Thousands of patients are discharged out of hospital to care homes without being tested.

2 March 2020: After chairing his first emergency COBRA meeting (the government’s emergency response committee) on Coronavirus, Prime Minister Boris Johnson says the country is ‘very, very well-prepared’ (Sky News).¹

‘I wish to stress that, at the moment, it’s very important that people consider that they should, as far as possible, go about business as usual’, the Prime Minister says (Sunday Times).²
The SPI-M committee, an official committee set up to model the spread of pandemic flu, publishes a report noting up to four-fifths of the population could be infected and one in a hundred might die – ‘that was a prediction of over 500,000 deaths in this nation of nearly 70 million’ (Reuters).³

3 March 2020: ‘Prime Minister Boris Johnson said... that coronavirus would not stop him greeting people with a handshake, adding that he had shaken the hands of everyone at a hospital where infected patients were being treated’ (Reuters).⁴

‘I was frankly horrified,’ Professor Susan Michie, Director of the UCL Behaviour Change and member of SPI-B, told Channel 4 Dispatches. ‘It seemed very odd for somebody who is in a position of power and a position of influence to be stating something that is so much at odds with not only with common sense but also scientific evidence about transmission’ (Channel 4 Dispatches).⁵

The Prime Minister’s advice was: ‘We should all basically just go about our normal daily lives.’ He also advised: ‘The best thing you can do is to wash your hands with soap and hot water while singing Happy Birthday twice’ (Guardian).⁶

During a press conference the Prime Minister said, ‘Our country remains extremely well prepared. We already have a fantastic NHS, fantastic testing systems and fantastic surveillance of the spread of disease.’ However, ‘the upbeat tone of that briefing stood in sharp contrast with the growing unease of many of the government’s scientific advisers behind the scenes. They were already convinced that Britain was on the brink of a disastrous outbreak’ (Reuters).⁷

‘The government pursued its contain and delay strategy in the first two weeks of March despite strong warnings from its two main modelling teams that it could lead to a catastrophic number of people being killed’, the Sunday Times reports. ‘The teams from Imperial College London and the London School of Hygiene & Tropical Medicine concluded separately that if the mitigation measures under the delay strategy were followed, about 250,000 deaths could result. They delivered papers
detailing those findings to a meeting of SAGE, the Scientific Advisory Group for Emergencies, on March 3 attended by government officials’ (Sunday Times).  

The Government’s action plan is set out in a document from the Department of Health and Social Care that introduced its ‘contain, delay, research, mitigate’ strategy. The document notes ‘if the disease becomes established in the UK... it may be that widespread exposure in the UK is inevitable’ (Sunday Times).  

The SPI-B committee – the Scientific Pandemic Influenza Group on Behaviours – tells SAGE, ‘There was agreement that Government should advise against greetings such as shaking hands and hugging, given existing evidence about the importance of hand hygiene’ (SPI-B committee).  

The WHO Director-General announces ‘globally, about 3.4% of reported COVID-19 cases have died’ (WHO).  

**4 March 2020:** ‘The government has been accused of withholding information about the spread of coronavirus after a 70% increase in confirmed cases prompted health officials to stop providing daily updates on the location of new infections’ (Guardian).  

**5 March 2020:** The Prime Minister floats the idea of ‘herd immunity’ on ITV’s This Morning, saying, ‘one of the theories is, that perhaps you could take it on the chin, take it all in one go and allow the disease, as it were, to move through the population, without taking as many draconian measures.’ He also notes, ‘it should be business as usual for the overwhelming majority of people in this country’ (This Morning).  

Minutes from the day’s meeting of SAGE note, ‘SAGE agreed there is no evidence to suggest that banning very large gatherings would reduce transmission. Preventing all social interaction in public spaces, including restaurants and bars, would have an effect, but would be very difficult to implement’ (SAGE).
Professor Chris Whitty, the chief medical adviser, tells the Commons Health Committee, ‘One of the things which is clear, if you model out the epidemic, is you will get 50% of all the cases over a three-week period and 95% of the cases over a nine-week period, if it follows the trajectory we think it’s likely to.’ One scenario could involve a ‘huge number’ of cases ‘overtopping the ability of the NHS realistically to put everybody in beds’ (Guardian).15

Professor Neil Ferguson ‘says he had already provided the government by early March with estimations of the likely number of deaths if a mitigation strategy was pursued – at least 305,000. This was revised down to 250,000 in the report he published on the 16 March but the NHS would still be over capacity’, BBC News reports. Ferguson notes ‘Our projections of the potential health impact of the pandemic were known from about 5 March onwards’ and ‘actively discussed’ within government. ‘Prof Ferguson says he told SAGE the findings were his best estimate of what was most likely to happen. He says other scientists had reached similar conclusions too’ (BBC News).16

The first official report of somebody dying in hospital having tested positive for Covid-19 caught in the UK came on 5 March. ‘Still, elderly and vulnerable people were not given any advice to shield themselves,’ the Guardian reports. ‘A member of one SAGE advisory committee said that around this time there was a gap between the scientific advice and political messaging. “The prime minister was going around shaking people’s hands to demonstrate that there wasn’t a problem. There was a disconnect at that point. We were all slightly incredulous that that was happening”’ (Guardian).17

Professor Chris Whitty, the chief medical adviser, said it’s ‘highly likely’ the coronavirus is being transmitted in the community (BBC News).18

7 March 2020: The Prime Minister joins the 81,000-strong crowd that watched the England rugby team beat Wales at Twickenham, posting a video on Twitter of himself eagerly shaking hands with five female rugby players (Sunday Times).19
Rupert Read publishes a briefing setting out what a precautionary approach to the outbreak would look like, having sent it to a senior member of the government on 24 February. The briefing urges immediate implementation of measures such as the shutting down of most air travel, treating cold and flu symptoms presumptively as coronavirus symptoms and shutting down places where the old or medically-vulnerable are likely to exposed to the virus (Rupert Read).²⁰

The *Guardian* notes the mortality rate of Covid-19 is ‘probably about or a bit less than 1%. Much higher figures have been flying about, but the UK’s chief medical officer, Chris Whitty, is one of those who believes it will prove to be 1% or lower’ (*Guardian*, 7 March).

**8 March 2020:** ‘On Sunday, March 8, France banned public gatherings of more than 1,000 people but that same day thousands of French fans were allowed to mingle in the 67,000 crowd at Murrayfield, Edinburgh, for their [rugby] team’s game with Scotland’ (*Sunday Times*).²¹

With much of northern Italy going into lockdown and calls growing in the UK for tough measures to get rising cases under control, a ‘senior government source’ briefs ITV’s Political Editor Robert Peston, telling him ‘the Italians did several of the populist – non-science based – measures that aren’t any use. They’re who not to follow’ (*Robert Peston*).²²

**Early-mid-March 2020:** In the face of government inaction, large numbers of institutions, organisations and individuals across the UK move to cancel or postpone public events, or hold them remotely, including the Six Nations Championship and the Premier League (*Independent*).²³

**9 March 2020:** A report that appears ‘to be written for the modelling group which feeds into the government’s scientific advisers, SPI-M... warns that the UK government should abandon its mitigation approach for intense control measures – such as lockdown – in response to the Covid-19 epidemic’, *Channel 4 News* reports. ‘The paper,
by Steven Riley, professor at Imperial College London, finds that mitigation — the strategy the government was following at the time — would lead to 1.7 million deaths’ (Channel 4 News).

‘There is a risk if we go too early [with more measures to fight the virus] people will understandably get fatigued and it will be difficult to sustain this over time,’ Chief Medical Officer Chris Whitty says, speaking at a Downing Street press conference. ‘There was talk of behavioural fatigue, as if we have only got, psychologically, a certain span when we will put up with these things and therefore there is no point putting them in place early... it was just plain wrong’, comments Stephen Reicher, Professor of Social Psychology at the University of St Andrews and member of SPI-B (Channel 4 Dispatches).

Sir Patrick Vallance, the chief scientific adviser, says, ‘measures that people look at — mass gatherings and so on — actually don’t make much difference’ (Financial Times).

A report from the government’s Scientific Advisory Group for Emergencies, SAGE, recommends, with no dissension recorded in its summary, that the UK reject a China-style lockdown (Reuters).

Helen Ward, Professor of Public Health at Imperial College London, notes the 9 March government report ‘Potential impact of behavioural and social interventions on an epidemic of Covid-19 in the UK’ ‘did not consider the impact of case-finding and contact-tracing, but it did suggest that the biggest impact on cases and deaths would come from social distancing and the protection of vulnerable groups. And yet social distancing was not recommended then.’ The government waited seven days before recommending distancing on 16 March. ‘But there was still no enforcement, and it was left up to individuals and employers to decide what to do,’ Ward notes (Guardian).

10-13 March 2020: The government allows the Cheltenham Festival to take place, with over 60,000 people attending each day. Since then, a number of racegoers have been diagnosed with Coronavirus (Guardian).
The Cheltenham area ends up being one of the worst-affected parts of the whole UK with the coronavirus (*Metro*).  

‘If you think of the best way to spread a virus, it would be: bring 250,000 people together from around the country, get them crowding together to watch a horse race,’ Sir David King, former chief scientific adviser, tells *BBC File On 4*. He describes the decision to allow the festival to go ahead as ‘reckless’ and ‘foolhardy’ (*BBC File On 4*).  

**10 March 2020**: ‘The government was accused of playing roulette with the public by the editor-in-chief of the *Lancet* medical journal. Dr Richard Horton called for the “urgent implementation of social distancing and closure policies”’ (*Guardian*).  

The minutes of the day’s SAGE meeting notes ‘SAGE advised that special policy consideration be given to care homes and various types of retirement communities’ (*SAGE*).  

Official figures suggest there had been a total of 913 cases. A November 2020 BBC investigation notes experts estimate there were in fact 75,000 cases (*BBC News*).  

**11-15 March 2020**: The all-England Badminton Championships are held in Birmingham, attracting 300 players and more than 25,000 spectators from around the world, including China, Malaysia, Denmark, Taiwan, India and Indonesia (*BBC File On 4*).  

**11 March 2020**: WHO declares a Coronavirus pandemic. The government allows the UEFA Champions League football match between Liverpool and Atlético Madrid to go ahead at Anfield stadium in Liverpool. 54,000 people attend the game, including 3,000 fans from Spain. Spain closed its schools on 10 March 2020 (*Guardian*).  

The UK is not banning large gatherings because officials are ‘following the science and the evidence,’ says deputy chief medical officer Dr Jenny Harries. She also notes, ‘If a healthcare professional hasn’t advised you
to wear a face mask, it’s usually quite a bad idea’ and ‘doesn’t help’ (Shropshire Star).\textsuperscript{37}

England says there are plans to increase coronavirus testing to 10,000 a day (NHS England).\textsuperscript{38}

Dr David Halpern, the Head of the Number 10 ‘Nudge Unit’, tells the BBC, ‘There is going to be a point, assuming the epidemic flows and grows as we think it probably will do, where you’ll want to cocoon, you’ll want to protect those at-risk group so that they basically don’t catch the disease and by the time they come out of their cocooning herd immunity has been achieved in the rest of the population’ (Guardian).\textsuperscript{39}

‘The [unpublished] modelling from Imperial College that underpinned the government’s belief that the nation could ride out the epidemic by letting the infection sweep through, creating “herd immunity” on the way, was... troubling,’ the Guardian’s Science Editor noted. ‘The model, based on 13-year-old code for a long-feared influenza pandemic, assumed that the demand for intensive care units would be the same for both infections. Data from China soon showed this to be dangerously wrong, but the model was only updated when more data poured out of Italy, where intensive care was swiftly overwhelmed and deaths shot up’ (Guardian).\textsuperscript{40}

‘We’re simply not doing enough NOW,’ tweets, Anthony Costello, professor of Global Health at UCL and an ex-WHO director. ‘We shd ban mass gatherings, close parliaments, alert ALL health workers about protective equipment + hygiene, close schools/colleges, promote home working wherever possible, and protect workers in the gig economy. Every day of delay will kill’ (Anthony Costello).\textsuperscript{41}

Scottish National Party MP Dr Philippa Whitford raises the issue of asymptomatic spread with Health Secretary Matt Hancock, who tells her it is rare (Philippa Whitford).\textsuperscript{42}

\textbf{12 March 2020: The Prime Minister tells the nation, ‘This is the worst public health crisis for a generation. Some people compare it to seasonal flu. Alas, that is not right. Owing to the lack of immunity, this disease is more dangerous. And it’s going to spread further and I}
must level with you, level with the British public, many more families are going to lose loved ones before their time.’ Addressing the ‘question of banning major public events such as sporting fixtures,’ the Prime Minister says, ‘The scientific advice as we’ve said over the last couple of weeks is that banning such events will have little effect on the spread’ (Prime Minister’s Office, 10 Downing Street). 43

SAGE meet to examine modelling from experts at Imperial College London and other institutions. ‘The results were shattering,’ according to the Times. A week earlier, councils had been warned to expect about 100,000 deaths from Covid-19. Now Chris Whitty, the chief medical officer, and Sir Patrick Vallance, the chief scientific adviser, realised the estimates were wrong.’ The Times quotes a ‘senior figure’: ‘Unmitigated, the death number was 510,000… Mitigated we were told it was going to be 250,000’ (Times). 44

‘The government moved the UK from the “containment” phase into “delay”, accepting the inevitability of millions of infections,’ the Guardian reports. The government announces it will ‘no longer try to “track and trace” everyone suspected of having the virus. Instead, under plans outlined by the Prime Minister and his medical and scientific advisers, testing would be limited to patients in hospital with serious breathing problems’ (Guardian). 45

The WHO’s director-general makes his opening remarks at the mission briefing on Covid-19: ‘We are deeply concerned that some countries are not approaching this threat with the level of political commitment needed to control it. Let me be clear: describing this as a pandemic does not mean that countries should give up. The idea that countries should shift from containment to mitigation is wrong and dangerous’ (WHO). 46

‘We think that the peak may be something like 10 to 14 weeks away – it could be a bit longer,’ says Chief Scientific Adviser Sir Patrick Vallance (Reuters). 47

‘That evening, the former health secretary Jeremy Hunt spoke on the BBC, saying he was concerned Britain had become an “outlier”. Hunt says now he became worried that [Chief Medical Officer Chris] Whitty was too resigned to the virus spreading: “I couldn’t understand why they
were so certain that nothing could be done to stop nearly 60% of our population becoming infected, when I had figures showing that even in Wuhan, the centre of the outbreak in China, less than 1% of the population actually became infected” (Guardian). 48

Writing in the Spectator, ITV Political Editor Robert Peston notes, “The strategy of the British government in minimising the impact of Covid-19 is to allow the virus to pass through the entire population so that we acquire herd immunity, but at a much delayed speed so that those who suffer the most acute symptoms are able to receive the medical support they need, and such that the health service is not overwhelmed and crushed by the sheer number of cases it has to treat at any one time’ (Spectator). 49

‘I’m embarrassed by the situation in this country... We haven’t taken the action we should four or five weeks ago,’ says Professor John Ashton, a former regional director of public health for north-west England, on BBC Question Time. ‘Boris Johnson should have convened COBRA at the outset when it became clear what was cooking up.... we have lost control here... for reasons that are totally obscure to me we have taken it as policy not to track the people who have come back from Italy, not to test the people who have come back from Italy. So, the virus will now be amongst us’ (BBC Question Time). 50

The Guardian reports that as of 12 March, ‘almost every country [in Europe] had deployed nationwide or regional school closures’. The UK’s schools remain open (Guardian). 51

13 March 2020: ‘Mass gatherings are to be banned across the UK from next weekend, the government has announced after Boris Johnson’s cautious approach to the coronavirus outbreak was overtaken by care homes, sporting bodies and even the Queen taking matters into their own hands’ (Guardian). 52

The government’s chief science adviser, Sir Patrick Vallance, tells BBC Radio 4 Today programme that one of ‘the key things we need to do’ is to ‘build up some kind of herd immunity so more people are immune to this disease and we reduce the transmission’ (Vox). 53
Interviewing Sir Patrick on *Sky News* about the herd immunity strategy, presenter Stephen Dixon says ‘even looking at the best-case scenario... 0.5-1 percent fatality in something like this, that’s an awful lot of people dying in this country’ (*Sky News*).\(^{54}\)

Professor Graham Medley, who leads the government's disease modelling team, tells *BBC Newsnight*, ‘We are going to have to generate what is called herd immunity... and the only way of developing that in the absence of vaccine is for the majority of the population to become infected’ (*BBC Newsnight*).\(^{55}\)

‘According to Italian health minister Pierpaolo Sileri the UK Prime Minister told his Italian counterpart Giuseppe Conte in a call on March 13 that he wanted herd immunity in the UK’, the *Mirror* reports, citing the 3 June 2020 *Channel 4 Dispatches* documentary (*Mirror*).\(^{56}\)

‘The health secretary dialed into a conference call for Group of Seven countries as governments across the world sought to coordinate their responses and share their experiences,’ according to *Bloomberg*. ‘[Matt] Hancock asked the Italian representative if Italy was also working on a herd immunity plan’ (*Bloomberg*).\(^{57}\)

During a weekly briefing to media teams in other health organisations and medical royal colleges, Simon Enright, Director for Communications for NHS England and NHS Improvement, ‘is said to have relayed information from the government’s top scientific and medical advisers’, according to *BBC News*, after seeing contemporaneous notes from the meetings and having spoken to people on the calls. ‘We want people to be infected with Covid-19,’ the notes say. ‘The best way of managing it is herd immunity and protect the vulnerable.’ According to the notes, Enright was clear where the idea had come from: it was on the ‘direct advice’ of the chief medical adviser and the chief scientific adviser (*BBC News*).\(^{58}\)

Minutes from the day’s meeting of SAGE note ‘SAGE was unanimous that measures seeking to completely suppress spread of Covid-19 will cause a second peak. SAGE advises that it is a near certainty that countries such as China, where heavy suppression is under way, will experience a second peak once measures are relaxed’ (SAGE).\(^{59}\)
The WHO’s director-general says all possible action should be taken: ‘Not testing alone. Not contact tracing alone. Not quarantine alone. Not social distancing alone. Do it all’ (Guardian).  

‘Anthony Costello, a paediatrician and former World Health Organization director, said that the UK government was out of kilter with other countries in looking to herd immunity as the answer. It could conflict with WHO policy, he said in a series of Twitter posts, which is to contain the virus by tracking and tracing all cases’ (Guardian).  

‘At the start of the Covid-19 emergency, the UK imposed self-isolation on travellers from Hubei province in China, Iran, parts of South Korea and northern Italy,’ the Financial Times reports. ‘That guidance was withdrawn on March 13’ (Financial Times).  

BBC News reports on a new study of more than 44,000 cases of Covid-19, based on data from the Chinese Centre for Disease Control and Prevention. The study puts ‘the overall death rate of the Covid-19 virus at 2.3%’ (BBC News). 

14 March 2020: WHO spokesperson, Margaret Harris, questions the UK government’s decision to follow a herd immunity response to the outbreak, telling BBC Radio 4’s Today programme: ‘We don’t know enough about the science of this virus, it hasn’t been in our population for long enough for us to know what it does in immunological terms’ (Guardian).  

More than 200 scientists sign an open letter to the government urging them to introduce tougher measures to tackle the spread of Covid-19, noting the UK’s current approach will put the NHS under additional stress and ‘risk many more lives than necessary’ (BBC News).  

Six senior health experts, including Richard Horton, the editor-in-chief of the Lancet, and Devi Sridhar, professor public health at the University of Edinburgh, publish a letter in the Times, noting there is ‘no clear indication that the UK’s response is being informed by experiences of other countries’. The letter urges the government to share the scientific evidence being used to inform policy, rather than acting on the basis of modelling that is being kept secret (Times).
The British Society for Immunology publishes an open letter to the government with ‘significant questions’ about the herd immunity plan: ‘this strategy only works to reduce serious disease if, when building that immunity, vulnerable individuals are protected from becoming ill, for example through social distancing… we don’t yet know if this novel virus will induce long-term immunity in those affected as other related viruses do not’ (British Society for Immunology).  

**15 March 2020:** ‘When I first heard about this, I could not believe it… my colleagues here in the US… assumed that reports of the UK policy were satire,’ notes William Hanage, a professor of the evolution and epidemiology of infectious disease at Harvard University, writing in the *Guardian* about the UK government’s herd immunity plan. ‘The UK should not be trying to create herd immunity, that will take care of itself. Policy should be directed at slowing the outbreak to a (more) manageable rate. What this looks like is strong social distancing… All this and more should have started weeks ago’ (*Guardian*).  

Writing in the *Guardian* about herd immunity, Anthony Costello, Professor of Global Health and Sustainable Development at University College London and a former director of maternal and child health at the WHO, asks ‘Is it wise or ethical to adopt a policy that threatens immediate casualties on the basis of uncertain future benefit?’ (*Guardian*).  

Writing in the *Sunday Telegraph*, Health Secretary Matt Hancock states ‘Herd immunity is not a part of it [the government’s plan to deal with coronavirus]. That is a scientific concept, not a goal or a strategy. Our goal is to protect life from this virus, our strategy is to protect the most vulnerable and protect the NHS through contain, delay, research and mitigate’ (*PoliticsHome*).  

The Stereophonics play concerts at the Cardiff Arena on 14 and 15 March – to 15,000 people in total over the two nights (*Express Digest*).  

**Mid-March 2020:** A *Reuters* investigation into the government’s response notes that ‘Interviews and records published so
far suggest that the scientific committees that advised [Prime Minister] Johnson didn’t study, until mid-March, the option of the kind of stringent **lockdown** adopted early on in China’ (Reuters).\(^{72}\)

‘According to several care home managers... in mid-March’ the NHS made a decision ‘to transfer 15,000 patients out of hospitals and back into the community, including an unspecified number of patients to **care homes**’, Reuters reports. ‘These were not only patients from general wards. They included some who had tested positive for COVID-19, but were judged better cared for outside hospital’ (Reuters).\(^{73}\)

**16 March 2020:** The Prime Minister urges the public to avoid all unnecessary contact and travel and to not visit pubs and theatres, ‘following expert modelling which suggests the approach could cut the estimated coronavirus **death toll** from 260,000 to 20,000’ (Guardian).\(^{74}\)

The Guardian reports on the government’s partial U-turn: ‘What changed was new data on the impact of Italy’s out-of-control epidemic on its health service. Basically, it is catastrophic, with 30% of hospitalised patients having to be admitted to intensive care’ (Guardian).\(^{75}\)

‘According to SAGE it looks as though we are now approaching the fast growth part of the upward curve, and without drastic action cases could double every five or six days,’ the Prime Minister announces (BBC More or Less).\(^{76}\)

Channel 4 Dispatches notes, ‘Professor [Neil] Ferguson and other scientific advisers had been issuing similar warnings for weeks.’ Professor Graham Medley, a SAGE member and the chair of SPI-M, comments ‘We had been saying it on SAGE from the end of February. It was a public perception that something changed on the 16\(^{th}\) [March], but nothing changed within SPI-M or within SAGE’ (Channel 4 Dispatches).\(^{77}\)

The Imperial College team advising the government publishes a report that predicts ‘unconstrained, the virus could kill 510,000 people’ and ‘even the government’s “mitigation” approach could lead to 250,000 deaths and intensive care units being overwhelmed at least eight times over,’ Reuters reports. ‘Imperial’s prediction of over half a million deaths
was no different from the report by the government’s own pandemic modelling committee two weeks earlier’ (Reuters).78

Jeremy Farrar, Director of the Wellcome Trust and also a member of SAGE, says ‘SAGE advised government to impose lockdown on 16 March’ (Jeremy Farrar).79

According to the Guardian, the report ‘indicated that, in effect, the virus had to be allowed to spread initially, so that over time people would become infected, recover, and attain immunity: “Introducing such interventions too early risks allowing transmission to return once they are lifted (if insufficient herd immunity has developed)”’ (Guardian).80

‘We have a simple message for all countries: test, test, test. Test every suspected case’ and ‘if they test positive, isolate them and find out who they have been in close contact with... and test those people too,’ says the WHO’s director-general (BBC News).81

After speaking to some members of the SPI-M group, Dr Kit Yates, a Senior Lecturer in the Department of Mathematical Sciences and Co-Director of the Centre for Mathematical Biology at the University of Bath, tells the BBC’s More or Less programme that in March 2020 SPI-M, and the SAGE group it fed into, underestimated the size and growth of the virus in the UK. The 16 March Imperial College model relied on ‘really early calculations’ based on data from Wuhan to calculate the doubling time of the virus in the UK, which they estimated to be more than five days, Yates notes. However, the Imperial College model ignored data from the UK which showed the doubling time of the virus to be around three days. Yates continues: ‘Using only data available at the time... by the 14 March it should have been clear already that the doubling time was way shorter than the five-day doubling period that was being used in the Imperial College model’ (BBC More or Less).82

‘By March 16, more than 600 behavioural scientists had signed a letter challenging ministers to provide an evidence base for the assertion [of behavioural fatigue re: lockdown], which they claimed was being used to justify a policy of “herd immunity”, risking “large numbers of lives”’ (Financial Times).83
'While the UK has carried out about 44,000 tests, South Korea had by Saturday tested more than 248,647 people—one in every 200 citizens—and Italy 86,011, including anyone who might have been exposed to the virus, as well as those with symptoms' (Guardian).

17 MARCH 2020: SIR SIMON STEVENS, THE NHS CHIEF EXECUTIVE, writes to every NHS Trust instructing them to ‘urgently discharge all hospital inpatients who are medically fit to leave’ (NHS).

Speaking to the House of Commons Health Select Committee, Sir Patrick Vallance, the chief scientific adviser, says keeping Covid deaths below 20,000 would be ‘a good outcome’ (PoliticsHome).

As of 17 March, the Guardian reports ‘only the UK and Belarus [in the whole of Europe] had held off implementing full or partial closures’ of schools. The UK’s schools remain open (Guardian).

An open letter organised by Rupert Read is published in the Daily Mail, co-signed by 26 people including former House of Commons Select Committee Chair Ian Gibson, George Monbiot, Chris Packham and Peter Tatchell, urging the government forthwith to institute quarantining policies, compel most firms to ensure workers work from home, introduce physical distancing policies, roll out mass testing and give sick pay to those on zero-hours contracts (Daily Mail).

The World Health Organization notes ‘data to date suggest that 80% of infections are mild or asymptomatic’ (WHO).

18 MARCH 2020: ‘DR TEDROS ADHANOM GHEBREYESUS, THE WHO’s director-general, has again called on every country to adopt its recommended strategy. The only way to slow the pandemic sufficiently to give time for treatments and a vaccine to become available is to test everyone who has symptoms and track and isolate their contacts, he said’ (Guardian).

‘The UK’s best scientists have known since that first report from China that Covid-19 was a lethal illness. Yet they did too little, too late,’ Richard Horton, editor-in-chief of the Lancet, writes in the Guardian.
'Something has gone badly wrong in the way the UK has handled Covid-19... there was a collective failure among politicians and perhaps even government experts to recognise the signals that Chinese and Italian scientists were sending' *(Guardian)*.\(^{90}\)

The Prime Minister announces the ambition of carrying out 25,000 tests per day. 5,779 tests are carried out on 18 March *(Guardian)*.\(^{91}\)

The Department of Health and Social Care confirms the target of 25,000 tests a day, adding ‘the increased capacity is expected to be ready within 4 weeks’ *(Full Fact)*.\(^{92}\)

**19 March 2020:** ‘The status of COVID-19 was downgraded from level 4, the highest threat level, to level 3 by the four nations group on high consequence infectious diseases and the Advisory Committee on Dangerous Pathogens’, the *British Medical Journal* notes. ‘This enabled the required standard of personal protective equipment to be lowered for staff in hospitals and to nurse patients in non-infectious disease settings’ *(British Medical Journal)*.\(^{93}\)

‘The NHS was ordered... to discharge 15,000 patients to free space for people with Covid-19,’ the *Times* reported on 15 May. 95% were to be sent home, which meant 600 people going to care homes. ‘Providers said the number was higher and that they were put under pressure by the NHS to accept people at short notice. People were not tested before being moved’ *(Times)*.\(^{94}\)

The PHE National Infection Service guidance on discharging patients from hospital is changed ‘so that hospitals no longer needed to avoid sending patients to care homes, a decision which was heavily criticised and which was reversed by the government later on in the epidemic’ *(Telegraph)*.\(^{95}\)

Taiwan bars all foreign nationals from entering Taiwan, with some exceptions *(Focus Taiwan)*.\(^{96}\)

**20 March 2020:** All schools are closed by the government *(Guardian)*.\(^{97}\)
The Prime Minister announces all cafes, pubs, bars, clubs, restaurants, gyms, leisure centres, nightclubs, theatres and cinemas must close tonight (Guardian).  

Deputy Chief Medical Officer Jenny Harries says, ‘The country has a perfectly adequate supply of PPE [Personal Protective Equipment]’ and that supply pressures had now been ‘completely resolved’ (Pulse).  

A ‘critical incident’ is declared at Northwick hospital in Harrow after the hospital runs out of intensive care beds because of a surge in coronavirus cases (ITV News).  

New Zealand closes its borders to everyone but citizens and residents in an attempt to stop the spread of coronavirus (Stuff).  

**23 March 2020: The Prime Minister announces a national lockdown**, with people ordered to stay at home, except for shopping for basic necessities, one form of exercise a day, medical need, to provide care or travelling to and from work if it is absolutely necessary (Guardian).  

Construction work is allowed to continue (INews), including the building of the HS2 rail line (Guardian).  

‘The inclusion of ‘targeted herd immunity’ as a possible UK government response to the Covid-19 pandemic – in a list of possible interventions considered for analysis by a contractor – appears to contradict strong denials by the health secretary 10 days earlier that it was any part of government policy’, reports the Guardian. ‘A proposed computer simulation of the impact of ‘targeted herd immunity’ was contained in a planning document, used by NHSX [the NHS’s digital planning department] and a technology contractor to map out the data response to the pandemic, around 23 March. While it does not appear the herd immunity simulation took place, its inclusion in a list of possible interventions raises questions about the government’s stance on the policy’ (Guardian).
24 March 2020: Speaking to the House of Commons Science and Technology Committee, editor-in-chief of the *Lancet* Richard Horton notes the journal published three ‘truly alarming’ papers at the end of January 2020: ‘The authors of those papers were advocating the immediate provision of personal protective equipment [and] urging the importance of testing and isolation ... and also emphasizing the pandemic potential.’ Horton continued, ‘It’s been seven to eight weeks since that time and February was the opportunity for the UK to really prepare, based upon testing, isolation, quarantine, physical distancing, ICU [Intensive Care Unit] capacity and so on.... We missed that opportunity. We could have used the month of February based upon what we knew in January’ (*Labour Briefing*).106

*BBC* presenter Victoria Derbyshire speaks to the director of a UK company that makes protective equipment who said they’re exporting all over the world but haven’t had orders from the UK government. ‘We actually offered our services [to the UK government] when this first happened and unfortunately our services wasn’t taken up, but the rest of the world did take it up,’ the director notes (Stefan Simanowitz).107

25 March 2020: *BBC Newsnight* interviews Andrew Raynor, CEO of a ventilator manufacturer. ‘You got in touch with the government as soon as they put out the call for help a few weeks ago. What happened then?’ asks presenter Emily Maitlis. ‘Nothing, quite honestly,’ the CEO replies (Stefan Simanowitz).108

The Prime Minister states, ‘We are going up from 5,000 to 10,000 tests per day, to 25,000, hopefully very soon up to 250,000 per day.’ 6,583 tests are carried out on 25 March 2020 (*Guardian*).109

26 March 2020: Speaking about why the government has eased up on what initially seemed to be a concerted contact tracing and quarantining effort, Deputy Chief Medical Officer Jenny Harries tells reporters, ‘There comes a point in a pandemic where that is not an appropriate intervention,’ and that the testing focus would shift to patients and health workers (*Financial Times*).110
Responding to the WHO’s ‘message for all countries: test, test, test,’ Harries says, ‘We need to realise the clue for WHO is in its title. It is a world health organisation. And it is addressing all countries across the world with entirely different health infrastructures, and particularly public health infrastructures. We have an extremely well-developed public health system... the point there is they are addressing every country, including low and middle income countries’ (BBC News).\textsuperscript{111}

The National Care Forum writes to Matt Hancock and Boris Johnson warning that care homes were being pressured into taking patients discharged from hospital who had not been tested for the virus, even though they were exhibiting symptoms (Telegraph).\textsuperscript{112}

\textbf{29 March 2020:} Rupert Read releases a video calling for a public inquiry into the government’s handling of the crisis. Within days the video had nearly half a million views; by June the video had over 600,000 views (Rupert Read).\textsuperscript{113}

\textbf{Late March 2020:} ‘Public Health England confirmed that it was already becoming clear in late March, and certainly from the beginning of April, that the COVID-19 infection had an asymptomatic phase, when people could be infectious without being aware they were sick’ (House of Commons Public Accounts Committee).\textsuperscript{114}
WHAT IS NOW UNDERSTOOD TO BE THE FIRST WAVE OF THE PANDEMIC in the UK peaks during April, with over 1,000 daily deaths from Covid over 22 days. The Prime Minister himself is infected and hospitalised on 5 April. There are regular news reports of shortages of PPE among medical staff. The number of people being tested in the UK remains behind countries such as Germany. Data analysis by the *Financial Times* suggests there have been 41,000 deaths in the UK due to Covid.

1 APRIL 2020: SPEAKING FROM ISOLATION IN 11 DOWNING STREET, the Prime Minister says, ‘I want to say a special word about testing, because it is so important, and as I have said for weeks and weeks, this is the way through. This is how we will unlock the coronavirus puzzle. This is how we will defeat it in the end’ (*BBC News*).¹

Interviewed on *ITV News* Deputy Chief Medical Officer Jonathan Van-Tam says that testing ‘is a bit of a side issue to be truthful with you’ (*ITV News*).²
The government confirms that only 2,000 people out of 500,000 front-line NHS England workers had been tested for coronavirus so far – 0.4%. 9,793 tests are carried out on 1 April 2020 (Guardian).³

According to the Sunday Times, Doris-Ann Williams, chief executive of the British In Vitro Diagnostics Association, which represents over 100 companies that make up most of the UK’s testing sector, said, ‘her organisation did not receive a meaningful approach from the government asking for help until April 1 – the night before Hancock bowed to pressure and announced a belated and ambitious target of 100,000 tests a day by the end of this month’ (Sunday Times).⁴

‘The British Healthcare Trades Association was ready to help supply PPE in February — and throughout March — but it was only on April 1 that its offer of help was accepted’, the Sunday Times reveals. Dr Simon Festing, the organisation’s chief executive, said: ‘Orders undoubtedly went overseas instead of to the NHS because of the missed opportunities in the procurement process’ (Sunday Times).⁵

2 APRIL 2020: THE DEPARTMENT OF HEALTH AND SOCIAL CARE, PHE and NHS England publish the guidance document Admission and Care of Residents during COVID-19 Incident in a Care Home, ‘intended for care homes, local health protection teams, local authorities, clinical commissioning groups and registered providers of accommodation for people who need personal or nursing care’. Noting the care sector ‘plays a vital role’ accepting patients discharged from hospital and home settings, the briefing explains, ‘Some of these patients may have COVID-19, whether symptomatic or asymptomatic’ before noting, ‘All of these patients can be safely cared for in a care home if this guidance is followed.’ The briefing also notes ‘Negative tests are not required prior to transfers/ admissions into the care home’ (Department of Health and Social Care, Care Quality Commission, Public Health England, and NHS England).⁶

The Department of Health and Social Care announces ‘family and friends should be advised not to visit care homes, except next of kin in exceptional situations such as end of life’ (BBC News).⁷
'Dr Chaand Nagpaul, chair of council at the British Medical Association, said the doctors' union had heard concerns from physicians in more than 30 hospital trusts about [Personal Protective Equipment] shortages... Reports have been rife of shortages and large variations in the level of PPE available. Pictures of healthcare workers who have created their own makeshift protective equipment out of bin bags and other materials have proved embarrassing for the government and NHS leaders. Staff have also improvised masks out of snorkels, bought kit from hardware stores, and used school science goggles to protect themselves' (Guardian).^8

Admitting the government has made mistakes on testing, Health Secretary Matt Hancock announces the government is aiming to carry out 100,000 coronavirus tests a day in England by the end of April (BBC News).^9

'It is good to finally hear the explanation from the minister of health about the difficulties in scaling up testing. This is down to a lack of preparedness in advance of a pandemic, which then impacts upon the ability to greatly and rapidly increase a national response’, notes Michael Head, a senior research fellow in global health at University of Southampton (Guardian).^10

3 APRIL 2020: 'Hospitals could be left without enough medical ventilators at the height of the UK coronavirus outbreak, with manufacturers struggling to build thousands of new machines in time for the likely mid-April peak in cases.' A source tells the Guardian that it was impossible to 'produce into the peak... we should have started doing this weeks ago' (Guardian).^11

In a joint press release from the British Medical Association, Royal College of Nursing (RCN), Unite and UNISON, RCN Chief Executive and General Secretary Dame Donna Kinnair note, ‘Weeks into this crisis, it is completely unacceptable that nursing staff, wherever they work, have not been provided with PPE. I am hearing from nurses who are treating patients in Covid-19 wards without any protection at all. This cannot continue’ (BMA).^12
A BMA survey of its members finds ‘more than half of doctors working in high-risk environments said there were either shortages or no supply at all of adequate face masks, while 65% said they did not have access to eye protection’ (BMA).\textsuperscript{13}

Writing in the \textit{Guardian}, Anthony Costello, a paediatrician and former WHO director, notes ‘The government and its advisers are now committed to their strategy of delaying the spread of coronavirus, which they hope will eventually lead to \textit{herd immunity}’ (\textit{Guardian}).\textsuperscript{14}

An Ipsos MORI poll finds 56\% of respondents believe that the government’s social distancing measures were taken too late, while only 4\% of people felt that they were taken too soon (Ipsos MORI).\textsuperscript{15}

\textbf{5 April 2020: 13,069 tests are carried out in the UK (excluding Northern Ireland) on 5 April (Department of Health and Social Care).}\textsuperscript{16}

The UK has carried out 195,524 tests, in contrast to at least 918,000 completed a week earlier in Germany (\textit{Reuters}).\textsuperscript{17}

\textbf{6 April 2020: ‘The government has been accused of missing an opportunity after it failed to deploy 5,000 contact tracing experts employed by councils to help limit the spread of coronavirus. Environmental health workers in local government have wide experience in contact tracing, a process used to prevent infections spreading and routinely carried out in outbreaks such as of norovirus, salmonella or legionnaires’ disease... PHE’s contact tracing response team was boosted to just under 300 staff, deemed adequate for the containment phase of handling the Covid-19 virus up to mid-March... tracing was scaled back when the UK moved to the delay phase of tackling coronavirus in mid-March... in Germany, thousands of contact tracers are still working – with more being recruited’ (\textit{Guardian}).}\textsuperscript{18}

\textbf{7 April 2020: ‘Lack of personal protective equipment continues to be a critical issue. It is heartbreaking to hear that some}
staff have been told to simply ‘hold their breath’ due to lack of masks,’ says Dr Samantha Batt-Rawden, president of the Doctors’ Association UK (Guardian).¹⁹

‘World-leading disease data analysts have projected that the UK will become the country worst hit by the coronavirus pandemic in Europe, accounting for more than 40% of total deaths across the continent. The Institute for Health Metrics and Evaluation in Seattle predicts 66,000 UK deaths from Covid-19 by August, with a peak of nearly 3,000 a day, based on a steep climb in daily deaths early in the outbreak’ (Guardian).²⁰

‘Leaked recordings of a Home Office conference... reveal that the Government has all but given up in its fight against the Coronavirus and is intent on simply finding ‘a method of managing it within the population.’ The recordings show Home Office Deputy Science Adviser Rupert Shute stating repeatedly that the government believes ‘we will all get’ Covid-19 eventually. The call further implied that the government now considers hundreds of thousands of deaths unavoidable over a long-term period consisting of multiple peaks of the disease’ (Byline Times).²¹

8 April 2020: The UK reaches the highest number of recorded daily deaths from Coronavirus: 938 (Guardian).²²

The government’s published figures are certainly an underestimate, as they exclude those dying at home and in care homes (Times),²³ as well as the likely large increase in indirect deaths (‘excess mortality’) resulting from a significant drop in the number of people attending A&E (Independent)²⁴ and the unavailability of doctors, beds and vital treatment for those suffering from other conditions besides coronavirus (Guardian).²⁵

The UK media coverage of the crisis however is dominated by none of this but rather by the Prime Minister’s own hospitalisation (ITV News).²⁶

Three NHS nurses forced to wear bin bags due to a lack of PPE test positive for coronavirus (Telegraph).²⁷

. . .
9 April 2020: Hospitals across England are running out of the surgical gowns needed to treat patients with Covid-19 and do not know when fresh supplies will arrive, two secret NHS memos reveal.’ The memos ‘contradict repeated assurances by ministers and NHS bosses that they are getting on top of the widespread shortages of PPE that have produced panic and fear among frontline staff’ (Guardian).28

UNISON reports that ‘thousands of people working in the NHS, social care and local services have contacted a UNISON hotline in the last week expressing anxiety at the lack of gloves, masks, eye protectors and gowns where they work.’ The union passes these testimonies onto the Health Secretary (UNISON).29

In a briefing to its members, the RCN notes it ‘is acutely aware that members have reported a lack of adequate personal protective equipment in all health and social care settings during the crisis’ (Royal College of Nursing).30

10 April 2020: The UK reaches a new record high 980 recorded daily deaths from Coronavirus from those tested and dying in hospitals. This number is higher than any daily maximum recorded in Italy (or any other European country other than France, though France’s figures include deaths in care homes) during the entire pandemic to date, and places the UK’s per capita death rate from Coronavirus as one of the highest in the world (Statista).31

Most of the media coverage leads with Boris Johnson’s recovery after being in intensive care (ITV News),32 while the BBC website main headline is about the government’s supposed ‘herculean’ efforts to secure enough PPE for the NHS frontline staff who are becoming infected with Covid-19 in record numbers (Jack Seale).33

Health Secretary Matt Hancock urges NHS staff not to overuse Personal Protective Equipment: ‘We need everyone to treat PPE like the precious resource it is. Everyone should use the equipment they clinically need, in line with the guidelines: no more and no less’ (Guardian).34
The BMA says **PPE** supplies in London and Yorkshire ‘are running at dangerously low levels’ and ‘that some pieces of equipment are no longer available – forcing doctors into impossible situations, and ultimately, putting their lives at risk’ (BMA).\(^{35}\)

Following its 26 March letters to the Health Secretary and Prime Minister, ‘the National Care Forum writes again to the Government, urging once more for discharged patients to be tested or risk litigation over the ‘avoidable deaths’ of residents who subsequently became infected’ (*Telegraph*).\(^{36}\)

**11 April 2020:** A leaked letter from the Association of Directors of Adult Social Services (Adass) to the Department of Health and Social Care notes the handling of **PPE** for care workers has been ‘shambolic’, with delivery of equipment ‘paltry’ and ‘haphazard’ (*BBC News*).\(^{37}\)

The Adass letter says ‘there is a risk that there are greater levels of deaths in social care and in the community than in hospitals’ (*Guardian*).\(^{38}\)

A US institute that predicted deaths from Covid-19 in the UK would be the highest in Europe at 66,000 has revised down its forecasts as a result of new data. The Institute for Health Metrics and Evaluation, based at the University of Washington in Seattle, now predicts 37,494 deaths in the UK by 4 August, although it said the figure could be between 26,000 and 62,500. Despite the lower figure, it still predicts the UK will have the highest **death toll** in Europe’ (*Guardian*).\(^{39}\)

**12 April 2020:** ‘UK government stockpiles containing protective equipment for healthcare workers in the event of a pandemic fell in value by almost 40% over the past six years, the *Guardian* has found. Analysis of official financial data suggests £325m was wiped off the value of the Department of Health and Social Care emergency stockpile, reducing it from £831m in 2013 under the Conservative-led coalition government to £506m by March last year’ (*Guardian*).\(^{40}\)
A survey across the UK by the Royal College of Surgeons of England finds ‘a third of surgeons and trainees say they do not believe they have an adequate supply of PPE in their Trust, enabling them to do their jobs safely.’ 57% say there have been shortages in the past 30 days (Royal College of Surgeons). 

13 April 2020: The New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) warns that ‘particular caution should be exercised in Covid-19 patients discharged from hospital to nursing homes, homeless shelters, or other institutions where there are vulnerable individuals’ (Guardian).

The Alzheimer’s Society, Marie Curie, Age UK, Care England and Independent Age co-write an open letter to the Health Secretary: ‘We urgently need testing and protective equipment made available to care homes – as we’re seeing people in them being abandoned to the worst that coronavirus can do... A lack of protective equipment means staff are putting their own lives at risk while also carrying the virus to highly vulnerable groups’ (Alzheimer’s Society).

Robert Kilgour, owner of Renaissance Care which runs, care homes in Scotland, says, ‘There are instances of ambulances taking residents to hospital and returning and coming straight back,’ noting a ‘huge discouragement by the authorities to hospitalise, a wish to keep them where they are and look after them where they are’ (Times).

The Guardian reports ‘Britain missed three opportunities to be part of an EU scheme to bulk-buy masks, gowns and gloves and has been absent from key talks about future purchases, the Guardian can reveal, as pressure grows on ministers to protect NHS medics and care workers on the coronavirus frontline’ (Guardian).

14 April 2020: ‘Public Health England did not increase testing for Covid-19 as quickly as was needed to control the spread of the virus, the Government’s Chief Scientific Adviser has suggested. Sir Patrick Vallance’s comments echo those of Chris Whitty, England’s chief medical officer, who said a week ago that Germany ‘got ahead’ in
testing people for Covid-19 and that the UK needed to learn from that’ (Guardian).46

Interviewed on BBC Newsnight, Clare Wenham, Assistant Professor of Global Health Policy at the London School of Economics, says, ‘I don’t know why the UK government haven’t been listening to the guidance coming out of the World Health Organization. [WHO Director-General] Dr Tedros was very clear that it was “test, test, test”. And the countries we have seen getting out of this situation and the lockdown sooner than others, or in fact never going into a full lockdown, they have followed a very simple strategy of testing, isolating those who are infected, and then contact tracing who they have been in contact with’ (BBC Newsnight).47

15,994 tests are carried out in the UK (excluding Northern Ireland) on 14 April (Department of Health and Social Care).48

15 April 2020: ‘The Government published its adult social care action plan which announced that trusts would need to test every single patient prior to discharge back to their care home or new admission to a care home whether they had symptoms or not’ (Telegraph).49

Health Secretary Matt Hancock tells the BBC Today programme 15% of care homes have two or more cases of coronavirus, noting ‘that is a robust figure that we have high confidence in’ (Telegraph).50

Of those NHS staff who have downloaded the Doctors’ Association UK app to track the availability of PPE in the NHS, 38% report no eye protection, and only 52% report having a gown for high-risk procedures (Doctors’ Association UK).51

Dr Bharat Pankhania, a senior clinical lecturer at the University of Exeter medical school with field experience in the SARS and Ebola epidemics, is quoted in the Guardian about the possibility of lifting the lockdown. ‘Keep the shutdown until we know we can cope with patients,’ he said. ‘Use the opportunity to scale up manufacture of PPE and ventilators. When you feel you have amassed your PPE, test kits, the army needed to do the tests and army of contact testers, that is when you lift the shutdown. But you only do that when you know the
test numbers are in a sustained downward trajectory. In an emergency you can recruit many people and get them to help you under supervision...There is no indication we are preparing for that now’ (Guardian).\(^{52}\)

‘The death toll among people being looked after in care homes in England has risen to 1,400, care leaders have said, as NHS England and the Care Quality Commission finally started rolling out testing of staff and residents.’ Care home deaths are not included in the government’s daily death figures (Guardian).\(^{53}\)

Analysis of data released by the Office of National Statistics by statistician David Spiegelhalter suggests there has been a ‘massive rise’ in ‘excess mortality’ due directly or indirectly to Covid-19 (David Spiegelhalter),\(^{54}\) with very few Covid-19 deaths being registered outside hospital (David Spiegelhalter).\(^{55}\)

**16 April 2020:** Speaking on the *BBC Today* programme, Health Secretary Matt Hancock says ‘this core goal of making sure the NHS isn’t overwhelmed, which everybody was telling me a month ago was impossible to achieve, that has been achieved thus far’ (*BBC Today*).\(^{56}\)

Dr Rachel Clarke, a doctor specialising in palliative medicine, said the government responded to the threat to care homes ‘absolutely woefully inadequately, I’m afraid,’ on *BBC Question Time*. ‘The point at which the government decided to change its testing policy [on 12 March] so that every possible case was being tested to one in which only cases in hospitals were being tested was the point at which residents of care homes and people receiving care in their own homes were thrown under a bus. They were being abandoned’ (*BBC Question Time*).\(^{57}\)

The *New York Times* reports the UK government paid $20 million for coronavirus tests that didn’t work. ‘Within days of the deal, enthusiastic health officials back in London were promising that the new tests would vault Britain into the vanguard of international efforts to combat the virus.’ However, after a laboratory at Oxford University found the tests to be inaccurate ‘half a million of the tests are now gathering dust in
storage’ while ‘another 1.5 million bought at a similar price from other sources have also gone unused’ (New York Times).\textsuperscript{58}

The Financial Times notes, ‘The UK is setting itself apart from the rest of the world by maintaining loose border controls even as dozens of countries continue to clamp down on international travellers’ to reduce the coronavirus outbreak. ‘The UK is an outlier,’ say Professor Gabriel Scally, President of Epidemiology and Public Health at the Royal Society of Medicine. ‘It is very hard to understand why it persists in having this open borders policy. It is most peculiar.’ 15,000 passengers are still arriving each day to UK airports, with no routine testing (Financial Times).\textsuperscript{59}

Anthony Costello, a paediatrician and former WHO director, describes the UK government as a ‘one-club golfer’ for using only one strategy to deal with coronavirus – lockdown – when ‘it should be combined with testing, tracing and digital apps that have been used so successfully in South Korea.’ He adds: ‘It is a total mess and we have been wrong every stage of the way. We have to change our policy and at the current moment I don’t hear anything to suggest we are. They keep talking about flattening the curve which implies they are seeking herd immunity, but what we should have done is crush the epidemic and then keep it down’ (Telegraph).\textsuperscript{60}

The government announces NHS patients being discharged into care homes would be first tested for Covid-19 – ‘by which time almost 1,000 homes in England had suffered outbreaks. The guidance still allows discharges pending test results’ (Guardian).\textsuperscript{61}

\textbf{17 April 2020: Health Secretary Matt Hancock announces} the UK will restart tracing the contacts of people who have had coronavirus symptoms ‘reverting to a policy recommended by the World Health Organization but abandoned by the UK as the numbers of cases and deaths began to rise in early March’ (Guardian).\textsuperscript{62}

‘NHS bosses have asked doctors and nurses to work without protective full-length gowns when treating Covid-19 patients, as hospitals came within hours of running out of supplies,’ the Guardian reports. ‘The
guidance is a reversal of Public Health England guidelines stipulating that full-length waterproof surgical gowns, designed to stop coronavirus droplets getting into someone’s mouth or nose, should be worn for all high-risk hospital procedures’ (Guardian).  

A Cabinet source is quoted in the Telegraph about exit plans from the lockdown: ‘They are waiting for the public to change their minds. We didn’t want to go down this route in the first place – public and media pressure pushed the lockdown, we went with the science’ (Telegraph).

‘The Good Law Project says it has seen leaked hospital guidance telling doctors there was no need to write Covid-19 on death certificates and that it may be mentioned in another part of the form relating to indirect causes “should the doctor wish”,’ the Times reports. The Good Law Project notes ‘If doctors are being discouraged from reporting deaths as Covid-19 we have no way of knowing if government figures on deaths from coronavirus – the daily in hospital figures as well as the weekly ONS figures – are accurate’ (Times).

‘Operators said the infection rate in care homes was far higher than the 15 per cent acknowledge by the government [on 15 April], the Times reports. ‘Peter Calveley, chief executive of Barchester Healthcare, said that half its care homes had suspected or confirmed cases, while Jeremy Richardson, chief executive of Four Seasons, said around 60 per cent of its care homes had suspected cases. Methodist Homes has also said more than half its resident homes have confirmed or suspected cases’ (Times).

Of those hospitalised in the UK who tested positive for coronavirus, 15,464 have died (Department of Health and Social Care).

18 APRIL 2020: Data collated by Care England, the country’s largest representative body for care homes, suggests the number of care home residents who have died of suspected coronavirus may have reached 7,500 (Telegraph).

Dr Alison Pittard, the dean of the Faculty of Intensive Care Medicine, the professional body for intensive care practitioners, ‘said her faculty had been warning for years about a shortage of intensive care capacity
and intensive care nurses in hospitals. Normally each intensive care patient would have one intensive care nurse in attendance all the time, she said. Now there was one nurse to six patients, although other staff had been redeployed to intensive care units to plug the gaps and the new system was working because of heroic efforts’ (Guardian).69

‘There is no question that we were insufficiently prepared,’ Paul Nurse, Nobel laureate and head of the Francis Crick Institute, tells the Guardian about the government’s response to the outbreak. ‘We had been warned a few years ago when reports made it clear that the UK was not ready to combat a major flu pandemic and we did not take up that warning. As a result, we were caught out.’ (Guardian).70

19 April 2020: Speaking at the daily government press conference the deputy chief medical officer Dr Jenny Harries says the UK ‘Has been an international exemplar in preparedness. So the fact that there is a pandemic stockpile is considered a very high quality mark of a prepared country in international terms’ (Sky News).71

Richard Horton, the editor-in-chief of the Lancet medical journal, tweets in response: ‘When you see supposedly independent medical advisors to government tell what are manifest untruths to shore up a political regime whose credibility is rapidly collapsing, you have to say that those advisors have lost their integrity and our trust’ (Richard Horton).72

‘Data on patients with confirmed Covid-19 from the Intensive Care National Audit and Research Centre suggested ethnic minorities were overrepresented compared with the general population’, the Guardian reports. ‘Figures released on Friday showed that of 4,873 patients with Covid-19 in critical care, 1,681 were from the BAME community, accounting for 34.5% of cases’ (Guardian).73

Deepti Gurdasani from the William Harvey Research Institute at Queen Mary, and Hisham Ziauddeen at the University of Cambridge, publish a paper highlighting how the government’s decision to stop mass testing and contact tracing on 12 March was based on erroneous
modelling assumptions about the speed of receiving test results (Deepti Gurdasani and Hisham Ziauddeen).  

20 April 2020: ‘Figures verified by Nursing Notes, a website representing nursing professionals, and shared with Byline Times reveal that 100 frontline health, care and related staff have now lost their lives during the pandemic. The list includes 19 medical professionals (such as doctors), 49 nursing and midwife staff, nine allied health professionals, nine social care staff, 13 ancillary staff and a student nurse volunteer’ (Byline Times).

‘An NHS trust has been accused of “gagging” its staff by asking them not to tweet about “political issues” such as “PPE, testing and exit strategies”, the Independent reports. ‘Acceptable tweets included praising staff for their hard work, volunteering to move departments, working over the weekend and keeping people safe’ (Independent).

‘Senior intensive care consultants in London have told this programme they regard the original model of Nightingale [hospital] as unsafe because it ‘grossly underestimates the complexity of the disease.’ They warn it could drain away resources from other hospitals at what is a most critical time,’ the BBC World Tonight programme reveals (BBC World Tonight).

21 April 2020: ‘Dozens of patients with Covid-19 have been turned away from the NHS Nightingale hospital in London because it has too few nurses to treat them,’ the Guardian reveals. ‘The hospital has been unable to admit about 50 people with the disease and needing “life or death” care since its first patient arrived at the site, in the ExCeL exhibition centre, in London’s Docklands, on 7 April. Thirty of these people were rejected because of a lack of staff’ (Guardian).

The Trades Union Congress calls for the government to set up a public inquiry into the ‘grotesque’ failure to provide frontline workers with adequate PPE (TUC).
Joanna Cherry MP, the Scottish National Party’s Home Affairs spokesperson, writes to Home Secretary Priti Patel urging her to introduce screening for all travellers arriving at UK airports. Cherry had previously pressed Patel on this on 11 April (National).  

New figures published by the Office for National Statistics shows 13,121 of deaths in England and Wales up to 10 April involved Covid-19 – 41% more than the government’s official figure of 9,288 by 10 April (Office for National Statistics).  

22 April 2020: A Financial Times analysis of data from the Office for National Statistics suggests the coronavirus pandemic has already caused as many as **41,000 deaths** in the UK – more than double the official figure of 17,337 released by the government, which only counts people who died in hospital and who tested positive for coronavirus (Financial Times).  

Writing in the Guardian, Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, argues some ‘countries chose to treat’ the coronavirus outbreak ‘like a bad flu strain that would be unstoppable and spread across the population until some kind of immunity was reached.’ In the UK this was ‘the assumption until quite recently,’ she notes (Guardian).  

‘Some of the scientists advising the UK government on its handling of the coronavirus pandemic fear they will be used by ministers as “human shields” at a future public inquiry, and they have privately discussed how to protect themselves from any attempted blame game, BuzzFeed News reports. ‘Members of the Scientific Advisory Group for Emergencies (SAGE), and other experts who advise them, have become nervous about senior ministers, including first secretary Dominic Raab and chancellor Rishi Sunak, deflecting criticism this week by saying they had been “guided by the scientific and medical advice”’ (BuzzFeed News).  

23 April 2020: ‘Experts have voiced growing frustration over the UK government’s claim that it is “following the science”, saying the refrain is being used to abdicate responsibility for political decisions,’
the *Guardian* reports. ‘They also raised concerns that the views of public health experts were being overlooked, with disproportionate weight given to the views of modellers.’ Professor Devi Sridhar, chair of global public health at the University of Edinburgh, ‘said the failure to fully consider the perspectives of experts beyond epidemiology may have contributed to misguided decisions’ (*Guardian*).  

‘Government pandemic planning should have focused more on the threat of a new respiratory virus rather than an influenza outbreak, Jeremy Hunt, the former health secretary, conceded,’ the *Times* reports. ‘He said he regretted that Britain had not learned more from how countries in Asia had responded to the Sars virus in planning for a health emergency’ (*Times* newspaper, 24 April).

‘The chief executive of Heathrow airport has called on the government to introduce mass health screening checks at airports following criticism of Britain’s loose border controls during the worst global pandemic for a century,’ the *Financial Times* reports. ‘These could include measures such as temperature checks, antibody tests and a requirement to carry a health certificate. Downing Street rejected the call for checks at airports, saying the government’s position was “based on medical and scientific advice”’ (*Financial Times*).

Professor Azeem Majeed, head of public health at Imperial College London, is quoted in the *Telegraph*: ‘We need to use this *lockdown* to recruit large numbers of contact tracers, get them in post, get them working with local public health teams so we have a large scale programme in place as soon as possible. If for example you look at Wuhan in China, they recruited 9,000 contact tracers for 11 million people. That’s around 50,000 people for England. So we need to look at large volumes of contact tracers, not just a few hundred or a few thousand. We need tens of thousands, maybe even 100,000 people to do contact tracing’ (*Telegraph*).

24 April 2020: ‘The prime minister’s chief political adviser, Dominic Cummings, and a data scientist he worked with on the Vote Leave campaign for Brexit are on the secret scientific group [SAGE] advising the government on the coronavirus pandemic’, the *Guardian*
reveals. Former Chief Scientific Adviser Sir David King notes political advisers were never on the equivalent committees of SAGE when he chaired them (Guardian). \(^{88}\)

The government is not testing sick care home residents for coronavirus 10 days after Health Secretary Matt Hancock promised that anyone in residential care would be checked if symptomatic, the Guardian reports, citing a leaked email. ‘I’m convinced the loss of life in care homes could have been limited,’ says Labour MP Peter Kyle. ‘They could have tested, got the right PPE, and stopped workers working between multiple homes. They put the NHS on battle stations but they left social care as business as usual ... It has been criminal neglect’ (Guardian). \(^{89}\)

‘Staff at care homes, GP surgeries and hospices will have to wait at least a month for government-supplied personal protective equipment, prompting criticism that they are being treated as second-class citizens. An online portal allowing primary and social care providers to order PPE, which had been due to start operating early this month, is now not expected to be in full operation for another five weeks,’ the Times reveals. ‘A similar marketplace used by the French government was built in 48 hours and has been running for nearly a month’ (Times). \(^{90}\)

The Financial Times reports Chris Whitty, the chief medical adviser, ‘made it clear the government’s 100,000 testing target had not been based on scientific advice, while endorsing the broader goal of an increase in testing’ (Financial Times). \(^{91}\)

26 April 2020: ‘The involvement of the Prime Minister’s chief political adviser, Dominic Cummings, in meetings of the scientific group advising the UK government’s response to the coronavirus has left other attendees shocked, concerned and worried for the impartiality of advice’, the Guardian reports. ‘One attendee of the Scientific Advisory Group for Emergencies (SAGE) said they felt Cummings’ interventions had sometimes inappropriately influenced what is supposed to be an impartial scientific process.’ The Guardian notes ‘a second SAGE attendee said they were shocked when Cummings first began participating in SAGE discussions, in February’ (Guardian). \(^{92}\)
After reviewing all publicly available minutes of SAGE meetings over the last decade, the Guardian reports Downing Street political advisers have never before attended SAGE meetings (Guardian).\(^{93}\)

The UK’s death toll could reach 100,000 if the lockdown is lifted too early, warns Imperial College’s Professor Neil Ferguson, who is a member of SAGE (Mirror).\(^{94}\)

Out of 210 care home providers spoken to by the BBC, 159 said none of their workers had had a test. ‘The government said all symptomatic staff, residents and their families would be tested’ (BBC News).\(^{95}\)

Dominic Raab, the Foreign Secretary who has been standing in for the Prime Minister, said the Government was ‘on track’ to hit the target of 100,000 daily tests by 30 April (Telegraph).\(^{96}\)

‘The opportunities presented by technology should be fully investigated, but seeking quick solutions in surveillance tools that rely on our personal data creates serious long-term threats to our rights and ways of life,’ comments Clare Collier, the advocacy director at civil rights group Liberty, on government plans for a contact tracing app. ‘Contact-tracing technology will only work if 60% of people use it. But people will only use it if they trust their rights are being protected. For this approach to have any hope of helping us beat the virus, privacy safeguards must be hard-wired into the design from the outset’ (Guardian).\(^{97}\)

27 April 2020: The BBC Panorama programme ‘Has the Government failed the NHS?’ is broadcast. The investigation finds the Government ‘failed to buy crucial protective equipment to cope with a pandemic... there were no gowns, visors, swabs or body bags in the government’s pandemic stockpile when Covid-19 reached the UK.’ Covid-19 was officially designated a High Consequence Infectious Disease (HCID) in January, the programme explains, a decision made in consultation with a group of British experts. On 13 March, the Government downgraded its guidance on PPE and told NHS staff they were safe to wear less protective aprons and basic surgical masks in all but the most high-risk circumstances. ‘Panorama understands that on the same day, the government took steps to remove Covid-19 from the list of
HCIDs. But the experts who had recommended the coronavirus be put on the list in the first place were not consulted' (*BBC News*).98

A self-selecting survey undertaken by the Royal College of Physicians (RCP) of 2,129 hospital doctors found 27% said they could not get the protective kit they needed to keep them safe while treating patients with Covid-19, up from 22% who said the same when the RCP conducted the same survey at the beginning of April. ‘We’re living through the darkest times the NHS has ever faced... and it is truly terrible that supply has worsened over the past three weeks rather than improved’, said Professor Andrew Goddard, the college’s president (*Guardian*).99

Speaking outside Downing Street the Prime Minister says ‘this is the biggest single challenge this country has faced since the war and I no way minimise the continuing problems we face.’ He adds ‘There will be many people looking now at our apparent success and beginning to wonder whether now is the time to go easy on those social distancing measures’ (*Mirror*).100

28 APRIL 2020: ASKED ON LBC RADIO WHY THE recommendations of *Exercise Cygnus* in 2016 were not implemented, Health Secretary Matt Hancock says he checked with ‘his officials’ and was assured ‘everything that was recommended was done’ (*LBC*).101

Health Secretary Matt Hancock announces government policy is to test care home staff and residents only once unless the person subsequently develops symptoms. ‘The early weeks of the new testing regime were mired in ‘a complete system failure,’ care operators complained,’ the *Guardian* reports. ‘At one point we got the results after 24 hours, some we never get back and some we get back a week later. That’s not helpful when they come back positive. In that week they have been happily spreading the virus around’, said Anita Astle, the manager at Wren Hall nursing home in Nottinghamshire (*Guardian*).102

A Home Office paper discussed by SAGE notes, ‘SAGE previously discussed this issue and concluded that as imported cases account for such a small percentage of total cases (~0.5% at the time), there was
little scientific justification for implementing any measures at the border at that point’ (*Express & Star*).\(^{103}\)

**29 April 2020:** Research from University College London and Data-Can, a health data research hub for cancer diagnosis and treatment in the UK, shows ‘Almost 18,000 more people with cancer in England could die after the coronavirus pandemic led hospitals to suspend treatment and deterred patients from seeking NHS care’ (*Guardian*).\(^{104}\)

Based on interviews with sources in or close to Downing Street, the Department of Health and Social Care, the Cabinet Office, COBRA and SAGE, as well as other advisers and experts, a Guardian investigation reveals ‘some experts believe Britain’s exceptional response arose in part because government preparations for a pandemic were so weighted to a flu outbreak.’ Professor Graham Medley, a SAGE member and the chair of SPI-M, which stands for scientific pandemic influenza – modelling: ‘Everything – government preparedness, the modelling – was based on pandemic influenza. And that’s not because of lack of awareness on our part, that’s because that got the government attention and the funding. We could persuade them that flu was important’ (*Guardian*).\(^{105}\)

‘Inquests into coronavirus deaths among NHS workers should avoid examining systemic failures in provision of personal protective equipment (PPE), coroners have been told, in a move described by Labour as “very worrying”;’ the Guardian reports. ‘The chief coroner for England and Wales, Mark Lucraft QC, has issued guidance that “an inquest would not be a satisfactory means of deciding whether adequate general policies and arrangements were in place for provision of PPE to healthcare workers”’ (*Guardian*).\(^{106}\)

‘26,097 people died across the United Kingdom after testing positive for COVID-19 as of April 28 at 1600 GMT, Public Health England said, citing daily figures that included deaths outside of hospital settings for the first time,’ *Reuters* report. ‘That means the United Kingdom has suffered more COVID-19 deaths than France or Spain have reported,'
though less than Italy, which has Europe’s highest death toll and the second worst in the world after the United States’ (Reuters).\textsuperscript{107}

Scottish National Party MP Dr Philippa Whitford says the rate of asymptomatic spread accounts for around 50\% of the virus (Philippa Whitford).\textsuperscript{108}

The Financial Times estimates the real UK death toll to be 47,100 (Chris Giles).\textsuperscript{109}

**30 April 2020:** Leading the government’s daily press briefing, the Prime Minister says, ‘We have so far succeeded in the first and most important task we set ourselves as a nation – to avoid the tragedy that engulfed other parts of the world’ (Prime Minister’s Office, 10 Downing Street).\textsuperscript{110}

Speaking on the BBC Today programme, Saffron Corderoy, the Deputy Chief Executive of NHS Providers, the membership organisation for hospitals, the mental health community and ambulance services in England, calls the Government’s 100,000 testing target ‘a red herring’ because ‘it is not actually meaningful in anyway.’ She continues: ‘What it doesn’t show is who has been tested and to what end... What we need to do is focus on testing key groups of NHS staff, care worker staff, social care staff and key workers in a systematic way’ (BBC Today).\textsuperscript{111}

Speaking on BBC Question Time, Sir Paul Nurse, chief executive of the Francis Crick Institute and former director of the Royal Society, describes the government’s 100,000 daily testing target as ‘a bit of a PR stunt which has gone a bit wrong... testing was absolutely critical. It hasn’t been handled properly’ (BBC Question Time).\textsuperscript{112}

‘By the end of April, 6,500 care home residents in England were dead from Covid-19’ (Guardian).\textsuperscript{113}

An Ipsos MORI poll finds ‘there has been a significant rise in the number of people that think the Government acted too late in taking stricter measures, up 9 percentage points, from 57\% to 66\% in the last two weeks’ (Ipsos MORI).\textsuperscript{114}
May 2020

With the incidence of the virus reducing, the Prime Minister announces an easing of the lockdown on 10 May. Questions about the effectiveness of the test-and-trace system put in place by the government dominate the news agenda. Independent SAGE is established. On 22 May reports emerge that the Prime Minister’s Chief Adviser Dominic Cummings violated the lockdown rules by travelling from London to Durham.

1 May 2020: Health Secretary Matt Hancock announces the Government has exceeded its goal of 100,000 tests a day by the end of April, with 122,347 tests carried out on 30 April (Matt Hancock).

However, BBC Reality Check explains ‘this figure includes home testing kits which are counted when they are sent out - so it does not mean the test was actually completed or returned to a lab’ (BBC Reality Check).

In addition, the number of people tested on 30 April was 73,191, probably because some people are tested twice for clinical reasons (BBC Reality Check).
The BBC’s Andrew Neil describes the government announcement as ‘a propaganda figure rather than a reliable guide’ (Andrew Neil).  

MHA care homes, which has 222 facilities in the UK, said the Prime Minister was being ‘at best disingenuous’ when he told yesterday’s Downing Street press briefing the UK had come through the peak and there was sunlight ahead. Sam Monaghan, the chief executive of the network, said: ‘We are now 43 days in from lockdown, yet still our residents and staff have not received the enhanced level of protection that they need. The government will be held to account for this’ (Guardian).

The Office for National Statistics reports those living in the poorest parts of England and Wales were dying at twice the rate of those in the richest areas (Guardian).

3 MAY 2020: A new poll from Opinium suggests there is a broad public opposition to lifting the lockdown, with 67% of respondents opposed to opening schools, 78% and 81% opposed to opening restaurants and pubs respectively, and 84% against allowing mass gatherings at sports events or concerts to resume. The poll also ‘shows the government struggling to hold on to public support over its handling of the coronavirus crisis,’ the Observer notes. ‘The percentage of people who approve of its management of the crisis has fallen from 61% three weeks ago to 47% now, with the proportion of those who disapprove up from 22% to 34%’ (Observer).

48% of doctors have sourced their own PPE or relied on a donation when none was available through normal NHS channels, according to a survey by the British Medical Association of more than 16,000 doctors in England (Guardian).

4 MAY 2020: The Guardian notes ‘Ministers face ongoing criticism over coronavirus testing, as the number of daily tests dropped below 80,000, care home staff reported difficulties in getting checked and home kits were delivered without return envelopes’ (Guardian).
Announcing the setting up of an independent **Scientific Advisory Group for Emergencies** group on the *BBC Today* programme, Sir David King, a former chief scientific adviser, is asked to confirm if he thinks the government’s current science and medical advisers ‘are not free to speak their minds’ in the daily press conferences and ‘when they answer… questions they are deferring to ministers’. King answers: ‘I believe that is the case, yes’ (*BBC Today*).\(^\text{10}\)

**5 May 2020:** Speaking to the *Health Select Committee* about testing, England’s deputy chief medical officer Jenny Harries admits, ‘the UK’s decision to stop community testing and contact tracing for covid-19 in early March was partly driven by a lack of testing capacity,’ according to the *British Medical Journal*. ‘The issue here is what capacity do we have to undertake testing and where should that be prioritised,’ Harries says. ‘If we had unlimited capacity and the ongoing support beyond that then we would perhaps choose a slightly different approach’ (*British Medical Journal*).\(^\text{11}\)

‘Policies designed to prevent hospitals from being overwhelmed pushed a greater burden onto **care homes**,’ a *Reuters* investigation reveals, after studying documents from government agencies and interviewing five leaders of local authorities and eight care home managers. ‘With hospitals given priority by the government, care homes struggled to get access to tests and protective equipment. The elderly were also put at potentially greater risk by measures to admit only the sickest for hospital treatment and to clear out as many non-acute patients as possible from wards’ (*Reuters*).\(^\text{12}\)

‘The Government share with employers and unions its draft guidance on how to get employees back to work,’ the *Telegraph* reports. The Trades Union Congress ‘cannot support’ the current plans, general secretary Frances O’Grady says. ‘The union accused ministers of failing to increase enforcement to prevent companies flouting the law. The Government’s guidance says that ‘employers should consider’ action such as enabling social distancing or providing handwashing facilities, but also states employers can decide to ignore the suggestions, according to the TUC’ (*Telegraph*, 5 May).
Speaking to the Health Select Committee, Chief Scientific Adviser Sir Patrick Vallance says the evidence available shows ‘the risk at one metre is about 10–30 times higher than the risk at two metres, so social distancing is an important part of this’ (*PoliticsHome*).

The government reports the UK **death toll** is now 29,472, meaning the UK now has the highest number of coronavirus deaths in Europe, according to government figures (*BBC News*).

**6 MAY 2020:** **THE PRIME MINISTER AND HIS SENIOR MINISTERS** – Michael Gove, Rishi Sunak, Matt Hancock, Dominic Raab – meet to approve the plan to start lifting the **lockdown**. They approved ‘a less aggressive plan than many ministers had been calling for,’ the *Sunday Times* reports. ‘They did so after being told that the real rate of new Covid-19 infections was 18,000 a day when the government target rate is 4,000 a day’ (*Sunday Times*).

‘[Health Secretary] Matt Hancock’s claim to have triumphed in meeting his goal of 100,000 tests a day appears in serious doubt after the government failed for the fourth time in a row to hit the target they believe is crucial for exiting the **lockdown,**’ the *Guardian* reports. Just 69,463 tests were carried out or posted to recipients on 5 May (*Guardian*).

‘The NHS’s contact-tracing app will fail unless sufficient numbers of Android phone users sign up, experts who have examined its trial use on the Isle of Wight have said,’ the *Guardian* reports. This is because the NHS’s app ‘cannot use tools built by Apple and Google for the purposes of contact tracing’ (*Guardian*).

**7 MAY 2020:** **SIR IAN DIAMOND, HEAD OF THE OFFICE FOR National Statistics,** estimates there are at least three times as many new cases every day as recorded by official statistics, the *Times* reports. ‘He agreed with estimates that daily cases were running at about 20,000, while it is understood that cabinet has been told the figure is between 16,000 and 18,000’ (*Times*).
Sam Monaghan, chief executive of MHA, the UK’s largest charitable provider of care homes, tells the Guardian ‘Given the perilous state the social care sector continues to find itself in, easing restrictions, which will no doubt lead to greater spread of Covid-19 in the general population, will inevitably increase the risk of infection to our staff and our homes... without a comprehensive plan for the care sector, easing restrictions would be a reckless move’ (Guardian). 19

The Times reports, ‘Patients being tested for Covid-19 are being told it will take up to ten days to get results because of delays in samples being processed’ (Times). 20

Richard Horton, editor-in-chief of the Lancet medical journal, tweets: ‘Dear Prime Minister - Please don’t dilute your policy of lockdown. Not yet. We have come so far. We need 3 more weeks’ (Richard Horton). 21

The House of Commons Joint Committee on Human Rights publishes a report on the government’s proposed contact tracing app ‘concluding that if effective, the app could pave the way out of the current lockdown restrictions and help prevent the spread of Coronavirus, but there are significant concerns regarding surveillance and the impact on other human rights which must be addressed first.’ In addition ‘The Committee were also highly concerned that the app had not been subject to in-depth parliamentary scrutiny, as previous extensions of state powers of surveillance and data collection for terrorism prevention, had been in the past’ (Joint Committee on Human Rights). 22

The Financial Times estimates the real UK death toll to be 55,000 (Chris Giles). 23

8 MAY 2020: Professor John Edmunds of the London School of Hygiene and Tropical Medicine, who sits on the government’s SAGE, warns the present level of cases made it ‘probably impossible’ to control the outbreak through contact tracing (Times). 24

A YouGov poll finds 75% of respondents believe it would be wrong for the government to start loosening lockdown now, with 46% of respon-
dents saying it would be right for the government to start loosening lockdown in three weeks (YouGov).\textsuperscript{25}

\textbf{9 May 2020: Home Office figures show that just 273 of about 18.1 million people arriving in the UK in the first three months of the year had to spend time in isolation (Guardian).\textsuperscript{26}}

‘More people in this country now believe the UK has performed worse than Italy, Spain and France in the Covid-19 crisis than say it has done better than its European neighbours, according the latest Opinium poll,’ the Observer reports. ‘It appears that the rise of the UK death toll above those of other nations has shifted public opinion about the effectiveness of the UK response’ though ‘Overall more people still approve of the way the UK has handled the crisis (48% approve against 36% who disapprove)’ (Observer).\textsuperscript{27}

\textbf{10 May 2020: In a televised address the Prime Minister announced an easing of the lockdown, urging people in jobs such as construction and manufacturing to return to work and giving permission for unlimited outdoor exercise, the i newspaper reports. ‘He raised the prospect of some primary school lessons resuming and shops beginning trading next month... The Government replaced it’s ‘stay at home’ instruction to the public with a plea to ‘stay alert’ to the dangers of the virus’ (i).\textsuperscript{28}}

The Prime Minister announces the Government will soon be introducing a 14-day quarantine for travellers arriving at UK airports (Mirror).\textsuperscript{29}

Scotland, Wales, and Northern Ireland all reject the Prime Minister’s new ‘stay alert’ slogan and said they will continue to stress the ‘stay at home’ message of the lockdown (Financial Times).\textsuperscript{30}

Britain could suffer more than 100,000 deaths by the end of the year if the government relaxes the lockdown too fast, a scientific adviser to the government tells the Sunday Times. ‘Warnings about the potential death toll were sent to the government’s SAGE advisory
committee early last week by researchers from the London School of Tropical Hygiene, Imperial College London and other centres. They modelled different lockdown exit policies... the source said more than one model had put the death toll in six figures in some scenarios’ (Sunday Times).³¹

Speaking on Sophy Ridge on Sunday Dr Michael Veale, Lecturer in Digital Rights and Regulation at University College London said the UK was, in effect, the only country in the world to use self-reporting, rather than tests, to trigger contact tracing. ‘That appears to stem from, not a lack of number of tests potentially, but really something that hasn’t been focused on enough – the tests aren’t fast enough in the UK compared to other countries,’ he explains. ‘And so the UK seems to claim it’s stuck using self-reporting because it can’t get a test turned around within a few hours’ (Times).³²

Interviewed on the BBC’s Andrew Marr Show, British statistician and Winton Professor of the Public Understanding of Risk in the Statistical Laboratory at the University of Cambridge Sir David Spiegelhalter describes the government’s daily press briefings as ‘completely embarrassing.’ Noting the government has downplayed the number of deaths and exaggerated the number of tests, Sir David says, ‘this is actually not trustworthy communication on statistics.’ The general public is ‘feed what I call number theatre, which seems to be coordinated really much more by the Number 10 communications team rather than genuinely trying to inform people about what’s going on’ (BBC Andrew Marr Show).³³

11 May 2020: Writing in the Guardian, David Hunter, Professor of Epidemiology and Medicine in the Nuffield Department of Population Health at the University of Oxford, argues, ‘If we take the prime minister’s advice and return to work in large numbers now – and without the ability to test, trace and isolate – then virus spread will increase, there will be super-spreader events and local or regional lockdowns will have to be reconsidered’ (Guardian).³⁴

Speaking on BBC Newsnight, former Chief Scientific Adviser Sir David King says ‘I think it would be foolhardy to go back to work now...we
should be considerably more cautious about undoing the *lockdown* (*BBC Newsnight*).\(^{35}\)

‘A system of testing, tracing, and isolating is still not in place,’ write KK Cheng, Professor of Public Health and Primary Care and Director at the Institute of Applied Health Research, University of Birmingham, and Wenjie Gong, Associate Professor at the Xiangya School of Public Health, Central South University, China, on the *British Medical Journal* blog. ‘Adequate provision of high quality *PPE* is not secure. Transmissions in *care homes*, hospitals, and households are far too high. Of course, the Government needs to balance health, wealth, and public acceptance of *lockdown* in making decisions. In this case, however, the health implications are so overwhelming that loosening the lockdown too much now will not do the economy and people’s livelihoods any good’ (*British Medical Journal*).\(^{36}\)

Speaking in the House of Commons ‘former health secretary, Jeremy Hunt, has said lives could have been saved if the UK had ramped up coronavirus testing sooner, as he attacked “one of the biggest failures of scientific advice to ministers in our lifetimes”’ (*Independent*).\(^{37}\)

Speaking to *Double Down News*, Professor John Ashton, a former regional director of public health for north-west England, says ‘I don’t think *herd immunity* has ever gone away in all of this. It has been lurking in the background as a fall-back position for a failure to get to grips with this, to do the testing and control it’ (*Double Down News*).\(^{38}\)

**12 May 2020:** Downing Street stops publishing graphs that compare the UK coronavirus *death toll* to the total in other countries (*Huffington Post*).\(^{39}\)

‘International comparison charts were shown at the Downing Street daily briefing until England’s death rate from Covid-19 hit a trajectory set to take it above other European nations,’ the *Guardian* reports on 17 May. ‘Ministers have said comparisons are not accurate because countries collect their data in different ways’ (*Guardian*).\(^{40}\)

After raising the issue with the Prime Minister in the House of Commons, Conservative MP Kevin Hollinrake tells *BuzzFeed News* it is
taking up to five days to get tests results turned around in some settings, such as care homes, and even longer in other instances. Singapore provides patients with results in hours, while in South Korea patients are usually informed of their test result within a day (BuzzFeed News).

13 May 2020: During Prime Minister’s Questions, Labour Party leader Keir Starmer reads out testimony from a cardiologist: ‘We discharged known, suspected and unknown cases into care homes which were unprepared with no formal warning that patients were infected, no testing available and no PPE to prevent transmission. We actively seeded this into the very population that was most vulnerable’ (carehome.co.uk).

The Alzheimer’s Society warns the ‘lives of people with dementia continue to be put in danger’ and calls for weekly testing of all care home staff and residents. A survey of 105 care homes finds over half of care homes can’t isolate residents, and 43% are still not confident of their PPE despite nearly a third taking Covid-19 positive patients from hospital (Alzheimer’s Society).

‘UK & US challenge is govt & scientists flying blind,’ tweets Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh. ‘No good data on community transmission, no real-time surveillance in place, testing barely established. If data reveal few cases in certain part of country then much safer to open schools & resume activity. We just don’t know’ (Devi Sridhar).

‘Central government excluded local partners from key intelligence and failed to share enough information, hampering the response to coronavirus,’ the Municipal Journal, an online management journal for local authority business, reveals after receiving a leaked interim operational review. One contributor to the review by the C-19 National Foresight Group, a cross-government and partnership team created to support local resilience forums ‘described information sharing by central government as “woefully lacking” while another said the process was “peppered with surprise announcements at various tiers of government, resulting in partners being on the back foot and having to plan/communicate live
rather than prepare (and with stretched resources)” (Municipal Journal).\(^{45}\)

**14 May 2020:** Former health secretary Jeremy Hunt discusses testing on the *BBC Today* programme: ‘If you call up because you have got Covid symptoms, you really need test results back in 48 hours. Within that window, we need to contact everyone who you have been near in the last three or four days. That’s really got to happen very, very fast, otherwise there’s no point’ (*Times*).\(^{46}\)

‘Is it safe currently to go on public transport? I don’t think so. Is it safe to open schools? I don’t think so,’ Professor Devi Sridhar, chair of global public health at the University of Edinburgh, says on *BBC Question Time* about lifting the lockdown. ‘Because we don’t have in place the basic building blocks of surveillance to actually know who has the virus. And if the lockdown starts opening up now before we have the infrastructure in place, it’s basically pointless... what we are going to see is cases are going to go up... the virus is going to continue spreading and in a few weeks we are going to have this exact same debate again’ (*BBC Question Time*).\(^{47}\)

An Ipsos MORI poll finds ‘the majority of Britons (53%) think the Government should prioritise peoples’ health, with more restrictions on public events, workplaces and travel, compared to just 11% who think it should prioritise economic health by having less restrictions. Whilst three in ten say it should be both equally’ (Ipsos MORI).\(^{48}\)

The government publishes new guidelines stipulating that staff and agency workers should work in only one care home ‘wherever possible’ (*Guardian*).\(^{49}\)

‘Sources close to Downing Street say the target for new daily infections is 5,000 before the lockdown can ease, but other more cautious voices in government are understood to be pushing for fewer than 4,000 new cases a day,’ the *Guardian* reports. ‘There is scepticism within the government that the UK will have reached that figure before 1 June, the first possible date for easing the lockdown.’ With the latest figures suggesting a ‘crude estimate’ of 10,000 new cases each day, Paul Hunter,
Professor in Medicine at the University of East Anglia, says the figures show that ‘we’re still some way off getting to a point where we can relax restrictions a lot’ (Guardian).  

15 May 2020: During the daily government briefing, Health Secretary Matt Hancock says ‘Right from the start we’ve tried to throw a protective ring around our care homes. We set out our first advice in February... we’ve made sure care homes have the resources they need to control the spread of infection’ (Sky News).

Palliative care doctor Rachel Clarke tweeted in reply: ‘This is categorically untrue. Care homes were left without testing. Without contract tracing. Without PPE. Without support. You can deny it all you like, @MattHancock, but we were witnesses - we ARE witnesses - and believe me you will be held to account’ (Rachel Clarke).

The Health Secretary also announces ‘we’ll test every resident and every member of staff in our elderly care homes in England between now and early June’ (BBC Reality Check).

‘A care home owner has told how he was forced to take in infected hospital patients, which led to seven of his residents dying of Covid-19,’ the Telegraph reports. David Crabtree, who manages two care homes in Bradford commented: ‘The irony is that discharging without testing will put more people in more hospital beds - not empty them.’ Nicola Richards, Director of Palms Row Health Care which operates three nursing homes in Sheffield, notes ‘We are aware that patients are being discharged without tests, or have been tested but the results are not available yet. This should have been thought about months ago’ (Telegraph, 15 May).

The British Medical Journal publishes an editorial: ‘the UK’s response so far has neither been well prepared nor remotely adequate,’ it argues, noting the ‘reckless policy of discharging older patients from hospitals to care homes without testing allowed the virus to spread and kick start a second epidemic of community infection.’ The editorial continues: ‘By the time the UK formally announced a lockdown with a huge package of economic support measures, almost two months of potential
preparation and prevention time had been squandered. The delay in the face of emerging evidence that the Italian lockdown reduced viral transmission by about half looks likely to have cost many lives’ (British Medical Journal).  

‘Only 1,500 of the 18,000 people the government wants to recruit as contact tracers have been appointed, a cabinet minister has admitted,’ the Guardian reports. ‘The Northern Ireland secretary, Brandon Lewis, told Sky News... there had been 15,000 applications, but only 1,500 had been hired by the start of the week’ (Guardian).

According to Reuters, Dr Helen Carter, PHE’s deputy director in the Midlands, sent a memo to Birmingham councillors explaining ‘the government had initially ordered the agency not to share with local councils its surveillance reports containing data about notified cases from local hospital emergency rooms and general practitioners’ (Reuters).

The Financial Times estimates the real UK death toll is 61,200 (Chris Giles).

16 May 2020: The Observer reports a new poll ‘shows that approval for the government over its handling of the pandemic has plummeted by nine points in the last week... For the first time since Opinium began tracking views on the pandemic in March, more people disapprove of the government’s handling than approve’ (Observer).

17 May 2020: ‘Support for the government’s handling of coronavirus has dropped sharply since the prime minister’s address to the nation last weekend’, Sky News reports. ‘For the first time, more people think the government’s approach to the epidemic is going badly than is going well,’ with 49% of people polled by YouGov saying the government was doing badly, and 47% that it was doing well (Sky News).

In several hospitals up to a fifth of patients with Covid-19 contracted the disease on site after being admitted for another illness, the Guardian
reports. ‘Senior doctors and hospital managers say that doctors, nurses and other staff have inadvertently passed on the virus to patients because they did not have adequate **personal protective equipment (PPE)** or could not get tested for the virus’ (*Guardian*).\(^{60}\)

**18 May 2020:** Writing in the *Guardian*, Professor of Global Health at UCL and an ex-WHO director Anthony Costello, argues ‘the government’s decision [to abandon the community test, trace and isolate strategy on 12 March... led to the uncontained explosion of the Covid-19 epidemic’ (*Guardian*).\(^{61}\)

Speaking to the *Telegraph*, former health secretary Jeremy Hunt said, ‘It is absolutely essential that test, **track and trace** is up and running before we start sending people back to school, so time is very tight.’ Hunt added the UK needed to be performing 500,000 tests a week to meet the demands of a national test-and-trace programme (*Telegraph, 18 May*).

‘Temporary care workers transmitted Covid-19 between **care homes** as cases surged, according to an unpublished government study which used genome tracking to investigate outbreaks,’ the *Guardian* reveals. ‘In evidence that raises further questions about ministers’ claims to have ‘thrown a protective ring around care homes,’ it emerged that agency workers – often employed on zero-hours contracts – unwittingly spread the infection as the pandemic grew, according to the study by Public Health England (PHE)’ (*Guardian*).\(^{62}\)

**19 May 2020:** The deputy chief scientific adviser acknowledges the Government’s decision to abandon its initial coronavirus test-and-trace policy was influenced by a lack of available tests, *PoliticsHome* reports. Professor Dame Angela McLean said, ‘The advice that we gave certainly took account of what testing was available. It was the best thing to do with the tests that we had.’ Asked if the advice given was based on the capacity at the time, Dame Angela says, ‘I think that's what I just said, yes’ (*PoliticsHome*).\(^{63}\)

‘The government's ability to test people for coronavirus has been “inadequate” throughout the pandemic, a committee of MPs has said,’ *BBC News* reports. The Science and Technology Committee said capacity had not been increased ‘early or boldly enough’ and that a lack of capacity had driven initial decisions in mid-March to reduce contact tracing and largely restrict tests to hospital patients. In a letter to the Prime Minister Committee chairman Greg Clark, a Conservative Party MP, said capacity ‘drove strategy, rather than strategy driving capacity’ (*BBC News*).64

‘The first national review to capture the UK’s response to coronavirus has... warned that failing to seek an extension [to Brexit] threatened to “compound COVID-19 with a second UK societal-wide, economic and social, chronic threat,”’ the *Municipal Journal* reports. Contributors to the leaked report by the C-19 National Foresight Group, a cross-government team supporting local resilience forums, said preparations for a no-deal Brexit threatened to ‘overwhelm’ and ‘burnout’ local disaster planning capacity (*Municipal Journal*).65

**20 May 2020:** ‘We have growing confidence that we will have a test, track and trace operation that will be world-beating and yes, it will be in place by June 1,’ the Prime Minister says during Prime Minister’s Questions in the House of Commons (*BBC News*).66

‘Boris Johnson should resist calls to ease the lockdown including reopening schools until a new system to trace the spread of coronavirus is a proven success, according to two members of the government's scientific advisory council,’ *Sky News* reports. Professor John Edmunds, dean of the faculty of epidemiology and population health at the London School of Hygiene and Tropical Medicine and a member of SAGE, said a ‘well functioning track and trace system’ was needed before lifting lockdown further. ‘Without that, we would return to a situation where the epidemic is increasing,’ he noted (*Sky News*).67

‘A programme to train thousands of contact-tracers to help control the spread of coronavirus has been described as shambolic and inadequate by recruits,’ the *Guardian* reveals. People hired ‘have reported spending days just trying to log into the online system, and virtual training
sessions have “left participants unclear about their roles”. When ‘someone taking part in a training session... asked for guidance on how to speak with somebody whose loved one had died of coronavirus, they were reportedly told to look at YouTube videos on the topic’” (Guardian).

‘Fully reopening schools without substantial improvements in the performance of the test-and-trace system could risk a new surge in cases of Covid-19, according to calculations by the government’s scientific advisers,’ the Guardian reports. ‘A report presented to the Scientific Advisory Group for Emergencies (SAGE) on 20 May, at a time when the government was weighing up the impact of school reopening in England, indicated little leeway for increasing school attendance and relaxing other physical distancing measures without a test-and-trace system that reaches 80% of contacts within 48 hours’ (Guardian).

21 May 2020: ‘Tens of thousands of Covid-19 tests have been double-counted in the Government’s official tally, public health officials have admitted,’ the Telegraph reports. ‘Diagnostic tests which involve taking saliva and nasal samples from the same patient are being counted as two tests, not one. This inflates the daily reported diagnostic test numbers by over 20 per cent’ (Telegraph).

‘Sars-CoV-2 causes mild disease in most cases, and gives rise to antibody responses in nearly all cases’, Rupert Beale, clinician scientist group leader at the Francis Crick Institute, notes in the London Review of Books. ‘We don’t know how long these responses will last, but it is likely that people who suffer only mild disease will be susceptible to reinfection after a few months or years. Humanity has never developed ‘herd immunity’ to any coronavirus, and it’s unlikely that Sars-CoV-2 infection will be any different’ (London Review of Books).

SAGE warns ‘that if the test, trace and isolate (TTI) system begins operating when there is a relatively high level of incidence and prevalence of Covid-19 in the population, the system could very rapidly become overwhelmed’ (SAGE).
22 May 2020: Around 30,000 deaths could have been prevented if the government had put the UK into lockdown just a week earlier, according to modelling by British scientist James Annan from Blue Skies Research. The death toll would be around the 8,000 mark – similar to Germany – and would likely have been shorter and caused less damage to the economy. ‘This is all quite simple maths that every single modeller involved in SAGE was fully aware of at the time,’ Annan notes (Mirror).73

Sir Ian Boyd, a professor of biology at St Andrews University and member of the government’s SAGE committee, tells the BBC Coronavirus Newscast he ‘would have loved to have seen’ the government ‘acting a week or two weeks earlier and it would have made quite a big difference to the steepness of the curve of infection and therefore the death rate’ (BBC News).74

The ‘Independent SAGE’ committee, which is separate from the government’s official advisers and is chaired by the former chief scientist Sir David King, warns that 1 June is too early to reopen schools. ‘It is clear from the evidence we have collected that 1 June is simply too early to go back’, Sir David says. ‘By going ahead with this dangerous decision, the government is further risking the health of our communities and the likelihood of a second spike’ (Guardian).75

The Guardian reports Patrick Vallance, the government’s chief scientific adviser, says SAGE has ‘been very clear that an effective ‘test, track and trace’ mechanism was necessary in the event of schools reopening, and the sooner in place the better in order to make changes to England’s lockdown’ (Guardian).76

‘The UK’s contract tracing plan has two more fundamental flaws that threaten to undermine its effectiveness,’ Wired reports. ‘The app is unusual in that it does not send alerts based on confirmed cases of coronavirus. Instead, in its current iteration, it asks users to report whether they have coronavirus symptoms and if they do, an alert may be sent to other app users with whom they have been in contact.’ This approach makes the UK an outlier compared to other countries, with proposed or active contact tracing apps in Germany, Australia, Austria, France, Iceland, and Singapore all relying on testing, rather than symptoms.
Second, an effective app requires testing to be done quickly, and currently it is ‘impossible to say whether the UK is testing people quickly enough to support an effective contact tracing system’ (Wired).\textsuperscript{77}

Home Secretary Priti Patel announces that from 8 June almost everyone arriving at ports and airports, including British citizens, will have to quarantine themselves for a fortnight (Guardian).\textsuperscript{78}

Commenting on 9 May, Gary McLean, professor in molecular immunology at London Metropolitan University, said: ‘This initiative to require all UK visitors to enter a 14-day quarantine is really what should have been done two months ago, and should also remain in place for at least another two months from when it is finally implemented’ (Yahoo! News).\textsuperscript{79}

The Financial Times estimates the number of UK excess deaths linked to coronavirus is 63,600 (Chris Giles).\textsuperscript{80}

\textbf{24 May 2020: Responding to the Prime Minister’s defence of his adviser Dominic Cummings after reports he ignored the lockdown,}\n
Stephen Reicher, Professor of Social Psychology at the University of St Andrews, tweets: ‘As one of those involved in SPI-B, the Government advisory group on behavioural science, I can say that in a few short minutes tonight, Boris Johnson has trashed all the advice we have given on how to build trust and secure adherence to the measures necessary to control COVID-19’ (Stephen Reicher).\textsuperscript{81}

Two other members of SPI-B committee – Robert West, Professor Of Health Psychology at UCL, and Susan Michie, Professor of Health Psychology and Director of Centre for Behaviour Change at UCL – tweet in agreement (Robert West and Susan Michie).\textsuperscript{82 83}

Anthony Costello, professor of global health and sustainable development at UCL and a former director at the WHO, tweets: ‘The huge problem for PM Johnson is that he has driven a cart and horses through any contact tracing programme. Why will contacts contacted by SERCO call centres self-isolate for 14 days rather than ’follow their instincts’?‘ (Anthony Costello).\textsuperscript{84}
The Insight team at the Sunday Times publish their latest investigation: ‘According to the data, no other large European country allowed infections to rocket to such a high level before finally going into lockdown. Those 20 days of government delay are the single most important reason why the UK has the second highest number of deaths from the coronavirus in the world.’ Back-dated modelling done by Imperial College and Oxford University estimates there were around 14,000 people infected in the UK on 3 March. By the time lockdown was announced on 23 March this had soared to 1.5 million infected people (Sunday Times).  

25 May 2020: ‘They [the government] are treating the whole health crisis as though it were a political crisis. If it’s a political crisis, what you do is try to manage your reputation. If it’s a health crisis you focus on saving lives, at whatever cost to your political reputation,’ Robert West, professor of health psychology at UCL’s Institute of Epidemiology and Health, who sits on the advisory group on behavioural science for SAGE, tells the Guardian. ‘The worry is that the government has said from the beginning it is following the science, and that was never true’ (Guardian).  

26 May 2020: King’s College London and Ipsos MORI publish the results of a poll taken from 20–22 May. ‘54% think the government is relaxing the lockdown measures too quickly, twice as many as the 27% who think they are being eased at about the right pace,’ while 68% said the government acted too slowly to control the spread of coronavirus, up 6 points from 62% from a 1–3 April poll (King’s College London).  

28 May 2020: Up to six friends or relatives will be able to meet in parks and gardens from Monday, two metres apart, the Prime Minister announces. Dentists will be able to reopen from 8 June, and it was confirmed that schools can go ahead with plans to reopen next week. The Prime Minister also confirmed that outdoor retail, such as
markets and car showrooms, will be allowed to open from Monday, and all other shops a fortnight later (Guardian).88

‘The number of people with Covid-19 has remained stable for the third week in a row, according to the Office for National Statistics, with an estimated 133,000 people infected in England in the last two weeks,’ the Guardian reports. ‘The findings raise questions about whether community transmission rates are low enough to avoid a second surge in infections as lockdown measures start to be lifted.’ The study found that just one in 15 (6.8%) of those tested carried antibodies for Covid-19, suggesting the vast majority of people in England have not been infected and are not immune (Guardian).89

‘The government’s target of hitting 200,000 Covid-19 daily tests by Monday has been described as ‘meaningless’ by senior scientists, who say that the published data on testing does not adhere to the basic rules of statistics,’ the Guardian reports. Experts said ‘the published daily testing figures appeared ‘almost designed to confuse’ and made it impossible to judge whether current levels of testing are adequate to support the track, trace and isolate programme that is said to be essential for easing lockdown. Concerns included the failure, for the past five days, to release data on how many people have been tested, the reported double-counting of multiple swabs (nose and saliva) from the same individuals, and the inclusion of tests that have been mailed out to homes and satellite labs, but not returned, in the daily tally.’ Former Chief Scientific Adviser Sir David King comments, ‘We’re opening up from the lockdown without having the test, track and trace process fully operative...We’re much more likely to go into a second peak in the outbreak unless we have test, trace, isolate fully in place’ (Guardian).90

The coronavirus test-and-trace system will not be fully operational until the end of June, Baroness Dido Harding, the head of the programme, is said to have told MPs, according to ITV News. ‘The Government launched its tracing system in England on Thursday with the help of the newly hired 25,000 contact tracers, however the accompanying app to go with the programme has been delayed by several weeks’ (ITV News).91
The UK has suffered the second-highest rate of deaths from the coronavirus pandemic after Spain, according to per capita excess mortality figures (Financial Times).  

According to the Financial Times a cautious estimate of the number of UK excess deaths linked to coronavirus is 64,000 (Chris Giles).

29 MAY 2020: ‘Lockdown restrictions are being lifted in England before experts are ready to cut the threat level from coronavirus from “high”, No 10 has admitted,’ the Independent reveals. ‘Boris Johnson had been expected to lower the alert level from 4 to 3 when he gave the go-ahead for groups of 6 to mix in gardens and parks [on 28 May], but failed to mention it...The government’s own rules state that a “gradual relaxation of restrictions and social distancing measures” should only happen when the alert level is lowered to 3’ (Independent).

‘Government advisers have voiced unease over the decision to lift England’s lockdown while thousands of people a day are still becoming infected with the coronavirus, warning that loosening restrictions could easily lead to a second wave,’ the Guardian reports. John Edmunds, a professor of infectious disease modelling at the London School of Hygiene and Tropical Medicine and member of SAGE, says ‘I think many of us would prefer to see the incidence driven down to lower levels because that then means that we have fewer cases occurring before we relax the measures... think at the moment, with relatively high incidence and relaxing the measures and also with an untested track and trace system, I think we are taking some risk here.’ Edmunds noted there were 8,000 new infections every day in England without counting those in hospitals and care homes: ‘If there’s a 1% fatality rate, that’s about 80 deaths a day. If there’s a 0.5%, that’s 40 deaths a day. So that’s the number of deaths per day that we might expect to see going forward.’ Jeremy Farrar, director of the Wellcome Trust and also a member of SAGE, tweets: ‘Covid-19 spreading too fast to lift lockdown in England. Agree with John & clear science advice. TTI has to be in place, fully working, capable dealing any surge immediately, locally responsive, rapid results & infection rates have to be lower. And trusted’ (Guardian).
‘Right now, looking at the numbers in England it is a big risk and gamble,’ Professor Devi Sridhar, chair of global public health at the University of Edinburgh, says on the *BBC Today* programme about the easing of the lockdown. ‘Deaths are up this week from last week and you are still facing roughly 8,000 new infections a day, from the ONS [Office for National Statistics] survey. So to not have a functioning test-trace system, and to start opening up schools and shops, this could trigger an increase in cases, and therefore an increase in deaths in a few weeks’ time’ (*BBC Today*).\textsuperscript{96}

Though the government initially said people instructed to quarantine after arriving in the UK would be subject to spot checks in person at their given address, *Metro* reveals the spot checks will be done over the phone (*Metro*).\textsuperscript{97}

**30 May 2020:** Peter Horby, Professor of Emerging Infectious Diseases at University of Oxford, a member of SAGE and Chair of the New and Emerging Respiratory Virus Threats Advisory Group (NERV-TAG), tells the *BBC Today* programme he shares the concerns of Professor Edmunds and Jeremy Farrar. He notes the UK still has 8,000 new cases a day, the R number is between 0.7 and 0.9 and that the Test, Trace, and Isolate system is not fully operational. ‘We still, really, don’t have a great handle on the role of children in schools on transmission, so we are not entirely sure what the effect of relaxing the social measures will be,’ he notes (*BBC Today*).\textsuperscript{98}

Calum Semple, Professor in Child Health and Outbreak Medicine at the University of Liverpool and a member of SAGE, comments, ‘Essentially we’re lifting the lid on a boiling pan and it’s just going to bubble over... we need to get it down to simmer before we take the lid off, and it’s too early’ (*BBC News*).\textsuperscript{99}

Anthony Costello, Professor of Global Health at UCL and an ex-WHO director, tweets: ‘We have 8000 cases daily, a private testing system set up without connection to primary care, call-centre tracing that appears a fiasco, and no digital app. After 4 months. Unless the population has hidden (T cell?) immunity, we’re heading for resurgence’ (Anthony Costello).\textsuperscript{100}
31 May 2020: The government announces that the two million extremely vulnerable people who have been ‘shielding’ in England can now safely spend time outdoors from 1 June (ITV News).  

Commenting on the announcement, Dr Stephen Griffin, an Associate Professor at the School of Medicine, University of Leeds, said, it ‘seems to lack any obvious rationale other than to add to an ongoing “good news” narrative that appears to have little grounding in reality.’ According to the Guardian, ‘GPs also criticised the advice, saying that it was changed without consulting them and did not make clear whether vulnerable people could now receive treatment in surgeries’ (Guardian).

Jeanelle de Gruchy, president of the Association of Directors of Public Health (ADPH), says her colleagues across England are ‘increasingly concerned that the government is misjudging the balance of risk between more social interaction and the risk of a resurgence of the virus, and is easing too many restrictions too quickly... Let’s be clear, the NHS ‘Test and Trace’ programme is currently far from being the robust operation that is now urgently required as a safeguard to easing restrictions’ (ADPH).

According to the Guardian the ADPH has ‘called on ministers to postpone the easing of restrictions until more is known about the infection rate, the test-and-trace system is better established and public resolve to maintain physical distancing and hygiene can be reinforced’ (Guardian).

Peter Openshaw, Professor of Experimental Medicine at Imperial College London and a member of NERVTAG, is interviewed on the BBC Andrew Marr Show. ‘I share with all my scientific colleagues, or virtually all my scientific colleagues, a deep concern that we need to go with great caution,’ he says. ‘At the moment we still have quite a large number of cases out there in the community. And I think unlocking too fast carries a great risk that all the good work that has been put in by everyone to try to reduce transmission may be lost.... We need the numbers [of cases] to be much lower, and also we need to gear up the
“test and trace” in order to be able to cope with the many thousands of cases which are now being seen’ (BBC Andrew Marr Show).\textsuperscript{105}

Dame Donna Kinnair, the chief executive and general secretary of the RCN, says staff are ‘anxious that easing lockdown could undo the progress we’ve made as a country in combatting this virus’ (Guardian).\textsuperscript{106}

‘Too much of April was wasted by focusing on the 100,000 tests by 30 April target at the expense of other aspects of a clear strategy,’ Chris Hopson, the chief executive of NHS Providers, which represents foundation trusts in England, says. ‘The testing strategy, if there was one, got hijacked on the basis of just meeting that target when there were lots of other things that needed to be done’ (Guardian).\textsuperscript{107}

‘Only 15 per cent of care home staff have been tested for coronavirus since the start of the outbreak, according to data which suggests the government is failing to meet a key target,’ the Independent reports. Health secretary Matt Hancock pledged on 15 May that every elderly resident and member of staff in England would be tested by ‘early June’. The research by the Data Analysis Bureau and Person Centred Software revealed that by 27 May nearly two-thirds of homes had still not had any staff members tested (Independent).\textsuperscript{108}
Despite expert warnings about loosening restrictions too quickly, the government continues its reckless strategy of opening up the economy, with shops allowed to reopen on 15 June. The test-and-trace system, vital to reducing infections, continues to underperform. On 5 June the Financial Times estimates 65,000 people have died in the UK because of the Covid.

1 June 2020: The University of Oxford’s Blavatnik School of Government publishes a ‘Lockdown rollback checklist’, which analyses whether countries meet WHO recommendations for rolling back lockdown. The UK appears in 167th place in a league table of 170 nations (University of Oxford).1

Professor Martin Green, the spokesman for Care England’s larger care companies, speaks to Guardian columnist Polly Toynbee: ‘From the start the NHS was prioritized… PPE was redirected away from care homes. Managers were told by suppliers their orders were requisitioned by the NHS.’ Green says some areas had ‘blanket policies not to admit residents to hospital. I’ve seen the letters from GPs saying they will not admit residents, putting DNR (do not resuscitate) on their notes. Some
refused to visit... There was a clear instruction to empty hospitals in March and send people to care homes despite no testing for infection. I’ve seen patient notes altered to disguise infection.’ Toynbee writes: ‘The NHS was only saved, Green alleges, because hospitals dumped the crisis on care homes’ (Guardian).

‘Public trust in the UK government as a source of accurate information about the coronavirus has collapsed in recent weeks, suggesting ministers may struggle to maintain lockdown restrictions in the aftermath of the Dominic Cummings affair,’ the Guardian reports. ‘According to surveys conducted on behalf of the University of Oxford’s Reuters Institute by YouGov, less than half of Britons now trust the Westminster government to provide correct information on the pandemic – down from more than two-thirds of the public in mid-April.’ The Institute’s director, Rasmus Kleis Nielsen, comments: ‘I have never in 10 years of research in this area seen a drop in trust like what we have seen for the UK government in the course of six weeks’ (Guardian).

‘England’s chief nurse has confirmed she was dropped from the Downing Street daily coronavirus briefing after refusing to back Dominic Cummings,’ the Guardian reports. ‘Ruth May said that in a trial run for the 1 June briefing, she was asked about Boris Johnson’s chief adviser’s decision to drive his family from London to Durham during lockdown while his wife had suspected Covid-19. After she failed to back Cummings, she said, she was told she was no longer needed for the televised press conference taking place later that day, and she was never given an explanation why’ (Guardian).

2 June 2020: ‘Chief medical officer Chris Whitty made the decision not to lower the coronavirus alert level last week, Downing Street has confirmed,’ the Independent reports. ‘A cut from Level 4 – meaning transmission is “high or rising exponentially” – to 3, where the virus is “in general circulation”, had been widely expected after Boris Johnson signalled his plan to relax lockdown restrictions in England at the start of this week.’ Instead ministers said the pandemic in the UK was at Level 4, but ‘transitioning towards Level 3’ (Independent).
Sir David Norgrove, Chair of the UK Statistics Authority, writes an open letter to the Health Secretary about the government’s reporting of statistics on Covid-19. ‘The aim seems to be to show the largest possible number of tests, even at the expense of understanding,’ he notes (UK Statistics Authority).

Speaking on the Politics At The Edge podcast, Ian Harvey, Emeritus Professor of Epidemiology and Public Health at the University of East Anglia, says the UK government ‘could and should’ have locked down 10 to 12 days earlier, having seen what was happening in other European countries: ‘I think, if you’d locked down 10 days earlier, it’s quite likely that the number of cases and hence the mortality would have been around about one-eighth of the eventual size of the problem’ (Eastern Daily Press).

Speaking to the Guardian, Professor Neil Ferguson, head of the outbreak modelling group at Imperial College London and a former member of SAGE, says, ‘I suspect that under any scenario, the level of transmission and number of cases will remain relatively flat between now and September, short of very big policy changes or behaviour changes in the community’ (Guardian).

3 June 2020: The UK reports 359 people have died after contracting Covid-19. ‘The daily number is higher than the combined total of COVID-19 deaths that the 27 countries in the European Union reported to the World Health Organization (WHO) for its June 3 situation report on the pandemic’ (Newsweek).

A document from the SAGE sub-group, the Scientific Pandemic Influenza Group on Modelling (SPI-M-O) ... records the scientists noting that ‘previous advice concerning the loosening of social distancing measures at the start of June was predicated on there being a highly effective system of contact tracing in place. So effective that 80% of contacts of index cases are identified and quarantined within 48 hours’ (Byline Times).

Rupert Read and Tara Greaves publish an article highlighting how a new report from the ONS shows fewer than 7% of people in England have
been infected with the virus. As well as underscoring how dangerous and unrealistic a ‘herd immunity’ strategy is, the ONS research debunks the March 2020 study from Oxford University’s Evolutionary Ecology of Infectious Disease Group, which estimated as much as half of the UK population had already been infected with the Coronavirus (this study was neither peer-reviewed nor published in any scientific journal, but received much positive attention in certain parts of the media at the time) (Byline Times).\footnote{11}

4 JUNE 2020: ‘The NHS coronavirus test-and-trace system designed to prevent a second deadly wave is not expected to work at full speed until September or October,’ the Guardian reports. ‘Tony Prestedge, the chief operating officer of the NHS scheme, admitted in a webinar to staff that the programme would be “imperfect” at launch, adding that he hoped it would be operational at a world-class level within three to four months’ (Guardian).\footnote{12}

5 JUNE 2020: Noting it ‘seems probable’ there will be a second wave this winter ‘unless we find quick, practical solutions to some of the structural problems that have made implementing an effective response so difficult,’ 27 leading experts, of which over half are professors in virology, public health, epidemiology and other relevant fields, call on the Prime Minister to order a public inquiry into the government’s response to coronavirus (Guardian).\footnote{13}

According to the Financial Times a cautious estimate of the number of UK excess deaths linked to coronavirus is 65,000 (Chris Giles).\footnote{14}

7 JUNE 2020: Speaking on The Andrew Marr Show, SAGE member Professor John Edmunds says he wishes the UK had gone into lockdown sooner as the delay ‘cost a lot of lives’. Asked about Professor Edmunds’ comments, Health Secretary Matt Hancock says, ‘I think we took the right decisions at the right time’ (BBC News).\footnote{15}...
8 June 2020: ‘Almost two-thirds of Britons with common life-threatening conditions have been denied care by the NHS because hospitals have focused on fighting Covid-19, new research has revealed,’ the Guardian reports. Seven out of 10 people with diabetes, 65% with high blood pressure and 64% suffering from breathing problems have had care cancelled by the NHS during the pandemic, an Essex University study has found (Guardian).16

‘Ministers are facing a high court legal challenge after they refused to order an urgent investigation into the shortages of personal protective equipment faced by NHS staff during the coronavirus pandemic,’ the Guardian reports. The case is being brought by the Doctors’ Association UK, the Good Law Project and the charity Hourglass, which campaigns on issues involving care homes (Guardian).17

‘More than half of Boris Johnson’s cabinet are pushing for Downing Street to cut the two-metre social distancing rule to contain coronavirus, in a move that would provide a huge boost to the hospitality industry,’ the Financial Times reports. This ‘would involve overriding the government’s Scientific Advisory Group for Emergencies,’ the newspaper notes. ‘One government figure’ is quoted: ‘The scientists have been quite firm on this. At the moment SAGE is definitely not inclined to reduce the guidance’ (Financial Times).18

9 June 2020: A new Independent SAGE report urges the government to provide the following support to those who have been asked to isolate: financial support to compensate lost income; support for obtaining groceries etc.; accommodation for those who cannot isolate in current residence; follow up to check symptoms and wellbeing (Independent SAGE).19

Representing the Independent SAGE group of twelve leading scientists, Sir David King, former Chief Scientific Adviser, says, ‘The government has placed huge emphasis on their test, track and trace system in recent weeks, even labelling it “world-beating”. It is clear from our research that this simply isn’t the case – indeed, the system as it stands is not fit for purpose’ (Guardian).20
The ONS estimates the number of excess fatalities in the UK to be more than 63,000 (Guardian).  

**10 JUNE 2020:** ‘Flights in and out of Britain are a major factor in the spread of coronavirus, a new report has confirmed,’ the Evening Standard reports. The Institute for Economics and Peace (IEP) study noted the UK is an example of where a large number of domestic and international flights ‘facilitated contagion’ of the virus (Evening Standard).  

‘Coronavirus was brought into the UK on at least 1,300 separate occasions, a major analysis of the genetics of the virus shows,’ BBC News reports. The Covid-19 Genomics UK consortium (Cog-UK) study shows China, where the pandemic started, had a negligible impact on cases in the UK with most of the initial cases coming from European countries. BBC News notes ‘there were 20,000 people flying in from Spain every single day in mid-March’ (BBC News).  

Speaking to the House of Commons Science and Technology Committee, Professor Neil Ferguson, from Imperial College’s School of Public Health and an ex-SAGE member, said: ‘The epidemic was doubling every three to four days before lockdown interventions were introduced. So had we introduced lockdown measures a week earlier, we would have reduced the final death toll by at least a half’ (Imperial College).  

Speaking on the BBC Today programme, Michael Baker, Professor of Public Health at the University of Wellington in New Zealand, said he is ‘really surprised’ the UK didn’t follow the ‘Asia model’ of treating the virus like a SARS virus and ‘going for elimination’. He also noted the UK could eliminate the virus, as New Zealand seems to have done, by implementing an ‘intense lockdown for 4-6 weeks, maybe a little longer,’ followed by contact tracing, testing and border management (BBC Today).  

‘Problems with the UK government’s coronavirus testing regime must be “urgently addressed” if the country is to develop an effective strategy for combating the disease, the Royal College of Pathologists has
warned,’ the *Financial Times* reports. ‘The Royal College warns of an array of problems that need to be fixed, including the slow turnaround of test results, a failure to inform patients’ doctors when they test positive for coronavirus and workforce shortages’ (*Financial Times*).\(^{26}\)

The Organisation for Economic Co-operation and Development notes ‘the UK has been relatively hard hit by the Covid-19 crisis,’ with the lockdown ‘introduced on March 23, somewhat later than in neighbouring countries’ (*Financial Times*).\(^{27}\)

**11 June 2020:** Analysing new data released by the government, the **Independent SAGE** group says it is ‘extremely concerned’ the government’s test & trace system is picking up contacts from only 25% of estimated symptomatic infections. ‘The government’s own SAGE committee says that 80% of the contacts of all symptomatic cases must be found and isolated in order to stop the virus spreading further,’ Independent SAGE note (Independent SAGE).\(^{28}\)

**12 June 2020:** National Audit Office data confirms that ‘25,000 hospital patients were discharged to care homes at the height of the pandemic before testing became routine’ (*Guardian*).\(^{29}\)

**14 June 2020:** ‘Senior scientists have reported flaws in an influential World Health Organization-commissioned study into the risks of coronavirus infection and say it should not be used as evidence for relaxing the UK’s 2-metre physical distancing rule,’ the *Guardian* reports. ‘The analysis of infection risk at 1 metre versus 2 metre should be treated with great caution,’ argues Professor David Spiegelhalter, a statistician at Cambridge University who has participated in the government’s **SAGE** group. Professor Kevin McConway, an applied statistician at the Open University, said the research ‘should not be used in arguments about how much greater the infection risk is at 1-metre minimum distance as opposed to 2 metres’ (*Guardian*).\(^{30}\)
'Care homes are receiving far more coronavirus testing kits than they order, raising concern that the extra supplies help the government inflate the number of people it claims have been tested,’ the Guardian reports. After telephoning the company that had been contracted by the government to complete the testing, one care home manager said she was ‘told that they have been told to send out double the amount that has been requested, [and] they then record that number as daily tests completed’ (Guardian).31

15 JUNE 2020: ‘Shops in England, including those offering clothes, toys, books and electronics, are now throwing open their doors to customers again. Shops in Northern Ireland have already reopened’ (BBC News).32

‘England’s coronavirus lockdown should not be further lifted until the government’s contact-tracing system has proven to be “robust and effective”, the World Health Organization has said,’ the Guardian reports. Dr Hans Kluge, the WHO’s director for Europe, cautioned that the UK remained in a ‘very active phase of the pandemic’ (Guardian).33

Masks become mandatory on public transport in England (BBC News).34

16 JUNE 2020: Writing in the Guardian, David McCoy, Professor of Global Public Health and Director of the Centre for Public Health at Queen Mary, University of London, argues ‘The government’s contact tracing shambles suggests... a disdain for evidence, an obsession with centralised control, and the privileging of private over public interests’ (Guardian).35

More than 16,000 people have died from Covid-19 in UK care homes, according to the ONS (Guardian).36

17 JUNE 2020: ‘A government minister has said the NHS coronavirus contact-tracing app is ‘not a priority’ and he was not sure it would be out by winter,’ BBC News reports. ‘Lord Bethell, the Minister
for Innovation at the Department of Health and Social Care, said he was unable to give a date for its launch’ (BBC News).\(^{37}\)

**Independent SAGE** note the latest ONS surveillance figures estimate more than 4,000 infections per day in the UK (Independent SAGE).\(^{38}\)

Analysing the government’s test-and-trace data, the *BBC More or Less* programme notes the ONS survey found ‘33,000 people with the virus in the community in England during the first week test and trace was running – late May and early June – plus more in hospitals and care homes. We [the government’s track and trace system] though we had found 12,600 of these cases, but we actually only found 8,100 of them. And if we don’t find them even the best contact tracing system in the world won’t be able to follow up’ (BBC More or Less).\(^{39}\)

**18 June 2020:** ‘The government has been forced to abandon a centralised coronavirus contact-tracing app after spending three months and millions of pounds on technology that experts had repeatedly warned would not work,’ the *Guardian* reports. ‘In an embarrassing U-turn, Matt Hancock said the NHS would switch to an alternative designed by the US tech companies Apple and Google, which is months away from being ready. At the Downing Street briefing, the health secretary said the government would not ‘put a date’ on when the new app may be launched, although officials conceded it was likely to be in the autumn or winter’ (Guardian).\(^{40}\)

Speaking on *BBC Newsnight* Dr Michael Veale, Lecturer in Digital Rights and Regulation at University College London, said the government U-turn on the NHS app was ‘very predicable’, noting he had warned the UK government about the problem that led to the U-turn on 11 April 2020 (BBC Newsnight).\(^{41}\)

The **Independent SAGE** group note the government’s contact tracing system ‘is not fit for purpose’. They note figures released by the government reveal ‘extensive data gaps’ and ‘the actual number of daily and weekly cases in the community is unknown because testing has been chaotic and haphazard and the methodology is now being revised.’ Therefore, ‘we do not know how many cases have been missed and have
not been transferred for contact tracing – ONS survey data suggests there are very many missing cases.’ Furthermore, they note ‘we have no idea how many people contacted are actually isolating and what health or other support they are receiving’ (Independent SAGE).\(^42\)

Data collected by the King’s College London’s COVID Symptom Tracker app suggests there are approximately 3,391 new cases each day in England (Daily Mail).\(^43\)

**19 JUNE 2020:** ‘Ministers have been accused of playing down the gravity of the coronavirus pandemic after it emerged that more than 1,000 people died every day in the UK for 22 consecutive days – in stark contrast with daily tolls announced by the government,’ the Guardian reports. The gap between the government’s figures and the true toll was ‘an attempt to play down the adversity that the country was faced with,’ Sir David King, the former Chief Scientific Adviser and chairman of the Independent SAGE group, said (Guardian).\(^44\)

The world has entered ‘a new and dangerous phase’ of the pandemic, the WHO’s Dr Tedros Adhanom Ghebreyesus tells a briefing: ‘Countries are understandably eager to open up their societies and economies but the virus is still spreading fast, it is still deadly and most people are still susceptible... We call on all countries and all people to exercise extreme vigilance’ (Guardian).\(^45\)

**21 JUNE 2020:** The Independent SAGE group conclude the ‘Risk of transmission still too high to reduce social distancing rules indoors’ and that the impending government announcement on relaxing the two-metre rule means ‘Government ignoring advice of own SAGE committee which recommends keeping 2 metre rule.’ Noting ‘There are more 1,000 new cases a day and still no functioning tracing system’, the group states the ‘daily number of new cases still too high’ and that ‘evidence [is] needed that it has dropped to much less than 1,000 a day before relaxing rules’ (Independent SAGE).\(^46\)
22 June 2020: The MRC Biostatistics Unit COVID-19 Working Group at the University of Cambridge estimates there are 4,300 new cases a day in England (MRC Biostatistics Unit).47

23 June 2020: The Prime Minister announces pubs, restaurants, hotels, and hairdressers can open from 4 July in England and that people should remain two metres apart where possible but a ‘one metre plus’ rule would be introduced (BBC News).48

‘The easing of multiple lockdown measures in England at once risks Covid-19 gaining a fresh foothold, scientists advising the government have warned,’ the Guardian reports. Professor John Edmunds, an epidemiologist at the London School of Hygiene and Tropical Medicine and a member of SAGE warns: ‘Relaxing the 2-metre rule at the same time as opening bars and restaurants does run the risk of allowing the epidemic to start to regain a foothold. These changes will have to be very carefully monitored and the NHS track-and-trace system will have to be working properly to help keep us safe.’ Susan Michie, Professor of Health Psychology at University College London and a member of SPI-B, comments: ‘The key thing is that we don’t have a [digital] test, trace, isolate system in place,’ said Michie, who is also a member of Independent SAGE. ‘And I think that’s the reason that the World Health Organization said last week that they thought the UK should not lift any more restrictions. It’s why other countries have 1 metre because they have other precautions and other systems in place that we don’t have.’ She also noted, ‘Hospitalisations are not coming down dramatically and the fact that we’ve just had opening of non-essential shops and a range of other things, I think, not the best time to reduce it [the 2-metre rule]’ (Guardian).49

Professor Gabriel Scally, President of Epidemiology and Public Health at the Royal Society of Medicine, tweets: ‘The rules announced today are very complicated and potentially confusing. All at a time when the virus is not yet controlled and the Find, Test, Trace, Isolate, Support system is not running properly yet’ (Gabriel Scally).50

‘Local outbreaks of Covid-19 could grow undetected because the government is failing to share crucial testing data, council leaders and
scientists have warned,’ the Guardian reports. ‘More than a month after being promised full details of who has caught the disease in their areas, local health chiefs are still desperately lobbying the government’s testing chief, Lady Harding, to break the deadlock and share the data. The situation was described by one director of public health as a ‘shambles’, while a scientist on the government’s own advisory committee said it was ‘astonishing’ that public health teams are unable to access the information’ (Guardian).  

**24 June 2020:** Citing a classified daily document released by PHE dated 18 June, HuffPost UK report ‘The government is not certain that the coronavirus R rate is below 1 in England, meaning the disease may not be under control even as lockdown restrictions are being lifted.’ The PHE document estimates there are 7,000 new cases every day in England alone (HuffPost UK).  

Former Chief Scientific Adviser Sir David King tells Sky News Former he thinks the easing of lockdown is happening ‘too quickly’, making the risk of a second wave ‘very significant’. He continues: ‘I don’t think there is anyone who could believe, from the scientific point of view, that this is a wise move’ (Sky News).  

‘The 2 metre to 1 metre reduction and the other changes announced for 4 July won’t only lead to an increased physical transmission of infection at a time when we are far from being out of the woods,’ Stephen Reicher, Professor of Psychology at the University of St Andrews and a member of SPI-B, writes in the Guardian. ‘They also undermine the psychological resolve we need to deal with the pandemic’ (Guardian).  

‘MPs have rejected a motion calling for NHS and social care staff to be routinely tested for covid-19 regardless of symptoms, as the country emerges from lockdown,’ the British Medical Journal reports. ‘The motion, proposed by Labour’s shadow health secretary, Jonathan Ashworth, fell with 344 votes cast against and 198 for’ (British Medical Journal).
Former Health Secretary Jeremy Hunt voted down the proposal even though he called for a weekly testing himself on the same day in an article in the *Telegraph* newspaper (*Stroud News and Journal*).\(^{56}\)

Lynn Bjerke and Rupert Read call for local, volunteer-based community contract tracing systems to be set up to prevent a resurgence of mass deaths when new outbreaks occur (*Byline Times*).\(^{57}\)

**25 June 2020:** ‘Europe has seen an increase in weekly cases of Covid-19 for the first time in months as restrictions are eased, the World Health Organization (WHO) says,’ *BBC News* reports. ‘In 11 countries, which include Armenia, Sweden, Moldova and North Macedonia, accelerated transmission has led to “very significant resurgence,” said Regional Director Dr Hans Henri Kluge’ (*BBC News*).\(^{58}\)

‘Government figures... show that, of those who test positive, 70.3% were reached, with about three-quarters providing details for close contacts and the rest saying they had no recent close contacts. Of the contacts provided, 81.7% were reached,’ the *Guardian* reports. ‘It is unclear what proportion are tracked within 48 hours or how many follow advice to self-isolate. The most optimistic estimate for current performance is that 57% of contacts are being traced rapidly and isolating, but the true proportion is likely to be lower’ (*Guardian*).\(^{59}\)

‘The number of suspected coronavirus outbreaks in schools almost doubled last week, new Public Health England figures show,’ *Schools Week* report. ‘PHE’s weekly COVID-19 surveillance report, published today, shows the number of ‘acute respiratory outbreaks’ in schools rose from 24 to 44 – 16 more outbreaks than were recorded at hospitals’ (*Schools Week*).\(^{60}\)

**26 June 2020:** **Independent SAGE** says it ‘is extremely concerned by latest data which shows cases have stopped falling. At current rates, at least 20,000 more people will die in next 9 months. Even before pubs & restaurants re-open on July 4’ (Independent SAGE).\(^{61}\)
27 June 2020: ‘Blanket restrictions on non-essential overseas travel will be relaxed in the UK from 6 July, ministers have said,’ BBC News reports. ‘Holidaymakers are expected to be allowed to travel to certain European countries without having to spend 14 days in quarantine when they return. They are thought to include Spain, France, Greece, Italy, the Netherlands, Finland, Belgium, Turkey, Germany and Norway – but not Portugal or Sweden’ (BBC News).52

Speaking on Channel 4 News Devi Sridhar, chair of global public health at the University of Edinburgh, says the issue of travel bans and borders has been dealt with in a ‘random way’ by the government. ‘When we actually did needed border restrictions early on in the pandemic borders were left wide open – one of the few countries in the world to have that arrangement… at each point it’s, I think, been led really more by the economics rather than by the public health imperative’ (Channel 4 News).63

28 June 2020: In a YouGov poll, 51% of respondents say the government is doing a bad job handling the crisis, while 44% said it was doing a good job. Sky News notes, ‘This seven-point gap is smaller than the government’s worst moment – an 18-point deficit two weeks ago’ (Sky News).64

‘Care home residents were more likely to die of Covid-19 in the UK than in any of the major European countries apart from Spain,’ the Guardian reports about analysis done by the London School of Economics as part of the International Long Term Care Policy Network. ‘The proportion of residents dying in UK homes was a third higher than in Ireland and Italy, about double that in France and Sweden, and 13 times higher than Germany’ (Guardian).65

29 June 2020: A Reuters investigation reveals a series of failures by officials and government agencies, including PHE, in testing, tracking and tracing: ‘failure to build up capacity to perform mass tests for COVID-19; Deciding on a narrower definition of COVID-19 than used by the World Health Organization and other countries; a decision
to abandon testing of most people who didn't require hospitalization, and failure, early on, to create any way to track infection; a decision to abandon a programme of widespread “contact tracing”, in which people in contact with an infected person were traced and told to isolate to stop the outbreak spreading; deciding to share almost no details about the location of infections with local public health officials or the public; and fragmenting local responsibility for public health’ (Reuters).  

'We all want this to be over,' Head of the WHO Tedros Adhanom Ghebreyesus tells a press briefing. ‘We all want to get on with our lives. But the hard reality is that this is not even close to being over... most people remain susceptible, the virus still has a lot of room to move’ (Reuters).

30 June 2020: ‘Non-essential shops in Leicester have closed suddenly as the government imposed the first local lockdown in the UK,’ BBC News reports. ‘Pubs and restaurants hoping to reopen at the weekend also have to delay plans for at least two weeks, while schools will be shut for most pupils’ (BBC News).

Dr Bharat Pankhania, a former consultant in communicable disease control at PHE, tells BBC Radio 4 the situation in Leicester is ‘a reflection of a premature lifting of lockdown measures,’ which were ‘not strict enough in any case’ (BBC News).

‘The ability of local leaders to manage new coronavirus outbreaks in the UK is being hampered by gaps in the reporting of infection data for cities and regions,’ according to the Financial Times. ‘The government publishes a UK-wide figure for Covid-19 cases every day that includes tests from hospitals and those processed by commercial laboratories, including samples taken at home. But at a subnational level the total of new daily cases contains only hospital tests. The result is that hundreds of local authorities across the country are unable to see a timely picture of what is happening in their communities or compare that with other cities and regions of the UK.’ Peter Soulsby, mayor of Leicester, tells the BBC: ‘For weeks we have been trying to get information about the level of testing in the city and the results of that testing in the city’ (Financial Times).
Parts of Kent, London, north Wales and Scotland are still battling significant Covid-19 outbreaks, sparking fears from scientists and public health directors that Leicester’s return to **lockdown** is set to be repeated’, the *Guardian* reports. ‘I am expecting there to be a number of Leicesters,’ says Deenan Pillay, Professor of Virology at UCL and a member of **Independent SAGE**. ‘The base level of infections going on in the UK is still much higher than it was in other countries in Europe when they started to release their lockdowns’ (*Guardian*). \(^{71}\)

In Germany ‘any community with an infection level exceeding 50 people per 100,000 over the previous seven days must return to **lockdown**’ (*Guardian*). \(^{72}\)
Pubs, restaurants, hotels, and hairdressers are allowed to open from 4 July. International travel restrictions are relaxed on 6 July. Outdoor pools are reopened on 11 July, followed by indoor gyms, swimming pools and sports facilities. The test-and-trace system is still failing to contact thousands of people. The number of cases slowly begins to rise. At the end of the month, new restrictions are placed on Greater Manchester, east Lancashire, and parts of West Yorkshire.

1 July 2020: ‘Crucial data that could help prevent fresh local waves of coronavirus is being withheld from some of the places most in danger of further lockdowns,’ the Guardian notes. ‘Council leaders said on Wednesday they were either not getting test results needed to prevent new outbreaks, or the results were incomplete and without sufficient detail to allow them to quell local surges in infection... Rochdale borough council, which has one of the highest levels of new infections in England after Leicester, told the Guardian the borough had not received any community testing results.... Barnsley, which after Leicester had the highest levels of infections recently alongside Brad-
ford and Rochdale, only started getting community postcode-level testing data on Wednesday [1 July]’ (Guardian).¹

2 July 2020: The Scottish government announces the use of face coverings will become mandatory in shops in Scotland from 10 July (BBC News).²

The Financial Times reports the government contract with private consultancy firm Deloitte to oversee the vast majority of coronavirus tests in England does not require the company to share the results with national or local health bodies (Financial Times).³

3 July 2020: ‘People arriving into England from more than 50 countries will no longer need to self-isolate for 14 days,’ BBC Newsround reports. ‘Countries including Greece, Spain, France and Belgium are on the government’s quarantine-free list, which comes into effect from 10 July. Travellers from the UK will not have to quarantine on arrival in those countries either, which means many people will be able to go on holiday abroad’ (BBC Newsround).⁴

Nearly 20,000 deaths of residents in care homes in England and Wales have involved coronavirus, according to new figures from the ONS (ITV News).⁵

Investigative Journalist Nafeez Ahmed notes a series of SAGE meeting minutes in April 2020 ‘show that SAGE belatedly conceded that there was ‘no evidence pointing to high levels of population immunity in this stage in the pandemic’; that it was unclear how long immunity lasted; and that therefore the idea of opening up the economy via mass distributing of immunity passports for people recovered from the Coronavirus was premature’ (Byline Times).⁶

5 July 2020: ‘Local health officials are being “kept in the dark” about Covid-19 infections in their area by Whitehall’s refusal to share all of its data, Andy Burnham, the mayor of Greater Manchester, has warned,’ the Observer reports. Public health officials and council
leaders said, ‘they were receiving only partial postcode data, which prevents them from precisely monitoring local areas, and could allow the virus to spread’ (Observer). 7

‘Health Secretary Matt Hancock has said asymptomatic transmission of Covid-19 was not known when thousands of patients were released from hospitals into care homes without being tested’ (BBC News). 8

6 JULY 2020: The Prime Minister says, ‘too many care homes didn’t really follow the procedures in the way that they could have’ (BBC News). 9

Nadra Ahmed, chair of the National Care Association, which represents smaller and medium-sized care providers, says Boris Johnson’s comments were ‘a huge slap in the face for a sector that looks after a million vulnerable people, employs 1.6 million care workers and puts £45bn into the economy every year.’ She continued, ‘Despite the fact PPE was diverted, despite the fact we didn’t have testing in our services, despite the fact they’ve not put any money into our sector, it has worked its socks off, and it’s a huge disappointment to hear the leader of our country say what he’d said’ (Guardian). 10

The UK government has said it will no longer publish data on the daily number of individual people being tested for coronavirus, after five weeks of failing to release such statistics,’ the Guardian reports. ‘Downing Street said the decision had been taken because figures only count people having their first Covid-19 test, and as NHS and care staff can now often have regular tests, this could skew the statistics. However, it drew criticism from Labour and the Liberal Democrats, who accused ministers of ‘dodging scrutiny’ and covering up a failure to meet targets’ (Guardian). 11

In an open letter to the WHO, 239 scientists say there is ‘a real risk’ that the coronavirus can be airborne, meaning it can spread through microscopic particles that linger in the air. The scientists are urging the WHO and other public health organisations to amend their guidelines to reflect the evidence (CBS News). 12
7 July 2020: The MRC Biostatistics Unit COVID-19 Working Group at the University of Cambridge revises their estimate of last week’s number of infections arising each day across England, from 3,000 to 5,300 (MRC Biostatistics Unit).13

Speaking on the BBC Today programme, Mark Adams, CEO of Community Integrated Care, describes the Prime Minister’s 6 July comments about care homes as ‘cowardly’ and ‘appalling’. He continues: we are ‘entering a Kafkaesque alternative reality where the government set the rules, we follow them, they don’t like the results, they then deny setting the rules and blame the people that were trying to do their best... what we are getting is history re-written in front of us...we have got a situation where the whole of the social care system has had to source 90% of its PPE since the beginning of the crisis, and that is still the same. You’ve got testing which the World Health Organization in February was saying is absolutely fundamental to handling a pandemic... we didn’t test social care until the end of May. Us, like most social care operators, had our losses before we had even start having any testing at all. Yes, the testing has now reached a point where most of our staff in care homes and most of the residents in care homes have been tested once. But once is absolutely useless... we have been crying out for weekly or ideally twice weekly testing for months, and we have only just got that commitment’ (BBC Today).14

Independent SAGE publish a report calling for the UK government to ‘fundamentally change its approach’ and follow a ‘new overarching strategic objective of achieving a Zero Covid UK, i.e. the elimination of the virus from the UK’ (Independent SAGE).15

Using data crunched by the second-fastest super computer in the world, a team of researchers at the at Oak Ridge National Lab in the United States led by Daniel Jacobson suggest Vitamin D could be a potentially useful drug in addressing Covid-19 (eLife).16

8 July 2020: Kate Lamble from BBC More or Less tells BBC Today programme ‘two-thirds of the posted tests that the government had been counting as having happened, never took place.’ Lamble notes the government’s claim of achieving 100,000 tests a day by the end of
April was based on starting to count home testing kits when they were sent out, not when they were completed and returned (BBC Today).  

9 JULY 2020: ‘GYMS, SWIMMING POOLS AND LEISURE CENTRES WILL reopen in England within days as part of the government’s lockdown easing, with the UK culture secretary, Oliver Dowden, suggesting “normal life is slowly returning”;’ the Guardian reports. ‘Outdoor pools can reopen from Saturday 11 July and indoor gyms, swimming pools and sports facilities may open from Saturday 25 July with new guidance on spacing out and cleaning equipment, plus limiting the number of people in facilities and smaller class sizes’ (Guardian).

Full Fact investigate the Prime Minister’s 3 June statement that ‘tests conducted at the 199 testing centres, as well as the mobile test centres, are all done within 24 hours.’ Full Fact conclude ‘Far from “all” tests being done within 24 hours, the proportion of people in England receiving their test result within 24 hours of taking their test in the week to 3 June was 19% at regional test sites, 5% at mobile testing units and 6% at satellite test centres’ (Full Fact).

Johns Hopkins Coronavirus Resource Center publishes details of the twenty countries currently most affected by Covid-19 worldwide, finding the UK has the highest number of deaths per 100,000 population (Johns Hopkins Coronavirus Resource Center).

SAGE considers a paper by the Academy of Medical Sciences looking at factors that are ‘likely to affect the impact of winter resurgence of COVID-19’ including ‘The mutation potential of SARS-CoV-2 and whether this would alter its infectivity and virulence. Coronaviruses do, however, typically exhibit lower mutation rates compared to other viruses’ (SAGE).

10 JULY 2020: THE UK CLINICAL VIROLOGY NETWORK – 70 clinical virologists – write to Chris Whitty, England’s Chief Medical Officer, ‘to express our concern over lack of engagement by policymakers with clinical virology expertise in the UK in the management of the Covid-19 (Sars-CoV-2 pandemic)’. They also note ‘Our skills have
been underused and underrepresented (albeit to differing extents within the devolved nations of the UK), resulting in lost opportunities to establish a coordinated robust and durable testing framework for Sars-CoV-2.’ Whitty has not responded to the letter, as of 4 August 2020 (Guardian).

11 July 2020: ‘Officials have not yet outlined what metrics will be used to impose further [local] lockdowns, but it is understood a system based on the German model is under discussion,’ the Observer reports. ‘This would involve a threshold of 50 weekly positive tests per 100,000 of the population in any given council. Once that is breached, special measures could be triggered… The Department of Health and Social Care said it did not have a set trigger, but would use a range of data to decide where and how to act’ (Observer).

12 July 2020: ‘People who have recovered from Covid-19 may lose their immunity to the disease within months, according to research suggesting the virus could reinfect people year after year, like common colds,’ the Guardian reports. Professor Jonathan Heeney, a virologist at the University of Cambridge, said the study ‘puts another nail in the coffin of the dangerous concept of herd immunity’ (Guardian).

13 July 2020: ‘Face masks will become mandatory in shops across England, ministers are to announce on Tuesday, following mixed messages, a cabinet split and mounting pressure on Boris Johnson to change public advice,’ the Guardian reports. ‘New legislation will not come into force until Friday 24 July… The government had come under increased public pressure to go further on face coverings amid mounting evidence that masks can effectively hinder transmission of the virus’ (Guardian).

Sir David King, Chair of Independent SAGE, writes to Chief Medical Officer Chris Whitty urging the government to adopt a Zero-Covid strategy. ‘Our fear is that if the UK government does not revise its
approach we could see thousands of unnecessary & avoidable deaths,’ the letter notes (Independent SAGE).26

Amnesty International publishes a report confirming more than 540 health and social worker in England and Wales have died from Covid-19, which is among the highest number of Covid-19 health worker deaths in the world (Amnesty International).27

The MRC Biostatistics Unit COVID-19 Working Group at the University of Cambridge estimates there are 3,600 new cases a day in England (MRC Biostatistics Unit).28

14 July 2020: ‘Britain must start “intense preparations” for a second wave of coronavirus that has the potential to kill as many as 120,000 hospital patients in a worst case scenario, experts have warned,’ the Guardian reports. ‘Senior doctors and scientists convened by the Academy of Medical Sciences said on Tuesday that, without urgent action, a resurgence of cases this winter could overwhelm the NHS when services are already stretched because of flu and other seasonal pressures’ (Guardian).29

Appearing before the Public Administration and Constitutional Affairs Committee, Health Minister Edward Argar says the first time he saw the report into Exercise Cygnus, a 2017 simulation of an influenza pandemic that highlighted UK’s lack of preparedness and forewarned the crisis in care homes, was when he read about it in the Guardian on 7 May (Guardian).30

15 July 2020: ‘Boris Johnson has for the first time committed to an “independent inquiry” into the coronavirus pandemic,’ BBC News reports. ‘The PM said now was not the right time for an investigation but there would “certainly” be one “in the future” so lessons could be learned’ (BBC News).31

16 July 2020: ‘By early March, it had become clear that Britain, like many western countries, was preparing for the wrong kind
of pandemic,' a Financial Times investigation finds. ‘Previous outbreak planning had focused on influenza and the country had not built up a test-and-trace capability of the kind seen in Taiwan and South Korea, which had previous experience of dealing with coronaviruses such as SARS in 2002 and MERS in 2015.’ Discussing the government’s decision to stop community contact tracing on 12 March Chaand Nagpaul, the chair of the British Medical Association, says, ‘we were effectively working blindfolded.’ Devi Sridhar, Professor of Global Public Health at the University of Edinburgh, comments, ‘It was absolutely catastrophic that the decision was made to delay locking down and to stop community testing and tracing. It was equivalent to just giving up and letting the virus go.’ The Financial Times notes, ‘one government adviser suggested that ending mass community testing was not just about capacity but a very strategic decision taken by a small group of modellers who sit on the government’s Scientific Advisory Group for Emergencies (SAGE).’ The adviser comments, ‘Early on, this was treated like flu, a mild illness that should be allowed to pass through’ (Financial Times).32

17 July 2020: ‘Boris Johnson has unveiled his plan for a ‘more significant return to normality’ by Christmas, as he revealed steps to encourage people back to work in England,’ the Guardian reports. The Prime Minister said it will be up to employers to discuss with workers whether it is safe to return from 1 August; most leisure activities, including bowling, casinos, skating rinks and services such as beauticians will be allowed to open from 1 August; indoor performances to audiences can open in August, subject to pilots; gatherings in sports stadiums are to be piloted, with a view to reopening in the autumn; and wedding receptions of up to 30 people will be allowed (Guardian).33

‘More than 4,000 people were discharged from hospital into care homes without being tested for COVID-19 around the peak of the pandemic,’ Sky News reveals. ‘The data from NHS Trusts shows two thirds of elderly patients discharged hadn’t had a coronavirus test’ (Sky News).34
18 July 2020: ‘The health secretary, Matt Hancock, has bowed to pressure from councils, which demanded full access to the names and data of people in their areas who tested positive for Covid-19, and those with whom they have been in contact, in another major government U-turn,’ the Observer reports. ‘Local authorities and public health officials have been complaining for weeks that they are being hampered in efforts to combat and prevent local outbreaks by lack of access to ‘named patient data’ which would allow them to get straight to the sources of local outbreaks’ (Observer).35

20 July 2020: ‘The UK government broke the law in rolling out its test-and-trace programme without a full assessment of the privacy implications, the Department of Health and Social Care has admitted after a legal challenge,’ the Guardian reports. ‘The reckless behaviour of this government in ignoring a vital and legally required safety step known as the data protection impact assessment (DPIA) has endangered public health,’ comments Jim Killock, the executive director of Open Rights Group (ORG). ‘We have a “world beating” unlawful test-and-trace programme’ (Guardian).36

‘Lifting lockdown restrictions has not led to a spike in coronavirus cases, the UK’s national statistician has said, but he issued a warning for autumn as the PM insisted he does not want a second national shutdown,’ Sky News reports. Sir Ian Diamond, Head of the ONS, said there are around 1,700 new Covid-19 cases recorded every day, that there are antibodies in 6.3% of the population who have been ‘exposed to the virus’ – about three million people – and positive tests have been ‘basically flat over the last few weeks’ despite several areas with raised infection rates (Sky News).37

‘I am bemused by those who count the flatlining of number of Covid infections as a success,’ Stephen Reicher, Professor of Social Psychology at the University of St Andrews and member of SPI-B, tweets in response. ‘That means accepting many thousands of infections and many hundreds of deaths per week as a success. It means accepting a situation where many are still too nervous to go out’ (Stephen Reicher).38
21 JULY 2020: Sir John Bell, Oxford University’s Regius Professor of Medicine, tells the House of Commons Health and Social Care Committee that officials had failed to get Britain on the ‘front foot’ in preparation for a pandemic despite several ‘close calls’ with emerging infectious diseases in recent decades.’ Bell comments: ‘The fact that we were asleep to the concept that we were going to have a pandemic, I think, shame on us’ (Evening Standard). 39

Asked about the high number of deaths in care homes by the House of Commons Health and Social Care Committee, Chief Medical Officer Chris Whitty replies: ‘This has been a major problem. Some of this I think comes from the fact that we had not recognised what are in retrospect obvious but were not obvious points early on. For example, the fact people were working in multiple homes and people who were not paid sick leave. That is a clear risk. These were major risks in social care settings’ (carehome.co.uk). 40

22 JULY 2020: ‘The government’s flagship test-and-trace system is failing to contact thousands of people in areas with the highest infection rates in England, raising further questions about the £10bn programme described by Boris Johnson as “world-beating”,’ the Guardian reports. ‘In areas with the highest infection rates in England, the proportion of close contacts of infected people being reached is far below 80\%, the level the government’s scientific advisers say is required for test and trace to be effective’ (Guardian). 41

23 JULY 2020: ‘There was an “astonishing” failure by government to plan for the economic impact of a possible flu-like pandemic, parliament’s financial watchdog has said,’ the Guardian reports. ‘MPs on the cross-party public accounts committee concluded that government schemes were drawn up “on the hoof” in mid-March by Rishi Sunak’s Treasury, weeks after the first case of coronavirus was detected in the UK... key government ministries such as the Department for Business, Energy and Industrial Strategy [BEIS] were not made
24 JULY 2020: ‘THE GOVERNMENT IS STILL NOT SHARING ENOUGH coronavirus data for local authorities to get a full picture of who is being infected, health bosses have said,’ the Guardian reports. ‘But Kate Hollern, the MP for Blackburn – which last week had 120 new Covid-19 cases, up from 72 the previous week – said data on ethnicity and occupation was not always supplied. Hollern said Blackburn’s director of public health, Dominic Harrison, had complained the data from pillar 2 – community testing at drive-through centres or via the post – was ‘highly variable’… Another director of public health in the north-west said they had only received full addresses for positive cases on Friday morning and that information on ethnicity was “patchy” and the section for occupation was “mostly blank” (Guardian).43

‘A lack of protective equipment, inadequate testing, and discharging people from hospitals into care homes were the key mistakes made by the government in its approach to coronavirus in England, according to the first responses given to a major coronavirus inquiry,’ the Guardian reveals. Age UK said older people were ‘catastrophically let down’ and described the policy of discharging the elderly from hospital into care settings without a test as a ‘terrible mistake’. The British Medical Association said the government’s testing and tracing capabilities at the beginning of the crisis fell ‘far short’ of what was required, leaving the infection to ‘spread unchecked’. The doctors’ group of the Unite union said the government had ‘squandered’ weeks of valuable time (Guardian).44

‘The National Health Service is at risk of a slower and more fraught path to recovery than most comparable international systems due to its starting position going into the Coronavirus pandemic and the severity of our outbreak,’ according to a study by the Nuffield Trust think-tank (Nuffield Trust).45
27 July 2020: A report into the high death rate of London bus drivers during the pandemic by Sir Michael Marmot, the Director of the UCL Institute of Health Equity, concludes that imposing an earlier lockdown in England would have saved lives (Guardian).  

28 July 2020: Doctors of the World UK and over 20 local authorities, public health bodies and non-profit organisations write to the Government to express concern at the lack of Covid-19 public health guidance in languages other than English. ‘This is preventing people in England who do not speak or read English well from accessing essential public health information and limiting their ability to keep themselves, their families, and their communities safe,’ they note (Doctors of the World). 

29 July 2020: ‘Boris Johnson fears a second wave of coronavirus could start within a fortnight,’ the Daily Mail reports. ‘A senior government source told the Mail the Prime Minister was ‘extremely concerned’ by outbreaks ‘bubbling up’, both at home and abroad. Although the number of UK cases is relatively low, rises were recorded each day last week for the first time since the April peak. The seven-day average stands at almost 700 – 28 per cent up on three weeks ago’ (Daily Mail). 

‘MPs have accused the Government of effectively throwing care homes to the wolves in a scathing report by the Public Accounts Committee,’ Nursing Notes reports. The report highlights an ‘appalling error’ when 25,000 patients were discharged from hospitals into care homes without ensuring all were first tested for COVID-19 – even after there was clear evidence of asymptomatic transmission of the virus…. The committee concluded that the Government’s ‘slow, inconsistent, and at times negligent approach’ to social care in the Covid-19 pandemic exposed the ‘tragic impact’ of ‘years of inattention, funding cuts, and delayed reforms,’ leaving the sector as a ‘poor relation’ that has suffered badly in the pandemic (Nursing Notes). 

Between 9 March and 17 May, approximately 5,900 care homes, equivalent to 38% of care homes in England, reported at least one outbreak (House of Commons Public Accounts Committee).

‘The government is not doing everything it should to stop a second wave of coronavirus from hitting the UK, the British Medical Association’s top doctor has warned,’ the Independent reports. Dr Chaand Nagpaul, chair of the BMA’s council, told MPs that confused government messaging and lack of a ‘systemic approach’ on policies like mask-wearing and social distancing was behind a weekly rise in infections. ‘Warning that there were “too many examples of potential spread” he told a meeting of the All-Party Parliamentary Group on coronavirus: “At the moment we’re not doing everything we should in trying to contain the virus” (Independent).

A BBC Newsnight investigation finds there ‘doesn’t appear to have been much evidence... at the time’ for the Chief Medical Officer’s 9 March 2020 claim that if lockdown is implemented too early, people would get ‘fatigued’. Robert West, Professor of Health Psychology at University College London and member of SPI-B, comments: ‘this term “behavioural fatigue” ... certainly didn’t come from SPI-B, and it is not a behavioural science term. If you look in the literature you won’t find it because it doesn’t exist’ (BBC Newsnight).

The MRC Biostatistics Unit COVID-19 Working Group at the University of Cambridge estimates there are 3,000 new cases a day in England (MRC Biostatistics Unit).

‘The figures from the Office of National Statistics (ONS) resemble those of [the University of] Cambridge, at 2,700 a day last week – which was an increase on the 2,500 of the week before’ (Guardian).

30 July 2020: ‘England had the highest levels of excess deaths in Europe between the end of February and the middle of June, official analysis shows,’ BBC News reports. ‘The Office for National Statistics says England saw the second highest peak rates of death in Europe, after Spain. But England had the longest period where deaths were above average, and so overall had the highest levels’ (BBC News).
‘A trust chief says he was “leant on from a big height” to delay visiting restrictions at the start of the coronavirus pandemic – a decision which he believes could have cost 25 lives,’ the Health Service Journal reports. ‘David Loughton, Chief Executive for the Royal Wolverhampton Trust, has said despite wanting to implement lockdown measures at his hospitals on 8 March, he was instructed not to and had to delay taking this action for two and a half weeks. It is not clear whether he is referring to local regulators or Whitehall officials’ (Health Service Journal).56

‘Durham’s former chief constable has warned that Dominic Cummings’ lockdown behaviour has made it more difficult for officers to enforce the rules and has been used by some as an excuse for law-breaking,’ the Guardian reports. Mike Barton said the decision by the Prime Minister’s chief adviser to drive to Durham had ‘damaged trust in the government and in the rules’ (Guardian).57

The minutes of the day’s SAGE meeting note, ‘During the application of NPIs [non-pharmaceutical interventions] nationally, there have been substantial support packages available. SAGE advised that local areas of intervention will require similar – and probably more – support to facilitate adherence, particularly in disadvantaged communities, as they will be experiencing restrictions for a second time’ (SAGE).58

SAGE considers a paper from the Scientific Pandemic Influenza Group on Modelling, Operational sub-group that warns ‘Christmas could result in explosive outbreaks across the country’ and ‘Reopening schools and further education colleges in September is expected to increase transmission’ (SAGE).59

31 July 2020: ‘Millions of people in parts of northern England are now facing new restrictions, banning separate households from meeting each other at home after a spike in Covid-19 cases,’ BBC News reports. ‘The rules impact people in Greater Manchester, east Lancashire and parts of West Yorkshire. The health secretary told the BBC the increase in transmission was due to people visiting friends and relatives’ (BBC News).60
‘Coronavirus infections are rising in England, Office for National Statistics (ONS) figures suggest. A sample of households in England, excluding care homes and hospitals, were swabbed to test for current infection.’ According to the ONS daily cases have risen from an estimated 3,200 to 4,200 since last week. ‘However, there is not enough data to suggest a higher proportion of positive tests in any particular region’ (BBC News).61

Chief Medical Officer Chris Whitty says the easing of lockdown restrictions has ‘probably reached near the limit of what we can do’ if coronavirus is to be kept under control (BBC News).62

‘The planned easing of lockdown restrictions in England has been postponed for at least a fortnight - with face masks to become mandatory by law in most public indoor settings on 8 August,’ Sky News reports. ‘Boris Johnson told a Downing Street briefing that the decision to “squeeze that brake pedal” on changes had been taken due to coronavirus infection numbers “creeping up” and “in order to keep the virus under control”’ (Sky News).63

Professor David Hunter, an expert in epidemiology and medicine in the Nuffield Department of Population Health at University of Oxford, ‘says this mode of detection – lab-confirmed tests – unearths one in five of the actual cases out there. Realistically, new infections may be 3,000-5,000 cases a day’ (HuffPostUK).64

‘Applying a handbrake to lockdown easing in England is welcome, but may not be enough to stop a rise in infections, experts have said,’ the Guardian reports. ‘SAGE, the government’s scientific advisory group, said on Friday that it did not have confidence that the reproduction rate, R, was currently below 1 in England, based on rapidly reported data.’ Robert West, Professor of Health Psychology at University College London, comments: ‘Putting a brake on further easing of the lockdown will probably not reduce infection rates but it may slow the speed with which they rise. The government needs to grasp the nettle and recognise that it needs to follow Scotland’s example and use the next few weeks to get to zero Covid-19 before the autumn – and then things can start to ease safely’ (Guardian).65
'Councils are launching their own track and trace operations amid renewed concerns that the national system is missing too many cases,' the *Times* reports. Lisa McNally, the Director of Public Health for Sandwell council in the West Midlands said ‘I wouldn’t quite go as far as to say we’ve given up on **test and trace**, but we’re not happy with just allowing them to do their job any more. I don’t see the urgency to fix this; I don’t see them running around in a panic’ (*Times*).⁶⁶
The number of cases in the UK continues to rise. The government encourages people to return to work and launches the ‘Eat Out to Help Out’ scheme. Experts warn the government about opening up further when the test-and-trace system is still not working, noting the resumption of schooling in September will lead to an increase in infection.

1 August 2020: ‘Pubs or “other activities” in England may need to close to allow schools to reopen next month, a scientist advising the government has said,’ BBC News reports. Professor Graham Medley said there may need to be a ‘trade-off’ (BBC News).

2 August 2020: ‘The government’s £1bn contact-tracing programme failed to reach almost half the contacts named by infected patients in “non-complex” cases — including people living under the same roof,’ the Times reveals. ‘The outsourcing giants Serco and Sitel are being paid £192m to provide 18,500 call handlers who are responsible for tracing non-complex contacts referred to them.’ Martin Hibberd,
Professor of Infectious Diseases at the London School of Hygiene and Tropical Medicine, commented: ‘I’m not convinced we are doing enough contact-tracing at the moment, or sufficiently well, to control a new outbreak’ *(Times).*

‘The Government has abandoned a pledge to regularly test all people in **care homes** from this summer,’ the *Telegraph* reports. In a memo sent to local authority chief executives on 31 July 2020. Professor Jane Cummings, the government’s adult social care testing director, said ‘Previously advised timelines for rolling out regular testing in care homes’ were being axed because of ‘unexpected delays’ *(Telegraph).*

Sir Paul Nurse, Director of the Francis Crick Institute in London, tells the *Guardian* important decisions during the pandemic had been made in what appeared to be a ‘black box’ of scientists, civil servants, and politicians. ‘The failure to be more open about pivotal decisions, and the basis on which they were reached, meant it had been impossible to challenge emerging policy, he said, a situation that fuelled poor decisions and put public trust at risk’ *(Guardian).*

3 August 2020: *The Financial Times* notes ‘the latest data show that only about half of people tested through commercial labs – known as pillar 2 – received the result within 24 hours of taking a test’ *(Financial Times).*

‘Waiting times for coronavirus test results vary significantly across different parts of the UK, with some areas experiencing average wait times up to 34 hours longer than others,’ *Green World* reports. According to data obtained through a Freedom of Information Act request submitted by the Green Party, ‘Cardiff has the longest wait in the UK, where people had to wait an average of 45 hours to receive their test results, followed by Wembley in London (33 hours) and Lincoln (24 hours). The shortest waits were recorded in Milton Keynes (11 hours), Glasgow (12 hours) and Llandudno (13 hours)’ *(Green World).*

The government announces new 90-minute tests that can detect coronavirus and flu will be rolled out in hospitals and **care homes** from next week. ‘The government said almost half a million of the new rapid swab
tests, called LamPORE, will be available from next week in adult care settings and laboratories, with millions more due to be rolled out later in the year,’ *BBC News* reports. ‘Additionally, thousands of DNA test machines, which have already been used in eight London hospitals and can analyse nose swabs, will be available across NHS hospitals from September. Around 5,000 machines, supplied by DnaNudge, will provide 5.8 million tests in the coming months, the Department for Health said.’ The report notes ‘There is currently no publicly available data on the accuracy of the new tests’ (*BBC News*).7

The government launches the **Eat Out to Help Out** scheme, which allows diners across the UK to enjoy half-price meals (*BBC News*).8

In a comment piece in the *Lancet Diabetes and Endocrinology* journal, researchers note ‘The striking overlap between risk factors for severe COVID-19 and vitamin D deficiency, including obesity, older age, and Black or Asian ethnic origin, has led some researchers to hypothesize that vitamin D supplementation could hold promise as a preventive or therapeutic agent for COVID-19.’ The researchers argue that with results from trials pending, ‘it would seem uncontroversial to enthusiastically promote efforts to achieve reference nutrient intakes of vitamin D, which range from 400 IU/day in the UK to 600–800 IU/day in the USA. These are predicated on benefits of vitamin D for bone and muscle health, but there is a chance that their implementation might also reduce the impact of COVID-19 in populations where vitamin D deficiency is prevalent; there is nothing to lose from their implementation, and potentially much to gain’ (*Lancet Diabetes and Endocrinology*).9

4 AUGUST 2020: ‘CURRENT TESTING AND CONTACT TRACING IS inadequate to prevent a second wave of coronavirus after schools in the UK reopen,’ scientists at UCL and the London School of Hygiene and Tropical Medicine have warned in an article published in *The Lancet Child and Adolescent Health* journal, *BBC News* reports. ‘Increased transmission would also result from parents not having to stay at home with their children, they say’ (*BBC News*).10

‘The results [of the UCL and the London School of Hygiene and Tropical Medicine study] reveal that should schools fully reopen in
September, alongside a relaxation of other measures, and 68% of contacts of infected people can be reached, but only 18% of symptomatic adults are tested and isolated, the UK could face a second wave of infections up to 2.3 times the size of the recent epidemic, with a peak in December’ (Guardian).11

Speaking on the BBC Today Programme, Dr Jasmina Panovska-Griffiths, Lecturer in Mathematical Modelling at UCL and lead researcher on the UCL and London School of Hygiene and Tropical Medicine study, says about ‘50 per cent of contacts of those infected are being traced’ in England at the moment, and this needs to reach ‘68 percent’ (BBC Today).12

‘Councils with the highest Covid infection rates in England have launched their own contact-tracing operations to plug holes in the ‘world-beating’ £10bn government system, with some reaching 98-100% of people who fell through the gaps,’ the Guardian reports. ‘In total, local authorities in eight of the 10 worst-hit areas in England have launched or are planning to launch supplementary versions of the government’s flagship test-and-trace system amid concerns that it is failing to reach the most vulnerable residents’ (Guardian).13

‘Analysis of hundreds of transactions from trusts in England details for the first time how procurement teams were forced to rely on improvised supply lines as the flow of PPE from the centralised stockpile, overseen by Department of Health and Social Care, struggled to cope. Similar shortages were faced in Scotland, Wales and Northern Ireland,’ an investigation by the i newspaper finds. A procurement chief at one of England’s largest NHS trusts comments: ‘Whitehall left us swinging in the wind. If we hadn’t scrambled as we did to get the resources needed – by any means necessary, at any cost necessary – we would have run out [of some types of PPE]. It was an unholy mess. You had profiteers and you had saints moving heaven and earth to help. Telling the difference was often impossible’ (i).14

5 August 2020: Speaking on the BBC Today programme, Professor Neil Ferguson, head of the outbreak modelling group at Imperial College London and a former member of SAGE, says ‘In terms of
the reproduction value, the R value, opening high schools could increase it by as much as a half, but by as little as 0.2 or 0.3, but it will go up ... [and] lead to quite rapid growth of the epidemic.’ He also notes ‘The risk then is that big schools, comprehensives, universities, FE colleges, link lots of households together, reconnect the social network which social distancing measures have deliberately disconnected. And that poses a real risk of amplification of transmission, of case numbers going up quite sharply.’ He concludes, ‘It will be challenging and there will be no going back to anything close to normal social interaction at least not until we get through to next spring and potentially to the availability of a vaccine’ (BBC Today).\textsuperscript{15}

The Children’s Commission for England publishes a briefing calling for ‘regular testing of pupils and teachers – regardless of whether they have Covid-19 – which is essential for keeping schools safe by both providing assurance that they are safe and preventing entire ‘bubbles’ or year groups from having to be sent home once a case of Covid-19 occurs’ (Children’s Commissioner for England).\textsuperscript{16}

The House of Commons Home Affairs Committee publishes its ‘Home Office preparedness for COVID-19 (coronavirus) management of the borders’ report. ‘On 13 March, the Government withdrew its self-isolation guidance for arrivals from specific countries and for almost 3 months—until 8 June—there were no border measures in place,’ the report explains. ‘No reason was given for the withdrawal of the guidance at the time. Other countries at that time were introducing more comprehensive measures, including quarantine, self-isolation, testing and screening.’ Furthermore, the report notes the ‘Evidence suggests that thousands of new infections were brought in from Europe in the ten days between the withdrawal of guidance and the introduction of lockdown on 23 March. It is highly likely that this contributed to the rapid increase in the spread of the virus in mid-March and to the overall scale of the outbreak in the UK. The Committee therefore concludes that the failure to have any special border measures during this period was a serious mistake that significantly increased both the pace and the scale of the epidemic in the UK, and meant that many more people caught COVID-19.’ The report records that the Home Office and other Government departments didn't provide the committee with the scien-
tific advice behind its decisions when asked for it: ‘Their failure to do so despite repeated promises to provide the information is completely unacceptable. It is not clear, therefore, who was making the decisions about borders in March, nor on what basis such decisions were made’ (House of Commons Home Affairs Committee).  

The Covid-19 Bereaved Families for Justice group, made up of 1,450 people who have lost friends and family to Covid-19, is calling for an urgent judge-led public statutory inquiry (Guardian).

6 August 2020: In a study published in the Lancet Journal, researchers working on University College London’s COVID-19 Social Study highlight a ‘Cummings effect’, with survey data showing May 2020 reports of Dominic Cummings breaking the lockdown ‘undermined confidence in the government to handle the pandemic specifically’ (Lancet).

The Serco run Test & Trace system has only reached around 50% of people from the same household as a person infected with Covid-19 being contacted (BBC News).

‘Councils across England will be offered near real-time data on infections and a dedicated teams of contact tracers, after growing concerns over the government’s £10bn coronavirus test-and-trace system,’ the Guardian reports. The government plans to assign teams of healthcare professionals to over 10 local authorities following trials in Leicester, Luton, and Blackburn with Darwen. ‘It is understood that local authorities will also be offered access to a Public Health England database showing live patient-identifiable data to help them spot and contain clusters of infections, if they sign data protection agreements’ (Guardian).

The Good Law Project reports ‘the Government awarded a PPE contract worth £252 million to Ayanda Capital Limited, a ‘family office’ owned through a tax haven in Mauritius, with connections to Liz Truss. It is the largest PPE contract we have seen to date. In response to judicial review proceedings issued by Good Law Project, the Government has admitted that the 50 million FFP2 masks they purchased from
Ayanda Capital – for a price that we calculate to be between £156m and £177m –“will not be used in the NHS’ because ‘there was concern as to whether the[y]... provided an adequate fixing’” (Good Law Project).22

‘The NHS will be inflicting pain, misery and risk of death on tens of thousands of patients if it again shuts down normal care when a second wave of Covid-19 hits, doctors’ and surgeons’ leaders are warning,’ the Guardian reports. ‘They are urging NHS bosses not to use the same sweeping closures of services that were introduced in March to help hospitals cope with the huge influx of patients seriously ill with Covid.’ Professor Neil Mortensen, President of the Royal College of Surgeons of England, comments, ‘The NHS must never again be a Covid-only service. There is a duty to the thousands of patients waiting in need and in pain to make sure they can be treated’ (Guardian).

The MRC Biostatistics Unit COVID-19 Working Group at the University of Cambridge estimates there are 3,200 new cases a day in England (MRC Biostatistics Unit).23

**7 August 2020:** According to the Guardian, ‘One of two 90-minute rapid coronavirus tests bought by the UK government and announced on Monday has yet to be approved by regulators, while no data on the accuracy of either has been published.’ Jon Deeks, Professor of Biostatistics at Birmingham University, comments: ‘It looks like a decision that was raced through. They are making decisions before anybody knows the results as to how well they work. They are not making clear comparisons with the alternatives, which means that British people might not get the best tests’ (Guardian).24

**8 August 2020:** Just ten enforcement orders have been issued to people for breaking quarantine rules after returning to the UK from abroad since 8 June (Guardian).25

The ONS estimates that from 27 July–2 August there were 3,700 new cases per day (Guardian).26
9 August 2020: The Guardian reports, ‘Ministers are facing fresh pressure to help schools in England limit the spread of coronavirus when they reopen fully in September after rejecting a call for teachers and pupils to undergo routine testing. Nick Gibb, the schools minister, said the government would not go along with a demand from the children’s commissioner for England to bring in routine coronavirus testing, and would only test those who showed symptoms’ (Guardian).27

10 August 2020: ‘Researchers behind a report from Delve, a multidisciplinary group convened by the Royal Society, have said routine testing will be necessary when the majority of children return to school,’ the Guardian reports. ‘Dr Ines Hassan, a researcher in the global health governance programme at the University of Edinburgh and a lead author of the report, said the group were recommending the widespread and regular screening of all staff in schools, including those who are asymptomatic’ (Guardian).28

‘NHS test and trace is cutting 6,000 contact tracer jobs and allocating roles to regional teams to work with councils, following criticism by local authorities that the centrally run system was failing to tackle local outbreaks,’ the Guardian reports. The government announced ‘local and national teams would work together to make sure they reach as many people as possible who have been in contact with someone who has coronavirus. The change means the number of national contact tracers will be reduced from 18,000 to 12,000 on 24 August’ (Guardian).29

11 August 2020: ‘The rise above 1,000 daily confirmed cases of Covid-19 in the UK breaches the ceiling that the government’s own Joint Biosecurity Centre said was acceptable in May, it has emerged,’ the Guardian reveals. After the number of tested and confirmed cases rose to 1,062 in 24 hours at the weekend – the first time the daily total was more than 1,000 since late June – Professor Gabriel Scally, President of Epidemiology and public Health at the Royal Society of Medicine and a member of Independent SAGE, said the escalation was ‘unacceptable, ineffective and dangerous’ (Guardian).30
13 August 2020: ‘The government has come under fresh criticism today over its controversial COVID-19 Track and Trace scheme, after admitting that, despite this week’s promise to “strengthen regional contact tracing,” the major firms involved in the controversial scheme will not actually be redeploying any of their staff to work regionally with local councils,’ Open Democracy reveals. ‘This week the government announced a “new way of working” in which “NHS Test and Trace will provide local authorities with a dedicated team of contact tracers for local areas” – a move welcomed by experts who had long advocated a more localised approach.’ However, the government admitted to Open Democracy that no Serco or Sitel staff would be moved to work with local councils (Open Democracy).31

‘About 3.4 million people in England – 6% of the population – have had Covid-19, with infections more common among members of black, Asian and minority ethnic communities,’ the Guardian reports, quoting the results of a large home antibody testing study. Co-author Professor Graham Cooke from Imperial College London notes: ‘There is no evidence of anything near high-enough levels of herd immunity for this to be helpful at a population level and that it is likely there is a high proportion of susceptible people out there still that need to be protected’ (Guardian).32

14 August 2020: Speaking to the Evening Standard, Chancellor Rishi Sunak urges more people to return to offices or other workplaces and enjoy London’s restaurants, pubs and bars, and shops (Evening Standard).33

15 August 2020: The ONS estimate there are 3,800 new cases a day in England (Times).34

‘Council public health budgets have been cut by a quarter per head since 2015,’ the Times reports. Jeanelle de Gruchy, President of the ADPH, comments: ‘One key lesson we need to learn from this pandemic is that maintaining a well-resourced public health system is not a “nice-to-have” but a “must-have”’ (Times).35
Tom McTague publishes an investigation of the government’s response to the crisis in the *Times*, speaking to ‘leading politicians, including a former prime minister and five former cabinet ministers; three experts who either sit on the government’s scientific advisory committee for responding to pandemics, **SAGE**, or have briefed it during the crisis; half a dozen influential officials working in Downing Street and the NHS; and specialists associated with the government’s response, including professors of epidemiology, mathematics, history and psychology.’ McTague comments, ‘The majority of those I spoke with – even those close to [Prime Minister Boris] Johnson – agreed that, in hindsight, the prime minister and his most senior health and scientific advisers made serious missteps’ (*Times*).\(^{36}\)

**16 August 2020:** ‘**Senior doctors, hospital bosses and public health experts have accused ministers of scapegoating Public Health England for their own failings over Covid-19 by planning to axe the agency,**’ the *Guardian* reports. Professor Sir Simon Wessely, President of the Royal Society of Medicine and a former adviser to the government, comments: ‘PHE employs some of the best, brightest and most hard-working clinicians and experts we have. There are simply not enough of them, which can partly be explained by the steady reduction in funding over the last seven years.’ Dr Chaand Nagpaul, Chair of the British Medical Association’s ruling council, comments: ‘We must absolutely not allow PHE and its staff to shoulder the blame for wider failings and government decisions. With more than 1,000 new UK cases of Covid-19 being recorded for the fifth day in a row, we must seriously question whether now is the right time for undertaking such a seemingly major restructure and detract from the very immediate need to respond to the pandemic’ (*Guardian*).\(^{37}\)

**18 August 2020:** ‘**Health Secretary Matt Hancock has confirmed Public Health England will be replaced by a new body focused on preparing for external threats like pandemics,**’ *BBC News* reports. ‘Baroness Dido Harding, who runs NHS **Test and Trace** in
England, will be the interim chief of the new National Institute for Health Protection’ (BBC News).³⁸

**19 August 2020:** ‘Jeremy Corbyn has said the government “lectured” him about herd immunity during cross-party coronavirus talks,’ the Guardian reports. In an interview with the podcast A World to Win, Former Labour leader Corbyn said: ‘We were involved in meetings with the government throughout the spring of this year and [shadow health secretary] Jon Ashworth and I remember distinctly going to a meeting at the Cabinet Office, where we got a lecture about herd immunity’ (Guardian).³⁹

**21 August 2020:** ‘The R value for the UK may have risen above 1.0 for the first time since weekly reporting of data began,’ the Guardian reports. Dr Michael Head, a senior research fellow in global health at the University of Southampton, comments: ‘We are seeing increases in new daily cases, and now we have an R number estimate that is approximately at the 1.0 threshold. The data suggests that as people mix more freely, there are probably increases in community transmission. This is to be expected, but highlights the problems in coming out of lockdown, particularly when there are many thousands of active cases in a population’ (Guardian).⁴⁰

‘Workplaces are suffering “an explosion” in coronavirus infections because the government ignored warnings about the dangers of a rush back to work,’ the Morning Star reveals, citing a report by occupational-health experts at the Hazards campaign. The report notes ‘The government are forcing children back into unsafe schools so that parents can return to unsafe workplaces and the chaotic and irresponsible opening of pubs, clubs and gyms during a high transmission of a potentially fatal disease is madness’ (Morning Star).⁴¹

‘To protect the safety of students and staff, and prevent community infections, all university courses should be offered remotely and online, unless they are practice or laboratory based, with termly review points,’ a report from Independent SAGE recommends. If students do attend
campus a Covid-safe university should be secured through ‘testing on or before arrival on campus followed up by further regular testing of students and staff’ (Independent SAGE).42

22 August 2020: ‘Nursing homes were put under “constant” pressure to accept patients with coronavirus while being regularly refused treatment from hospitals and GPs for residents who became ill at the height of the Covid crisis, a landmark study has revealed,’ the Independent reports. ‘The Queen’s Nursing Institute said homes were told hospitals had blanket “no admissions” policies during April and May while GPs and local managers imposed unlawful do not resuscitate orders on residents’ (Independent).43

26 August 2020: ‘Boris Johnson has abandoned advice that pupils should not wear face masks in English secondary schools,’ Sky News reports. ‘Face coverings will be mandatory in communal areas and corridors for children in towns and cities that are subject to stricter coronavirus restrictions.’ Sky News notes, ‘The prime minister performed his latest U-turn in the face of growing pressure from headteachers, teaching unions and medical experts’ (Sky News).44

27 August 2020: ‘Boris Johnson will launch a major drive to get Britain back to the office as ministers warn working from home will make people more “vulnerable” to being sacked,’ The Telegraph reports. ‘A publicity campaign to begin next week will extol the virtues of returning to the workplace, making the “emotional case” for mixing with colleagues and highlighting the benefits to mental health’ (Telegraph).45

‘The UK has recorded the highest number of new coronavirus cases since 12 June, with government figures reporting 1,522 positive cases,’ the Guardian reports. ‘The number of new cases, which cover the 24 hours to 9am on 27 August, were up 474 on the previous day. The average number of cases confirmed in the past seven days stood at 1,155, the highest rolling average recorded since 22 June’ (Guardian).46
Speaking on *BBC Newsnight*, Professor Susan Michie, Director of the Centre for Behaviour Change at University College London and member of **Independent SAGE**, notes the number of ‘cases are rising week on week’ and that ‘even by the government’s own data, we don’t have a functioning test, trace and isolate system, which is necessary for really containing the increases that we are seeing’ (*BBC Newsnight*).\(^{47}\)

The *Financial Times* reports the test-and-trace programme in England ‘is falling increasingly short of its own targets.’ In the week ending 19 August, 72.6% of people who tested positive in England were contacted by NHS **test and trace**, compared to 79% the week before. 75.5% of infected people’s contacts were reached in the week ending 19 August. ‘At least 80 per cent of the close contacts of anyone infected with Covid-19 must be traced and isolated within 24-72 hours for the system to be effective, according to the **Scientific Advisory Group for Emergencies**’ (*Financial Times*).\(^{48}\)

The *Guardian* reveals ‘Covid-19 death tolls at individual care homes are being kept secret by regulators in part to protect providers’ commercial interests before a possible second coronavirus surge’. The report notes ‘England’s Care Quality Commission (CQC) and the Care Inspectorate in Scotland are refusing to make public which homes or providers recorded the most fatalities amid fears it could undermine the UK’s care system, which relies on private operators’ (*Guardian*).\(^{49}\)

The government announces workers on low incomes in parts of England with high rates of coronavirus will be able to claim up to £182 for 14 days – equivalent to £13 a day – if they have to self-isolate (*BBC News*).\(^{50}\)

Frances O’Grady, the General Secretary of the Trades Union Congress, commented about the government’s plan: ‘These paltry payments will not make the difference needed. Every worker should have the right to decent sick pay so they can help stop the spread of the virus. Ministers shouldn’t need a trial to know that’s the right thing to do. And sick pay must not become a post code lottery. The sooner government gets on with delivering fair sick pay for everyone, the quicker we will beat this pandemic. It should be at least as much as the real Living Wage – £320 a week – so everyone who needs to self-isolate can afford to’ (*Trades Union Congress*).\(^{51}\)
In a preprint paper (not peer-reviewed) in the *Lancet* medical journal, researchers ‘conclude that it is possible for humans to become infected multiple times by SARS-CoV-2, but the generalizability of this finding is not known’ (*Lancet*).\(^{52}\)

‘People in Britain have given a worse assessment of their country’s handling of the coronavirus outbreak than the electorates of 13 other leading democracies, according to international research,’ the *Guardian* reports. ‘Only 46% of the British population believe their country has done a good job handling coronavirus, the Pew Centre has found’ (*Guardian*).\(^ {53}\)

**28 August 2020:** ‘The UK transport secretary, Grant Shapps, has said it is safe to go back to work in England, as the government prepares to launch a publicity drive to persuade the public to return to the office,’ the *Guardian* reports. ‘The Cabinet Office will take out ads in regional newspapers after schoolchildren in England return to the classroom next week, advising employers about how to make their offices Covid-secure, and encouraging the public to feel safe to go back’ (*Guardian*).\(^ {54}\)

**29 August 2020:** ‘A leaked government report suggests a “reasonable worst case scenario” of 85,000 deaths across the UK this winter due to Covid-19,’ *BBC News* reveals. ‘The document also says while more restrictions could be re-introduced, schools would likely remain open. But it says the report “is a scenario, not a prediction” and the data are subject to “significant uncertainty”. However some are critical of the modelling and say some of it is already out of date’ (*BBC News*).\(^ {55}\)

‘Universities must scrap plans to reopen campuses next month in order to prevent a major public health crisis,’ the University and College Union demands. ‘The union fears that the migration of over a million students across the UK risks doing untold damage to people’s health and exacerbating the worst health crisis of our lifetimes’ (University and College Union).\(^ {56}\)
31 August 2020: ‘The UK is at risk of a new surge of coronavirus infections, experts have said, as schools and universities reopen their doors and cold weather drives people inside,’ the Guardian reports. On 30 August the government reported 1,715 new cases – the highest daily number since 4 June, and the highest number for a weekend day since mid-May. Professor Neil Ferguson, an epidemiologist at Imperial College London and former SAGE member, commented: ‘What it clearly demonstrates is we’re in a position where case numbers are going up. So we don’t have much room for manoeuvre’ (Guardian)."
Experts say the government has already, or is close to, losing control of the virus. By mid-September, more than 11 million people are under ‘enhanced lockdown measures’. Reports of serious problems with the test-and-trace system continue to dominate the news agenda. On 21 September, SAGE warn the government the country faces a ‘very large epidemic with catastrophic consequences’ unless they take immediate action by imposing a two-week ‘circuit breaker’ lockdown to reduce the spread of coronavirus. The government ignores this advice.

1 September 2020: ‘With students about to return to universities in the UK, what can we learn from the US debacle?’ two researchers ask in an editorial in the British Medical Journal. ‘The first lesson is the importance of curbing community transmission before reopening... The second lesson is the value of quarantining before or on arrival’ (British Medical Journal).¹

‘Boris Johnson has declined to meet members of a campaign group representing families bereaved by coronavirus, despite appearing to promise to do so on live TV last week,’ the Guardian reports. Challenged live on Sky News last week about repeated requests from Covid-19
Bereaved Families for Justice UK for a meeting in person, the Prime Minister said he was ‘not aware’ of their letters, but ‘of course’ he would meet them. The *Guardian* notes it has seen a letter from the Prime Minister that now declines to meet the group, saying it was ‘regrettably not possible’ (*Guardian*).

2 September 2020: The Prime Minister tells the House of Commons, ‘Not only are we getting the pandemic under control, with deaths down and hospital admissions way, way down, but we will continue to tackle it, with local **lockdowns** and with our superlative **test and trace** system, which, before Opposition Members sneer and mock it, has now conducted more tests than any other country in Europe’ (*Hansard*).

‘The UK government is to trial routine weekly Covid testing of the population as part of preparations to head off a possible winter second wave, as the former health secretary Jeremy Hunt called for such tests to become the norm,’ the *Guardian* reports. ‘Matt Hancock said the government was committing an extra £500m to scale up testing capacity and launch community pilots trialling the effectiveness of repeat testing in schools and colleges, as well as in the population as a whole. It will also ramp up the trials of a new test kit that it is claimed can provide results within 20 minutes.’ Hunt, who chairs the Health Select Committee, said the UK should embrace mass population testing: ‘I would really want to expand the whole testing programme so we can almost get to a point where we are testing the whole population every week’ (*Guardian*).

Scientists on the Scientific Pandemic Influenza Group on Modelling (SPI-M) warn people returning home from abroad are spreading the virus, because of poor compliance with quarantine and the lack of testing at airports (*Guardian*).

3 September 2020: ‘Bo**sses in charge of the coronavirus testing system have apologised after it emerged UK labs were struggling to keep up with demand,’ *BBC News* reports. ‘Some people are being
asked to travel hundreds of miles to get tested. UK labs were described as “maxed out” after a rise in demand - 170,000 tests a day are being processed, up from 100,000 in mid June... The booking website is now prioritising high-risk areas, including towns and cities with high infection rates and care homes, for testing. It means there are restricted home testing kits and fewer booking slots at local testing centres for people in low-risk areas, the government said’ (BBC News).

4 September 2020: The Guardian reports, ‘Coronavirus tests are running out in parts of north-east England despite cases rising to the highest level in months, political leaders have said amid growing concern over the government’s rationing of tests.’ Martin Gannon, the leader of Gateshead council, commented: ‘We’ve run out of tests... It’s diabolical. At a time when we’re opening schools, we’ve got an empty void of tests. You can’t control a situation when you haven’t got the facilities to do it’ (Guardian).

5 September 2020: ‘Covid-19 could now be endemic in some parts of the country that combine severe deprivation, poor housing and large BAME communities, according to a highly confidential analysis by Public Health England,’ the Observer reports. Prepared for local government leaders and health experts, the document ‘suggests the national lockdown in these parts of the north of England had little effect in reducing the level of infections, and that in such communities it is now firmly established’ (Observer).

The first Covid Memorial Day is held, marking six months since the first person to die of Covid-19 in the UK (Covid Memorial Day).

6 September 2020: With almost 3,000 people in the UK testing positive for Covid-19 – a more than 50% increase in a single day and the highest daily total since May – Professor Gabriel Scally, a former NHS regional director of public health for the south-west and member of Independent SAGE, says the government has ‘lost control of the virus’. He continues, ‘It’s no longer small outbreaks they can stamp on.
It’s become endemic in our poorest communities and this is the result. It’s extraordinarily worrying when schools are opening and universities are going to be going back.’ Christina Pagel, a professor of operational research at University College London and member of Independent SAGE comments, ‘It’s a massive jump. There is no way you can look at these figures and feel confident that things are going in the right direction’ (Guardian).\textsuperscript{10}

‘More than 100 NHS trusts in England could be at or above full capacity this winter if they faced a second wave of coronavirus admissions on top of the usual seasonal workload, with figures suggesting that dozens would have 10% fewer beds than needed,’ the Guardian reveals. Chris Hopson, Chief Executive of NHS Providers, comments: ‘These figures illustrate the point that trust leaders have strongly made over each of the last five winters – that there is insufficient acute bed capacity, and community capacity, to deal with winter demand. That’s not entirely surprising after a near decade of the longest and deepest funding squeeze in NHS history, when the NHS has been unable to grow its capacity to meet rising demand because it simply can’t afford to. We also know that our bed capacity is run at much higher levels of occupancy – often at 95% or higher – than in other comparable European countries’ (Guardian).\textsuperscript{11}

7 SEPTEMBER 2020: IN A STUDY PUBLISHED IN THE JOURNAL Public Health, researchers from Kings College London, University of Bristol and PHE find 75% of those with household Covid-19 symptoms had left home in the last 24 hours (Public Health).\textsuperscript{12}

Speaking to BBC’s File On 4, Tim Spector, Professor of Genetic Epidemiology at King’s College London, says up to 60,000 people in the UK may have been suffering from ‘long Covid’ for longer than three months, unable to get the care they need to recover from the debilitating symptoms, with approximately 300,000 people reporting symptoms lasting for more than a month (Guardian).\textsuperscript{13}
8 SEPTEMBER 2020: The Guardian reports the UK has recorded nearly 3,000 new coronavirus cases for the second day in a row. Susan Michie, Professor of Health Psychology at University College London and member of Independent SAGE, comments: ‘The number of daily cases has been creeping up for many weeks. Now we’re seeing a steep increase in the numbers of daily infections. So that is incredibly worrying, at a time when schools are beginning to reopen, when universities are going to being opening, and we also still don’t have a functioning test, trace and isolate system’ (Guardian, 8 September 2020).

‘The head of the NHS test and trace service has apologised to people in England who have either been unable to secure a coronavirus test or been told to go to drive-through centres hundreds of miles away’ (Guardian).14

Regarding problems with the government’s testing system, Paul White-man, general secretary of the National Association of Head Teachers, says: ‘The government assured us that this would be ready, but at the first sign of stress it seems to be falling over. This will put the successful and sustainable return to school at serious risk. It is unacceptable for this to happen when schools have put so much effort into getting their part of the plan right, and when pupils have had to endure so much uncertainty and disruption already.’ Nadra Ahmed, the chair of National Care Association, comments: ‘It does seem to be almost like a postcode lottery at the moment, which is even more alarming, because outbreaks may not be picked up. By now we were supposed to be doing daily testing by now’ (Guardian).15

‘It is six *months* since the WHO declared a pandemic,’ Rachel Clarke, a doctor specialising in palliative medicine, tweets. ‘It beggars belief that in all that time @10DowningStreet has failed to set up a credible testing system. World-beating hype, yet dangerously incompetent reality’ (Rachel Clarke).16

9 SEPTEMBER 2020: The government announces social gatherings of more than six people will be illegal in England from Monday (BBC News).17
Chief Medical Officer Professor Chris Whitty says, ‘the period between now and spring is going to be difficult’ and people shouldn’t see the restrictions ‘as a very short term thing’ because they were unlikely to be lifted after just two or three weeks (BBC News).\(^{18}\)

‘Boris Johnson believes a mass testing programme is ‘our only hope for avoiding a second national lockdown before a vaccine,’ according to leaked official documents setting out plans for “Operation Moonshot”,’ the Guardian reports. ‘The prime minister is said to be pinning his hopes on a project that would deliver up to 10m tests a day – even though the current testing regime is struggling to deliver a fraction of that number and is beset by problems... Some of the technology it would require does not yet exist’ (Guardian).\(^{19}\)

**10 September 2020:** The Socialist Campaign Group of Labour MPs issues a statement saying, ‘Britain needs a zero Covid strategy which puts the health of the people first’ (Morning Star).\(^{20}\)

A poll carried out for the Trades Union Congress by Britain Thinks shows two-fifths (43%) of workers would be unable to pay their bills if they have to survive on £96 a week – the current rate of Statutory Sick Pay (Trades Union Congress).\(^{21}\)

**11 September 2020:** The latest figures show 3,539 new daily cases, compared with 1,940 a week ago (Guardian).\(^{22}\)

Cases of coronavirus in England are doubling every seven to eight days, according to research from Imperial College London, which estimates the R value for England to be 1.7 (Guardian).\(^{23}\)

The Scientific Advisory Group for Emergencies estimates the R number range for the UK to be 1.0-1.2 (Government Office for Science and SAGE).\(^{24}\)

‘Households in Birmingham have been banned from mixing in new lockdown measures announced following a spike in coronavirus cases,’ BBC News reports. ‘The rate of infection has more than doubled in the city in a week to 90.3 cases per 100,000. The measures also cover neigh-
bouring Sandwell and Solihull, affecting more than 1.6 million people in total’ (BBC News).²⁵

‘Less than 20% of people in England fully self-isolate when asked to do so, according to documents released from the government’s scientific advisory group for emergencies, which said mass testing would be of no use unless this percentage rose,’ the Guardian reports. ‘The minutes, from a meeting on 27 August of the Multidisciplinary Task and Finish Group on Mass Testing, make it clear that the scientists think mass testing is of limited use. The minutes say mass testing “will require high rates of testing and self-isolation (> 90%) achieved equitably in any targeted population”. Poorer people are the least likely to self-isolate because they cannot afford to stay home, the minutes say: “Self-reported ability to self-isolate or quarantine is three times lower in those with incomes less than £20,000 or savings less than £100”’ (Guardian).²⁶

The government announces the Covid contact-tracing app will launch in England and Wales on 24 September, more than four months later than originally promised (Guardian).²⁷

**12 September 2020:** Speaking on the BBC Today Programme, Mark Walport, Chief Scientific Adviser in the UK from 2013 to 2017 and a member of SAGE, says, ‘We are on the edge of losing control’ of the virus. Kate Bell, the Head of Economics at the Trade Union Congress, tells the programme, ‘the level of sick pay is too low for many people to be able to self-isolate. The average person would lose around £800 if asked to self-isolate for two weeks because the level of sick pay at £96 a week is worth just a fifth of average earnings’ (BBC Today).²⁸

‘People across England have told BBC News they are struggling to access coronavirus tests. Health Secretary Matt Hancock said last week that no-one should have to travel more than 75 miles for a test, after the BBC revealed some were being sent hundreds of miles away. But dozens have now reported being unable to book a swab at all’ (BBC News).²⁹
13 September 2020: The government’s coronavirus testing programme currently has a backlog of 185,000 swabs, with tests being sent to Germany and Italy as UK labs are overwhelmed (Guardian). The coronavirus is spreading through care homes again, according to leaked documents that show the government is failing to protect the most vulnerable from the spiralling number of cases,’ the Sunday Times reveals. A Department of Health report marked ‘official sensitive’ and circulated on Friday stated that the rate of the coronavirus recorded through satellite tests — almost all of which take place in care homes — had quadrupled since the start of the month. It now stands at an estimated 1,100 new cases every day’ (Sunday Times).

14 September 2020: ‘There are currently no tests at all available in ANY of the top 10 Covid-19 hotspots in England,’ LBC can reveal. ‘No walk-in, drive-through or home tests available for people in Bolton, Salford, Bradford, Blackburn, Oldham, Preston, Pendle, Rochdale, Tameside or Manchester,’ confirms Ben Kentish, LBC radio’s Westminster correspondent (Ben Kentish). A British Medical Association poll of 8,000 doctors and medical students in England finds more than 86% say they expect a second peak of coronavirus in the next six months. ‘When asked which of a range of factors might risk causing a second peak, almost 90% of respondents agreed or strongly agreed that failures of the test-and-trace system posed a risk, while a similar proportion cited a lack of infection-control measures in places like bars and restaurants, and 86% agreed or strongly agreed confusing messaging on public health measures was a risk’ (Guardian).

15 September 2020: “Britain’s testing crisis could take weeks to resolve,” the health secretary has admitted as it emerged that Covid tests from hospitals are being deployed for use in the community to plug holes in the system,’ the Guardian reports (Guardian). Steve Rumbelow, the Chief Executive of Rochdale council, describes the testing system as ‘chaotic’ and ‘clearly in meltdown’ (Guardian).
‘We were promised weekly testing for staff and 28-day testing for residents. That has not been delivered,’ says Martin Green, chief executive of Care England. ‘There are delays in the couriers not coming to take swabs and problems with the labs getting the results back in time. It seems that the government makes an announcement first and then scrabbles around to see how it makes it happen. The testing regime needs a thorough root and branch review’ (Times).36

16 September 2020: Professor Chris Whitty, the Chief Medical Officer, and Patrick Vallance, the Chief Scientific Adviser, brief the Prime Minister ‘about what one person present called the “terrifying reality” of allowing the virus to go unchecked’ (Guardian).37

The Financial Times reports that just 8% of people in England who tested positive received their results by the end of the day after their test — down from 63% at the start of September (Financial Times).38

The Prime Ministers tells the House of Commons Liaison Committee a second national lockdown would be ‘disastrous’ for the economy. ‘I don’t want a second national lockdown — I think it would be completely wrong for this country and we are going to do everything in our power to prevent it,’ he said (Financial Times).39

Repeating policy that likely led to many deaths at the beginning of the pandemic, updated UK government guidance reiterates that care homes in England should be prepared to accept Covid-19-positive patients from hospitals (Channel 4 News).40

There were nearly 4,000 new daily cases of Covid-19 in the UK, according to government data (Reuters).41

17 September 2020: More than 11 million people are currently subject to ‘enhanced lockdown measures’ in the UK (Guardian).42

The Financial Times reveals experts on the government’s Scientific Advisory Group for Emergencies (SAGE) and the Scientific Pandemic Influenza Group on Modelling (SPI-M) ‘have proposed a two-
week national **lockdown** in October to try to tackle the rising number of coronavirus cases,’ to coincide with the October half-term for schools (*Financial Times*).\(^\text{43}\)

Baroness Dido Harding, the head of **Test and Trace**, tells the House of Commons Science and Technology Committee she didn't believe ‘anybody was expecting to see the really sizeable increase in demand’ for coronavirus tests (*Sky News*).\(^\text{44}\)

The *Guardian* reveals ‘contact tracers working for one firm hired by the government to ensure close contacts of confirmed Covid cases are tracked down and told to self-isolate have called the contacts only to discover that they were first identified as being at risk up to 14 days earlier’ (*Guardian*).\(^\text{45}\)

*Channel 4 News* reveals a leaked ‘contract, from Trafford Council in Greater Manchester, outlines how eligible **care homes** will receive COVID-positive patients within just 2 hours of the patient being identified by the hospital as ready for discharge’ (*Channel 4 News*).\(^\text{46}\)

18 SEPTMBER 2020: **W E NEED ACTION NOW. D ELAYING FOR 2 weeks earlier in year generally agreed to be a terrible mistake. Are we going to repeat it? 1000’s of lives at stake,** tweets Professor Susan Michie, director of the Centre for Behaviour Change at University College London, and member of **Independent SAGE** (Susan Michie).\(^\text{47}\)

‘NHS hospitals have been banned from launching their own coronavirus testing for staff and patients who have symptoms – despite a nationwide shortage in tests,’ the *Independent* reveals. ‘Leaked NHS documents... show the Department of Health and Social Care (DHSC) has now capped funding for Covid-19 testing in the health service, even though the lack of tests has left hospital doctors, nurses, teachers and other key workers forced to stay at home’ (*Independent*).\(^\text{48}\)

A research article (which has not been peer-reviewed) by researchers at Kings College London, University College London and PHE finds just 18% of people with Covid symptoms adhere to self-isolation, and only 11% adhere to quarantine if contacted by **test and trace** (*medRxiv*).
The ONS estimates there are 6,000 new cases of coronavirus a day in England (*BBC News*).\(^{49}\)

**20 September 2020:** Following opposition to a more restrictive policy from Chancellor Rishi Sunak, three proponents of a ‘herd immunity’ approach to managing the virus, Professor Sunetra Gupta and Professor Carl Heneghan of the University of Oxford, and Professor Anders Tegnell, the Swedish epidemiologist who has master-minded Sweden’s response to the pandemic, brief the Prime Minister and Chancellor. Professor John Edmunds from SAGE also participates (*Sunday Times*).\(^{50}\)

Noting ‘urgent action’ is required to stop the spread of the virus, Independent SAGE publish their ‘emergency 10-point plan to avoid a national lockdown’. Actions include: pubs and restaurants being limited to outdoor service; work from home if possible; no in-person teaching at universities and colleges; fund schools to allow smaller, socially distanced classes; limit indoor social interaction to a bubble of three households; and ‘rebuild the testing system based on tried and trusted local authority, NHS and public health structures, including recruiting and deploying contact tracers locally’ (Independent SAGE).\(^{51}\)

**21 September 2020:** Speaking at a Downing Street press conference alongside the Chief Medical Adviser, Patrick Vallance, the Chief Scientific Adviser, warns the UK could see 50,000 new coronavirus cases a day by mid-October without further action. This would likely lead to about ‘200-plus deaths per day’ a month after that (*BBC News*).\(^{52}\)

SAGE warns the government the country faces a ‘very large epidemic with catastrophic consequences’ unless they take immediate action by imposing a two-week ‘circuit breaker’ lockdown to reduce the spread of coronavirus. SAGE also warns there is ‘low levels of engagement’ with the test-and-trace system. Coupled with testing delays and likely poor rates of self-isolation the group notes ‘this system is having a marginal impact on transmission at the moment’ and that ‘unless the system
grows at the same rate as the epidemic, and support is given to people to enable them to adhere to self-isolation, it is likely that the impact of test, trace and isolate will further decline in the future’ (Guardian).53

A Survation poll shows 74% of people want local public health teams, rather than Serco and Sitel, to run NHS Test and Trace (HuffPostUK).54

‘The “eat out to help out” scheme has been linked to the rise in cases: the government directly subsidised one of the riskiest settings, indoor hospitality, Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, notes’ (Guardian).55

22 September 2020: Noting the UK has reached ‘a perilous turning point’, the Prime Minister sets out a number of new coronavirus restrictions for England, which he says could last for up to six months: pubs and restaurants will close at 10:00 pm, shop staff will have to wear face masks, weddings will be limited to a maximum of 15 people and fines for breaking the laws on gatherings or mask-wearing have been increased (BBC News).56

In a U-turn from previous advice, the government urges people to work from home if they can (Guardian).57

‘People in Scotland have been banned from visiting other households indoors, in tough new restrictions that go further than those announced for England,’ Sky News reports (Sky News). ‘Closing down restaurants and pubs earlier will do little to stave the spread for as long as multiple different households can interchangeably meet up,’ notes Dr David Strain, a senior clinical lecturer at Exeter University (Guardian).58

Asked in a YouGov poll about the changes to lockdown rules, 13% of respondents say they have gone ‘too far’, 32% ‘are about right’, and 45% ‘do not go far enough’ (YouGov).59

23 September 2020: Speaking on the BBC Today programme, Professor John Edmunds, dean of the faculty of epidemiology and population health at the London School of Hygiene and Tropical
Medicine and a member of SAGE, says, ‘Overall, I don’t think the measures have gone anywhere near far enough. In fact, I don’t even think the measures in Scotland have gone far enough...I suspect we will see very stringent measures coming in place throughout the UK at some point, but it will be too late again. We will have let the epidemic double and double and double again until we do take those measures...we didn’t react quick enough in March. We haven’t learned from our mistake back then, and we are unfortunately about to repeat it’ (BBC Today).60

Professor Cath Noakes, a member of SAGE at Leeds University, ‘said she doubted the new measures would prevent an exponential rise in coronavirus cases over the coming months,’ the Guardian reports. Noakes comments: ‘I think it’s unlikely the measures will be sufficient to bring the R back down below 1. I don’t think they will cut it’ (Guardian).61

Speaking to the BBC, Professor Peter Openshaw of Imperial College and a member of the government’s NERVTAG, which feeds into SAGE, said a ban on households mixing indoors in England ‘may well be coming very soon... I would think if we wait two or three weeks, it will be too late. It ought to be instituted sooner rather than later’ (Sky News).62

Richard Horton, editor-in-chief of the Lancet medical journal, tweets: ‘We are going to see a repeat of March: incremental changes that are insufficient to cut lines of viral transmission. This is a slow motion car crash of a government, ruled from the cabinet to the backbenches by a streak of lethal libertarianism’ (Richard Horton).63

The Times reveals ‘The Scientific Advisory Group for Emergencies did not model the effect of a 10pm curfew, with key members saying there was no evidence that it would be effective’ (Times).64

24 September 2020: Speaking to Sky News Health Secretary Matt Hancock estimates almost 10,000 people a day in the UK are contracting coronavirus. He also notes surveys suggested that over 100,000 people a day were catching the disease at its peak earlier in the
year, but the government only found around 6,000 of them through testing (Guardian).65

The government’s contact-tracing app for England and Wales is launched (BBC News).66

‘Thousands of GPs and nurses are being forced to stay off work as they cannot get tested for Covid-19, England’s test-and-trace tsar has been warned,’ the Guardian reports (Guardian).67

25 SEPTEMBER 2020: Speaking on the BBC Today programme, Professor Graham Medley, an infectious disease modelling expert at the London School of Hygiene and Tropical Medicine and member of SAGE, warns the death toll will rise from 34 to 100 a day in three to four weeks’ time. Medley notes: ‘In order to stop that process increasing again, then we need to make sure that that transmission comes down now, because that doubling time will carry on. The things that we do now will not stop 100 people dying a day, but they will stop that progressing much higher’ (Guardian).68

The University and College Union says that face-to-face teaching at universities should be halted until the government fixes test-and-trace failures and curbs the spread of Covid-19 (Guardian).69

According to the latest COVID Symptom Study app figures, which has over four million participants, ‘there are currently 16,130 daily new symptomatic cases of COVID in the UK on average over the two weeks up to 20 September’ (COVID Symptom Study).70

‘Since 10 August, people who test positive are also asked about places they have been and activities they have done in the days before becoming unwell; eating out was the most commonly reported activity in the 2-7 days prior to symptom onset,’ notes PHE’s Weekly Coronavirus Disease 2019 (COVID-19) surveillance report (Public Health England).71

In a report looking at Sweden’s response to the pandemic, Independent SAGE note ‘the idea that Sweden has no restrictions or lock-
down is a misconception’ and also that ‘the assertion that its strategy is successful is far from clear’ (Independent SAGE).\textsuperscript{72}

\textbf{27 September 2020:} Ben Page, Chief Executive of Ipsos Mori polling company, tweets: ‘By a margin of 45\% to 11\% the public choose protecting health over re-opening the economy (the rest are unsure/neutral)’ (Ben Page).\textsuperscript{73}

\textbf{29 September 2020:} 7,143 new cases of coronavirus are reported in the UK in the last 24 hours - the biggest rise since the pandemic began. In addition, 71 coronavirus-related deaths have also been recorded – the highest number since 1 July (Sky News).\textsuperscript{74}

\textbf{30 September 2020:} Speaking at a Downing Street press conference the government’s Chief Scientific Adviser Patrick Vallance, says, ‘We don’t have this under control at the moment... this is heading in the wrong direction, there is no cause for complacency at all. We all need to make sure we reduce the number of contacts we’ve got; we need to reduce contacts in certain environments, particularly indoor spaces poorly ventilated’ (Guardian).\textsuperscript{75}

The charity Breast Cancer Now estimates that around 986,000 women have missed mammograms in the UK after screening services were paused because of coronavirus, meaning approximately 8,600 women could be living with undetected breast cancer (Sky News).\textsuperscript{76}
With the number of infections rapidly increasing, the government introduces their ineffective three-tier system on 14 October. The number of cases continues to rise, and with pressure building from government advisers, independent experts and other countries introducing severe restrictions, on 31 October – five and a half weeks after SAGE’s 21 September recommendation – the Prime Minister finally announces a national four-week lockdown for England, starting on 5 November. Schools remain open.

1 October 2020: The latest results from the Imperial College REACT-1 study show as many as one in 100 people are currently infected with Covid-19 in north-west England. There are signs the rise in infections is now slowing. Prof Paul Elliott, the director of the study, comments, ‘This reinforces the need for protective measures to limit the spread of the disease and the public’s adherence to these, which will be vital to minimise further significant illness and loss of life from Covid-19. It’s a really critical period, and we really need to get on top of this now’ (Guardian).
'Despite repeated public and private pleas from NHS and care staff and representative organisations, from eminent scientists such as Professor Sir John Bell, Professor Sir Paul Nurse, and Professor Sir Jeremy Farrar, and from other House of Commons select committees, the Government and NHSE/I have not yet introduced routine asymptomatic testing for all NHS staff,' a report from the House of Commons Health and Social Care Committee notes. 'Around 70% of COVID-19 carriers are asymptomatic, and only the routine testing all healthcare staff will ensure core health and care services are returned to normal levels' (House of Commons Health and Social Care Committee).²

'Coronavirus cases have doubled in the majority of English cities and towns that are subject to long-term local lockdowns, Guardian analysis has found.' According to the newspaper, Sir Chris Ham, a former chief executive of the King's Fund think-tank, said the numbers were not falling because the lockdown rules were too 'complex and confusing', and there is a lack of support for people self-isolating, while the test-and-trace system was 'still not working well enough' (Guardian).³

**2 October 2020:** The government SAGE committee estimates the reproduction (R) number of the virus in the UK is between 1.3 and 1.6, up from between 1.2 and 1.5 last week (Sky News).⁴

'Covid-19 testing in care homes in England could be de-prioritised to save scarce laboratory capacity for the NHS, public health officials fear,' the Guardian reports. After meeting with NHS colleagues, one local health official commented: ‘There are moves afoot to keep testing capacity for the NHS. It has been mooted in our area that the NHS has to come first and it is having real difficulties’ (Guardian).⁵

**4 October 2020:** The Great Barrington Declaration, pushing for herd immunity and signed by infectious disease epidemiologists and public health scientists, is published (Great Barrington Declaration).⁶

...
5 October 2020: The Guardian reports, ‘More than 50,000 potentially infectious people may have been missed by contact tracers and not told to self-isolate because of the data blunder that meant nearly 16,000 coronavirus cases went unreported in England’ (Guardian).⁷

‘Ministers have been accused of putting the high street above public health after the business department warned council leaders against enforcing mask-wearing in supermarkets,’ the Guardian reports. After four retailers – including Sainsbury’s, Lidl and Morrisons – were issued with warning notices by Barking and Dagenham council because their staff were seen failing to enforce mask-wearing and social distancing, a senior official from the Department for Business, Enterprise and Industrial Strategy phoned the council and said it ‘did not have powers to enforce these guidelines using the government’s Covid-19 emergency powers’ and that ‘the action had caused a negative reaction from the operators’ (Guardian).⁸

6 October 2020: Professor Neil Ferguson, head of the outbreak modelling group at Imperial College London and a former member of SAGE, tells BBC Today ‘we think that infections are probably doubling every two weeks or so, in some areas faster than that, maybe every seven days, and in other areas slower’ (BBC Today).⁹

Professor John Edmunds, of the London School of Hygiene and Tropical Medicine and a member of SAGE, tells BBC Newsnight, ‘I think we are starting to get to a point where we really will have to take really critical action. Otherwise, we are going to run the risk of turning the National Health Service back into a National Covid Service. And that’s what leads to all these excess deaths, because you cannot treat other patients properly because the hospitals are full with Covid patients.’ He also notes, ‘these local restrictions that have been put in place in much of the north of England really haven’t been very effective... so we need to take much more stringent measures. Not just in the north of England, actually, I think we need to do it countrywide, and bring the epidemic back under control... the problem with the government is they are
trying light touch measures but really that is just delaying the inevitable. We will, at some point, put very stringent measures in place because we will have to when hospitals really start to fill up and so on... so, frankly, the better strategy is to put them in place now’ (BBC Newsnight).

7 October 2020: Asked about Professor John Edmunds’s comments pushing for more ‘stringent measures’ on BBC Newsnight on 6 October, Calum Semple, Professor of Child Health and Outbreak Medicine at University of Liverpool who attends SAGE meetings, says, ‘Yes, I think that’s a really good point. And based on the mathematics of data that I am seeing, I am with John here, that perhaps a ‘circuit breaker’ a couple of weeks ago would have been a really good idea. It is always easier to reduce an outbreak at the earlier stage than to let it run and then try to reduce it at a later stage’ (BBC Today).

14,162 new daily cases and 70 deaths are recorded in the UK (Guardian).

8 October 2020: The number of Covid-19 patients in intensive care in the north of England is set to pass the April peak in 22 days if infections continue rising at the current rate, according to a briefing to MPs by Chris Whitty, the government’s Chief Medical Officer, and Health Minister Ed Argar. The Guardian notes, ‘In slides marked “official – sensitive”... a senior government official cited a study by the US Centers for Disease Control which found that, compared with Covid-free people, those with coronavirus were twice as likely to report having dined at a restaurant in the 14 days before becoming infected’ (Guardian).

‘Some hospitals in the north of England are set to run out of beds for Covid patients within a week, health chiefs are warning, amid growing signs that the disease’s fast-unfolding second wave will seriously disrupt normal NHS care for a second time,’ the Guardian reports (Guardian).

The Guardian reports, ‘Members of the Scientific Advisory Group for Emergencies (SAGE) believe that a potential shutdown of pubs and restaurants in the north and Midlands, which is expected next week
after delays that one MP has called “reckless”, are unlikely to bring cases down to a more manageable level’ (*Guardian*).  

Speaking to *Sky News*, Robert Jenrick, the Communities Secretary, admitted that local **lockdowns** ‘haven’t yet seen the impact we would like to have seen’ (*Guardian*).  

The *Independent* reports, ‘The government’s contact-tracing programme failed to reach more than 30 per cent of close contacts of people who tested positive for the coronavirus in England, the latest figures show, in what is the worst week on record since the beginning of **Test and Trace**’ (*Independent*).  

A Redfield & Wilton Strategies poll for *Mail Online* finds 63% of respondents would back a ‘circuit breaker’ **lockdown** (*Daily Mail*).  

**9 October 2020:** Professor Steven Riley from Imperial College London and co-author of the ongoing REACT 1 study, says, ‘It’s a national epidemic, it is still growing,’ with 45,000 new infections each day (*Guardian*).  

The REACT 1 study shows, ‘The high rate of coronavirus infections in the North of England is likely to spread to the rest of the country within weeks,’ the *Independent* reports (*Independent*).  

Commenting on the 8 October *Guardian* report about hospitals in the north of England running out of beds for Covid patients, Jeremy Farrar, Director of the Wellcome Trust, tweets, ‘The tragedy is how predictable this has been since at least early July. It was not inevitable. It is not inevitable now that this worsens, but to avoid spiralling out of control needs to be action now. We are close to or at events & choices of 13-23 March’ (Jeremy Farrar).  

*SAGE*’s behavioural science experts warn that only 18%–25% of people who needed to were self-isolating (*Guardian*).  

‘Nearly nine out of 10 Covid-19 tests taken under the system used by **care homes** in England were returned after the government’s 48-hour target in September, official figures reveal’ (*Guardian*).
Professor Sir Robert Lechler, President of the Academy of Medical Sciences in the UK, says the Great Barrington Declaration ‘has gained a worrying amount of prominence’ and that he is concerned about the public perception of what this document calls for, ‘describing some of the Declaration’s main ideas as “untenable”’ (Academy of Medical Sciences).  

**11 October 2020:** The Deputy Chief Medical Officer, Jonathan Van-Tam, says the UK is at a ‘tipping point similar to where we were in March’ in the crisis and must act swiftly to avoid history ‘repeating itself’. Martin McKee, Professor of European Public Health at the London School of Hygiene and Tropical Medicine, comments, ‘I would say, actually, we are beyond the tipping point. To be perfectly honest, I think it’s perhaps being a little bit optimistic. We are clearly on the path of exponential growth’ (Guardian).

An Ipsos MORI survey finds that 73% of respondents said they support local **lockdowns** in areas where coronavirus is rising, and 68% of people support implementing local lockdowns where they live if needed. Support also remains strong for the ‘rule of six’, while 61% said they would support banning all travel in and out of the country (Ipsos MORI).

**12 October 2020:** The Prime Minister announces a new three-tier system of coronavirus restrictions is being introduced in England. Starting on 14 October 2020, there will be three Local COVID Alert Levels – ‘medium’, ‘high’ and ‘very high’ – depending on infection rates in the area (Sky News).

At the Downing Street press conference, Professor Chris Whitty, the Chief Medical Officer, says ‘I am not confident - and nor is anybody confident – that the Tier 3 proposals for the highest rates, if we did the absolute base case and nothing more, would be enough to get on top of it’ (Sky News).

Speaking on the BBC PM programme, Professor Calum Semple, an infectious disease expert and adviser to the government, says he and
other experts ‘were advocating for quite stringent, severe local interventions, where necessary, three to four weeks ago.’ He also argues the government is ‘a little late to react’ and a ‘much firmer intervention, the so-called circuit breaker’ will be needed to be implemented nationally within weeks (BBC PM).\textsuperscript{29}

The head of the WHO, Tedros Adhanom Ghebreyesus, warns against deliberately allowing coronavirus to spread in the hope of achieving so-called \textit{herd immunity}, and describes the idea as ‘simply unethical’ (\textit{Guardian}).\textsuperscript{30}

\textbf{13 October 2020:} Labour Party leader Keir Starmer calls on the government to ‘follow the science’ and impose a national ‘circuit breaker’ \textit{lockdown} of at least two weeks (\textit{Guardian}).\textsuperscript{31}

A (not yet peer-reviewed) paper co-authored by Graham Medley, an infectious disease modelling expert at the London School of Hygiene and Tropical Medicine and member of SAGE, and Matt Keeling, a member of the Scientific Pandemic Influenza Group on Modelling (SPI-M), estimates between 3,000 and 107,000 deaths could be avoided by January if a two-week ‘circuit breaker’ \textit{lockdown} is imposed during half-term (\textit{Sky News}).\textsuperscript{32}

Stephen Reicher, Professor of Psychology at the University of St Andrews, and a member of the SAGE subcommittee advising on behavioural science, argues the ‘alarming growth’ of the virus between 21 September, when SAGE advised the government to immediately implement a \textit{lockdown}, and 12 October means the government now ‘had to go further than the SAGE advice to bring the virus under control.’ However, Reicher notes ‘the government plumped for an anaemic compromise between its scientific advisers and those arguing against any new restrictions’ with ‘England’s new three tier system still falls far short of what SAGE advised back in September’ (\textit{Guardian}).\textsuperscript{33}

\textbf{14 October 2020:} Arlene Foster, the First Minister of Northern Ireland, announces a partial \textit{lockdown} in Northern Ireland,
with pubs and restaurants closed, and close-contact services, apart from essential health services, banned for four weeks, and schools closed for two weeks (Guardian).³⁴

A ‘Consensus Statement on COVID-19’ written by the Scientific Pandemic Influenza Group on Modelling, Operational sub-group, which feeds into SAGE, notes, ‘In England, we are breaching the number of infections and hospital admissions in the Reasonable Worst Case planning scenario that is based on COVID-S’s winter planning strategy. The number of daily deaths is now in line with the levels in the Reasonable Worst Case and is almost certain to exceed this within the next two weeks’ (SPI-M-O).³⁵

Sir David King, the former Chief Scientific Adviser and Chair of Independent SAGE, tells ITV’s Peston programme, ‘If we had gone into this second lockdown on 23 September, we would have been seeing more like 5,000 cases a day, not approaching 20,000. If we just delay for another few days, we are going to see that number rise. It is going to be more and more difficult to chase all of these cases.’ He continues, ‘I believe we need to go into a lockdown until we have a test and trace system that is picking up the majority, the vast majority, of all of the new cases within 24 hours’ and ‘introduce support for people going into isolation who are losing their income’ (Peston).³⁶

80 researchers publish the John Snow Memorandum in the Lancet medical journal, noting the ‘renewed interest in a so-called herd immunity approach, which suggests allowing a large uncontrolled outbreak in the low-risk population while protecting the vulnerable…. is a dangerous fallacy unsupported by scientific evidence.’ As of 16 October, the memo had been signed by 2,800 scientists, researchers, and healthcare professionals (John Snow Memorandum).³⁷

１５ OＣＴＯＢＥＲ ２０２０：‘Hospital doctors and public health experts have backed growing calls for a ‘circuit breaker’ to stem the resurgence of Covid-19 and protect the NHS,’ the Guardian reports. Claudia Paoloni, President of the Hospital Consultants and Specialists Association which represents 3,500 senior hospital doctors, comments: ‘We are in favour of a circuit breaker. Unfortunately we find ourselves in an
inimitable situation in that it’s one thing that we can do to buy ourselves some time and suppress this down to a more manageable level again.’ She adds: ‘The circuit breaker should start as soon as possible. To get us through the winter ... you might need a series of circuit breakers to keep the transmission suppressed.’ According to the Guardian, ‘the British Medical Association said it supported a temporary short-term lockdown but only as part of a new ‘robust prevention plan’ involving stronger restrictions than the three-tier system that Boris Johnson announced this week, and clearer public health messaging to encourage compliance.’ The Guardian also notes the Royal Society for Public Health supported a circuit breaker. Christina Marriott, its Chief Executive comments: ‘The virus is out of control in much of England and the majority of scientific opinion is that action needs to be taken swiftly – and indeed is likely overdue – if we are to avoid thousands of unnecessary deaths’ (Guardian).38

A report from Dr Elaine Maxwell, a nurse academic and content lead for the National Institute for Health Research’s Centre for Engagement and Dissemination, concludes ‘Health professionals urgently need more information and training to respond to the rising numbers of people in the UK living with so-called 'long Covid’, which may not be one condition but several different syndromes... the NHS and social care system was currently unequipped to meet the needs of this emerging patient group’ (Nursing Times).39

Dr Anthony Fauci, the top infectious disease expert in the US, says the Great Barrington Declaration’s belief in herd immunity is ‘nonsense’ and ‘dangerous’ (CNBC).40

16 October 2020: Data from the ONS shows cases of coronavirus are rising rapidly in England, with about 27,900 new cases every day in the community in early October (Guardian).41

17 October 2020: Sir John Bell, Regius Professor of Medicine at the University of Oxford and an adviser to the government,
tells BBC Today programme, ‘I can see very little way of getting on top of this without some kind of a circuit breaker because the numbers are actually pretty eye-watering in some bits of the country and I think it’s going to be very hard to get on top of this just biting around the edges’ (Guardian).42

Commenting on Sir John’s interview later on in the BBC Today programme, former Health Secretary Jeremy Hunt says, ‘I’ve always thought that it’s better to do things quickly and decisively than to wait until the virus has grown so I have a lot of sympathy with that’ (Standard).43

Speaking on LBC radio about the Government’s new tiered coronavirus strategy, Anthony Costello, Professor of Global Health and Sustainable Development at University College London and a former director of maternal and child health at the WHO, says, ‘I don’t think it’s going to work, I don’t think Tory MPs think it’s going to work’ (LBO).44

18 October 2020: ‘Greater Manchester is set to run out of intensive care beds to treat people left seriously ill by Covid-19, and some of those units in the region’s 12 hospitals are already full, a leaked NHS document has revealed,’ the Guardian reveals. The documents show that ‘by last Friday the resurgence of the virus had left the ICUs [Intensive Care Units] of hospitals in Salford, Stockport and Bolton at maximum capacity, with no spare beds to help with the growing influx’ (Guardian).45

19 October 2020: The Welsh First Minister, Mark Drakeford, announces a two-week ‘firebreak’ – under which schools, shops, pubs and hotels will close and citizens will be told to stay at home – will begin on 23 October (Guardian).46

Ireland announces a six-week national lockdown to suppress the virus, with its leader calling it ‘Europe’s strictest regime’ (Politico).47

Asked on Channel 4 News if England should do a ‘circuit breaker’ and if so when and how long, Christina Pagel, a Professor of Operational
Research at University College London and member of Independent SAGE, replies, ‘Yes they should. Tomorrow. For two weeks... I was looking at the death numbers... They have been doubling every two weeks since the beginning of September. Unfortunately, the people who are going to die in the next four weeks probably already have Covid. There is nothing that we can do about that now. But if it doubles again in two weeks and doubles again in two weeks that is 6,000 people that are likely to die in the next two weeks. I find that personally horrifying... what we do now will save people’s lives at the end of November. And if we wait two weeks until things get even worse, we could have saved 3,000 people in that time. I just feel delaying and delaying, well it is literally costing lives’ (Channel 4 News).  

20 October 2020: Nicki Credland, Chair of the British Association of Critical Care Nurses, tells the BBC Today programme, ‘we don’t have enough fully qualified intensive care nurses to be able to manage a surge in Covid-positive patients who need ICU [Intensive Care Unit] admission. We didn’t have enough nurses back in March, April, May time, and that hasn’t changed. We haven’t miraculously got more nurses for this second surge’ (BBC Today).  

21 October 2020: John Edmunds, a professor at the London School of Hygiene & Tropical Medicine, told MPs... that without further measures England’s tiered Covid-19 strategy would lead to high numbers of new infections every day, putting the NHS under strain and driving up the death toll’, the Guardian reports. Speaking to the House of Commons Science and Technology Committee, Edmunds, who is a member of SAGE, noted, ‘If you look at where we are, there is no way we come out of this wave now without counting our deaths in the tens of thousands’ (Guardian).  

In an op-ed in the British Medical Journal, Peter Doshi, Associate Editor and Assistant Professor of pharmaceutical health services research at the University of Maryland School of Pharmacy, notes, ‘None of the trials currently under way are designed to detect a reduction in any serious outcome such as hospital admissions, use of intensive care, or
deaths. Nor are the vaccines being studied to determine whether they can interrupt transmission of the virus.’ He continues, ‘Hospital admissions and deaths from covid-19 are simply too uncommon in the population being studied for an effective vaccine to demonstrate statistically significant differences in a trial of 30,000 people. The same is true of its ability to save lives or prevent transmission: the trials are not designed to find out’ (British Medical Journal).

Analysis of data from thousands of users of the COVID Symptom Study app from ZOE, run out of King’s College London, shows that one in 20 people are likely to suffer from ‘long covid’, with symptoms lasting more than eight weeks (Covid symptom study).

The government records 26,688 new daily cases in the UK (Guardian).

**22 October 2020:** Speaking at a Downing Street press conference, Sir Patrick Vallance, the government’s Chief Scientific Adviser, says modelling suggests there are between 53,000 and 90,000 new infections per day across England (Independent).

With the performance of England’s £12bn test-and-trace system falling to a new low – new figures show less than 60% of close contacts being reached, while test turnaround times have risen to nearly 48 hours – the Prime Minister says, ‘I share people’s frustrations and I understand totally why we do need to see faster turnaround times and we need to improve it.’ He adds the system is helping ‘a bit’. The Guardian notes ‘In the week ending 14 October, 59.6% of close contacts were reached, down from the previous week’s figure of 62.6%, which was the lowest since the test-and-trace operation was launched at the end of May.’ However, ‘In fact the true proportion of contacts of Covid patients reached is lower still: the latest report reveals 101,494 people tested positive but only 96,521 were transferred to the contact-tracing system, of whom just over 80% were reached and asked to provide information about their contacts. That means, overall, only 46% of close contacts were reached’ (Guardian).
23 OCTOBER 2020: Nicola Sturgeon, Scotland’s First Minister, announces a five-level system for restricting people’s movements and limiting physical contact in Scotland. The Guardian reports ‘The system includes a top level that is tougher than the highest of England’s three tiers, which Sturgeon said would be closer to the lockdown imposed across the UK in late March’ (Guardian).

During the weekly Independent SAGE briefing, Christina Pagel, Professor of Operational Research at University College London, provides more details of the points she made on Channel 4 News on 19 October. She estimates that the current number of infections means there is likely to be 6,000 deaths from Covid between 23 October and 19 November, ‘and there is not much we can do about it.’ However, she notes ‘if we can reduce rates of transmission now, we can save lives by 3 December, and that is really what the circuit breaker is about’ (Independent SAGE).

The Guardian reports, ‘Mass cancellations of routine operations in England are inevitable this autumn and winter despite an NHS edict that hospitals must not again disrupt normal care, doctors’ leaders have said... The BMA [British Medical Association], which represents about 70% of Britain’s 240,000 doctors, says hospitals have too few beds and staff to maintain surgery and diagnostic testing for non-Covid illness while the second wave is unfolding’ (Guardian).

25 OCTOBER 2020: After speaking to more than 50 witnesses, including doctors, bereaved families, care home workers, politicians and government advisers, a Sunday Times Insight investigation finds ‘Elderly people were excluded from hospitals and intensive care during the height of the pandemic’s first wave as part of efforts to stop the NHS being overrun.’ The newspaper notes ‘The new findings undermine claims by Matt Hancock, the health secretary, that ‘everybody who needed care was able to get that care’ during the first wave.’ Dr Chaand Nagpaul, Chairman of the BMA, comments: ‘It is manifestly the case that large numbers of patients did not receive the care that they needed and that's because the health service didn't have the resources... Now we
are walking into a second crisis without having learnt crucial, even life-saving lessons’ (Sunday Times).

26 October 2020: Speaking on BBC Newsnight, Christina Pagel, Professor of Operational Research at University College London and a member of Independent SAGE, says ‘We are seeing a lot of politicians, understandably, really, really reluctant to implement ‘severe restrictions. But the longer they take to decide the worse the situation gets. Covid is moving faster than political decision making.’ Asked if the 3-tier system will ‘keep us out of curfew,’ Pagel replies, ‘No it won’t’ (BBC Newsnight).

A BMA survey of 6,500 doctors in England finds just under 6% say the government’s three-tier system will have any significant impact on containing the spread of the virus, and 37 per cent say they will have no impact or be ineffective (British Medical Association).

‘The NHS has been given in excess of £1bn less than it needs to tackle the second wave of Covid-19, deal with the coming winter and restart routine operations,’ the Guardian reports (Guardian).

27 October 2020: The government records 367 Covid deaths in the last 24 hours (Guardian).

Leeds Teaching Hospitals tweeted, ‘We have 263 patients in our beds who have tested positive for COVID-19, including 22 in intensive care. This means we have more COVID-19 patients in our hospitals than at the peak of the pandemic in mid-April’ (Leeds Teaching Hospitals).

The Financial Times notes an Imperial College London study involving 365,000 adults shows, ‘the proportion of people in Britain with antibodies that protect against Covid-19 declined sharply over the summer,’ adding to evidence that the concept of herd immunity is flawed (Financial Times).
28 October 2020: France announces a second national lockdown, to last until at least the end of November, with people only allowed to leave home for essential work or medical reasons (BBC News). 66

Germany announces a four-week national lockdown to begin on 2 November (Sky News). 67

Speaking on Sky News, Professor Gabriel Scally, President of Epidemiology and public Health at the Royal Society of Medicine and a member of Independent SAGE, urges the government to implement a ‘preferably four to six weeks’ circuit breaker national lockdown ‘as soon as possible’. He also notes, ‘All the time we are delaying it, we are only making the situation worse, not better’ (Sky News). 68

Speaking on BBC Newsnight about the possibility of a national lockdown, Robert West, Emeritus Professor of Health Psychology at University College London, says, ‘The longer it [the government] leaves it, the longer the lockdown will have to be and the more people will die ahead of that’ (BBC Newsnight). 69

A Frontiers in Public Health survey in May and June asked over 25,000 researchers across the world whether their policy makers have taken scientific advice into during the pandemic. 24% of UK researchers agree, with 56% disagreeing – ranking the UK 28 of 31 countries. In contrast 77% of researchers in New Zealand, 76% in Greece, 66% in Germany and 65% in South Korea agree (Frontiers in Public Health). 70

29 October 2020: New results from the Imperial College London REACT study show that the prevalence of infection in England has more than doubled since the last round of testing in early October. The study estimates there are 96,000 new infections every day in England. The overall reproduction number (R) has increased to 1.6, with infections doubling every 9 days (Imperial College London). 71
30 O CTOBER 2020: REPORTS EMERGE THAT THE GOVERNMENT IS planning on announcing a national lockdown early next week (Guardian). There were approximately 51,900 new daily cases last week in England, up from an estimated 35,200 daily cases the week before, according to the ONS (Reuters).

Professor Dominic Harrison, the Director of Public Health at Blackburn with Darwen borough council says it is ‘highly unlikely’ that the strictest tier 3 restrictions would reduce the infection rate or protect the NHS, and calls for an immediate three-week ‘circuit breaker’. He explains: ‘To put it bluntly, we’re going to need a much harsher set of control measures that look very much more like the first total lockdown, and very much more like what France is doing’ (Guardian).

According to a University of Warwick study the government’s Eat Out to Help Out scheme caused a ‘significant’ rise in new coronavirus infections (Sky News).

A poll from Redfield & Wilton Strategies for the New Statesman finds 56% of respondents support a short ‘circuit breaker’ national lockdown, with 18% opposed (Britain Elects).

31 O CTOBER 2020: THE PRIME MINISTER ANNOUNCES A FOUR-WEEK lockdown will be introduced in England, starting on 5 November 2020. Unlike the first lockdown in March 2020, schools, colleges, and universities will remain open (Prime Minister’s Office, 10 Downing Street).

Dr Kit Yates, a Senior Lecturer in the Department of Mathematical Sciences and Co-Director of the Centre for Mathematical Biology at the University of Bath, tweets about the newly announced lockdown: ‘I think these measures will bring R below one, but perhaps not by that much and that in four weeks time cases may not have fallen to a level whereby test trace and isolate can function effectively to keep infection under control’ (Kit Yates).

After speaking with modellers and statisticians in Independent SAGE, Professor John Drury, a Social Psychologist at the University of
Sussex who has participated in the SPI-B advisory sub-group of SAGE, tweets: ‘If the SAGE recommendation of a 2-week circuit breaker was implemented at the end of September, up to 2000 lives could have been saved. Because it wasn’t, we have to have a ‘lockdown’ of twice the length. And when will Test & Trace be fixed?’ (John Drury).79

Sir David King, ex-Chief Scientific Adviser and Chair of Independent SAGE, tells BBC News ‘There is a false dichotomy between economy and health and number of deaths. Those countries that acted quickly in the first place, such as Greece and South-East Asia and China, have had the lowest impact on their economies and the lowest impact on the number of deaths’ (BBC News, 31 October 2020).
A four-week lockdown in England begins on 5 November. Experts warn that not closing schools will significantly reduce the effectiveness of the lockdown, and that lifting restrictions before and over Christmas will lead to a sharp rise in cases. Despite these warnings, on 25 November the government announces families in the UK will be allowed to gather in three-household groups of any size over Christmas.

1 November 2020: Speaking on Sky’s Sophy Ridge on Sunday, former chief scientific adviser Sir Mark Walport says the November lockdown is not as ‘severe’ as the first lockdown in March 2020. ‘It’s unlikely this time to come down quite as fast as it did during the first lockdown because we have got schools open,’ he notes (Sky News).¹

‘Scientists advising the government urged ministers to close secondary schools for the month-long lockdown in England,’ the i newspaper reports. ‘Official figures show that coronavirus cases in the year 7 to year 11 age group in England increased 50 times between 1 September and 23 October, from 40 to 2,010, despite schools operating a system of bubbles for classes or year groups’ (i).²
The National Education Union (NEU), the UK’s biggest teaching union with almost half a million members, says schools are ‘an engine for virus transmission’ and urges the government to close them again during the lockdown. NEU joint general secretary Kevin Courtney comments: ‘We are worried this will just lead to another lockdown later. We think it will not work if schools are not included’ (Guardian).³

A YouGov polls finds 73% of respondents support the new four-week **lockdown** in England, with 22% opposed (YouGov).⁴

‘Hospitals will be forced to cancel routine operations across England due to pressures from resurgent Covid despite the new **lockdown** measures, doctors’ leaders have warned,’ the Guardian reports. Dr Alison Pittard, the Dean of the Faculty of Intensive Care Medicine, comments: ‘The NHS won’t collapse but patients with non-Covid illnesses will suffer if we don’t control transmission and more people will die... Routine operations are being cancelled in order to accommodate Covid patients. It all feels like deja vu but with the added burden of trying to maintain as much non-Covid activity as possible’ (Guardian).⁵

2 NOVEMBER 2020: Speaking on the **BBC Today** programme, Professor Andrew Hayward, an epidemiologist at University College London and a member of SAGE, says ‘I think if we had chosen a two-week circuit break at that time, we would definitely have saved thousands of lives and we would clearly have inflicted substantially less damage on our economy than the proposed four-week **lockdown** will do.’ He continues, ‘I think countries like ours that have failed to control Covid have seen the highest death rates and greatest impact on the economy and I think we’ve repeatedly underestimated Covid and done too little, too late really to control the virus and save both lives and livelihoods.’ He notes, ‘there is substantial transmission within secondary schools’ and ‘one of the consequences of not closing secondary schools would be that we may need to be in lockdown for longer than we might otherwise have to be’ (BBC Today).⁶

The Guardian reveals, ‘The ‘rapid turnaround’ coronavirus tests the Prime Minister announced on Saturday are not approved for the public
to interpret themselves without an expert’s help and so will not provide results in the promised 15 minutes’ (Guardian).^7

3 November 2020: A consensus document, signed by modelling teams around the country advising the government, notes, ‘The longer-term outlook depends on both the nature of non-pharmaceutical interventions that are implemented in England after 2 December and policies over the festive period. If England returns to the same application of the tiering system in place before 5 November, then transmission will return to the same rate of increase as today... Initial analysis shows a clear effect from tier 3 interventions and much less from tiers 1 and 2. It is not yet clear whether tier 3 measures alone are sufficient to reduce the reproduction number below 1’ (Guardian).^8

Penny Mordunt, the Paymaster General, tells parliament ‘some scientists expect a third or more waves of the virus to be managed [with] repeat lockdowns’ (Guardian).^9

A YouGov poll asks, ‘How do you think the UK government have handled coronavirus testing, overall?’ 25% of respondents reply, ‘Well,’ with 69% of respondents answering ‘Badly’ (YouGov).^10

The Financial Times estimates the real UK death toll to be 70,500 (Financial Times).^11

4 November 2020: The daily death toll in the UK from coronavirus is 492 – the highest daily count since May 2020 (Guardian).^12

5 November 2020: England starts a four-week lockdown (BBC News).^13

‘Covid-19 has revealed the depth of cronyism and clientelism in British public life,’ Peter Geoghegan, Investigations Editor at openDemocracy, writes in the London Review of Books. ‘More than almost any comparable state, Britain – or, more accurately, England – has outsourced swathes of
its pandemic response, often to companies with strong links to Conservative politicians but little obvious relevant experience’ (*London Review of Books*).\(^{14}\)

**6 November 2020:** University Hospitals Birmingham NHS trust, one of England’s biggest NHS trusts, has postponed planned surgery at two of its hospitals due to pressure from the resurgence of Covid-19. The *Guardian* notes, ‘It is unclear how many patients will be affected, but it could run into thousands, depending on how long the suspension of planned surgery is deemed necessary, which is not yet known’ (*Guardian*).\(^{15}\)

**8 November 2020:** After a campaign led by professional footballer Marcus Rashford, the government U-turns and agrees to extend free school meals to children from low-income families during school holidays in England. The *Guardian* reports, ‘The package includes a £170m Covid winter grant scheme to support vulnerable families in England and an extension of the holiday activities and food programme to the Easter, summer and Christmas breaks next year’ (*Guardian*).\(^{16}\)

An Opinium Research poll finds 43% of respondents think the government is currently ‘underreacting’ to coronavirus, with 20% answering ‘overreacting’ and 31% answering ‘reacting proportionally’ (Britain Elects).\(^{17}\)

**9 November 2020:** Preliminary analysis of the first effective coronavirus vaccine, developed by Pfizer and BioNTech, is reported to prevent more than 90% of people from getting Covid-19 (*BBC News*).\(^{18}\)

**11 November 2020:** *BBC News* reports, ‘The UK has become the first country in Europe to pass 50,000 coronavirus deaths, according to the latest government figures’ (*BBC News*).\(^{19}\)
Dr Chaand Nagpaul, the chair of the BMA, comments, ‘Today’s figure is a terrible indictment of poor preparation, poor organisation by the government, insufficient infection control measures, coupled with late and often confusing messaging for the public’ (Guardian).²⁰

A report by the Northern Health Science Alliance concludes a decade of public spending cuts meant northern England was hit harder by the pandemic than the rest of England (Guardian).²¹

The daily death toll in the UK from coronavirus is 595 (Guardian).²²

**12 November 2020:** ‘People with learning disabilities are dying of coronavirus at more than six times the rate of the general population, according to ‘deeply troubling’ figures that have prompted a government review,’ the Guardian reports. The PHE report ‘found that 451 in every 100,000 people registered as having learning disabilities died after contracting Covid-19 in the first wave of the pandemic, when the figures were adjusted for age and sex’ (Guardian).²³

NHS figures show the number of people waiting over a year for an operation has reached its highest level since 2008, with 139,545 patients in England waiting more than 12 months for surgery, including hip and knee replacements or cataract removals, in September 2020. The Guardian notes ‘The mounting delays reflect the widespread suspension of much normal NHS care, including planned surgery, that began when the lockdown started on 23 March’ (Guardian).²⁴

Sky News reports, ‘Rishi Sunak has declined to rule out further measures similar to the Eat Out to Help Out scheme when the economy reopens after the latest lockdown’ (Sky News).²⁵

The Guardian reports health authorities in New Zealand partially shut down the central city of Auckland, asking workers in the city to stay home, so they could trace just one infected person. The report notes the person was moved to a quarantine facility (Guardian).²⁶

**13 November 2020:** The Financial Times reports no new locally transmitted cases have been reported in the Australian state of
Victoria since **lockdown** was lifted two weeks ago. Though he notes, ‘Australia doesn’t have anything like the amount of international travel as Europe or the US,’ Professor Peter Doherty, who won the Nobel Prize for medicine in 1996 said, ‘Australian politicians took control early by shutting down international flights and establishing a hotel quarantine system, which slowed the outbreak. Social distancing rules were clearly explained — and widely followed’ (Financial Times). 

**14 November 2020:** The _Zero Covid_ campaign is launched. Supported by trade unions, academics and health experts, the campaign demands the replacement of the government’s private test-and-trace system with one based around council and NHS structures, more effective restrictions and better pay for people isolating and/or unable to work (Morning Star).

**15 November 2020:** ‘**Young and previously healthy people** with ongoing symptoms of Covid-19 are showing signs of damage to multiple organs four months after the initial infection,’ the Guardian reports about a study from Coverscan (Guardian).

**17 November 2020:** Quoting government figures, BBC News reports, ‘The total number of ‘excess’ deaths, those above expected levels, since the start of the pandemic is now 70,839’ (BBC News).

**18 November 2020:** The Guardian reports the British Medical Association (BMA) has warned, ‘Mixing between more than two households and travel between tiers should be banned in England until a vaccine is rolled out to prevent the NHS being swamped after **lockdown**’. The BMA says people should be asked to continue working from home where possible (Guardian).

Professor Gabriel Scally, a Visiting Professor of public health at the University of Bristol and a member of the Independent SAGE tells the Guardian he has little hope the latest **lockdown** will squash the
spread of the virus, given the first lockdown had little effect in reducing infection levels in some parts of England. Scally comments ‘We know that the [last] and even more severe lockdown did not get the virus under control, so how can we expect that this will bring the virus under control given that some things have not changed? How can we be in a good place by Christmas? I think it is impossible’ (Guardian).32

The Guardian reports, ‘PPE suppliers with political connections were directed to a “high-priority” channel for UK government contracts where bids were 10 times more likely to be successful, according to a report by the parliamentary spending watchdog’ (Guardian).33

19 November 2020: The Northern Ireland government announce that pubs, restaurants, and other hospitality outlets will remain closed until mid-December (Guardian).34

Professor Gabriel Scally, President of Epidemiology and public Health at the Royal Society of Medicine and a member of Independent SAGE, tells ITV’s Good Morning Britain ‘There is no point in having a very merry Christmas and then burying friends and relations in January and February. We need to think very seriously about Christmas and how we are going to spend it. It’s too dangerous a time, and an opportunity for the virus to spread’ (Good Morning Britain).35

Speaking about the national lockdown in March 2020, Dr Nick Davies from London School of Hygiene & Tropical Medicine and a member of SPI-M, notes ‘Our own modelling suggests that had lockdown been imposed a week earlier, we may have avoided about half or slightly more than half the number of deaths.’ Professor Gabriel Scally, President of Epidemiology and public Health at the Royal Society of Medicine and a member of Independent SAGE, comments: ‘I think we got ourselves into a mess by relying on modelling and allowing modelling to drive the whole response. I think the failure of the science, so to speak, will be seen as one of the most important features in what has been a very, very poor response to this global health tragedy’ (BBC News).36

Devi Sridhar, Professor of Global Public Health at the University of Edinburgh, tweets: ‘While rest of Europe paying for summer holidays
with winter **lockdowns**, Finland & Norway prepared over the summer, tightened their borders & are managing well this winter. When will rest of Europe learn? Travel restrictions are a public health issue’ (Devi Sridhar).\(^{37}\)

**20 November 2020:** ‘**Just half of close contacts given to England’s NHS Test and Trace** are being reached in some areas,’ a BBC investigation finds (*BBC News*).\(^{38}\)

‘The health secretary has said the government hopes to implement “UK-wide” measures to allow people to see some family members from different households over Christmas, as scientists stressed allowing households to mix could lead to more infections and deaths come January,’ the *Guardian* reports. ‘The best Christmas present ever is the promise of a new effective Covid-19 vaccine for everyone. It would be foolish to spoil this by relaxing measures too far and causing unnecessary deaths,’ says Prof Brendan Wren, Professor of Vaccinology at the London School of Hygiene and Tropical Medicine. ‘Time and time again it has been demonstrated worldwide that premature exits from **lockdown** have fatal consequences and we end up back in lockdown. This Christmas has to be different as the science shows us that a few days of fun can have dire consequences later on’ (*Guardian*).\(^{39}\)

**21 November 2020:** **Sir David King, the former Chief Scientific Adviser and Chair of Independent SAGE**, comments, ‘It isn’t good enough to test to people and then trace their contacts. You also have to isolate properly. That is not happening in the UK. In cities like Birmingham, where lots of people live in multigenerational families, we are tracing Covid contacts and are then sending them back to those homes – to spread the disease through the whole family’ (*Observer*).\(^{40}\)

**23 November 2020:** **Independent SAGE** publishes a report highlighting how winter celebrations can be made safer, including practical suggestions for alternative ways of celebrating, which do not involve indoor mixing of households (Independent SAGE).\(^{41}\)
24 November 2020: The Prime Minister announces gyms and non-essential shops in all parts of England will be allowed to reopen when lockdown ends on 2 December (BBC News).42

The government announces that from 15 December the two-week travel quarantine period for international arrivals to England will be cut to as little as five days, provided they test negative for covid-19 (Guardian).43

25 November 2020: The government announces families in the UK will be allowed to gather in three-household groups of any size over Christmas. The Guardian notes, ‘Martin McKee, professor of European public health at the London School of Hygiene and Tropical Medicine, said Covid spread most easily amid close contact indoors over long periods.’ McKee commented: ‘These are exactly the conditions the government seems to be encouraging. There is almost no advice on imaginative ways of celebrating the festivities, despite the long history of outdoor seasonal events in this country, and only the briefest mention of ways to reduce the risks indoors, for example by increasing ventilation’ (Guardian).44

‘Government scientists have warned the relaxation of coronavirus restrictions over Christmas could lead to a third wave of the pandemic, with increased transmission and unnecessary deaths,’ the Guardian reports. Professor Andrew Hayward, an epidemiologist at University College London and a member of SAGE, told BBC Newsnight programme: ‘Effectively, what this will be doing is throwing fuel on the Covid fire. I think it will definitely lead to increased transmission. It is likely to lead to a third wave of infection, with hospitals being overrun, and more unnecessary deaths. We are still in a country where we have got high levels of infection with Covid, particularly in young people. Bringing them together for hours, let alone days, with elderly relatives, I think, is a recipe for regret for many families. With the vaccine on the way, if we are not very careful over Christmas, we are really in danger of snatching defeat from the jaws of victory on this one.’ Professor Graham Medley, an expert in infectious disease modelling at the
Ian Sinclair & Rupert Read

London School of Hygiene and Tropical Medicine and a member of SAGE, commented: ‘I think it is inevitable that if a lot of people do take that risk, even if it is a small risk, then we will end up with a lot of people in hospital and potentially having to take measures in January to lock down again’ (Guardian).

‘The government’s £22bn test-and-trace system has failed to reach more than 100,000 people exposed to coronavirus in England’s worst-hit areas since the second wave began, official figures show, with four in 10 not asked to self-isolate,’ the Guardian reports. ‘A Guardian analysis found that the privately run arm of the test-and-trace programme had reached 58% of the close contacts of infected people in the country’s 20 worst-hit areas since 9 September, having barely improved since its launch’ (Guardian).

Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, tweets, ‘We will pay for our Christmas holidays with Jan/Feb lockdowns. Just because you can do something, doesn’t necessarily mean you should’ (Devi Sridhar).

26 November 2020: The government announces a toughened tier system will be introduced at the end of lockdown on 2 December. 99% of England’s population are placed in tiers two and three (Guardian).

Using data from the government and ONS about the track and trace system, a Guardian analysis finds ‘Overall, the figures indicate that less than one in four contacts of those who are infected are reached, and just four in ten contacts of those who test positive for the virus’ (Guardian).

27 November 2020: In their Notes on Festive Period report, the Scientific Pandemic Influenza Group on Modelling (SPI-M) notes preliminary modelling shows that ‘any relaxation over the festive period will result in increased transmission and increased prevalence, potentially by a large amount... The prevalence could easily double during a
few days of the festive season, with further multiplicative increases as new infections go back to their “routine” networks’ (Guardian).50

‘Health inspectors in England have been moving between care homes with high levels of Covid-19 infection without being tested,’ the Guardian reports, citing internal CQC documents (Guardian).51

**29 November 2020:** Dr Chaand Nagpaul, the chair of the BMA, says it would be a mistake to relax restrictions too early: ‘If we are to prevent the NHS being overwhelmed this winter and left unable to provide both critical and wider care to all who need it, we must do everything we can to bring the spread of the virus back under control’ (Guardian).52

Speaking on the BBC Andrew Marr Show, Peter Openshaw, Professor of Experimental Medicine at Imperial College London Imperial College and a member of the government’s NERVTAG, comments, ‘We scientists are very concerned indeed about relaxation of precautions at this stage. The rates are still too high, there’s too many cases coming into hospitals, too many people dying...If we take the brakes off at this stage, just when the end is in sight, I think we would be making a huge mistake’ (BBC News).53

**30 November 2020:** ‘More than half of people applying for financial support to self-isolate are being rejected in some coronavirus hotspots in England as councils report running out of cash and loop-holes leave low-income families ineligible,’ the Guardian reports. ‘Thousands of people are being excluded from accessing the £500 one-off payments due to gaps in the policy announced by Boris Johnson two months ago, according to council leaders and charities’ (Guardian).54
On 2 December, the UK becomes the first country in the world to approve the Pfizer/BioNTech coronavirus vaccine. From mid-December cases begin to rise again following the end of lockdown on 2 December. Citing a new strain of the virus and rapidly increasing infection rate, on 19 December the Prime Minister cancels the planned relaxation of restrictions over Christmas for London, the south-east and parts of eastern England, and limits relaxation of restrictions to just Christmas Day for the rest of England. As cases rapidly rise experts call for a national lockdown to be implemented immediately. On 28 December there are more Covid-19 patients in hospital than at the peak of the first wave. The Financial Times estimates the number of UK excess deaths linked to coronavirus is 83,000.

1 December 2020: The Guardian reports, ‘the UK’s total death toll from Covid-19 has passed 75,000, according to a tally of all fatalities that mention the disease on death certificates’ (Guardian).
2 December 2020: BBC News reports, ‘The UK has become the first country in the world to approve the Pfizer/BioNTech coronavirus vaccine, paving the way for mass vaccination’ (BBC News).²

The WHO updates its guidance on masks, recommending wearing face masks when indoors with other people, if the ventilation is inadequate (RTE).³

‘Disinfecting surfaces and sitting 2 metres apart just isn’t going to stop transmission’, Professor Devi Sridhar, Chair of Global Public Health at Edinburgh University, writes in the Guardian. ‘It’s best to imagine the virus like cigarette smoke: if one person in the room is smoking, you’re likely to smell the smoke. It’s the same with this coronavirus: if one person is infected, you could also become infected from the aerosols emitted when they breathe and talk’ (Guardian).⁴

3 December 2020: Grant Shapps, The Transport Secretary, tweets: ‘New Business Traveller exemption: From 4am on Sat 5th Dec high-value business travellers will no longer need to self-isolate when returning to ENGLAND from a country NOT in a travel corridor, allowing more travel to support the economy and jobs. Conditions apply’ (Grant Shapps).⁵

‘Is this for real?’ Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, replies on Twitter (Devi Sridhar).⁶

Education Secretary Gavin Williamson tells LBC radio that the UK is getting a vaccine first because it is a ‘much better country’ than Belgium, France, and the US (BBC News).⁷

4 December 2020: ‘The percentage of people testing positive for the coronavirus has fallen in all English regions except the North East, according to the Office for National Statistics,’ BBC News reports. ‘In the week to 28 November, one in 105 people in England had the virus compared with one in 85 a week before. Meanwhile, the R number for the UK has fallen to between 0.8 and 1 - the second week running it's been below 1’ (BBC News).⁸
Chris Hopson, the Chief Executive of NHS Providers, says: ‘If we get a prolonged cold snap in January the NHS risks being overwhelmed. The Covid-19 restrictions should remain appropriately tough. Trust leaders are worried about the impact of looser regulations over Christmas’ (Guardian).9

‘Government ministers should stop politicising the Covid-19 vaccine by boasting about being the first to license it, the head of a leading research group has said’, the Guardian reports. ‘Heidi Larson, the director of the London-based Vaccine Confidence Project (VCP), said the government should instead focus on building support for the jab or it will lose the confidence and trust of the British people’ (Guardian).10

‘Progress on vaccines gives us all a lift and we can now start to see the light at the end of the tunnel,’ the WHO’s Director-General Tedros Adhanom Ghebreyesus says. ‘However, WHO is concerned that there is a growing perception that the Covid-19 pandemic is over.’ WHO’s top emergency expert Mike Ryan cautioned, ‘Vaccines do not equal zero COVID’ (Reuters).11

6 December 2020: Professor Neil Ferguson, head of the outbreak modelling group at Imperial College London and a former member of SAGE, tells the Observer ‘It was slightly sad to me that the number one lesson from the first wave of transmission, which is that those countries that acted early had by far the best outcome and had lockdown in place for less time, was not remembered by the autumn’ (Observer).12

7 December 2020: Vaughan Gething, the Welsh Health Minister, says another lockdown may be needed in Wales before Christmas to stop the NHS being overwhelmed (Guardian).13

Researchers from the London School of Hygiene & Tropical Medicine find Slovakia reduced the infection rate by 60% in one week, using mass testing ‘in combination with tough quarantine rules and other measures that are not being implemented in Liverpool or elsewhere in the UK,’
including a person being paid their full salary when they had to isolate for 10 days (Guardian).\textsuperscript{14}

The Doctors’ Association UK, the Good Law Project and Hourglass, a charity also known as Action on Elder Abuse, say they will pursue legal action against the government’s ‘continued refusal to hold a public inquiry into whether PPE failures contributed to the deaths or illness of NHS staff and care workers’ (Guardian).\textsuperscript{15}

\textbf{8 December 2020:} ‘The UK’s Statutory Sick Pay is low by international standards, and misses out two million of our lowest-paid workers,’ a briefing note from the \textit{Resolution Foundation} think-tank notes. ‘Evidence suggests that this contributes to the low level of compliance with the legal obligation to self-isolate when instructed by NHS Test and trace’ (Resolution Foundation).\textsuperscript{16}

Victoria Kim, the Seoul Correspondent for the \textit{Los Angeles Times}, tweets: ‘South Korea's 14-day quarantine has been no joking matter — everyone entering the country since April has been required to isolate for 14 days, enforced by a cell phone app and a live person who will check that you don't set foot outside your apartment or quarantine center’ (Victoria Kim).\textsuperscript{17}

\textbf{9 December 2020:} ‘England’s chief medical officer has warned of a ‘disastrous’ resurgence in coronavirus cases if people stop adhering to social distancing guidelines now that the mass vaccination programme has begun,’ the \textit{Guardian} reports. ‘Prof Chris Whitty told MPs that the winter months were high risk for the NHS, particularly because of respiratory infections. He stressed the importance of immunising an estimated 20 million people made a priority for a jab before any substantial easing of restrictions’ (Guardian).\textsuperscript{18}

\textbf{10 December 2020:} ‘Soaring numbers of patients are having to wait more than a year for surgery because Covid has disrupted hospital care so badly, new NHS performance statistics show,’ the
Guardian reports. In October 2020 162,888 people in England had waited more than a year for a non-urgent planned procedure, even though the supposed maximum waiting time is 18 weeks – 123 times more than the 1,321 such cases there were in October 2019 (Guardian).  

**11 December 2020:** The Guardian reports ‘The self-isolation period for people in contact with someone who has coronavirus is being cut from 14 to 10 days across the UK, it has been announced, and could be dispensed with entirely early next year’ (Guardian).  

Sky News reports, ‘The R value in England is between 0.8 and 1, but the Scientific Advisory Group for Emergencies (SAGE), said it is not confident that R is below 1 in all English regions, particularly in London and parts of the South East’ (Sky News).  

‘The government’s test-and-trace programme to combat Covid-19 in England has repeatedly failed to meet targets for delivering test results and contacting infected people despite costs escalating to £22bn,’ the Guardian notes, citing a National Audit Office report. ‘The centralised programme is contacting two out of every three people who have been close to someone who has tested positive, with about 40% of test results delivered within 24 hours, well below the government’s targets’ (Guardian).  

According to the Financial Times’s Economics Editor a cautious estimate of the number of UK excess deaths linked to coronavirus is 83,000 (Chris Giles).  

**12 December 2020:** ‘People must think “really carefully” about the risk of more social contact over Christmas, NHS bosses have warned,’ BBC News reports. Chris Hopson, the head of NHS Providers, notes the US saw ‘record numbers’ of cases and deaths after the Thanksgiving holiday, and says the NHS is worried about January (BBC News).  

John Drury, Professor of Social Psychology at the University of Sussex, tweets: ‘While the government rationale may have been “people are planning to visit at Xmas anyway” and not wanting to “ruin Xmas”,
there is also evidence that many people decided to visit only *after* the gov't announcement of the 5 day suspension of the rules - a clear signalling effect’ (John Drury). 25

The *Guardian* reports ‘Some scientists on the government’s *Scientific Advisory Group for Emergencies (SAGE)* say privately that London should in fact have gone immediately into tier 3 at the start of December, when the post-**lockdown** regime for England was introduced’ (*Guardian*). 26

**13 December 2020:** ‘According to estimates from *Imperial College* London, 2.5 million people were infected between the day the prime minister ignored his expert calls for the circuit breaker on September 22 and the end of the **lockdown** on December 1,’ a *Sunday Times* Insight investigation finds. ‘The figures suggest if Johnson had brought in measures to hold daily infections level, 1.3 million fewer people would have been infected. With the virus’s death rate typically estimated at between 0.5% and 1%, it suggests that between 7,000 and 13,000 people might not have died if stricter measures had been introduced earlier’ (*Sunday Times*). 27

Germany announces it will close most shops from 16 December until 10 January, ban the sale of fireworks for New Year’s Eve, with schools and nurseries required to offer only emergency care for essential workers for the last three days before the start of the Christmas holidays (*Guardian*). 28

**14 December 2020:** The *Netherlands and the Czech Republic* announce they will follow Germany and implement strict **lockdowns** over the holiday period (*Guardian*). 29

‘England’s **test and trace** service is being sub-contracted to a myriad of private companies employing inexperienced contact tracers under pressure to meet targets,’ a *Guardian* investigation finds. The report notes, ‘The call-handlers, who agreed to speak on condition of anonymity, said they felt ill-equipped and unqualified to carry out the complex work,
which until October had been handled only by NHS clinicians, known as tier 2 clinical contact caseworkers’ (Guardian).  

15 December 2020: ‘Just a fortnight after a four-week national lockdown, Covid-19 case rates are rising in more than three-quarters of all local areas in England, latest data shows,’ the Guardian reports. ‘This includes every borough of London, 42 of the 45 local areas in eastern England and 66 of the 67 local areas in south-east England – where a new strain of the virus was this week revealed to be spreading quickly’ (Guardian).  

In a joint editorial, the British Medical Journal and Health Service Journal argue the government can no longer claim to be protecting the NHS if it goes ahead with its ‘rash’ plans to allow households to mix indoors over Christmas: ‘We believe the government is about to blunder into another major error that will cost many lives’ (Guardian).  

The BMA says ‘the Government’s plans to relax the rules on the current Tiers and allow up to three households to mix over the Christmas holiday period must be reviewed on the basis of evidence that the virus remains out of control’ (British Medical Association).  

Asked about the Christmas restrictions in an Ipsos MORI poll, 49% of respondents reply they are ‘not strict enough’, 39% ‘about right’ and just 10% ‘too strict’ (Ben Page).  

16 December 2020: During Prime Minister’s Questions, the Prime Minister accuses Labour Party leader Keir Starmer of wanting to ‘cancel Christmas’, saying, ‘we don’t want to criminalise people’s long-made plans’ (BBC Politics).  

‘As of 16th December, there were 15,465 patients with Covid-19 in English hospitals. This is the highest it’s been since the Spring. Occupancy has risen by 20% since the end of lockdown. We are now only 20% below peak,’ Christina Pagel, a Professor of Operational Research at University College London and member of Independent SAGE, tweets. ‘This is the
situation a week before we head into Christmas where potentially millions of people will mix indoors with different households. This is a scary situation and I felt like crying when I saw these numbers’ (Christina Pagel).  

New figures from the ONS suggest over 150,000 people are suffering with ‘long covid’, with a fifth of people with symptoms five weeks after being infected, and half of these continuing to experience problems for at least 12 weeks (BBC News).

The ONS estimates 1 in 10 respondents in a nationally representative sample of the UK community population who test positive for Covid-19 exhibit symptoms for a period of 12 weeks or longer (Office for National Statistics).

17 December 2020: The Welsh government announces a divergence with the other UK nations over the loosening of restrictions over Christmas, limiting mixing to two households, rather than three (BBC News).

‘Hospital occupancy may well exceed April’s peak within the next two weeks... many frontline NHS staff are exhausted, traumatised and demoralised,’ says Professor Christina Pagel, a member of the Independent SAGE and Director of Clinical Operational Research at University College London. ‘This will mean many more deaths to come – and this is all before the Christmas relaxation starts. It feels as if we are slowly but surely walking into a burning building on purpose, knowing it’s probably going to crash down around our heads’ (Guardian).

The DHSC submit a document to SAGE suggesting the UK could see 70,000 excess deaths due to Covid between October 2020 and February 2021 (Guardian).

18 December 2020: A new report from the Joint Committee on the National Security Strategy ‘finds that insufficient attention was paid to important capabilities ahead of the pandemic.’ It notes, ‘the Government failed seriously to consider how it might scale up testing, isolation and contact-tracing capabilities, despite the Government’s
earlier Biological Security Strategy’s emphasis on “Detection”, and despite predicting in 2017 that it was “likely” that a new infectious disease would affect the UK in the next five years.’ The report continues, ‘Although a pandemic has been a “tier-1” security risk since 2010, there has been only one “tier-1” national health crisis exercise in the last decade (“Exercise Cygnus”) and this did not cover all the Government’s pre-planned stages of pandemic response. This was not even mentioned in the Biological Security Strategy that came two years later. There is a lack of auditing of the implementation of the lessons from exercises within Departments and inadequate knowledge sharing’ (Joint Committee on the National Security Strategy).  

Kit Yates, a Senior Lecturer in the Department of Mathematical Sciences and Co-Director of the Centre for Mathematical Biology at the University of Bath, tweets about government data on the number of new confirmed cases, showing over 35,000 for 17 December: ‘This is probably the most worried I’ve been about the situation. Cases are high and rising fast as we head towards the Christmas relaxation period’ (Kit Yates).  

‘Overwhelming evidence shows that not only public health, but also society and the economy benefit greatly from reducing cases’ of the virus, note 300 scientists in the *Lancet* journal. ‘The control of the spread is most effective at low case numbers. Easing restrictions while accepting higher case numbers is a short-sighted strategy that will lead to another wave, and thus to higher costs for society as a whole. Testing and tracing capacities are limited: only with sufficiently low case numbers can the test–trace–isolate–support strategy quickly and efficiently help mitigate the spread’ (*Lancet*).  

A new report from the Institute for Government cites SAGE member Professor John Edmunds as saying SAGE were not consulted on the Eat Out to Help Out scheme. ‘SAGE members saw policies [introduced by the government in summer 2020] that incentivised people to gather in risky indoor settings and travel abroad, potentially re-seeding the virus on their return, as epidemiologically illiterate – and were consistent in advising to this effect,’ the report notes (Institute for Government).
19 December 2020: Citing a new strain of the virus and rapidly increasing infections rates, the Prime Minister announces the planned relaxation of coronavirus restrictions over Christmas is cancelled for London, the south-east and parts of eastern England, and limits relaxation of restrictions to just Christmas Day for the rest of England (BBC News).46

A YouGov poll finds 41% of respondents support allowing people from up to three homes to form a ‘Christmas bubble’ between 23 and 27 December, with 50% opposed. The poll also finds 38% of respondents are planning to mix with other households under the existing rules. If the rules were changed to not allow mixing only 22% say they would mix with other households (YouGov).47

20 December 2020: A Guardian editorial urges the government ‘to pursue a zero-Covid strategy that Independent SAGE has long advocated’ (Guardian).48

21 December 2020: ‘Boris Johnson is facing intense pressure to impose another national lockdown within days, as more than 40 countries banned arrivals from the UK in an effort to keep out a new fast-spreading variant of coronavirus,’ the Guardian reports. Andrew Hayward, Professor of Infectious Disease Epidemiology at University College London and a member of SAGE, comments, ‘I recognise that we have restricted travel from the tier 4 areas ... but this transmission is not only in those tier 4 areas, it’s there at some level across the country. We’re just entering a really critical phase of this pandemic, and it makes absolute sense ... to act decisively I would say across the country.’ Robert West, Professor of Health Psychology at University College London’s Institute of Epidemiology and Health and a member of SPI-B, notes the current system was ‘unlikely’ to contain the spread of the virus. ‘We need to reset our strategy and move rapidly to a zero Covid strategy of the kind that many have been proposing. This will involve stricter but more rational social distancing rules across the country, and finally doing what we should have done from the start – to build the
kind of test, travel, isolate and support programmes they have in countries in the far east’ (Guardian).

The BMA, Scottish Academy of Royal Colleges, Doctors Association UK and other public health bodies write to the Prime Minister raising concerns that people in precarious and low-wage employment cannot afford to miss work and self-isolate, and urge the government to provide more financial support (Morning Star).

22 DECEMBER 2020: The Times reports, ‘one internal [government] assessment, in early December, suggested that there will be nearly 700,000 cases a week by mid to late February – more than three times the present level – with 20,000 hospital admissions and 5,000 deaths’ (Times).

Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, says, ‘If we had locked down already in late-February [2020] we probably could have saved 80-90% of the people who died. And I think the bulk of the deaths were preventable’ (Owen Jones).

Professor Susan Michie, Director of the Centre for Behaviour Change at University College London and member of Independent SAGE, tweets, ‘Independent SAGE & other scientists had been reporting for 2 weeks the increased transmission esp in the SouthEast & had called for a Xmas rethink to save lives & give people time to plan. Yet again, Govt acted too little too late. National Tier 4 needed now’ (Susan Michie).

Speaking to BBC Newsday, Sir David King, former Chief Scientific Adviser and Chair of Independent SAGE, says there should be a national lockdown (BBC Newsday).

Speaking to LBC radio, Martin McKee, Professor of European Public Health at the London School of Hygiene and Tropical Medicine and member of Independent SAGE, says there should be a Tier 4 lockdown for the entire country (LBC).

A report from the Imperial College London COVID-19 Response Team finds that ‘Introducing national lockdown one week earlier [in March
2020] would have reduced the first wave death toll from 36,700 to 15,700" (Imperial College London).\textsuperscript{56}

Writing in the \textit{Guardian} Anthony Costello, Professor of Global Health and Sustainable Development at University College London and a former director of maternal and child health at the WHO, notes that one of the reasons he and many scientists supported a ‘maximum suppression’ or ‘zero Covid’ strategy in the first wave ‘was to stop natural selection doing its work.’ He explains: ‘When a virus is allowed to spread, spending time in different hosts, it evolves and mutates… with an estimated 2 million people now infected with Covid in the UK, there are many more opportunities for the virus to mutate’ (\textit{Guardian}).\textsuperscript{57}

A YouGov poll finds 71\% of respondents support going into another national lockdown, with 22\% opposed (YouGov).\textsuperscript{58}

\textbf{23 December 2020: Health Secretary Matt Hancock} announces six million more people in the east and south east of England will enter tier four on Boxing Day (\textit{BBC News}).\textsuperscript{59}

Dr Andrew Preston, reader in Microbial Pathogenesis at the University of Bath, comments, ‘The situation is fast-moving and requires decisive decision-making. Today, the government has recognised that the situation is continuing to deteriorate in many areas and that tougher restrictions are required if the hope is to contain it. With cases rising so quickly, the delay of three critical days – with new tiering not taking effect until Boxing Day – will mean that by then case numbers are going to be much, much higher and as a result much, much more difficult to bring down. If containment is the focus, then unfortunately, the restrictions need to be immediate, despite the fallout this will cause.’ Christina Pagel, Professor of Operational Research at University College London and a member of \textbf{Independent SAGE}, told Times Radio, ‘We are in an incredibly dangerous situation… we’re constantly behind the curve. I think we have to put the whole country in tier 4 today, especially in those tier 2 areas around tier 4 that are just going through the roof. Why are we letting people mix at Christmas? You are just asking for trouble’ (\textit{Guardian}).\textsuperscript{60}
The increase in transmissibility of the new strain of the virus ‘is likely to lead to a large increase in incidence, with COVID-19 hospitalisations and deaths projected to reach higher levels in 2021 than were observed in 2020, even if regional tiered restrictions implemented before 19 December are maintained,’ concludes a new (still to be peer-reviewed) paper from the Centre for the Mathematical Modelling of Infectious Diseases COVID-19 working group at the London School of Hygiene & Tropical Medicine. ‘Control measures of a similar stringency to the national lockdown implemented in England in November 2020 are unlikely to reduce the effective reproduction number $R_t$ to less than 1, unless primary schools, secondary schools, and universities are also closed. We project that large resurgences of the virus are likely to occur following easing of control measures’ (Centre for the Mathematical Modelling of Infectious Diseases).\(^{61}\)

In a letter to all NHS care providers, NHS England warns that the entire health service will have to stay on its highest level of alert until at least the end of March 2021 (Guardian).\(^{62}\)

The Guardian notes Taiwan has reported its first local case of the virus in 253 days: ‘After acting quickly to early reports of a virus in Wuhan, Taiwan’s measures have kept its case total to fewer than 800 infections and just seven deaths. Its success has been credited to a strong health and disease control framework, fast government action and scepticism of Beijing’s early assurances, and a population scarred by the Sars outbreak, willing to cooperate with anti-epidemic measures. Authorities have been extraordinarily cautious, recently expanding mandatory mask wearing rules ahead of the flu season, to little pushback’ (Guardian).\(^{63}\)

‘The more the virus circulates, the more likely it is that mutations and variants will emerge, making it harder to suppress,’ Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, writes in the Guardian. ‘The responsibility for this new variant can partly be attributed to those who argued against restrictions, believing that allowing the virus to run rampant in young people while shielding the vulnerable would allow immunity to develop. What they didn’t foresee is that such conditions are ripe for variants to emerge. Unless we suppress the virus, it will probably mutate further. This could make our current vaccines ineffective, or lead to reinfections’ (Guardian).\(^{64}\)
The UK records 744 deaths – the highest since late April 2020 (HuffPost UK).65

24 December 2020: ‘The Govt admits Tiers 1-3 cannot contain the virus,’ Independent SAGE tweets. ‘We fear Christmas Day mixing in context of new strain will create 1000s of dangerous super-spreading events. The entire UK needs to go into Tier 4 *TODAY*’ (Independent SAGE).66

Susan Michie, Director of the Centre for Behaviour Change at University College London and member of Independent SAGE, tweets about how isolation works in New York: ‘Round-trip transportation to and from the hotel and any necessary medical appointments; Private rooms and bathrooms; Onsite COVID-19 testing... PLUS Free Wi-Fi and unlimited local phones calls to stay connected; Breakfast, lunch, and dinner daily; Medication delivery; On site health care services by skilled doctors and nurses; Telepsychiatry to access expert mental health providers’ (Susan Michie).67

26 December 2020: ‘Overall cases are rising sharply. Over 40,000 people tested on 21st Dec, tested positive – just in *England*,’ tweets Christina Pagel, Professor of Operational Research at University College London and a member of Independent SAGE. ‘Overall hospital occupancy as of 24th December was only a few hundred people below the April peak. It's probably already above, or will be within a day or two. And, unlike April, we are not controlling the rise yet... will the new tiers be enough? In a word – no. Especially not after Christmas. The Tier 4 areas (inc the new tier 4) are shooting up still, but tiers 2 and 3 rising substantially too. This is not under control’ (Christina Pagel).68

27 December 2020: Dr Adrian James, President of the Royal College of Psychiatrists, says the pandemic, ‘is probably the biggest hit to mental health since the second world war. It doesn’t stop when the virus is under control and there are few people in hospital. You’ve got to fund the long-term consequences’ (Guardian).69
28 December 2020: NHS England reports it now has more Covid-19 patients in hospital than at the peak of the first wave – 20,426, surpassing April’s high of 18,974 on 12 April (Guardian).70

The Telegraph reports “The flagship Nightingale hospital [in London] is being dismantled as medics warn that there are not enough staff to run the facilities despite the NHS being at risk of being overwhelmed by coronavirus” (Telegraph).71

Politico reports SAGE have told the Prime Minister in direct terms that he has to keep secondary schools closed in January — and potentially order a stricter national lockdown than the one he implemented in November — to prevent coronavirus infections from spiraling out of control.” SAGE provided the advice last week, according to the report (Politico).72

Stephen Reicher, Professor of Psychology at the University of St Andrews and a member of SPI-B, sets out Independent SAGE’s five-point emergency plan in the Guardian: 1) acceleration of the vaccination programme 2) further restrictions, including on travel and schools closing 3) a revamped test, trace and isolate system run by local public health staff and including practical support so people can isolate 4) improved health and safety in workplaces 5) financial support for the public (Guardian).73

The NEU, the largest teachers’ union, calls on the Prime Minister to keep schools and colleges closed for at least the first 2 weeks in January, with online learning except for vulnerable children and the children of key workers (National Education Union).74

Calum Semple, Professor in Child Health and Outbreak Medicine at the University of Liverpool and member of SAGE, tells BBC Breakfast the Oxford AstraZeneca vaccine will be ‘gamechanger’, though notes ‘To get the wider community herd immunity from vaccination rather than through natural infection will take probably 70 per cent to 80 per cent of the population to be vaccinated, and that, I’m afraid, is going to take us right into the summer I expect’ (i). Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, tweets: ‘Worth
noting that no country has sustainably suppressed COVID without robust & enforced travel restrictions. Just keep re-importing new chains’ (Devi Sridhar).75

30 DECEMBER 2020: HEALTH SECRETARY MATT HANCOCK announces another 21 million people will enter Tier 4 on 31 December, meaning 78% of England will be in Tier 4 (Guardian).76

The Oxford AstraZeneca vaccine is approved for use in the UK, with the first doses due to be given on 4 January 2021 (BBC News).77

The DHSC announces a change to the vaccine policy, saying people should receive their second dose of vaccine (whether the Oxford and AstraZeneca or the Pfizer BioNTech one) within 12 weeks of the first (Department of Health and Social Care).78

‘The health service is struggling to cope with record numbers of Covid cases to such an extent that some patients may be denied access to an intensive care unit or the chance to go on a mechanical ventilator, the Hospital Consultants and Specialists Association said,’ the Guardian reports. ‘Some ICUs in London – which is once again the worst affected part of England – are now so overloaded that doctors have asked for some patients to be transferred hundreds of miles away’ (Guardian).79

Dr Samantha Batt-Rawden, President of Doctors Association UK, says: ‘The NHS in the southeast is in meltdown. Staff on the front line are devastated that we have ended up back where we were in April, with cases increasing at a rate that shows no sign of slowing. ICUs across the southeast are overflowing, with doctors telling us their hospitals are running out of non-invasive ventilators and even basics like oxygen’ (Independent).80

‘Cases in the current Tier 4 areas have quadrupled since lockdown,’ Sir David King, former Chief Scientific Officer and chair of Independent SAGE, tells Times Radio. Broadcast journalist Tom Newton Dunn tweets, ‘Unless we take real sharp decisions now, tens of thousands more people will die. That means a nationwide lockdown, with immediate effect’ (Tom Newton Dunn).81

...
31 **December 2020:** Unite national officer for the health sector Colenzo Jarrett-Thorpe says: ‘From paramedic to porter, catering assistant to biomedical scientist, the system is under severe strain... To add to this appalling sense of siege, we are again receiving distressing reports about a lack of suitable **PPE** for staff treating highly infectious, sick patients and rising numbers of staff self-isolating or contracting Covid-19’ (*Morning Star*).  

The *Guardian* reveals University College London Hospital Trust is warning ‘it is on track to become virtually Covid-only amid a surge in cases in the capital that has left it scrambling to convert operating theatres, surgical recovery areas and stroke wards into intensive care units for the very sick’ (*Guardian*).  

Taiwan, which has a population of 24 million, has recorded just seven deaths from covid since the beginning of the pandemic (*Worldometer*).
On 4 January, the Prime Minister announces a third national lockdown, including the closure of schools and colleges. The NHS comes under intense pressure, and on 20 January it is reported 1,820 people died in the UK within 28 days of a positive Covid test – the biggest figure reported in a single day since the pandemic began. With over 1,000 deaths on average reported every day of the month, the Guardian reports January 2021 is the deadliest month of the pandemic so far. The government announces that some international arrivals will be required to quarantine in hotels.

1 January 2021: ‘Government hopes for a new year easing of the Covid pandemic are unravelling, with ministers forced into a U-turn on reopening primary schools and hospitals across the country struggling with rising numbers of severely ill patients,’ the Guardian reports. New cases topped 50,000 for the fourth day in a row, with close to 24,000 people in hospital. ‘In Essex, a major incident has been declared, with patients airlifted from an overwhelmed hospital in Southend to Cambridge’ (Guardian).1
Pfizer says it has tested the vaccine’s efficacy only when the two shots of the vaccine were given up to 21 days apart (BBC News).\(^2\)

Moncef Saoui, Head of the US government’s vaccine procurement and development programme, said the new UK policy of administering the vaccine dose up to three months apart appears to be founded on ‘more of a conceptual observation’ because it is not based on data from large-scale trials. Saoui noted it was ‘important’ to use vaccines as studied (Financial Times).\(^3\)

**2 January 2021:** An Imperial College London study finds the new variant of Covid-19 is ‘hugely’ more transmissible than the virus’s previous version, concluding the new variant increases the Reproduction or R number by between 0.4 and 0.7 (BBC News).\(^4\)

**3 January 2021:** Speaking on the BBC Andrew Marr Show, the Prime Minister says ‘Schools are safe. It is very, very important to stress that. The risk to kids, to young people is really very, very small indeed. The risk to staff is very small’ (ITV News).\(^5\)

‘Things are going from very bad to much worse,’ tweets Christina Pagel, Professor of Operational Research at University College London, and member of Independent SAGE. ‘Biggest worry: there is *no sign* that tier 4 is working. There are now almost 25,000 people with Covid-19 in English hospitals - 32% more than the April peak. Admissions are also now at April peak levels - *on top* of this much higher occupancy. *and* cases are *still* going up which they were not at April peak. We are still, at best, 2 weeks from peak - and that's *if* decisive action is taken *now*... I can't tell you how scary I find this. We are not even slowing this thing down - let alone reversing it’ (Christina Pagel).\(^6\)

**4 January 2021:** The Prime Minister announces a new lockdown, to last until mid-February. Schools and colleges are ordered to switch to remote learning (BBC News).\(^7\)
Most of England’s primary schools open for one day before being closed because of the **lockdown** (BBC Newsround).\(^8\)

A YouGov poll finds 79% of respondents support going into another national **lockdown**, with 16% opposed (YouGov).\(^9\)

Asked ‘Do you think it is the right or wrong decision to reopen most primary schools in England this week?’ by YouGov, 22% of respondents said it was the ‘right decision’, while 62% of respondents said it was the ‘wrong decision’ (YouGov).\(^10\)

Kings College hospital in London reports it has had to cancel urgent cancer surgery this week because so many of its intensive care beds are occupied by Covid-19 patients (Guardian).\(^11\)

According to a Guardian analysis there has been 91,453 deaths in the UK with Covid-19 on the death certificate or within 28 days of a positive test (Guardian).\(^12\)

**5 January 2021: The Prime Minister says the UK could face harsh restrictions for months to come, and the plan to emerge from lockdown in mid-February was subject to ‘lots of caveats, lots of ifs’** (Guardian).\(^13\)

*Tes* – AKA the *Times Educational Supplement* – reveals ‘Covid rates among school staff in some areas are as much as four times the corresponding local authority average... casting doubt on the government’s repeated assertion that teachers are at no greater risk than other workers’ (*Tes*).\(^14\)

UNISON says pre-schools including nurseries must be closed except to educate the children of key workers and those who are vulnerable (UNISON).\(^15\)

‘We... acknowledge that countries may see needs to be even more flexible in terms of the administration of the second dose,’ comments Dr Joachim Hombach, executive secretary of the WHO’s Strategic Advisory Group of Experts on Immunization. ‘But it is important to note that there is very little empiric data from the trials that underpin this type of recommendation’ (Guardian).\(^16\)
Sandra Gidley, President of the Royal Pharmaceutical Society, complains the government has been slow to enlist her members for the mass vaccination programme: ‘We have delivered a huge proportion of the flu vaccine so it does seem strange to be ignoring a ready-trained workforce that can deliver this’ (Financial Times).\(^\text{17}\)

‘Many people suffering from “long Covid” are still unable to work at full capacity six months after infection, a large-scale survey of confirmed and suspected patients has found,’ the Guardian reports. In one of the largest studies yet – which has not been peer-reviewed – Patient Led Research for Covid-19 (a group of long Covid patients who are also researchers) surveyed 3,762 people from 56 countries. Roughly 65% of respondents reported experiencing symptoms for at least six months, while 45% of respondents reported requiring a reduced work schedule compared with pre-illness, and approximately 22% of respondents reported not working due to their health conditions (Guardian).\(^\text{18}\)

A YouGov poll finds 77% of respondents believe the national lockdown ‘should have been introduced earlier,’ with just 11% saying it had been introduced at the right time (YouGov).\(^\text{19}\)

6 January 2021: The Health Service Journal reports ‘London’s hospitals are less than two weeks from being overwhelmed by covid even under the “best” case scenario, according to an official briefing given to the capital’s most senior doctors this afternoon’ (Health Service Journal).\(^\text{20}\)

Speaking on BBC Question Time, Rachel Clarke, a doctor specialising in palliative medicine, explains the over 1,000 people who have lost their lives in the UK in the last 24 hours because of Covid is more than the total number of deaths in Australia for the entire pandemic. She describes the conditions in hospital as ‘unimaginable’, and says she had a message from a doctor in London that day telling her ‘police cars are delivering critically ill Covid patients into his hospital in London because there are no ambulances’ (BBC Question Time).\(^\text{21}\)

Chris Giles, the Economics Editor at the Financial Times, says the best estimate of the number of excess UK deaths linked to Covid-19 since
mid-March 2020 is 89,300 (Chris Giles).22

7 January 2021: The UK’s coronavirus death toll has risen
1,162 over the last 24 hours, a record increase since the first wave in
April’, the Mirror reports. ‘It marks the second largest single-day
increase in recorded deaths during the course of the pandemic, with
only April 21 seeing a higher figure of 1,224 deaths’ (Mirror).23

‘I’m not sure lockdown will be enough,’ tweets Christina Pagel,
Professor of Operational Research at University College London, and
member of Independent SAGE, noting the more infectious new
strain of the virus and the less restrictive third lockdown (Christina
Pagel).24

‘The notion of behavioural fatigue associated with adherence to covid
restrictions (so-called “pandemic fatigue”) has been a recurrent theme
throughout the crisis,’ write Stephen Reicher, Professor of Psychology at
the University of St Andrews and a member of SPI-B, and Professor
John Drury, a Social Psychologist at the University of Sussex who has
participated in the SPI-B advisory sub-group of SAGE, in a British
Medical Journal Opinion blog. However, they note ‘adherence to stringent
behavioural regulations has remained extremely high (over 90%), even
though many people are suffering considerably, both financially and
psychologically,’ arguing the continuing spread of the virus is due to
structural issues – housing, employment, income – preventing many
people from being able to self-isolate (British Medical Journal Opinion).25

A document published by the Government’s New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) notes there is an
‘increased risk of virus replication under partial immunity after one dose
than after two doses, so in the short term, delaying the second dose
would be expected to somewhat increase the probability of emergence
of vaccine resistance – but probably from a low base’ (SAGE).26

8 January 2021: 1,325 people are reported to have died in the
UK within 28 days of a positive Covid test - the biggest figure reported
in a single day since the pandemic began (BBC News).27
'Heads are calling for limits to the number of pupils in school during lockdown in England, with attendance rates surging to 50% in some places,' BBC News reports. 'The two head teachers' unions, NAHT and ASCL, say the high numbers attending could hamper the fight against the virus' (BBC News). With a survey by the Teacher Tapp app finding that one in six primary schools in England reported that 30% or more of their normal roll was attending in person this week, Rebecca Allen, Professor of Education at the University of Brighton and Chief Analyst at Teacher Tapp, comments: 'The much higher number of children attending primary schools each day during this lockdown will make it more difficult to reduce the rate of transmission' (Guardian). The Guardian reports transport data for London shows that bus use is at 30% of normal levels and tube journeys at 18% of normal, compared to mid-April 2020 when tube use was just 4%-6% of normal, and bus use 10%-20% (Guardian). Speaking on BBC Newsnight, Susan Michie, Director of the UCL Behaviour Change and member of SPI-B and Independent SAGE, notes the current lockdown includes ‘mass gathering in terms of nurseries and religious events, we have household contact with cleaners... nannies going in and out of houses, we have a very wide definition of critical worker now, so we have heard that up to 30% of classes – so people are still going into schools. All of that means much busier public transport... we should be having a stricter lockdown, yet we're got a more lax lockdown' (BBC Newsnight). Discussing travellers arriving at British airports, Dr Kit Yates, a senior lecturer in the Department of Mathematical Sciences and co-director of the Centre for Mathematical Biology at the University of Bath, tweets, 'We could requisition hotels and turn them into managed and supervised isolation facilities as they do in other countries. It’s not impossible. We know that because it has been done in other countries not so dissimilar to our own' (Kit Yates).
10 January 2021: Writing in the Sunday Times Professor Chris Whitty, the Chief Medical Officer, notes the ‘NHS in some parts of the country is currently facing the most dangerous situation anyone can remember’ (ITV News).33

11 January 2021: Hospitals are reporting shortages of oxygen because of the pressure of treating the rising number of Covid patients, with South Essex NHS foundation trust reporting ‘a critical situation with oxygen supply’ (Guardian).34

A survey conducted by the National Association of Head Teachers finds 34% of school leaders said they had 31% or more of their normal roll attended school in person on Thursday 7 January 2021 (Guardian).35

12 January 2021: ‘The Covid pandemic has caused excess deaths to rise to their highest level in the UK since World War Two’, BBC News reports. ‘There were close to 697,000 deaths in 2020 - nearly 85,000 more than would be expected based on the average in the previous five years’ (BBC News).36

13 January 2021: Government figures show a record daily reported 1,564 new fatalities, bringing the total number of deaths from Covid to 101,160. ‘The UK has one of the worst Covid mortality rates in the world, at 151 per 100,000 people, ahead of the US, Spain and Mexico, where there are 116, 113 and 108 deaths per 100,000 people respectively’ (Guardian).37

Speaking to the House of Commons Science and Technology Committee, Dr Mary Ramsay, Head of Immunisation at PHE, say the UK will need to ‘allow the disease to circulate in younger people where it’s not causing much harm’ while protecting ‘the people who are really vulnerable’, if the vaccine fails to sufficiently slow or prevent transmission of Covid-19 (Byline Times).38

Responding to Dr Ramsay’s testimony, Anthony Costello, Professor of Global Health and Sustainable Development at University College
London and a former director of maternal and child health at the WHO, tweets it ‘reveals that the UK govt have always accepted a mitigation “take it on the chin” policy. The result: 1250 deaths per million, NHS overwhelmed. Countries that went for suppression China (3) NZ (5) and SKorea (22 per m) prove Zero COVID works’ (Anthony Costello).\(^3\)

A survey of ICUs and anaesthetic staff in June and July 2020 finds ‘nearly half... reported symptoms consistent with a probable diagnosis of post-traumatic stress disorder (PTSD), severe depression, anxiety, or problem drinking’ (British Medical Journal).\(^4\)

The BMA writes to PHE asking them to ‘urgently review the adequacy of its PPE guidance for healthcare staff amid growing concerns that inadequate PPE is placing many at serious risk of Covid-19,’ noting ‘the need for wider use of respiratory protective equipment, such as FFP3 respirators, in other high-risk settings across primary and secondary care’ (British Medical Association).\(^5\)

**14 January 2021:** The Guardian reports ‘Boris Johnson’s plans to test millions of schoolchildren for coronavirus every week appear to be in disarray’ after the Medicines and Healthcare products Regulatory Agency, the UK regulator, ‘refused to formally approve the daily testing of pupils in England’ (Guardian).\(^6\)

The Guardian reveals overstretched London hospitals are transferring seriously ill Covid patients to ICUs almost 300 miles away in Newcastle (Guardian).\(^7\)

A DHSC plan to discharge Covid patients from hospitals into care homes without tests is branded ‘madness’ by care home providers, warning the policy risks a repeat of the first wave (Guardian).\(^8\)

**15 January 2021:** The Prime Minister announces a tightening of the UK’s borders from 18 January 2021, with all international arrivals forced to quarantine, as well as demonstrate they have had a negative Covid test (Guardian).\(^9\)
Rachel Clarke, a doctor specialising in palliative medicine, notes this has only been introduced one year after the first recorded Covid case in the UK and 100,000 deaths (Rachel Clarke).

A new report from Independent SAGE urges the current policy of ‘voluntary self-isolation of international arrivals is replaced as a matter of urgency by a managed isolation system which will ensure that the full period of isolation is completed without putting people at risk.’ They set out four components for a new system: ‘prior agreement from the traveller that, on arrival, they will undertake a period of managed isolation under official supervision; prior notification to the border authorities of the intention to travel to the UK; Production of a negative COVID-19 PCR test taken not more than three days prior to the date of departure from country of origin, together with a further test on arrival; The costs of managed supervision would be met by the traveler’ whilst ‘financial assistance would be available to UK citizens who were able to show that their travel was nonoptional and that they lacked the means to afford managed isolation’ (Independent SAGE).

16 January 2021: ‘Families on low incomes are avoiding the Covid-19 testing system because they cannot afford to isolate if they get sick, while red tape is hampering access to the government’s £500 compensation payments,’ the Observer reports. ‘People in some of the most deprived areas of England, including Middlesbrough, Liverpool and the London borough of Newham, are less likely to request a coronavirus test’ (Observer).

17 January 2021: Experts on Independent SAGE publish a letter in the Sunday Times arguing recent statements by ministers intimating restrictions could be lifted once priority groups are vaccinated are ‘very dangerous’, noting that continuing to allow the virus to circulate at a high level creates the ‘conditions that favour the emergence of vaccine-resistant mutations’ (Martin McKee).

Foreign Secretary Dominic Raab tells Sky TV that people arriving in the UK may have to stay in quarantine hotels under new plans being exam-
ined by the government (Guardian).\textsuperscript{50}

18 January 2021: The UK now has the highest death rate from Covid-19 of any country in the world, the latest data, compiled by University of Oxford-based research platform Our World in Data, reveals (Independent).\textsuperscript{51}

Research (still to be peer-reviewed) led by the Principal Statistician at the ONS finds that close to a third of people discharged from hospitals in England after being treated for Covid were readmitted within five months (Guardian).\textsuperscript{52}

‘While ministers hope the race to vaccinate will allow a rapid relaxation of the lockdown restrictions, some economists cautioned that the maths dictated that social distancing was more effective in bringing case numbers down quickly than a vaccination programme,’ the Financial Times reports. ‘David Mackie, chief European economist at JPMorgan, estimated that if the vaccine rollout went as planned, the number of people in hospital would drop from almost 40,000 now to a little over 10,000 by April. However, if the number of contacts each person had was reduced to the level of the first lockdown last year, the number of people in hospital would drop to just under 600’ (Financial Times).\textsuperscript{53}

19 January 2021: The Guardian reports, ‘Israel’s coronavirus tsar has warned that a single dose of the Pfizer/BioNTech vaccine may be providing less protection than originally hoped, as the country reported a record 10,000 new Covid infections on Monday’ (Guardian).\textsuperscript{54}

Deaths in care homes in England have hit the highest level since mid-May, according to the CQC, which revealed a 46\% increase in coronavirus-related deaths in the last week (Guardian).\textsuperscript{55}

20 January 2021: 1,820 people have died in the UK within 28 days of a positive Covid test - the biggest figure reported in a single day since the pandemic began (BBC News).\textsuperscript{56}
Speaking to the Conservative Friends of India group, Home Secretary Priti Patel says she privately pushed for the UK’s borders to be closed in March 2020 (Sky News).  

**21 January 2021:** The Guardian reports, ‘cases of coronavirus may no longer be falling across England,’ according to Imperial College London’s React-1 survey, raising ‘concerns over whether lockdown measures can contain the new variant’ (Guardian).  

Christina Pagel, Professor of Operational Research at University College London and member of Independent SAGE, tells LBC radio the government’s focus on members of the public breaking the lockdown rules is a diversionary tactic: ‘The rules are just much laxer this time than in March 2020: we’ve got loads more people going to work, we’ve got more kids in school, we’ve got more shops allowed to be open. If they don’t want people to go out and transmit the virus then change the rules and stop blaming people’ (Ben Kentish).  

Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, tells Channel 4 News, ‘lifting things in March just means we will be in lockdown in April.’ She notes we need ‘a comprehensive suppression strategy,’ including giving people 80% of their salary if they need to isolate, a ‘robust test–trace–isolate scheme’ and travel restrictions (Channel 4 News).  

The Guardian reveals, ‘Ministers are considering paying £500 to everyone in England who tests positive for Covid-19, in a dramatic overhaul of the self-isolation support scheme.’ The report notes ‘government polling found only 17% of people with symptoms are coming forward to get a test, owing to fears that a positive result could stop people from working’ (Guardian).  

SAGE warns that ‘reactive, geographically targeted’ travel bans ‘cannot be relied upon to stop importation of new variants’ (Sky News).  

The Guardian reports Covid outbreaks are slowing delivery of the vaccine to some care homes in England as GPs postpone jabs in infected facilities. Managers say they have been left as sitting ducks’ (Guardian).
Anthony Costello, Professor of Global Health and Sustainable Development at University College London and a former director of maternal and child health at the WHO, notes data from the ONS released on 21 January 2021 shows ‘five weeks after testing positive for Covid-19, 15% of secondary schoolchildren and 13% of under-12s were still struggling with Covid-19 symptoms’ (Guardian). 64

22 January 2021: The Guardian reports a survey carried out for the DHSC ‘found that only one in four people reported compliance with self-isolation, with 15% going to work as normal.’ Professor Stephen Reicher, a member of SPI-B and Independent SAGE, argues universal payments to self-isolate must form an ‘essential element of our pandemic response’. He continues, ‘You can’t have a bureaucratic system, you can’t have a system where people don’t know whether they will get the support or not, it has to be immediate. The way to do that is to make it universal’ (Guardian). 65

24 January 2021: Commenting on reports the government is considering making travellers arriving in the UK to quarantine in hotels, Kamlesh Khunti, Professor of Primary Care Diabetes and Vascular Medicine at the University of Leicester, who sits on both SAGE and the Independent SAGE, comments, ‘We should... have a blanket policy on border control, otherwise people may be traveling from high-risk countries to low-risk countries and then to the UK in which case we will miss these cases. Giving this clear recommendation also gives less risk of confusion as the risk in various countries will change over time.’ Dr Michael Head, a Senior Research Fellow in Global Health at the University of Southampton, concurs: ‘Quarantine for all arrivals into the UK should have been introduced since the first wave, and should certainly be in place right now. It’s difficult to appropriately discern the risks between different countries, so a blanket policy is a better idea.’ Gabriel Scally, Visiting Professor of Public Health at the University of Bristol and a member of the Independent SAGE, and Professor Susan Michie, Director of the Centre for Behaviour Change at University College London and member of Inde-
ependent SAGE, both also agree quarantine should apply to all travellers arriving in the UK (Guardian).66

25 January 2021: A still to be peer-reviewed University of Oxford study finds one in eight people who have had Covid-19 are diag-
nosed with their first psychiatric or neurological illness within six months of testing positive (Guardian).67

Speaking to a Confederation of British Industry webinar, Dido Harding, the Head of the Test and Trace, says fewer than 60% of people asked to self-isolate actually do so (Mirror).68

Asked ‘How strict are the current lockdown measures?’ by Ipsos MORI, 48% of respondents reply ‘not strict enough’, 37% say ‘about right’ and just 9% say ‘too strict’ (Ben Page).69

27 January 2021: With government figures showing 100,000 have now died in the UK because of Covid, the Prime Minister says he takes ‘full responsibility’ for the government’s actions, noting ‘We truly did everything we could’ (BBC News).70

The Covid-19 Bereaved Families for Justice group says the Prime Minis-
ter’s defence of the government handling of the crisis is ‘an insult to the memory of everyone we have lost and a kick in the teeth for bereaved families who deserve acknowledgement that our loved ones were failed’. Stephen Reicher, Professor of Psychology at the University of St Andrews and a member of SPI-B and Independent SAGE, says the Prime Minister’s statement is ‘so transparently untrue’ and risks further undermining public trust in the government’s response to the crisis (Guardian).71

Dr Richard Horton, Editor-in-Chief of the Lancet journal, tells Channel 4 News ‘we should have pursued a policy of Zero Covid... all the way through the past 12 months the government’s decisions have been too slow, too indecisive, they didn’t follow the science.’ Asked how low case numbers should be before the UK opens up, Horton answers 20 cases a day per 100,000 people, for five days (Channel 4 News).72
Asking about the 100,000 people who have died from Covid on the *BBC Today* programme, Sir Michael Marmot, the Director of the UCL Institute of Health Equity, says he would ‘link it to where we were before the pandemic’ including ‘a big rise in inequalities in health’ and the ‘health for the poorest people outside London was getting worse’. He goes on to highlight the ‘reduction in investment in the public sector, the regressive cuts to public spending’ as reasons for the high death toll (*BBC Today*).\textsuperscript{73}

The government announces UK nationals and residents returning from thirty ‘red list’ nations will be placed in quarantine in government-provided accommodation – such as hotels – for ten days (*Sky News*).\textsuperscript{74}

Christina Pagel, Professor of Operational Research at University College London and a member of Independent SAGE, says the policy would be ‘enough to damage the economy but not nearly enough to be effective against Covid... Firstly, we just don’t know who the high-risk countries are because most countries do not have the sophisticated sequencing capabilities you need to spot, track and analyse new variants’ (*Guardian*).\textsuperscript{75}

The Prime Minister announces he hopes schools will reopen on 8 March 2021 (*Guardian*).\textsuperscript{76}

Mary Bousted, joint General Secretary of the NEU, warns ‘If we come out too early, we will end up in lockdown again’, noting the Prime Minister’s announcement ‘fails completely to recognise the role schools have played in community transmission’ (National Education Union).\textsuperscript{77}

Survey data shows ‘although willingness to self-isolate was high across all respondents, the self-reported ability to isolate was three times lower among those earning less than £20,000 (€23,000; $27,000) a year or who had less than £100 saved,’ an editorial in the *British Medical Journal* notes. ‘This finding is consistent with reports that lost wages are the primary reason for not following isolation guidelines.’ The authors, four health specialists, conclude ‘Ultimately, people need to be able to isolate without fear of a substantial damage to their work, income, family, or caring responsibilities’ (*British Medical Journal*).\textsuperscript{78}
28 January 2021: Writing in the Guardian, Gabriel Scally, a Visiting Professor of Public Health at the University of Bristol, and a member of the Independent SAGE, argues ‘The UK has no strategy, no overall objectives and no chance of making a half-baked quarantine scheme work’ (Guardian). 

The Guardian reveals Dominic Cummings’ Operation Moonshot plan ‘to test millions of people a day for coronavirus led the government to spend over £800m on quick turnaround tests that were later found in a pilot to give the wrong results as much as 60% of the time’ (Guardian).

‘The evidence to date suggests that countries pursuing elimination of Covid-19 are performing much better than those trying to suppress the virus,’ note Michael Baker, Professor of Public Health at the University of Otago, and Martin McKee, Professor of European Public Health at the London School of Hygiene and Tropical Medicine and a member of Independent SAGE. ‘Aiming for zero-Covid is producing more positive results than trying to “live with the virus”’ (Guardian).

29 January 2021: The percentage of people testing positive for coronavirus has stopped falling and remains high in England, the ONS reports (Guardian).

30 January 2021: The Guardian reports ‘More than 1,000 people in the UK have died of Covid on average each day in January, making it the deadliest month of the pandemic so far by the government’s count’ (Guardian).

31 January 2021: Chris Hopson, the Chief Executive of NHS Providers, says the NHS in England will take ‘months’ to return to normal service after the Covid crisis is finally over, because its workforce is ‘exhausted and traumatised’. According to the Guardian the number of people who have been forced to wait over a year for sometimes urgent care has increased from 1,398 to 192,169 in just a year (Guardian).
Though levels of infection decrease over the course of the month, experts warn the government to be cautious in loosening restrictions. On 22 February, the Prime Minister sets out the government’s four-step ‘roadmap’ to ease the lockdown, with all schools able to open on 8 March and a provisional date of 21 June 2021 for all limits on social contact to be lifted. Several experts criticise the government’s plan. A number of studies and experts highlight the dangers of long Covid.

1 February 2021: ‘Tens of thousands of people will be tested in a door-to-door ‘two-week sprint’ to halt the spread of the South African coronavirus variant as cases were found across England’, the Guardian reports. Gabriel Scally, a Visiting Professor of Public Health at the University of Bristol and a member of the Independent SAGE, comments: ‘This process is extraordinarily intensive and probably won’t succeed’ (Guardian).

The Health Service Journal reveals, ‘Dozens and potentially hundreds of urgent operations for children have been cancelled during the third wave of the covid pandemic’, with one source involved in coordinating activity noting ‘Operations commonly affected have included urgent
fixes of fractures under anaesthetics, adeno-tonsillectomy for obstructive sleep apnoea, and biopsies under anaesthetic’ (*Health Service Journal*).²

### 2 February 2021: Noting the UK’s quarantine plan ‘does not go far enough’, First Minister of Scotland Nicola Sturgeon announces a plan to introduce a ‘managed quarantine requirement for anyone who arrives directly into Scotland, regardless of which country they have come from’ (*BBC News*).³

A Trades Union Congress study analysing data from half of all England’s councils finds approximately 70% of people who apply for financial support to self-isolate due to Covid-19 are rejected. Frances O’Grady, the General Secretary of the TUC, comments: ‘Too many low-paid workers are going without the financial support they need to self-isolate – this is a gaping hole in the UK’s public health approach’ (*Guardian*).⁴

### 3 February 2021: A still to be peer-reviewed study by the University of Oxford finds the Oxford/AstraZeneca vaccine causes a 67% reduction in transmission of the virus, and a single dose of the vaccine is 76% effective from day 22 to day 90 after the jab (*Sky News*).⁵

‘We’ve seen the new variants emerge, which was something that none of us were able to predict,’ Dido Harding, the Head of *Test and Trace*, tells the Commons Science and Technology Committee (*Guardian*).⁶

Harding’s assertion is ridiculed by experts, with Dr Eric Feigl-Ding, Epidemiologist and Senior Fellow at the Federation of American Scientists in Washington DC, tweeting, “None of us were able to predict” #COVID19 would mutate or variants would emerge, says Dido Harding, head of Flag of United Kingdom National Institute for Health Protection. Except every epidemiologist and immunologist expert!!” (Eric Feigl-Ding).⁷

The *Guardian* reports, ‘Dr Deepti Gurdasani, a clinical epidemiologist and senior lecturer in machine learning at Queen Mary University of London, urged the prime minister to resist pressure to reopen schools
any sooner, warning that even 8 March looked unrealistic. She said levels of community transmission were still high and cases were not declining sufficiently rapidly.’ Dr Gurdasani comments, ‘We are in a very, very precarious position. Parents and children have made huge sacrifices because of schools being closed to most children. It’s very important we don’t squander this’ (Guardian).8

SAGE considers a paper from an ONS study looking at 47,780 coronavirus patients who were discharged alive by the end of August 2021. The study found 30% of patients were readmitted to hospital within 140 days while 12% died (SAGE).9

4 February 2021: Jeremy Hunt, former Health Secretary and current chair of the House of Commons Health Select Committee, says the government should aim at suppressing Covid sufficiently so South Korean-style intensive contact tracing is possible. According to the Guardian, Hunt says the government should take a ‘cautious approach to lifting lockdown in England so that new coronavirus cases can be driven down to a manageable level of 1,000 a day’ (Guardian).10

‘Matt Keeling, Professor of Populations and Disease at the University of Warwick, fears even partial easing of restrictions before May is a bad idea,’ the Guardian reports. Anthony Harnden, a GP, Professor of Primary Care at the University of Oxford and Deputy Chair of the Joint Committee on Vaccination and Immunisation, ‘also calls for caution’ (Guardian).11

A University of Aberdeen study finds international travel had the biggest impact on Covid death rates for countries hit in the pandemic’s first wave, with an increase of one million international arrivals associated with a 3.4% rise in the mean daily increase in Covid-19 deaths. Tiberiu Pana, one of the authors of the study, notes: ‘Our assessment of available data indicates that very early restrictions on international travel might have made a difference in the spread of the pandemic in western Europe, including the UK’ (BBC News).12

‘The head of one of the UK’s biggest airport hotel chains has said his company has been “kept in the dark” over the government’s plan to
quarantine international arrivals from high-risk countries,’ the *Guardian* reports. Speaking to the *BBC Today* programme, Rob Paterson, the UK chief executive of Best Western, notes ‘I think, in any normal company, if you went out and announced a programme nationally and you hadn’t thought about how you were going to plan that and you hadn’t spoken to the people involved, I’m not sure I’d have a job. To this day we simply haven’t heard anything, despite multiple offers’ (*Guardian*).\(^\text{13}\)

**SAGE** considers research looking at more than 73,000 adults admitted with Covid to 300 hospital settings across the UK between January and August 2021. According to the *Independent*, the study ‘found half of all the patients had at least one complication with complications, such as heart, kidney or lung problems, most common in men aged 30 and over.’ The study noted: ‘Complications and worse functional outcomes in patients admitted to hospital with Covid-19 are high, even in young, previously healthy individuals.’ Peter Openshaw, Professor of Experimental Medicine at Imperial College London and one of the co-authors of the study, comments: ‘Most planning with respect to Covid has focused on mortality, for example in setting the priority groups for vaccination. We now show that there are other severe outcomes that need to be taken into account in estimating the impact of Covid-19; long-term complications are especially common in males, those aged 30 and over and in patients with comorbidities’ (*Independent*).\(^\text{14}\)

5 **FEBRUARY 2021**: ‘Up to **100 children a week** are being hospitalised with a rare disease that can emerge weeks after Covid-19, leaving them in intensive care, doctors have said’, the *Guardian* reports. The paper reports ‘It often involves rashes, a temperature of up to 40°C, dangerously low blood pressure and abdominal problems, and in serious cases its symptoms are like those of toxic shock or the potentially fatal condition sepsis’ (*Guardian*).\(^\text{15}\)

According to the *Guardian*, Gavin Williamson, the Education Secretary, ‘is drawing up plans for students to make a phased return to universities in England from 8 March, although vice-chancellors warned that many were unlikely to be back on campus before summer’ (*Guardian*).\(^\text{16}\)
'Test and Trace has been accused of relying on “dodgy” statistics to justify its £22bn budget after it emerged the service is claiming credit for anyone who isolates with Covid,’ HuffPost reports. ‘Test and Trace chair Dido Harding repeated this week to MPs her claim that it had cut the R number by up to 0.6 and was on track to cut it by 0.8 in high prevalence areas of the UK. But it has emerged that the boast is calculated by comparing the service’s impact with what would happen if no one self-isolated upon getting symptoms of the virus’ (HuffPost).\(^\text{17}\)

Keep Our NHS Public launches a ‘People’s Covid Inquiry,’ to be hosted by human rights barrister Michael Mansfield QC, hearing testimony from frontline workers, academics, scientists, politicians and members of the public (Morning Star).\(^\text{18}\)

7 FEBRUARY 2021: The Times reveals, ‘Ministers have failed to ban travellers from 35 countries with cases of the dangerous South African and Brazilian variants’ (Times).\(^\text{19}\)

‘Of course, this “red-list” approach was never going to work as variants spread, people spread, people avoid certain routes,’ tweets Clare Wenham, Assistant Professor of Global Health Policy at the London School of Economics. ‘This is why we need a blanket point of entry control, otherwise you simply delay, rather than prevent problems’ (Clare Wenham).\(^\text{20}\)

8 FEBRUARY 2021: ‘Some NHS dental patients are being asked to pay for private appointments to get treatment while others face two-year waits to be seen,’ the Guardian reports. ‘The British Dental Association said 20m fewer dental treatments were carried out last year than in 2019’ (Guardian).\(^\text{21}\)

9 FEBRUARY 2021: According to the Guardian, attendance at primary school is increasing: ‘Official government data showed that 23% of pupils in state primary schools were on site last Thursday, up from 21% last month. Attendance was also up in special schools, which have
been asked to remain open, from 30% in January to 35% last week’ (Guardian).²²

10 February 2021: Speaking at a Downing Street press conference, Sir Patrick Vallance, the chief scientific adviser, says, ‘I think caution is important as we go into opening things up, and measuring’s important, and data is going to be important. The virus isn’t going to be particularly interested in dates’ (Guardian).²³

The House of Commons Public Accounts Committee publishes a report on PPE procurement during the pandemic, concluding, ‘The Department for Health and Social Care’s decision to prioritise hospitals at the beginning of the pandemic meant social care providers were left exposed by lack of PPE... Surveys by staff representative organisations showed at least 30% of participating care workers, doctors and nurses reported having insufficient PPE, even in high-risk settings’ (Public Accounts Committee).²⁴

11 February 2021: A YouGov poll commissioned by the Trades Union Congress, finds 19% of all those still working were going into offices or other workplaces for part or all of their working week despite them being able to do the job from home (Guardian).²⁵

12 February 2021: Levels of Covid are going down in all nations of the UK, ONS data shows. BBC News notes, ‘The data is more evidence lockdown is controlling the virus, even with the more infectious variants circulating... the latest R number, estimated to be between 0.7 and 0.9, also suggests infection numbers are shrinking’ (BBC News).²⁶

The i newspaper reveals, ‘Prime Minister Boris Johnson has a three-stage plan for reopening the economy from lockdown that could allow pubs across England to serve customers again by Easter weekend at the beginning of April.’ According to the report, ‘A senior Government official has told this newspaper the Prime Minister’s road map out of lockdown will begin with the reopening of schools, already scheduled for 8
March... If scientific data shows the R number, which fell below one on Friday for the first time since July, remains low and coronavirus infections remain at an “acceptable level”, then the Prime Minister will give the green light to non-essential shops reopening towards the end of March’ (i).27

After reviewing a copy of the government’s official requirements for hotel operators ahead of the hotel quarantine policy starting on 15 February 2021, BBC News reports, ‘England’s rules on quarantine hotels for travellers arriving from Covid “red list” countries are less stringent than those enforced in Australia.’ In contrast to the Australian system, travellers quarantined in England will be allowed out of their rooms for a limited set of exemptions, including exercise, while there is no provision for regular testing of hotel staff (BBC News).28

13 FEBRUARY 2021: ‘Experts have urged caution over the easing of lockdown restrictions, warning that relaxing measures too early could lead to another surge in cases and threaten the NHS with collapse,’ the Guardian reports. Steven Riley, a member of SPI-M which advises the government, told the BBC Today programme that despite the success of the vaccine rollout, scientists were ‘genuinely worried’ about the prospect of another wave (Guardian).29

‘People with learning disabilities have been given do not resuscitate orders during the second wave of the pandemic, in spite of widespread condemnation of the practice last year and an urgent investigation by the care watchdog,’ the Guardian reports. ‘Mencap said it had received reports in January from people with learning disabilities that they had been told they would not be resuscitated if they were taken ill with Covid-19’ (Guardian).30

14 FEBRUARY 2021: The Guardian reports Kamlesh Khunti, Professor of Diabetes and Vascular Medicine at Leicester University and a member of both the government’s official SAGE scientific advisory group and Independent SAGE, ‘said the wider process of reopening had to be gradual and monitored’. Khunti notes, ‘We need to open in
stages, monitor the community rates of infections, hospitalisation and deaths as well as monitor the R value, and then, if safe to do so, gradually open things up and continue monitoring’ (Guardian).  

’Tens of thousands of coronavirus survivors needing long-term care are heaping pressure on Britain’s stretched community services, threatening a crisis that experts warn could dwarf that seen in hospitals over the past 12 months’, the Independent reports. Zudin Puthucheary, an Intensive Care Consultant at the Royal London Hospital and Chair of the Intensive Care Society’s national rehabilitation collaborative, warns, ‘The rehabilitation disaster is going to be our next pandemic. The full scale of this needs to be understood’ (Independent).

15 February 2021: ‘The prime minister struck a cautious note as he repeatedly emphasised his desire for a slow, controlled easing of restrictions that would not have to be rolled back again’, the Guardian reports. Boris Johnson says he would ‘like to see the rates of infection come down very low indeed … we’ll want to see those rates really, really low… the risk is that if you have a large volume of circulation, if you’ve got loads of people, even young people, getting the disease, then a couple of things happen. First of all, you have a higher risk of new variants and mutations within the population where the disease is circulating. Secondly, there will also be a greater risk of the disease spreading out into the older groups again’ (Guardian).

‘We are still averaging around 600 deaths a day from Covid,’ Rachel Clarke, a doctor specialising in palliative medicine, tweets. ‘I’m incredibly worried that @BorisJohnson is poised - again - to relax lockdown too swiftly, unable to resist the desire to be popular. Nothing could be more reckless. He cannot ignore his scientific advisers’ (Rachel Clarke).

Stephen Reicher, Professor of Social Psychology at the University of St Andrews and a member of SPI-B and Independent SAGE, describes the policy of ‘opening all schools for all pupils on a predefined date without taking account of prevalence rates and without taking steps to reduce transmission in schools (ventilation, masks, smaller class sizes etc.)’ as ‘sheer idiocy’ (Stephen Reicher).
16 February 2021: The Guardian reports, ‘Contact tracing alone has a marginal impact on Covid transmission, curbing the spread of the disease by just 2% to 5%, official estimates show’ (Guardian).³⁶

17 February 2021: The Guardian reports the Prime minister ‘is said to favour a “big bang” return for schools, with all pupils in England returning to the classroom from 8 March 2021’ (Guardian).³⁷

The minutes of the day’s SPI-M meeting note, ‘Attempting to sustain high prevalence during vaccine rollout would run the risk of an extremely large resurgence that could require reimposition of restrictions to protect hospitals’ (SPI-M).³⁸

A classified analysis produced in January 2021 by the government’s Joint Biosecurity Centre concluded a ‘perfect storm’ of low wages, cramped housing and failures of the test-and-trace scheme led to ‘stubbornly high’ virus rates in England’s most deprived communities (Guardian).³⁹

Speaking on the BBC More or Less programme, Nathalie MacDermott, a clinical doctor sub-specialising in paediatric infectious diseases in the NHS, says ‘I think that we need to be very concerned about the potential impact of Long Covid and how many people in the young to middle-age adult population, who our adult working adult population, have been affected. I think we are going to need a significant amount more to manage the potential epidemic of long Covid that we’re facing’ (BBC More or Less).⁴⁰

Some quarantine hotels housing people who have travelled to the UK use ventilation systems that risk causing localised outbreaks, according to a report from a ventilation expert (Guardian).⁴¹

18 February 2021: Imperial College London’s REACT study finds that infections had fallen by more than two-thirds since the last time it reported in mid-January 2021. Professor Paul Elliott, Director of
the programme at Imperial, says the results show that ‘lockdown measures are effectively bringing infections down’ (Sky News).\textsuperscript{42}

Christina Pagel, Professor of Operational Research at University College London and member of Independent SAGE, says the REACT study results are encouraging, though says the finding that covid was more common among younger children was of potential concern if it’s linked to primary school attendance: ‘If this is the reason, it’s a sign that opening schools in March has to be done very carefully’ (Guardian).\textsuperscript{43}

Layla Moran MP, Chair of the All-party Parliamentary Group on Coronavirus, urges the government to set up a compensation scheme for frontline workers, noting, ‘Long Covid is the hidden health crisis of the pandemic, and it is likely to have an enormous impact on society for many years to come’ (Guardian).\textsuperscript{44}

\textbf{19 FEBRUARY 2021:} ‘A row has broken out over Boris Johnson’s hopes for a “big bang” reopening of schools, as sources claimed it had run into resistance from Prof Chris Whitty,’ the Guardian reports. ‘The chief medical officer for England was said to be reluctant to put his name to a public show of support for the policy this week’ (Guardian).\textsuperscript{45}

‘It would be “reckless” to bring back all pupils in England to school together on 8 March, says a joint statement by teachers’ unions,’ BBC News reports. ‘Rather than risk another “spike” in infections,’ the nine teachers’ and head teachers’ unions ‘are calling for a more “cautious” and “phased” return’ (BBC News).\textsuperscript{46}

The BMA urges ‘a cautious and measured approach to easing lockdown restrictions,’ arguing it is only safe to significantly ease restrictions when infections dip below 1,000 a day (British Medical Association).\textsuperscript{47}

Writing in the Guardian about how the government should come out of the lockdown, Professor Gabriel Scally, President of Epidemiology and Public Health at the Royal Society of Medicine and a member of Independent SAGE, argues ‘the prime minister should outline his goal of getting the infection rate down to a minimal level and keeping it there —
restoring normal functioning to much of society and the economy. To do that, the lockdown should be tightened for six weeks, but it should also be the last’ (Guardian). ⁴⁸

‘Matt Hancock acted unlawfully when his department did not reveal details of contracts it had signed during the Covid pandemic, a court has ruled,’ BBC News reports. ‘A judge said the health secretary had ‘breached his legal obligation’ by not publishing details within 30 days of contracts being signed’ (BBC News). ⁴⁹

A coalition of health organisations, including the RCN, BMA, Royal Pharmaceutical Society and the Royal College of Midwives, write to the Prime Minister demanding the guidance on PPE be updated to reflect the risks to medics and care workers from airborne transmission of covid. The letter notes current policies ‘continue to emphasise the importance of fomite, droplet and direct spread but do not properly address airborne transmission’ and says ‘The evidence is clear and lives continue to be put at risk’ (ITV News). ⁵⁰

**21 February 2021:** Speaking on The Andrew Marr Show, Professor John Edmunds, a member of SAGE, says, ‘I think if we open schools now, the reproduction [R] number is likely to go to something close to one, potentially slightly above.’ Asked if it would be better to open primary schools before secondary schools, Edmunds replies, ‘Sticking to the epidemiology, it is always safer to take smaller steps and evaluate.’ Speaking about vaccination, he notes, ‘I think there’s an argument for turning to children as fast as we can... there will continue to be major disruption in schools until we have vaccinated our children’ (Guardian). ⁵¹

**22 February 2021:** The Prime Minister sets out the government’s new four-step ‘road map’ to ease England’s lockdown, which could see all legal limits on social contact lifted by 21 June 2021, if certain conditions are met. During his appearance in the House of Commons he argues there is ‘no credible route to a zero-Covid Britain nor indeed a zero-Covid world’ (BBC News). ⁵²
‘Let’s be clear: this is not a plan for controlling the pandemic, this is a plan that in it has baked in a large number of cases surging, and a large number of deaths,’ Dr Deepti Gurdasani, a Clinical Epidemiologist and Senior Lecturer in Machine Learning at Queen Mary University of London, tells Sky News. ‘And by most conservative estimates published today by the University of Warwick and Imperial deaths between 30,000 and 80,000... we are opening up not cautiously, too early, not in line with scientific evidence, and without the mitigatory measures and protections we need in place. And the consequences will very sadly be surges of cases and many more deaths’ (Sky News).

‘I didn’t hear anything resembling a coherent strategy to push infections down. I didn’t hear anything to make me confident that things really will be different this time... I don’t think that we have seen the end of yo-yo Covid,’ Stephen Reicher, Professor of Psychology at the University of St Andrews and a member of SPI-B, says about the Prime Minister’s plan for easing lockdown (i).

Responding to the government's 'roadmap', Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, notes, ‘Until 80% to 90% of the population has been vaccinated, a large percentage of people will still be susceptible to infection and hospitalisation, giving the virus plenty of opportunities to spread and strain the NHS.’ Jennifer Dowd, Professor of Demography and Population Health at the University of Oxford, argues, ‘To ensure the reopening of schools doesn’t bring the R number back above 1, England must put basic mitigation measures in place. Masks should be mandated in classrooms, and schools should be better ventilated’ (Guardian).

Mary Bousted, joint General Secretary of the NEU, says, ‘Boris Johnson has, despite all his words of caution, failed to learn the lessons of his previous mistakes. Whilst cases of Covid infection are falling, along with hospitalisation rates, it remains the case, unfortunately, that cases are three times higher now than when schools re-opened last September. This fact, alone, should have induced caution’ (National Education Union).

The Guardian notes in a SPI-M paper on the reopening of schools ‘modellers estimate that reopening primary and secondary schools will drive
the R number up by 10-50%, and point out that a limited and cautious reopening, perhaps of primary schools only at first, would allow scientists to assess the impact on community infections’ (Guardian). 57

The ONS publishes data showing teachers have a higher probability of testing positive for Covid than most other occupations, with ‘teaching and other education professionals’ ranking fourth out of 25 occupations (Guardian). 58

23 FEBRUARY 2021: ASKED ON THE BBC’S POLITICS LIVE SHOW about the government’s position of letting cases rise as long as hospital admissions stay relatively stable, Professor Christina Pagel, Professor of Operational Research at University College London, and member of Independent SAGE, says she doesn’t agree with this. Citing the minutes of the SPI-M meeting on 17 February 2021, she notes this risks a massive surge, overwhelming hospitals and more lockdowns: ‘Keeping cases low is by far the best for keeping the economy open, and for saving lives, and for reducing the chances of a new variant, and for prevent Long Covid’ (Christina Pagel). 59

Speaking on Good Morning Britain Health Secretary Matt Hancock says there was ‘no national outage’ of PPE during the first wave of the pandemic in early 2020 (ITV News). 60

Dolin Bhagawati, from Doctors’ Association UK, says Hancock’s comment that the NHS did not face a national shortage of PPE ‘is disgustingly disrespectful to the memory of frontline colleagues who died from Covid-19 while raising concerns about inadequate PPE’ (Guardian). 61

The Economics Editor at the Financial Times says the best estimate of the number of excess UK deaths linked to Covid-19 since mid-March 2020 is 123,800 (Chris Giles). 62

25 FEBRUARY 2021: THE CHIEF MEDICAL OFFICERS FOR ALL FOUR UK nations and the medical director of NHS England direct the UK’s Covid alert level to be downgraded from ‘critical’ to ‘severe’. However, they
According to the *Guardian*, in the minutes of the day’s SAGE meeting, ‘the advisers stressed the importance of keeping infection rates down, particularly as it remains unclear whether vaccines offer any protection against long Covid, also known as post-Covid syndromes.’ The minutes state ‘that the long-term impact of long Covid on the working-age population “is not well understood, but it may be very significant”' (*Guardian*).

Nearly half of people who had a potential symptom of cancer during the pandemic’s first wave did not see a GP, according to a survey carried out by Cardiff University and Cancer Research UK. The research found people held off seeking medical help because they did not want to waste doctor’s time, increase pressure on the NHS or go to hospital in case they were infected (*Guardian*).

26 FEBRUARY 2021: INDEPENDENT SAGE PUBLISH THEIR ‘Strategy for COVID-19: Maximum Suppression or Mere Containment’ report, noting ‘there are clear deficits’ in the government’s roadmap for releasing lockdown ‘which endanger its overall ambition of ensuring that the route out of lockdown is ‘one-way’ and irreversible’. These include ‘The absence of an overall strategy for pandemic control over and above vaccination; opening of schools and colleges on a single date (March 8th) without sufficient mitigating or compensatory measures; insufficient focus on addressing inequality, thus risking turning COVID into a disease of the poor’ (Independent SAGE).

While the Prime Minister said the government’s reopening strategy would be guided by ‘data, not dates,’ Stephen Reicher, professor of psychology at the University of St Andrews and a member of SPI-B, says ‘Data not dates has turned into dates not data’. Using dates created psychological, economic and political ‘counter-pressures’ which makes changing dates increasingly difficult, Reicher noted, highlighting the surge in holiday bookings and the announcement that events such as the Reading and Leeds festival were going ahead (*Guardian*).
Commuters will return to offices ‘in a few short months’, the Prime Minister predicts on a video call to a rail industry conference (Guardian).  

28 February 2021: The Brazil variant of Covid, which is more transmissible than some other strains, emerges in the UK (ITV News).

Chris Hopson, the Chief Executive of NHS Providers, notes, ‘The UK is towards the bottom of the European league table for intensive care beds per head of population. Whilst the UK has 7.3 intensive care beds per 100,000 people, Germany has 33.8 and the USA 34.3. We also have comparatively fewer than France, Italy, Australia and Spain’ (Guardian).
ON 8 MARCH, SCHOOLS AND COLLEGES OPEN AND PEOPLE ARE allowed to meet up with one other person from outside their household for either exercise or recreation. From 29 March people are allowed to meet outside with up to six people, outdoor sports facilities are opened, and the government’s ‘stay at home’ message is rescinded. More studies are published about the prevalence of long Covid, and experts voice concern about variants of the virus becoming common in the UK. There are calls for a public inquiry into the government’s handling of the pandemic, and the Office for National Statistics reports over 150,000 people have now died from coronavirus in the UK.

1 MARCH 2021: The Guardian reports the Brazil variant ‘has been found in at least 15 countries that are not on the government’s red list – those from which travel is banned for all but UK residents, who must quarantine in a hotel on arrival for 10 days’ (Guardian).

‘Brazil variant makes a case for complete and immediate managed isolation of all international arrivals,’ Professor Gabriel Scally, President of Epidemiology and Public Health at the Royal Society of Medicine and a member of Independent SAGE, tweets. ‘At least until we know more
about the variant and, crucially, whether vaccination is effective’ (Gabriel Scally).²

Dr Kit Yates, a Senior Lecturer in the Department of Mathematical Sciences and Co-Director of the Centre for Mathematical Biology at the University of Bath, tweets, ‘The fact we are seeing cases of the new Brazilian variant in the community indicates that border controls have not been tough enough to prevent the entry of new variants. That people can travel from Brazil taking a connecting flight in France, for example, and avoid the mandatory managed isolation that has recently been brought in makes a mockery of the 'tougher' border restrictions’ (Kit Yates).³

2 MARCH 2021: ‘SCIENTISTS HAVE WARNED THAT EMERGING DATA ON long Covid in children should not be ignored given the lack of a vaccine for this age group, but cautioned that the evidence describing these enduring symptoms in the young is so far uncertain,’ the Guardian reports. On the key question of whether even mild or asymptomatic infection can lead to long Covid in children, Danny Altmann, Professor of Immunology at Imperial College London, comments, ‘The answer is that it certainly can, and the long Covid support groups contain a not insignificant number of children and teens’ (Guardian).⁴

Data from the Office for National Statistics shows deaths from Covid in England and Wales are falling fastest among those aged 80 and over, suggesting the vaccination programme is having an impact on mortality (Guardian).⁵

‘Deep inequalities, marginalisations and social exclusions in our society... were one of the major driving forces for the excess mortality we have seen,’ notes Richard Horton, editor-in-chief of the Lancet journal, in his UEA philosophy public lecture. However, he argues, ‘the abject failure of the public health science community to mobilise itself and place the pandemic in its proper societal context’ led to the biomedicalisation of this pandemic, which has allowed ‘politicians to evade their responsibilities’ for these social and economic conditions (UEA Public Events).⁶

...
4 March 2021: Data from Imperial College’s REACT 1 study finds the decline in infections between January and February may have slowed (BBC News).7

5 March 2021: ‘Senior doctors are braced for up to a million people needing treatment for long Covid after the pandemic, putting huge extra pressure on an already overstretched NHS,’ the Guardian reveals. Professor Helen Stokes-Lampard, Chair of the Academy of Medical Royal Colleges, says, ‘The NHS knows this is a problem. It’s very concerned about this. Long Covid is going to be a very substantial new burden on the NHS. It’s working hard and setting up clinics. But there will be huge numbers of these cases and it’s clearly going to be dealing with this for years, absolutely for years.’ Speaking on condition of anonymity, one of Britain’s leading doctors commented, ‘Although officially about 4 million people have had Covid, in reality it’s about 8 million or 9 million. If 10% of those people have got something, then it could be almost a million people, and that’s enormous’ (Guardian).8

Speaking to Times Radio, Professor Andrew Hayward, a member of SAGE, says, ‘I think, you know, given the societal trade-offs, we are going to have to live with a degree of mortality that will be substantial ... it will get less over time as more people get vaccinated and as more people get immune, and I do believe that we’ve been through the worst of this’ (Guardian).9

7 March 2021: A report commissioned by the Royal College of Nursing ‘shows that the government’s COVID-19 infection control guidelines, which are used across the UK, are “flawed and need replacing”,’ the Royal College of Nursing notes. ‘The report, written by independent experts, analysed a literature review which underpins the current guidance and found that the review met just four of the 18 criteria the experts deemed essential. Crucially, the report found that the review failed to consider a key way in which COVID-19 is transmitted – airborne infection – about which growing evidence has emerged during the pandemic’ (Royal College of Nursing).10
8 March 2021: All schools and colleges reopen. People are now allowed to meet up with one other person from outside their household for either exercise or recreation (INews).11

‘The reopening of schools will have an impact on infection rates that could affect the roadmap for lifting restrictions, Boris Johnson has warned as England’s deputy chief medical adviser said it was too soon to rule out a fourth wave taking off,’ the Guardian reports. The Prime Minister says the number of people being admitted to hospital with covid each day was eight times higher than ‘the lows of last summer,’ while Deputy Chief Medical Adviser for England Jenny Harries notes infection rates remain at the same levels as late September 2020, even without the effect of schools returning (Guardian).12

The New York Times reports on a (yet to be peer-reviewed) study about people who contracted long Covid even though they were not sick when they were infected. ‘The study, one of the first to focus exclusively on people who never needed to be hospitalized when they were infected, analyzed electronic medical records of 1,407 people in California who tested positive for the coronavirus. More than 60 days after their infection, 27 percent, or 382 people, were struggling with post-Covid symptoms like shortness of breath, chest pain, cough or abdominal pain’ (New York Times).13

9 March 2021: Speaking to the House of Commons Science and Technology Committee, Professor Chris Whitty, England’s Chief Medical Officer, warns revising the government’s roadmap to emerge from lockdown sooner than planned risks a more serious third wave of Covid infections. ‘All the modelling suggests there is going to be a further surge that will find people either that have not been vaccinated, or where the vaccine has not worked,’ he notes. According to the Guardian, ‘Experts on the modelling subgroup of SAGE calculate that even under the most optimistic scenario, at least 30,000 more Covid deaths could occur in the UK’ (Guardian).14

A SAGE advisor tells the Times, the push by Chancellor Rishi Sunak to reopen the economy means he was ‘the main person who was responsible for the second wave’ (Mirror).15
10 March 2021: The House of Commons Public Accounts Committee publishes a report, noting that despite receiving £5.7 billion ‘there is still no clear evidence to judge’ the ‘overall effectiveness’ of the government’s Test and Trace programme. The report continues, ‘It is unclear whether its specific contribution to reducing infection levels, as opposed to the other measures introduced to tackle the pandemic has justified its costs’ (House of Commons Public Accounts Committee).16

Twelve experts publish a letter in the Lancet about the government opening schools on 8 March, noting, ‘Without additional mitigations, increases in transmission are likely, this time with more infectious and possibly more virulent variants, resulting in further lockdowns, school closures, and absenteeism’ (Lancet).17

Researchers from the University of Leeds and University of Edinburgh, including Professor Devi Sridhar, publish an analysis in the BMJ titled, ‘How can we improve self-isolation and quarantine for covid-19?’ They provide four key recommendations: ‘Inadequate financial support is a commonly cited factor for not following self-isolation or quarantine rules; Comprehensive support models are required to make self-isolation or quarantine feasible; Alternative accommodation should be made available for people who cannot safely isolate at home; Locally delivered solutions and community engagement are highly effective, particularly for vulnerable or low income populations’ (British Medical Journal).18

11 March 2021: The Pfizer/BioNTech vaccine appears to give high protection against asymptomatic Covid-19, according to data from Israel,’ the Guardian reports. ‘The top line of the real-world results, issued by the Israeli ministry of health and the companies but not yet peer-reviewed by scientists, is efficacy of 97% against disease and death and 94% against infection without symptoms’ (Guardian).19
14 MARCH 2021: According to his close allies, the Prime Minister accepts it was a mistake to delay the start of the first national lockdown (Telegraph).20

‘I have no doubt that in the autumn there will be a further wave of infections,’ Sir Ian Diamond, the head of the Office for National Statistics and member of SAGE, tells The Andrew Marr Show (BBC The Andrew Marr Show).21

15 MARCH 2021: After speaking to twenty senior politicians, officials and former officials, BBC Political Editor Laura Kuenssberg publishes a long read into the UK government’s pandemic response. There was a ‘lack of concern and energy,’ one source says about early 2020. ‘The general view was it is just hysteria. It was just like a flu.’ According to the report, the Prime Minister was heard to say, ‘The best thing would be to ignore it.’ Furthermore, according to ‘several sources’, Boris Johnson repeatedly warned that an overreaction could do more harm than good (BBC News).22

The House of Commons Public Administration and Constitutional Affairs Committee publish a report on the government transparency and accountability during the pandemic. ‘Communication has not always been transparent enough, and accountabilities have been unclear,’ the report concludes. ‘At various points throughout the pandemic, data has been communicated with the apparent intention of creating a more favourable view of the Government—or even to provoke anxiety rather than help people understand risk. This is not acceptable’ (Public Administration and Constitutional Affairs Committee).23

16 MARCH 2021: ‘Senior doctors, government scientific advisers and a former head of the civil service have spoken out in favour of a public inquiry into the UK’s handling of Covid-19,’ the Guardian reports. Those supporting the call include Sir Paul Nurse, Director of the Francis Crick Institute, Professor Andrew Goddard, President of the Royal College of Physicians, SAGE members Professor John Edmunds and Professor Andrew Hayward, General Secretary of
UNISON Christina McAnea, the British Medical Association and Royal College of Nursing (*Guardian*). 24

**17 March 2021:** Families bereaved by Covid-19 warn the government they will start legal action in two weeks unless the government launches a statutory public inquiry into their handling of the pandemic (*Guardian*). 25

47% of respondents in an ICM poll say they support ‘a statutory public inquiry into the UK’s response to the Covid-19 pandemic,’ with 18% opposed (*Guardian*). 26

**18 March 2021:** The Resolution Foundation think-tank publishes a briefing that concludes, ‘One huge mistake will be the centre of the eventual inquiry into the UK Government’s handling of this pandemic: the failure to lockdown early enough despite clear evidence of the need to do so. That mistake is all the worse for having been made, not once, but three tragic times.’ The report notes ‘Delaying the start of the latest lockdown until January [2021], despite evidence of fast rising cases, is estimated to have led to around an extra 27,000 Covid-related deaths compared to a situation in which restrictions were put in place quickly enough to prevent the death rate rising from early December levels’ (*Resolution Foundation*). 27

Over 500 'do not attempt resuscitation' decisions made since March 2020 were not agreed in discussion with the person or their family, a Care Quality Commission report finds (*BBC News*). 28

**19 March 2021:** The *Guardian* reports the latest survey results from the Office for National Statistics shows 'cases are no longer falling in some regions and may even be rising in parts of the country' (*Guardian*). 29

'It’s fair to say that he never really believed in Covid,' an adviser to Boris Johnson tells the *Financial Times.* ‘He was sceptical about the scale of it
and the value of government intervention — he felt that the cure might be worse than the disease’ (Financial Times).

20 March 2021: The writer Michael Rosen, who spent 48 days in intensive care after contracting covid, says the UK government’s ‘toying with herd immunity without vaccination’ in February and March 2020 was ‘laissez-faire genocide’ (Owen Jones).

21 March 2021: ‘Lifting the ban on foreign holidays in the coming months could risk another lockdown next winter, Boris Johnson is being warned, amid mounting alarm about a third wave of infections sweeping continental Europe,’ the Guardian reports. Professor Kamlesh Khunti, a member of SAGE, says, ‘I don’t think people should be planning on summer holidays abroad until next year... does this risk another lockdown? Absolutely.’ Dr Mike Tildesley comments foreign travel for the average holidaymaker this summer looked ‘extremely unlikely’ (Guardian).

‘Britain must learn from the “tragic” lessons of the past 12 months and start preparing for the next pandemic now, world-leading experts and scientists have warned,’ the Independent reports. Professor Sarah Gilbert, whose team developed the Oxford vaccine, says it is vital to listen to the warnings ‘and prepare for the next one,’ while SAGE member Professor Peter Horby notes increasing global connectivity is ‘increasing the odds’ of future outbreaks (Independent).

22 March 2021: ‘It is unbelievable to me that the govt has known for 8+ months that Covid is airborne and done almost nothing to support better ventilation in schools, workplaces, retail, hospitality,’ tweets Christina Pagel, professor of Operational Research at University College London and member of Independent SAGE (Christina Pagel).
23 March 2021: One year since the first national lockdown started, a national day of reflection is organised by Marie Curie cancer charity, with the leaders of the major political parties observing a minute’s silence (Guardian).35

‘Perhaps the single biggest false assumption that we made was about the potential for asymptomatic transmission, and that did govern a lot of policy in the early days,’ the Prime Minister tells a Downing Street press conference. ‘All that misunderstanding about the reality of asymptomatic transmission certainly led to real problems that [meant] we then really had to work very hard to make up ground’ (Guardian).36

24 March 2021: Boris Johnson has said a decision may have to be taken “very soon” about whether to impose tougher border measures on France over concerns about the spread of potentially vaccine-resistant Covid variants,’ the Guardian reports. ‘According to the French CovidTracker website, which uses government data, the South African and Brazilian variants account for 4.8% of new daily cases in France’ (Guardian).37

The (still to be peer-reviewed) UK-wide Phosp-Covid study finds that 70% of the approximately 300,000 people hospitalised with Covid-19 have still not fully recovered after five months (Guardian).38

Analysis of NHS England data by Cancer Research UK finds the number of people urgently referred for suspected lung cancer reduced by 34% between March 2020 and January 2021 compared with the same time period in 2019–20 – about 20,300 fewer people. Declines were also found for suspected urological cancer and gynaecological cancer (Guardian).39

Dr Thomas Hale, leader of the Oxford COVID-19 Government Response Tracker, the largest repository of global evidence relating to pandemic policies, notes, ‘the scientific literature is now clear: COVID-19 restrictions work to break the chain of infection, with timely, sharper restrictions having greater effect than slower, weaker ones’ (Conversation).40

...
25 March 2021: Lewis Goodall, Policy Editor at BBC Newsnight, tweets, ‘I understand that the Variant and Mutant Taskforce (a joint body of PHE [Public Health England], JBC [Joint Biosecurity Centre] and Test&Trace) has written to Matt Hancock to inform him they’ve traced Covid variants being imported to the UK from countries not on the red list incl. France, Germany, USA and others in Europe’ (Lewis Goodall).41

Christina Pagel, Professor of Operational Research at University College London and member of Independent SAGE, retweets Lewis Goodall, commenting, ‘Some people think I am being stupidly doom-laden when I tweet about variants. I’m really not - it’s the biggest risk to our fantastic progress in vaccination and to avoiding more lockdowns’ (Christina Pagel).42

26 March 2021: Professor Devi Sridhar, Chair of Global Public Health at the University of Edinburgh, tweets, ‘Huge risk: Watching a slow-moving car crash as U.K. govt stays open to France and other European countries, which have a S. African variant our main vaccine (AZ) doesn’t work against. Red list approach doesn’t work. We need blanket int’l quarantine to avoid future lockdowns’ (Devi Sridhar).43

27 March 2021: Asked at the Conservative party spring conference whether there should be a special bank holiday when the pandemic subsides, the Prime Minister says, ‘The general view is people have had quite a few days off, and it wouldn’t be a bad thing for people to see their way round to making a passing stab at getting back into the office’ (Guardian).44

29 March 2021: The next stage of the government’s road map out of lockdown is implemented: people are now allowed to meet outside, including in private gardens, in groups of six people – or more as long as it’s kept to just two households. The government ends the
'stay at home' message, and outdoor sport facilities are reopened (BBC Newsround).45

A survey of more than 2,100 workplace safety representatives by the Trades Union Congress reveals that ‘many employers are failing to follow Covid-secure rules and keep workers safe’ (TUC).46

**30 March 2021:** Data released by the Office for National Statistics confirms more than 150,000 people have died from coronavirus in the UK (Guardian).47

‘The planet could have a year or less before first-generation Covid-19 vaccines are ineffective and modified formulations are needed, according to a survey of epidemiologists, virologists and infectious disease specialists,’ the Guardian reports. 88% of the scientists surveyed said low vaccine coverage in many countries would make it more likely for vaccine-resistant mutations to appear (Guardian).48
Conclusion: An Extreme National Scandal

By Rupert Read.

What makes this book, our book, different from other books – see especially the excellent works that have already appeared by Richard Horton and John Ashton – on the UK response to coronavirus, is of course that we refrain rigorously – in the main body of the text, the timeline of the plague year – from editorialising. Thus, we hope that all readers will be able to draw their own conclusions.

Sceptical readers might say, ‘But, in practice, you do editorialise: simply through what you choose to include in the timeline.’ And indeed, it is obviously true that we are not purely ‘neutral’ observers. We see the timeline as telling a true story; and we put the timeline together so that that story could become visible. This is because we regard the story, while clearly not the only possible story that could be told here, as being not only true but of literally vital importance. So, it seems reasonable, at the end of this book, to briefly draw our own conclusions, explicitly. So, what are they?

This conclusion is a brief reflection on what I see the timeline as telling us about our lives together, about the future of UK politics and governance, and maybe about the future of human life on Earth even.
I know that my colleagues would agree with me when I first emphasise that we really do think that the timeline very largely speaks for itself. We think what it says is devastating. The clearest way to comprehend this is via international comparisons.

Other island nations have come through the Covid-19 pandemic far, far better than the UK. The best comparator is Taiwan. Very internationally connected, with a population of 23.8 million and double the population density of the UK. Its coronavirus death toll, at time of writing?

Ten.

I had a very interesting conversation with perhaps New Zealand’s leading epidemiologist, Professor Michael Baker, last spring. Baker told me of how, in late January and early February 2020, New Zealand looked for leadership, in the emerging crisis situation, to much larger Anglo nations, as it had done traditionally. But New Zealand then started to realise: there wasn’t going to be any. So instead, it did something it was less used to: it looked to East Asian nations for that leadership. It sought advice and inspiration from Taiwan, South Korea, and, to some extent, from Vietnam and China (which, after its disgraceful initial cover-up and inaction, switched tack to rapidly contain the pandemic within its borders). Under Jacinda Ardern’s decisive political leadership, New Zealand moved to adopt a precautionary stance on Covid-19. (Their total death toll from corona, to date? Twenty-six.)

What can be seen in clarity and detail in our timeline is:

How austerity and the steady degradation of our emergency frameworks created what turned out to be a deadly backdrop to an emerging threat.

How Brexit was a fatal distraction.

How the UK failed utterly to be precautious; how, instead, it led the world on recklessness vis-à-vis the pandemic. How this recklessness was still pursued despite the Government being advised clearly and in no uncertain terms, throughout February 2020, of the magnitude of the tsunami of death and destruction that was liable to come, if precautions were not taken, swiftly and at scale.
How, despite, ironically, having come to power on the back of antagonism towards large-scale immigration, the UK Government refused to control the movement of people into this country at the one time when it was actually critically necessary to do so: at the onset of and during the first wave (and since).

How it toyed dangerously, repeatedly, with a ‘goal’ of achieving herd immunity via potentially deadly infection, ignoring the obvious risk of utterly overwhelming the NHS, not to mention more silent risks such as that now playing out, of an epidemic of long Covid.

How it systematically counterposed ‘the economy’ to adequate action on the virus: ignoring the truth that, even on their own terms, their failure to control the virus was and is economically disastrous; those countries that have aimed for Zero Covid have fared far better, economically, than those (the UK, the USA, Brazil) that have not.

How care home residents – very vulnerable old people – were in their tens of thousands sacrificed on the altar of ‘protecting’ the NHS.

How NHS staff themselves were not protected adequately.

How test-and-trace was initially abandoned at the very moment when it was direly needed; and how the resurrected test-and-trace system has been a ghastly, almost unbelievable failure, in part due to its centralised and yet simultaneously privatised nature.

The vaccine rollout in the UK is going well, thank goodness. And the Government seems finally, to some extent, to be learning the lessons from its previous appalling and ideologically driven failures: as I write, they are seeking to ensure that this ‘last’ lockdown does NOT get lifted prematurely, and that we ‘open’ up in a five-week-rhythm, in a step-wise fashion, so that the effects of each set of opening measures can be evaluated.

But we must never, ever forget why the vaccine rollout in the UK has been so desperately needed: because for a whole year the UK Government profoundly failed to protect us. Nor should we cease from pointing out that they are still making pretty huge – and still ideologically driven – errors: for instance, the way that they have kept most
factories, not to mention construction-schemes such as HS2, operating throughout the pandemic shows clearly where their priorities lie. A key reason why so many have died, and why deaths have disproportionately afflicted working-class people, is this vicious (not to mention self-defeating, in its ludicrous short-termism) insistence on ‘keeping the economy going’.

This long ‘last’ lockdown is partly necessary, with its attendant harmful effects on social life and mental health, because of this choice of economy over society. A choice that is incomprehensible to people from other European countries that chose to be much more serious in their interpretation of what ‘non-essential’ meant, vis-a-vis the economy, and so have not had to be so harsh for so long in reducing ordinary socialising.

I hope that the main body of our timeline will prove useful in the full public inquiry that must come, into how catastrophically the UK botched this pandemic. That inquiry should, in my judgement, on the basis of the plague-year’s timeline that we have put together here, prove career-ending for all those at the epicentre of it in Government: most notably, Boris Johnson, Matt Hancock and Rishi Sunak. They and their colleagues have ‘managed’ a completely unnecessary massacre. They are in effect complicit in the manslaughter of many tens of thousands. Their cheerleaders and apologists in the media too should be gone forever.

In my opinion, the effect should be like that upon the careers of mid-late 1930s appeasers: straightforwardly career-ending, in the midst of a paradigm shift. The parallel is actually reasonably exact. The UK Government have as it were sought to appease the virus. Rather than confronting it.

Let me repeat the point a third time, because it is hard to hear, being outside the ‘Overton window’ of what seemingly ‘makes sense’ within current UK politics, and yet the UK civilian carnage, from the avoidable Covid-catastrophe, has been higher than that from the entire Second World War. The national scandal whose outlines we trace in their terrible detail, in this timeline, should be definitively career-ending for the politicians who have presided over it, just as appeasement was definitively
career-ending for an earlier generation of politicians. Until this thought becomes at least contemplatable in the context of the full public inquiry, which must before long come, then it will not be possible to say that this country has learned adequately from this cataclysm.

Moreover, there is nothing in our politics right now more important than that the lessons from this pandemic be deeply learned, and soon. For the terrifying truth is that ecosystem-destruction and the rising tide of global overheating threatens a genuinely enormous increase in the number of pandemics, this century. It is likely that the uptick in epidemics and pandemics that we have already seen recently (SARS, Zika, Covid, etc) is the early stage of that.7

So I hope that our timeline will be read by the disaster-planners of the future. By aspiring politicians. By thoughtful scientists and civil servants. And by those in the media.

I think our timeline shows very clearly that Covid has been the worst national scandal since appeasement, at least. It turns out that the Government that we have had during the crisis — Brexit-fixated, ideologically prone towards a cod-libertarianism (while simultaneously centralising in a fashion that prevented rapid, smart responses), ideologically biased against state-action (and in favour of very-short-term corporate-friendly action), practising de facto cronyism and corruption, incompetent, opportunistic, hungry for publicity and unserious about follow-through — has, tragically, been probably the least suitable Government in the UK in all modern times for the crisis.

There are certainly going to be more such crises, probably worse ones, because of the rising tide of climate disasters (and Covid is itself a partly climate-caused disaster, it is part of the emerging long eco-emergency8). We are not yet out of the woods of this pandemic, not by a long shot: for example, it is quite possible that the high percentage of vaccine take-up required (about 80%) for safely achieving herd immunity from the ‘Kent variant’ (which the world calls simply the British variant) and for potentially moving thereby towards a zero-covid future will be unachievable, given misguided portions of the population who may refuse the vaccine. If we do not achieve herd immunity, then that
provides another opportunity for future variants to arise, which may reinfect huge numbers of us. (And, of course, reinfection is always possible from countries such as the USA which, because of their dire ‘libertarian’ political culture, are very unlikely to extirpate the virus.)

But even if we get out of these woods, there will be more. Very probably, more (including worse) pandemics, because of our eco-recklessness; and certainly, epochal disasters of other kinds coming from the same basic root-causes. From our extreme perturbation of the global ecosystem, and from our attrition against woods, forests, jungles, and so forth.

The fragility of the UK system (and the US) to corona raises a prospect that should break us all out of our complacency, if we are complacently assuming that future crises, and in particular climate disasters, will certainly affect us in the UK less badly than ‘frontline’ states. Who would have guessed, eighteen months ago, that death rates would be orders of magnitude higher here than in Sierra Leone, Vietnam, and many other ‘developing’ countries? Perhaps what corona has revealed is a fragility not just in our politics and governance but in our very culture, which is less communitarian than in the countries (notably, those in the Far East) which have shown actual leadership in this global crisis. Perhaps our society, despite or even because of its wealth (and complexity), is liable to collapse before these others, which superficially might look much more vulnerable than us.\(^9\)

If we can learn that lesson, or at least consider that possibility, then we will at last be getting someplace.

Like most Brits, I know people who have died from Covid: two old, dear family friends. And one of my closest friends (who is much younger than me) has a crushing, debilitating case of long Covid. The personal is political. It fuels us, with a sense of reality. With passion, energy. Sometimes, with rage.

But in the end the most important thing that Covid has taught us is closer to love than to rage. It has taught us something profound about our *vulnerability*.\(^{10}\) It’s incalculably important that the teaching be absorbed and remembered. For this may be our last big learning-opportunity before the climate decline (and the unleashing of a likely larger
wave of eco-driven pandemics) that our species has set in motion becomes unmanageable.

Any decent memorialisation of the hundred thousand of unnecessary dead in the UK needs to include a profound determination to learn the lessons implicit in our timeline – and to move decisively to stop history ever repeating itself.
**DEATH TOLLS** - The number of people who have died as a result of Covid-19.

**Herd immunity** - The epidemiological strategy of making a large enough proportion of the population immune to a specific disease by exposing them to the disease (either naturally or through vaccination).

**Zero Covid** - The opposite epidemiological strategy to Herd immunity, Zero Covid aims to eliminate all cases of coronavirus from a country or region.

**PPE/Personal Protective Equipment** - Clothing, helmets, goggles, or other equipment designed to protect the wearer's body from injury or infection.

**Care homes** - Often also called nursing homes, these are facilities for the residential care of elderly or disabled people.

**Test and Trace** - A government-funded service in England, established in 2020 to track and help prevent the spread of COVID-19. Its total budget (that will extend into 2022) is £37bn.

**Eat Out to Help Out** - A policy introduced in August 2020 by Chancellor of the Exchequer Rishi Sunak in which the government
subsidised 50% of peoples’ food bills at participating restaurants so long as they dined out, which ran from the 3–31 August 2020.

**Exercise Cygnus** – a three-day simulation exercise carried out by NHS England in October 2016 to estimate the impact of a hypothetical H2N2 influenza pandemic on the United Kingdom.

**SAGE/Scientific Advisory Group for Emergencies** – an advisory body chaired by the United Kingdom's Chief Scientific Advisor, currently Sir Patrick Vallance, that advises the British Government during emergencies.

**Independent SAGE** – an alternative group of scientists, chaired by Sir David King (former Government Chief Scientific Advisor), formed in May 2020 after concerns over possible political interference with, and the transparency of, SAGE.

**Lockdown** – a restriction policy announced by national governments making it illegal for people to leave their homes other than in exceptional circumstances.

**Long Covid** – the name given when symptoms persist for weeks or months after the infection has gone, the most common form being a debilitating ME-style post-viral illness.
Notes

Introduction


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Conclusion: An Extreme National Scandal


3. I know this not only because of what emerged at the time and since about what SAGE and the other official scientific etc. advisory bodies were telling ministers but also because, as documented in the timeline, I myself was raising the alarm by speaking to ministers at the very top of Government about how urgent the need for precautionary action was. But it turns out I wasted my breath. And then many started to breathe their last, as a result of the failure to listen.

4. Boris Johnson’s Greenwich speech, a key milestone in our timeline early in 2020, may well be a defining moment in what will surely be a crushing judgement that history makes against the criminally negligent rulers who shepherded us into mass death.

5. All of these government failures are set out in Jonathan Calvert and George Arbuthnott, Failures of State: The Inside Story of Britain’s Battle with Coronavirus, Mudlark, 2021.

6. Some may be surprised to see Sunak’s name here. But the truth is that Rishi Sunak has played a particularly nefarious role. He is widely thought to have had a relatively ‘good’ pandemic, in contrast to the other key players. But he too is an accomplice to mass manslaughter. Moreover, as Aditya Chakrabortty highlights in a 17 February 2021 Guardian article Sunak has in fact played a key role in opposing lockdown and in
‘leading’ on creating Eat Out to Help Out, which, in the way it was done, predictably helped lead to the second wave — see Aditya Chakrabortty, ‘The budget is a dangerous moment for an ambitious chancellor’, *Guardian*, 17 February 2021, https://www.theguardian.com/commentisfree/2021/feb/17/budget-chancellor-rishi-sunak-covid-britain-normal# [accessed 8 April 2021].


9. Indian author Amitav Ghosh made this argument brilliantly, toward the end of this conversation Rupert had with him as part of the 2021 UEA Philosophy Public Lecture Series: ‘Silver Linings from the Ecological Emergency’, 23 February 2021: https://www.youtube.com/watch?v=4FaP3b0zoKg [accessed 8 April 2021].

First and foremost, we would like to thank Joanna Booth – both for suggesting we create an eBook out of the timeline and for doing all of the difficult editing work to make it possible. It has been a huge job and Joanna has calmly and professionally dealt with all of our emails and questions despite the very tight schedule we have been working to.

Thanks also to Joe Eastoe for proofing the text, and for creating the glossary of key words and terms at the back of the book.

Ian would like to thank Lindesay, who has put up with an increasingly large pile of newspapers in the flat over the past year, and far too many conversations about media reports on the pandemic.

Rupert would like to thank Andy Towler, conversations with whom during the pandemic have provided vital perspective, information and sounding-board. Andy also read the entire manuscript at an early stage in the production process and provided feedback for which we are most grateful.

Finally, thanks to those who kindly provided endorsements quotes for the book – Michael Rosen, Peter Tatchell, Dr Nafeez Ahmed, Professor John Ashton and Professor Molly Scott Cato, as well as Andy Towler.