



COVID-19

UK Political Analysis

By Tim Hames, Senior Adviser | 19th June 2020



Social Distance. The bond between ministers and scientists is fraying.

The apparent popularity of the reopening of non-essential retail this week has raised expectations of a further shift towards ‘normality’ at the beginning of July, when pubs and restaurants are expected to return to the scene - albeit with social distancing and a strict limit on the number of personal contacts that an individual can interact with. It has also exposed the extent to which ministers and scientists may well find that their bond is fraying. Much of the Conservative Party manifestly loathes the lockdown, is inclined to believe that it is either excessive or introduced too late on the basis of dubious advice, and wants to liberalise the lockdown as much as it can in part by ending the so-called ‘two metre rule’ and replacing it with a ‘one metre rule’ instead. The indications, though, are that many scientific experts who have been part of the SAGE system disagree and are far more concerned about the prospect of a second spike in the virus later this year than they are about the short- and medium-term condition of the hospitality industry. There is a serious possibility of a public split, including prominent resignations, over this matter.

The wider reasons for mounting tensions within Whitehall can be found in the minutes of the first 35 meetings of the Scientific Advisory Group for Emergencies, which were released in late May and examined in detail for past and future policy in this Analysis. They reinforce the conclusion that an open divide on next steps is a serious possibility.

EXECUTIVE SUMMARY

- The SAGE minutes suggest a structure which is more complicated and closed than appreciated in the rest of Whitehall, Westminster or within the media.
- There was a consistent pattern of rejecting pre-emptive steps early in the crisis.
- The role of the behavioural sub-group (SPI-B) appears to be crucial in this.
- Until late April, very few SAGE meetings had notable numbers of officials or outside observers in attendance. There was little chance to challenge advice.
- There was a fundamental shift in approach between March 13 and March 16. Suppression went from being explicitly rejected to being emphatically embraced.
- Fear of a second spike has since moved SAGE into a hawkish stance on lockdown.
- The conflict between public health concerns and economic unease is sharpening.
- All sides are aware that a public inquiry into the handling of the crisis is close to inevitable and that creates incentives for positioning and posturing on policy.

The relatively rapid release of the minutes of the first 35 meetings of SAGE on COVID-19 is revealing. They allow a light to be shone on what policies were adopted and why.

The structure of SAGE.

SAGE is a surprising institution in many respects. First, it is not a standing committee in Whitehall. It convenes infrequently in light of events. It has been called into action once in 2014 (because of the Ebola outbreak), once in 2015 (triggered by the severe Nepal earthquake) and once in 2016 (in response to the Zika outbreak). The sole example of it meeting on a domestic matter occurred in the form of a short teleconference held on August 6th, 2019 over a potential breach of the Toddbrook Reservoir and at what point it should be considered safe for local residents to be allowed to return to their properties.

So when it held its first meeting on January 22nd in response to events in Wuhan, China it did not have much in the way of institutional experience. It took its lead from another entity, the New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG). This is a standing committee, not least because of the annual threat of an influenza outbreak. By the time of its second meeting (January 28th), SAGE had created a formal sub-group:

the Scientific Pandemic Influenza Group on Modelling (SPI-M). At its seventh meeting (on February 13th) a further new sub-group, namely the Independent Scientific Pandemic Influenza Group on Behaviours (SPI-B), was established. This structure is supplemented by several more innovations including the Public Health England Serology Working Group, the COVID-19 Clinical Information Network, an Environmental Working Group, the Childrens' Task and Finish Working Group and the Hospital Onset COVID-19 Working Group. This is quite a complicated arrangement and there were many examples of individuals sitting on multiple committees as well as the core body – SAGE – that assessed their advice and then made recommendations to ministers and officials. If the public impression about SAGE is that it is a single and simple committee, it is inaccurate.

The character of SAGE.

The SAGE apparatus is not merely improvised and complicated, but at the same time it is both open and closed. It is clearly very open within the scientific community itself in that the memberships of the group itself, the sub-groups and working groups are strikingly large. The theoretical membership of SAGE includes up to 57 individuals. NERVTAG has a membership of 15 people. SPI-M consists of 45 persons. SPI-B consists of 38 individuals. The PHE Serology Working Group involves 17 people. The COVID-19 Clinical Information contains 9 members. The Environmental Working Group has 14 people. The Childrens Task and Finish Working Group enjoys 36 participants. The Hospital Onset COVID-19 Working Group consists of 20 people. While this approach may be admirably inclusive (at least within the academic world), some of the numbers here veer towards the unwieldy.

In other respects, whether by accident or by design, SAGE is extremely closed. Until late April (well into lockdown), it was highly unusual for more than two or three outside officials or observers to attend SAGE itself and it appears there was no external aspect to NERVTAG, SPI-M and SPI-B or the various new working groups. This meant that the chance for an external analysis of either the extent of scientific uncertainty or any variety of viewpoint on the issues concerned was very limited, indeed virtually non-existent.

There were meetings of SAGE at crucial stages in the crisis where there were no outside figures whatsoever. The norm was for there to be 15-25 scientific experts within the conversation and one or two outside officials. Dominic Cummings turned up for the first time for one meeting on March 5th (the 13th such discussion) but not again until April 14th (the 25th meeting). At the very next meeting on April 16th, there were no less than 32 scientific experts in attendance and zero outside officials or observers. The one after that (on April 21st) had a ratio of 36-1 between the scientists and the officials and the next (on April 25th) saw a 33-1 split. As implied here, the broad pattern until the very end of April was that the number of scientists in the deliberations was increasing while the number of outside observers and officials was, if anything, rather low and declining.

One does not need to be an eminent psychologist to work out the consequence of this. Any outside observer in these circumstances would have concluded that their sole role was to listen, not to ask questions; let alone challenge the recommendations emerging. Policy was not merely, as ministers were fond of stating at the time, “led by the science”; it was driven by the scientists to the extent that it was all but controlled by the scientists.

Deference to SAGE is entirely understandable. It was, though, almost certainly reinforced by an atypical feature of British public and political life: the absence of individuals with a background in science in the corridors of power. The de facto COVID-19 War Cabinet has consisted of Boris Johnson (Balliol College, Oxford, BA in Classics), Dominic Raab (Lady Margaret Hall, Oxford, BA in Law), Rishi Sunak (Lincoln College, Oxford, BA in PPE – Philosophy, Politics and Economics, not Personal Protective Equipment), Michael Gove (Lady Margaret Hall, Oxford, BA in English) and Matt Hancock (Exeter College, Oxford, BA in PPE). Sir Mark Sedwill, the Cabinet Secretary and Head of the Civil Service, offers a little diversity in that his undergraduate degree, while in Economics, was at St Andrews University before he moved to St Edmund Hall, Oxford for an M.Phil in Economics. Sir Chris Wormald, the Permanent Secretary at the Department for Health and Social Care, restores the normal order of UK life (St John’s College, Oxford, BA in Modern History). The infamous Mr Cummings may be an evangelist for science now, but in other regards (Exeter College, Oxford, BA in Ancient and Modern History), he fits the Whitehall norm.

Before anyone accuses me of hypocrisy on this score, I will concede that I (Oriel College, Oxford, BA in PPE; Nuffield College, Oxford, D.Phil in Politics) would have no more clue what an epidemiologist was banging on about at a SAGE meeting than the rest of them.

Nor is the Labour Party in a position to preach on this, as their equivalent of the five in the unofficial War Cabinet were educated in Law (Sir Keir Starmer), Social Work (Angela Rayner) PPE (Anneliese Dodds), Politics and Philosophy (John Ashworth) and PPE (Rachel Reeves). Ed Davey, the Acting Leader of the Liberal Democrats (Jesus College, Oxford, BA in PPE) does not have a leg to stand on either. Of the Cabinet, precisely two figures have a scientific background at degree level. They are Alok Sharma, the Secretary of State for Business, Energy and Industrial Strategy, who has a BA in Applied Physics with Electronics from the University of Salford (but whom, upon departure, switched to being a chartered accountant) and Therese Coffey, the Secretary of State for Work and Pensions, who has not only a BA but a PhD in Chemistry from University College, London (but whom once again thereafter became a chartered management accountant). The first of this duo is in the second rank of Cabinet members when it comes to the coronavirus crisis, and the second is completely marginal (and widely tipped to be dismissed at the next reshuffle). Policy was “led by the science” because our leadership have little scientific knowledge.

The evolution of SAGE advice and recommendations to ministers and officials.

There is a distinct evolution in the nature of the advice and recommendations offered by SAGE to ministers and officials. Back in late January, the objective was to contain the virus outbreak in China. Despite that, NERVTAG did not advise port of entry screening from China or the use of screening questionnaires, pilot declarations or requiring proof of exit screening at Wuhan. A public health information campaign was endorsed instead. SAGE accepted this stance. The focus was on identifying those who had been in China and telling them to isolate themselves. At the second meeting, a ban on flights from China was raised but seen as “draconian”. Even by the fourth meeting (February 4th), the view was that “Sustained human-to-human transmission outside China cannot be ruled out, but there is as yet no definitive evidence of a substantial outbreak/epidemic elsewhere”. Allied to this, “SAGE agreed that, based on current evidence, domestic

measures such as shutting down public transport or restricting public gatherings would probably be ineffective in creating any meaning delay in the spread of Wuhan-Covid.”

Policy continued to move only incrementally thereafter. The list of Asian countries from which arriving travellers should self-isolate was increased beyond China (February 6th). Travel restrictions within the UK or preventing mass gatherings were contemplated, but not considered effective. The same was true for school closures. An attempt to alert the public to the risk of an epidemic was discarded on the basis of SPI-B’s declaration that “all available evidence suggests scepticism and general inaction dominate” sentiment. On February 25th, “SAGE discussed a paper modelling four non-pharmaceutical interventions: university and school closures, home isolation, household quarantine and social distancing, including uses of intervention in combination” but determined that all of these measures would require “implementation for a significant duration in order to be effective”, which the behaviouralists clearly did not think would happen in practice.

Two days later, in a stark switch, the planning assumption had become that “80% of the UK population may become infected, with an overall 1% fatality rate in those affected.” This sounds really rather dramatic, but SAGE still concluded that “Mitigations can be expected to change the shape of the epidemic curve or the timing of a first or second peak, but they are not likely to reduce the overall number of infections.” By early March there is something of a shift in strategy, as SAGE affirms that “within 1 to 2 weeks” there should be individual home isolation and whole family isolation for 14 days in the event of symptoms appearing. In addition, it was suggested, “roughly two weeks later” there should be mandatory social isolation for those aged 65 and over or with underlying medical conditions.” This was, however, coupled with the downbeat message (from SPI-B one assumes) that the modelling undertaken “assumed considerably less than total public compliance for these measures (eg. 50% compliance for household quarantine)”. While the epidemiologists were inclined towards more actions, the behaviouralists’ view prevailed and ministers and officials were told that “preventing all social interaction in public spaces, including restaurants and bars, would have an effect but be very difficult to implement”. Policy was steered away from the lockdown being pioneered in Italy.

As it continued to be until an absolutely massive change in thinking in mid-March. SAGE was by then nervous that it had underestimated the number of cases and was concerned about the capacity of the NHS to cope with the wave that might be about to strike it. Suppression had surfaced as an alternative approach and been adopted internationally. Yet, in an emphatic statement that option was rejected as inappropriate. At a meeting that involved 23 scientific experts and a single outside figure, SAGE forcefully asserted:

“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 underway, will experience a second peak once measures are relaxed”.

The minutes end with the decision that at the next meeting (March 17th) SAGE would “discuss the ramifications of a second epidemic peak” and what to do to prevent it.

Except that it never did. The meeting was held on March 16th, not 17th, and a shift to suppression, not a deliberation of what to do about a second peak, was the subject. A set of 23 scientific experts and two outside observers and officials then pronounced that:

“On the basis of accumulating data, including on NHS critical care capacity, the advice from SAGE has changed regarding the speed of implementation of additional interventions.”

That was, to put it mildly, something of an understatement. What had changed between March 13th and March 16th? The publication of a modelling paper by the Imperial College, London team which set out that if no further measures were taken there would be 500,000 deaths in the UK and that the more modest mitigation measures then on the table would still leave 250,000 fatalities. Suppression was now the only realistic option.

That team was led by Professor Neil Ferguson of Imperial College, who had participated in every SAGE meeting until that point (as he would until early May) including the one three days earlier in which SAGE had “unanimously” (so presumably including him) rejected suppression because of the “near certainty” that it would lead to a second peak. The UK was now heading down the same path as Italy and Spain but even then, at the behest of the behaviouralists, SAGE was cautious about being too stringent. On March

18th, it argued that “Transport measures such as restricting public transport, taxis and private hire facilities would have minimal impact on reducing transmission in London.” On March 23rd, the night which would see the Prime Minister declaring a lockdown, SAGE “on the advice of SPI-M, reconfirmed that the effect of closing the borders would have a negligible effect on spread”. Thus, in the UK, airports stayed open in lockdown. On March 29th SAGE, apparently keen to have feet in both the pro- and anti-suppression camps, prophesied that: “there will be a second peak when measures are relaxed.”

The SAGE minutes since then have largely been more functional. They capture the spirit of concern about the capacity of the NHS, disturbing evidence of nasocomical transition inside hospitals, the sudden emergence of care homes as an epidemic hot-house in themselves, the urgent need to test NHS staff as a priority and then roll testing out from there, the viability or not of tracking and tracing in various forms, a seemingly endless discussion as to what to say about face coverings. There is a hardening of view about the risk of “imported cases” as domestic incidents of COVID-19 started to fall by late April. Much of this is the relatively mundane material of tactics rather than one of strategy.

With a single and immensely significant exception. Unless matters have changed in the month since the last set of minutes which are in the public domain, anxiety within SAGE about a second peak when the lockdown restrictions are lifted is still there and intense. It is expressed, in slightly coded form possibly, with clarity in the minutes from April 30th.

“SAGE advised that, in addition to the importance of developing a vaccine for COVID-19, a clear UK plan is required for the seasonal flu vaccine for winter 2020-2021, including consideration of whether to vaccinate the entire UK population.”

Why would you want to vaccinate the entire British public against flu? To avoid a winter public health war on two fronts, coronavirus and influenza, which have similarities in symptoms and where the risk of personal misdiagnosis between them is extremely high. The experts remain unconvinced that even a highly effective suppression effort in the UK (with much greater civil compliance than SPI-B ever anticipated) will be enough to avoid some sort of second peak which risks pushing the reproduction number above 1. Events in Beijing over the past few days may well lead them to stick firmly with that analysis.

Conclusion

These will be very difficult weeks to be a minister or an official. They deserve rather more sympathy than they are likely to receive. The legacy of their dealings with SAGE is a bruising one. An overwhelmingly arts-educated elite operates on the instinct that science is a more certain proposition than it is. It deferred to SAGE in large part because it did not comprehend what a complicated structure had been created by and for SAGE and it did not have the cultural confidence to challenge the recommendations that emerged. It was told at the very start that an epidemic in the UK was unlikely and that prohibiting travel to and from China would be ineffective (in fairness, it may have been: it today seems that COVID-19 really took hold in the UK via Italy). Once the virus came in, more drastic measures were floated within SAGE, but ministers and officials were advised against them. This was largely due to the behaviouralist lobby inside SAGE (SPI-B) who, in retrospect, misjudged how the public would respond to the very drastic restrictions that would be imposed by ministers. On March 13th SAGE was unambiguous in its unanimity against suppression. By March 16th it had largely switched sides primarily because of a modelling paper that had been written by one of its own most prominent members who does not appear to have kept his colleagues in the loop as to the bombshell about to hit them; even then (probably because the behaviourists) it sought a softer lockdown. The Government has since then scrambled over PPE, on testing and now tracking and tracing.

It is reasonable to deduce that SAGE is still urging caution over how to lift the lockdown. There is plenty of data to suggest that there is a meaningful difference in risk between a society organised around social distancing at 1 metre, 1.5 metres and 2 metres. There is also a major distinction between smaller and larger numbers of contact points that any individual can maintain. Yet there are incredible economic and social consequences in these decisions. How big is the danger of a serious second peak? A classicist will decide.

There is also a final factor at work as of today that was not there at the onset of the virus crisis. It is now universally assumed in Whitehall and Westminster that there will be a major public inquiry, probably led by a senior judge, held once the UK situation is more stable. This will be a momentous event with enormous implications for individual and institutional reputations. It is very likely that awareness of this will influence decisions. It will act as an incentive for personal and political positioning, even posturing, and that is

not only true for ministers but for senior officials and outside advisers as well. If matters become more challenging in the weeks ahead – and the conflict between public health and economic recovery sharpens – then a distinct form of social distancing may well be witnessed between those who until recently were entirely content to be seen standing shoulder-to-shoulder with each other. That distance will be a lot more than two metres.

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