



# COVID-19

## UK Political Analysis

By Tim Hames, Senior Adviser | 26<sup>th</sup> February 2021



### Take Two. A quite different strategy for lifting the lockdown this time.

He said that he intended to be cautious. He clearly meant it. With the exception of the willingness to see the vast bulk of schoolchildren return to their classrooms on or about March 8th – a decision that will provide some serious logistical challenges – the Prime Minister has opted for an extremely careful approach to lifting the lockdown. This has been met with some discontent within the ranks of his own parliamentary party but the balance of available opinion poll evidence suggests that a majority of the public is willing to continue to be extremely patient. The young are more restless than the old, but for now ministers and officials are confident that compliance will be sufficiently high.

At one level, the events of this week feel much like that witnessed during the Spring of last year when after the better part of six weeks of a national lockdown, the Government published a roadmap in early May which set out how restrictions would be eased over the next two months. The order of the new lifting of the lockdown is indeed really very similar to then, with schools assuming priority, then non-essential retail, then most of the hospitality and leisure sector and finally international travel. There are, though, important if subtle differences between then and now both in terms of political calculation and policy calibration. Partly this is the harsh consequence of experience.

The first lockdown was followed by an easing that initially appeared to be faring well but which soon was struck by a second wave of the virus when it surged in mid-September. This was followed by a second lockdown in England which once lifted was felled by a new virus strain. The decisions set out on Monday are aimed to avoid history repeating itself.

## EXECUTIVE SUMMARY

- There are subtle but significant differences between the strategy that has been adopted in England this time and the effort to ease restrictions last summer.
- The most potentially challenging measure is the initial one, attempting to reopen schools with only very minor phasing of that return. There is the risk that this will place upward pressure on the R number and possibly hospital admissions too.
- The debate between the “health first” and “economy first” camps at the heart of Whitehall is much more than muted than last year. Fear of a fourth lockdown has led those once inclined to move faster to restore the economy to desist.
- The biggest victory for the scientific advisers in the internal dialogue has been ministerial agreement to move the period before measures to lift restrictions are considered from the three weeks seen last year to five weeks in 2021. The time needed to identify new mutant strains of the virus has been decisive here.
- While the four component nations of the UK will lift the lockdown in a broadly similar manner, there are and will be more differences in approach than in 2020.
- The four bespoke reviews which the Prime Minister has announced that he has commissioned offer a strong indication of what sort of measures may need to be maintained and initiatives introduced even after the lockdown officially ends.

The Government’s latest plan for dealing with the coronavirus crisis is its most detailed yet and has been heavily influenced by the success of the first vaccination roll-out and early, encouraging, evidence that the vaccines provide considerable protection to most of those injected and reduce (but not eliminate) the transmission factor as well.

Despite insisting that policy would be driven by “data” not “dates”, a timetable which involves dates has emerged. Not to have offered the slightest hint at all about when life might return to something akin to a new normal was considered an unrealistic approach given the need to retain public confidence and support. This has come with the caveat

that the dates cited are the earliest moments when various liberalisations might occur, not a set of targets as such, and are conditional on four overarching factors, namely:

- The coronavirus vaccine programme continues to go to plan.
- Vaccines are sufficiently reducing the number of people dying with the virus or needing hospital treatment.
- Infection rates do not risk a surge in hospital admissions.
- New coronavirus variants do not fundamentally change the risk of lifting restrictions.

These conditions do not mean that the number of cases has to continue to fall or that lifting the lockdown would be deferred if there was a temporary increase in them. What matters is the link between infection and serious illness, as seen in hospital admissions.

## **The first step – restoring schools – may prove the most challenging.**

There has been an intense debate within Whitehall about how and when to allow all primary school and secondary school children back into their classrooms. Ministers have opted for the relatively bold step of attempting to return the vast majority of them in the week starting March 8th (subject to testing facilities being available) in contrast to the more phased approach being preferred in Scotland, Wales and Northern Ireland.

This decision has been made knowing that it involves complexity and challenges.

The first is the sheer numbers involved. There will be a sharp increase in contact points for several million children (obviously) but also millions of adults (notably those with primary school children) who will collect and meet their children from those schools and a rise in the numbers returning to a place of work once they are liberated from home schooling. The risk of transmission lies less in the classroom itself (which can be rendered COVID-secure) but in travel to and from school and an unavoidable element of close contact in the playground setting and in the conduct of school sports.

The second lies in where we are in the vaccination schedule. By March 8th all those in the top priority groups will have had an initial injection and three weeks will have passed for them to build up the initial benefit of the vaccine. There will still be a minority who either declined a vaccine or who have yet to discover that it will not work for them. They will remain high risk individuals. Very few of those in the next five groups will by March 8th have had their first injection and had 21 days elapse for it to take its full effect. This matters because while it is true that deaths from the coronavirus have been very heavily concentrated on those with pre-existing medical conditions and those over the age of 80, about half of all hospital admissions since late December have been for those aged less than 70 (overwhelmingly those between 50 and 70 years old). Added to which, none of the children returning to school will have been vaccinated and, particularly for adults with primary school children, most of their parents are not due a vaccine for months.

The safeguard here is meant to be regular testing which if it worked would be valuable. The current plan is for three tests to be performed in schools for all children in the first two weeks of their return with parents provided with the means of conducting tests twice a week at home thereafter. All of these would be the lateral flow device tests.

There is plenty of room for matters to go astray in this arrangement. The tests held in school during the first two weeks back are likely to be largely effective. The problems come when home testing is the norm. Will all parents actually conduct the tests at all? Will they do so with enough efficiency as the tests can be misadministered? If the result is positive, will the adult, child and rest of the household all self-isolate even if that involves considerable social and economic inconvenience? None of this can be policed.

An element of upward pressure on the R number and possibly hospital admissions thus looks close to inevitable. The question is on what scale. If it emerges, then it is hoped that the school Easter holiday break will act as a firewall, pushing numbers back down again. It would be no surprise if ministers and officials were quietly working on a Plan B which saw testing continuing at school rather than the home after the Easter vacation. That plus the intensification of vaccination should defuse the risk by the end of April.

## **The argument between the “health first” and “economy first” lobbies has muted.**

There is plenty of lively argument within the Conservative parliamentary party as to the relative merits of a “health first” versus an “economy first” approach to lifting lockdown. There is rather more consensus at the heart of the government. The Prime Minister has shifted decisively towards the “health” camp having spent the Autumn seeking to split the difference between factions. Matt Hancock, the Health and Social Care Secretary, and Michael Gove, Chancellor of the Duchy of Lancaster, having long been the two figures most in favour of retaining restrictions for as long as necessary. The Chancellor and the Treasury more generally have come to accept that it would be better to wait for longer and offer business more certainty that the reopened economy will actually hold firm this time round than move a few weeks earlier and risk another stop-start episode. In Spring 2020, Dominic Raab, as First Secretary of State, was a pivotal figure in policy decisions not least because he became the de facto Acting Prime Minister when Boris Johnson fell very ill due to COVID-19 and needed to recuperate for some weeks after. Back then, Mr Raab sympathised with the “economy first” contingent. This time round, he has largely returned to his duties as Foreign Secretary and is a lesser actor on COVID. The collective balance of sentiment at the core of the government has thus changed.

All this is likely to stay the case even if the vaccination drive occurs faster than expected and the impact on hospital admissions and deaths is similar to that of last summer or rather quicker than presently anticipated. Those hoping or thinking that the latest plan disguises a secret intention to lift the lockdown far earlier are likely to be disappointed. The fear – even if it is a slight chance – of a fourth lockdown is too powerful a force.

## **The shift to a five week gap between restrictions being assessed is important.**

The relationship between the politicians and the scientists advising them has had some choppy moments in the duration of this crisis. Much of this has centred on the length of time needed to assess the impact of previous decisions on easing restrictions taken and whether or not to move on from there to the next stage of liberalisation. The past norm

has been that of a three week gap between considerations. This was never popular with many SAGE members who felt that at least one additional week would be very desirable.

They have clearly won that argument. The move from three weeks to five weeks is an important concession to them. It reinforces caution. The move has been accepted by the Prime Minister because it takes a longer period of time to identify and then assess how to deal with any emerging mutant strains of the virus which might be more resistant to the vaccines in the field than either the original virus or the now dominant Kent strain. As mutation is by far the biggest threat to the vaccine-based strategy (just imagine having to start the entire vaccination process from scratch), more time to check for it is vital.

## **There will be more differences between the four UK nations in this lifting exercise.**

Public health is now very largely devolved in the UK but that did not become politically apparent in the lifting of the lockdown last summer. Policy was similar in content but announced separately. This consistency of approach eroded in the last quarter of 2020 and while there has been some return to convergence over the past two months, there are, and will almost certainly continue to be, differences in matters of detail even though the scientific and medical counsel being received is almost identical. For example, it appears that Boris Johnson has abandoned returning to regional tiers (except with the option of highly localised lockdown-style restrictions if an outbreak is detected) while Nicola Sturgeon remains inclined to treat different parts of Scotland with varied rules.

There is an element of politics in all this. Having discovered the degree of autonomy that they had in the midst of such an enormous event, the temptation to push the boundaries of the devolution settlement is there. That has been most evident in the at times open disputes between the Prime Minister and the First Minister of Scotland. It is lubricated by the fact that there are elections for the Scottish Parliament, Welsh Parliament and the Northern Ireland Assembly in May. The SNP looks set to win an outright majority again (as it did in 2011) on an explicit call for another independence referendum, an ambition that post-Brexit and post-COVID is likely to become the most explosive question in UK politics. The Labour Party, which has been in retreat from its historical dominance in

Wales, is striving to avoid serious losses which would force it to ally with Plaid Cymru to remain in office. There are likely to be interesting shifts in Northern Ireland as well. The fate of the Union is one which will be fundamental to the remainder of this decade.

## **There are signs of what the longer-term post-COVID policy changes will probably be.**

This Winter is not yet over. But there are clues in the document released this week as to what ministers and officials think next Winter might be like and how to prepare for it. As set out in the FTI Analysis last week, even with vaccination on a substantial scale, there will be enough people left who could catch the virus to constitute a serious difficulty.

The first hint is in the announcement that the aim is now to have offered every adult in England a first vaccination by July 31st and not September as previously stated. If we assume that there continues to be 12 weeks between injections then there should be universal adult coverage by October 31st, or before the onset of Winter proper. This also opens the door to vaccinating some (older) children this year too if clinical trials can demonstrate the degree of safety required at a speed to suit this extra vaccination.

The second suggestion comes with a hardening of the language around a further drive on vaccination before the harshest months of Winter, almost certainly in combination with influenza vaccination. In the space of a few weeks revaccination has moved from being a possibility to a probability, and would be a certainty if the worst mutant viruses arrive.

The third is in the set of four reviews which the Prime Minister declared that he had set up as part of the overall policy package. One of these is into “COVID status certification” or a form of proof of vaccination for domestic purposes. This is controversial territory but there are real doubts as to how the hospitality and leisure sector can operate securely in the depths of Winter without it. The second concerns social distancing which will cover a range of issues such as whether either a one metre or two metre rule should be retained in certain circumstances even after the main raft of restrictions has been withdrawn, if face masks should be mandatory in certain public places (such as on mass transit) and at what point, if any, it would be wise to abandon the “work from home if you can” dictum. There is another review focused on large events, especially those conducted indoors. The

final one involves international travel and what the credible options are involving both a “vaccine passport” and enhanced testing. They all involve major changes in the way that we live our lives compared with before. They will persist after lockdown is formally over.

**Tim Hames**

Senior Adviser

Strategic Communications

Tim.Hames@FTIConsulting.com



About FTI

FTI Consulting is an independent global business advisory firm dedicated to helping organisations manage change, mitigate risk and resolve disputes: financial, legal, operational, political & regulatory, reputational and transactional. FTI Consulting professionals, located in all major business centres throughout the world, work closely with clients to anticipate, illuminate and overcome complex business challenges and opportunities.

For more information, visit [www.fticonsulting.com](http://www.fticonsulting.com) and connect with us on Twitter (@FTIConsulting), Facebook and LinkedIn.

The views expressed in this article are those of the author(s) and not necessarily the views of FTI Consulting, its management, its subsidiaries, its affiliates, or its other professionals.

©2020 FTI Consulting, Inc. All rights reserved. [www.fticonsulting.com](http://www.fticonsulting.com)