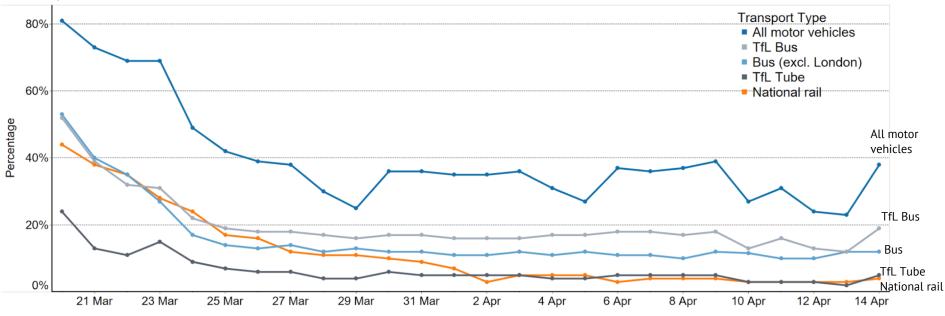


#### Transport use change

Transport use is down by more than 60% for all transport types since February. Rail and Tube use are down by 95%. Tuesday 14 April data shows a return to the pattern of travel seen before the Easter weekend. In particular, Tuesday 14 April data shows a return to the level of road traffic reduction seen on weekdays.

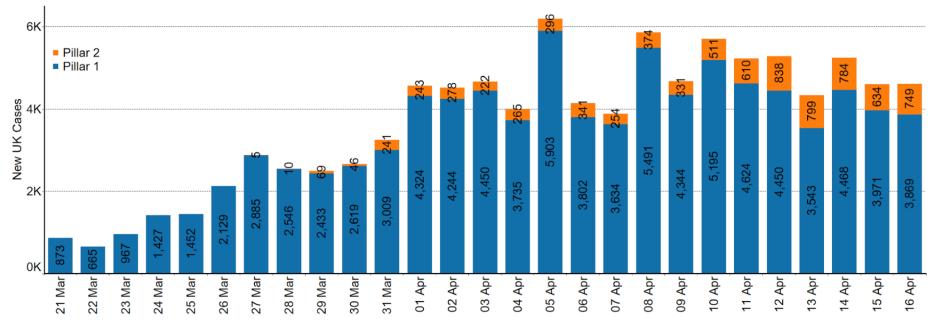


Source: Department for Transport. Bus (excl. London) data has been adjusted to compare against typical usage for the Easter break, whereas all other data sources have not.



### **New UK Cases**

Cases are reported when lab tests are completed. This may be a few days after initial testing. Testing capacity is increasing, which is resulting in a greater number of observed cases (Confidence: there are likely many more cases than currently recorded here). Pillar 1: NHS swab testing for those with a medical need and the most critical key workers. Pillar 2: Commercial-swab testing for critical key workers in the NHS, social care and other sectors.

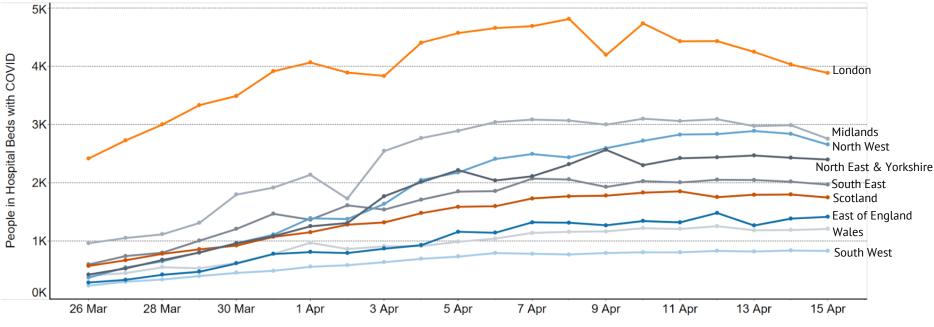


Source: Department of Health and Social Care.



### People in Hospital Beds with COVID-19 (Great Britain)

Over the last 24 hours, the number of people in hospital with confirmed COVID-19 fell by 3% across Great Britain. Nine hospitals, including London Nightingale did not return data for April 9, resulting in a misrepresented drop in hospitalisations. (Confidence: a new categorisation has been added to an existing high quality administrative data set).

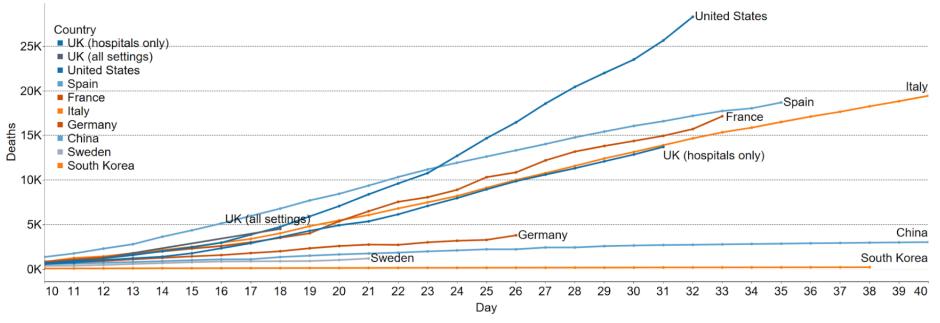


Source: NHSE, Welsh Gov., Scotland Gov.



#### **Global Death Comparison**

Country data is aligned by stage of the outbreak. Day 0 equals the first day 50 deaths were reported.



Source: ONS, NRS, NISRA, Public Health England, Johns Hopkins University. Daily reporting of UK deaths is for hospitals only and may lag by up to several days. ONS, NRS and NISRA reporting of UK deaths for all settings is based on information from death certificates, and therefore lags daily hospital data. International reporting procedures and lags are unclear, so may not be comparing like-for-like. Deaths are reasonably accurate, but international reporting procedures and lags are unclear, so may not be comparing like-for-like.