**UK government Covid19 press conference 27 April 2020**

**Jeremy Hoad**

(usual caveats apply to this live transcript / commentary)

(press conference now preceded by advice video with trancey dance music)

**Attending**

Matt Hancock, Health Secretary

Prof Chris Whitty, Chief Medical Officer for England
Prof Stephen Powis, NHS England

**Figures**

719,910 tested (37,024 since yesterday)

157,149 positive

15,051 hospitalised

21,092 dead

360 increase in dead over last 24 hours

(this means the govt needs an extra 63,000 tests every day within the next three days to reach its target of 100k tests a day by the end of April, about 270% more than it is currently achieving)

**Hancock**

Today’s briefing new format

1st question from member of the public, selected by independent polling organisation

15k qtns submitted – submit qtns at gov.uk/ask

Working through action plan at core to protect life & NHS, slow spread, flatten curve, provide capacity

We must never lose sight of the human cost of coronavirus

We must stand firm in our resolve

82 NHS colleagues and 16 in social care dead

I feel deep sense of personal duty that we care for their loved ones

Life assurance scheme set up today

£60k payment to families of dead frontline workers in NHS and social care

Looking at other professions who also do not have access to such schemes

Crisis has shown the values of this ctry so much

Pay tribute to British public

Every single hour of every single day NHS has had capacity to. Treat. Pple

3,190 spare critical care beds

42% of oxygen supplied beds in NHS lie empty

Programme of NHS Nightingale hospitals

8th opened today

(didn’t say where this was)

Monument to nation’s ability to get things done when it matters

Thank NHS, Armed Forces and companies that made this possible

Former staff and clinicians re-enlisted and students enlisted early

Tribute to staff who have worked differently and flexible

Advance amongst challenges we must not lose them

Fewer pple are coming to NHS when they need to

221k A&E attendances compared to 450k same time last year

In some cases pple are not coming forward for critical things that matter

NHS is open – Help us to help you

Come forward and seek help as you always would, use NHS responsibly

As hospitalisations fall from tomorrow other NHS services will be restored starting with cancer care

£13.4bn NHS debt written off

I want to ensure NHS is always there and puts us in stronger position for the future

(nice aim, a shame it comes after a decade of Conservative government real terms cuts to NHS)

Resolve to see this through

Stay at home etc.

**Whitty**

Slide (new slide)

5 tests for adjusting the lockdown

(Ministers obviously decided this was easier rather than them running through the five tests in their intro every day)

Slide

Transport – broadly flat

Slide

Apple data – evidence great maj of pple continuing to honour lockdown

Slide

New cases – tests increasing but trend flat or going down

Slide

Hospitalisations – clear trends down

Slide

Critical care beds – absolute and relative terms gradually trending down very slowly as expected

Slide

Deaths – artificial drop. After weekend but uptick will come as we catch up but trend overall (new average line added) is gradual decline but not past the peak

Slide

Global comparisons – need to. Not overinterpret these as diff measures

**Questions**

Qtn from Lyn in Skipton

Missing my grandchildren can we hug our closest family after 5 steps are met and lockdown is eased?

Whitty – ability to interact with families is essential

Depends on specific circumstances eg significant medical problem or older or in vulnerable group might be sensible to not. Put herself at risk

Imp to get together with families nevertheless vulnerable pple shld continue to be protected

Hancock – understand impact of not being able to hug closest family, affects all of us too

Significant economic impacts

Direct emotional bonds, natural to want to hug members of family

Best thing to follow rules

Powis – we all know how hard this is, this is really tough, my own mother wonders when she will see me and her grandchildren again

Comply with guidance until time is right

Hancock – shown qtns from public can be just as imp and difficult to answer as from journalists who are trained to ask them

(oh dear, that was probably unintentionally patronising)

Testing needed for up to 10m pple and families – various reports of ease of getting tests, will you hit 100k target?

Hancock – broadly on track, yes, we will hit the target, making it easier to get tests delivered over 5k home tests yesterday

Want to make it as easy as poss, more drive through tests, broadly where we expected to be, continuing to ramp up

Need to escalate testing significantly – where in a few months time?

Hancock – really imp, I set goal because testing is imp part of how we keep the virus down, want testing to continue to increase, PM set goal of 250k some time ago esp when antibody tests come onstream, we’ll keep on increasing

We’ve already passed testing rate in S Korea and approaching German levels

Need to take clinical advice, putting more into care homes and testing NHS staff when they’re asymptomatic, survey testing in field right now.

Imp qtn as testing critical part of controlling virus

(this raises the question as to why the government cancelled its previous testing programme as it entered phase 2 with lockdown and has. Never caught up again since)

Whitty – more testing capacity means you have more you can do with other things especially in other setting like care homes

Will overseas workers qualify for life assurance payments?

Transmission rate has to fall to 0.5 – what’s the magic of that figure?

How can you be confident you know what the figures actually are?

Hancock – Yes, for frontline staff in NHS and social care who die and are employees in NHS and social care and looking at other groups of keys workers

Whitty – I’ve never said the target was 0.5 but in range 0.5-1 but imp we do not go above 1 as we then go back to exponential growth

Below 1 is long term target, probably 0.5-1 currently

Life assurance scheme won’t waive rights of families of individuals who die from suing NHS if they wish to? No waiving of standard employment rights?

Hancock – No

At beginning of crisis Whitty suggested 20k wld be a good outcome now above that just hospital deaths

Trace and track crucial so what level of testing needed to get this working?

Whitty – number will definitely exceed 20k, direct and indirect deaths def will exceed that

(weird, we passed that level days ago)

Long run on this pandemic – cld go many ways until we have a clear exit with vaccine or drugs or both, really cautious about putting absolute numbers

Hancock – test, tarck and trace all a matter of degree, lower number of new cases, more effective for this. 100k a good start to make this work

S Korea comparison given regarding gaps between capcity and testing – balance as progress made

Germany uses 450k of greater capacity each week

Need to get track and trace part up and running

What explains the mismatch between where we are now compared to your expectations at start?

Whitty – I have never put an absolute number into the public domain

We have managed this but long, long way to go

Infection rates – if we are in. middle of 0.5-1 range is that good enough to relax rules?

Whitty – lower the R number, the better as peak will fall away faster to get to smaller numbers also larger gap between rate and 1 means greater flexibility on measures and decisions for Ministers

Probably currently around 0.75, some room for manouevre.

Current estimate of hospitals and care homes?

Whitty – clear falling in hospitals, harder to work out in care homes but not measuring directly

Some signif outbreaks, others unaffected, more local

Powis – hospital rates falling

Community spread less leads to this

Care homes different

Reports over weekend govt trying to quarantine pple for 14 days – what changed your mind?

Update on antibody testing?

Hancock – borders, very clear we follow the science, given current level of new infections in. UK and v low levels of int’l travel impact of border travel low but as rates reduce this impact will rise so judgement of measures needed at borders changes, will say more in due course

We now have lab based antibody tests, yet to find lateral flow, result on stick, yet to have clinical result we are confident in

Whitty – science moves forward in small incremental steps

Survey testing developing

Antibody test for individual not yet, will happen in small imporvements

Encouraging pple to go to hospital has govt measured side effects of lockdown and will that play a part on easing lockdown?

Hancock – yes, we have, striking pple around the world are coming forward to use non-covid services

Powis – we have concerns around indirect deaths not related to covid19, reminding pple for some weeks that NHS still there for you esp in conditions where speed is of the essence – message to public is to come forward

In long term we will only be able to tease this out as we look at excess deaths including comparisons btwn ctries

IN March said children only got minor symptoms and closing schools wld have m inimal effect – has advice changed? Effect on r value of sending pple back to schools? Can children spread virus?

Good news on taking back cancer patients etc - start of easing lockdown?

Whitty – great maj of children don’t get coronavirus but some still get it, much less than adults

Schools not p’tic dangerous for children

If. Schools closed the R goes down but wld lose some current benefit if opened

Debate around world as to what contribution children make and btwn younger and older children but no clear data, still learning

Remains case contribution of children at school is prob less than flu it still does contribute andtrying to work out impact on R rate

V good qtn but not a clear answer but getting closer

Hancock – always said pple should come forward throughout crisis, one of reasons to leave house but we now have caopacity in NHS to start reopening some services, locally determined according to capacity

Our message is NHS is open and there to help you as it always is

Powis – now in a position to start undersataking some of services we have had to step down or where treatments disrupted eg cancer patienets for clinical reasons

Not a sign lockdown is about to be relaxed, quite reverse – a sign lockdown is having a positive effect and providing capacity

Message is to continue to comply this continues to help NHS and get back to normal services

On schools – still not really a plan how schools will go back?

Hancock – still to early to make decisions

Protecting NHS made. Possible by social distancing measures

Whitty - final decisions will obviously be for Ministers, on science side we can say we have room for manovre – trying to give feel for what combinations allow keeping R below 1, decision about combinations of measures is for Ministers, we can provide data of impacts of combinations of things, diff choices incl. around schools

Raise tha Bar campaign wants to raise threshold of grant from 25k to 150k wld result in more income for Sheffield – will you c osndier thisa?

Threats to pubs and bars – will govt cancel beer duty?

Hancock – understand imp of impacts on businesses

Will talk to Chancellor about these measures

Ref. announcement by Chancellor of new bounce back scheme underwritten by govt to 100%

Economic and health benefits both best served by pple staying at home

Restoration of NHS services – can you tell us m ore? Timeframe for getting back to normal? Role for Nightingale hospitals?

HSJ revealed warning about child illness poss related to coronavirus – new feature or simply as expected?

Hancock – v worried about the latter

On restoration this will be urgent first then according to demands on the system locally driven so can’t say exactly when but over weeks starting from tomorrow

Powis – have been aware of small number of cases in children, can be Kawasaki related disease – Clinical Director for Children and PHE looking into this

Not sure of any link with coronavirus at the moment

This sort of disease is very very rare

Contact 111 or 999 if you have concerns

Whitty – v rare situation, plausible this is caused by coronavirus, inflammatory process, new presentation of this suggests a link is plausible but numbers are very small, very rare.

NHS freed up 30k beds to deal with first peak – how many will it need to keep open in case of 2nd peak?

Hancock – one of the principles of 5 tests is we shouldn’t risk a second peak, that wld mean halting restoration process which would have an impact on the health of the nation itself

NHS making sure it can reopen taking account of Nightingale hospitals

Nightingales are not going to be used for non-crona processes because they are set up for pple who are intubated and ventilated

(Not sure that is the case)

Powis – Nightingales have been imp part of flexibility introduced by NHS

Proof NHS can be agile, flexible and change model of care

Want to keep them as insurance policy for covid patients

Only into first week or so of coming off a peak, will keep this under review

Hancock – if you’d asked me this a month ago about restoring services at this point and NHS not overtopped in any instance we would have been very pleased with where we had come to on NHS capacity, core to principle of NHS available when you need it.

(ends with govt warning video)