

Public Accounts Committee

Oral evidence: Initial lessons from the government's response to the COVID-19 pandemic, HC 175

Thursday 10 June 2021

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Members present: Meg Hillier (Chair); Gareth Bacon; Olivia Blake; Dan Carden; Sir Geoffrey Clifton-Brown; Peter Grant; Nick Smith; James Wild.

Gareth Davies, Comptroller and Auditor General, Sian Jones, Director, National Audit Office, and Marius Gallaher, Alternate Treasury Officer of Accounts, HM Treasury were in attendance.

Questions 1-107

Witnesses

I: Simon Case, Cabinet Secretary, Cabinet Office, Alex Chisholm, Permanent Secretary, Cabinet Office, Sir Tom Scholar, Permanent Secretary, HM Treasury, Sir Chris Wormald, Permanent Secretary, DHSC, and James Bowler, Permanent Secretary of the Covid Task Force, Cabinet Office.

Report by the Comptroller and Auditor General

Initial learning from the government's response to the COVID-19 pandemic (HC 66)

Examination of witnesses

Witnesses: Simon Case, Alex Chisholm, Sir Tom Scholar, Sir Chris Wormald and James Bowler.

Chair: Welcome to the Public Accounts Committee on Thursday 10 June 2021. Today we are asking a raft of senior officials across Whitehall what initial lessons Government should be learning from its response to covid-19. We have been clear as a Committee that we wanted to dive in early and highlight what issues have arisen, what mistakes have been made and the lessons that can be learned while the pandemic continues, so that they can be applied very quickly to the frontline. We know that an unprecedented amount of taxpayers' money has been spent—£370 billion so far, according to the National Audit Office's cost tracker—and that the Government has announced an inquiry, but that will not start until spring of 2022.

Today we have a raft of really key witnesses, and we want to focus on lessons learned and touch a little on what will be changing as we go forward in terms of some of the recovery programmes. I would like to welcome Simon Case, the Cabinet Secretary; Sir Tom Scholar, the permanent secretary at the Treasury; Alex Chisholm, the permanent secretary at the Cabinet Office; Sir Chris Wormald, the permanent secretary at the Department of Health and Social Care; and James Bowler, the permanent secretary of the covid taskforce at the Cabinet Office.

Before we go into the full details of the main session, we picked up in a session we did a couple of weeks ago with PPE suppliers an issue about some of the large amounts of PPE stored in containers waiting to be released into the supply chain and to the frontline. I am going to ask Nick Smith to kick off on that issue.

Q1 Nick Smith: Sir Chris, we want to talk about PPE supplies first, and we are glad that supply levels are now high. Thanks for your background letter, although I thought it very chilling that you had to order over 266,000 body bags to deal with the pandemic. That was quite shocking, and I am sure it was a very difficult thing for your staff and team to work on.

We wanted to find out about PPE supplies after we found out that nearly 10,000 sea containers containing 500,000 pallets of PPE with a value of £3.2 billion were held centrally. It made some of us concerned about



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over-supply, value for money and possible wastage. I have three questions. What is the overall amount and value of the PPE stock that is held centrally at the moment? Secondly, what is the cost of storage? I have heard tell of £1 million a day. Is that a fair estimate? Thirdly, what is your current estimate of how many billions of PPE stock will be needed for the next 12 months?

Sir Chris Wormald: These are obviously very important questions, which the Committee has looked at several times. The current situation is that we have bought approximately 32 billion items of PPE during the pandemic, to a cost of approximately £15 billion. Of those, 11.7 billion items have been distributed to the frontline so far, 12.6 billion are held in the UK as central stock and 8.4 billion are not yet in the UK—they are on order from other parts of the world. You are particularly asking about 12.6 billion that we are currently storing in the UK.

Your figure on what it costs to store is approximately correct. Today—and, of course, these numbers go up and down—it is costing us approximately £6.7 million a week to store our central stock of PPE. That has been falling quite fast. The equivalent number in January 2021 was £11.6 million, so we have been making some considerable efficiencies on the storage, but it remains a large cost.

In terms of what we expect to go on using, that is, of course, highly uncertain. It is basically dependent on the course of the disease. We have done all our modelling—this comes to your question about value for money and whether we over-ordered—and we did our PPE purchasing on the basis of reasonable worst-case scenarios, which, as the Committee well knows, are scenarios that only have a maybe 5% to 10% chance of happening and therefore a 90% chance of not happening. We have been in the lucky position that we have not been in the reasonable worst-case scenario, so we expect to have more PPE than we need. Although that causes us some challenges, it is considerably better than the opposite position, so we are very comfortable with the decisions that we took on stock for the reasonable worst case.

Q2 Nick Smith: Can I press you on what your worst-case scenario is for PPE for the year ahead, given that there is such a large supply of stock but you are also trying to encourage domestic production of PPE? We are just trying to get a sense of how much PPE we will need in the worst-case scenario in the year ahead.

Sir Chris Wormald: We certainly would not expect to be using more than we have used in the last year. As I said, we distributed 11.7 billion items of PPE. That has obviously been at a run rate involving some very significant outbreaks of the disease, so we would hope that it would be lower than that. As you will see from our numbers, we are expecting to have enough for the period going forward.

We have been considerably ramping up the amount that is produced domestically. Previously, as my numbers illustrated, we have been heavily reliant on purchasing from overseas. At the beginning of the pandemic, I



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think that less than 1% of our PPE was produced domestically—it was basically all imported. It is now a much higher number than that.

Chair: We will come to some of that a little later in terms of future-proofing. Mr Smith, is there anything else you want to raise?

- Q3 **Nick Smith:** Thank you for that answer. Sir Chris, could you please write to us with your best estimate of possible use for the year ahead, given the large numbers of stock in supply and the cost of it, so that we can get a better understanding of your Department's plans?

Sir Chris Wormald: I am happy to set it out in writing, but with the caveat that there are vast uncertainties, as you all know, which is why we went for the maximalist end in terms of stock.

- Q4 **Chair:** We are happy to have a letter that lays out those uncertainties and judgments, because that is a very big focus of our work, not just today but in future hearings and in our work to help the Government learn lessons from the pandemic.

I want to move on to you, James Bowler. We had an unfortunate situation a couple of weeks ago where travel advice was leaked—well, not leaked, but put on to the gov.uk website and picked up by the *Manchester Evening News* in a good bit of journalism—that travel in and out of areas including Bolton, Blackburn with Darwen and Kirklees was not advised. The advice was then radically changed. Can you explain what the situation is now and why this poor communication error occurred in the first place? What went wrong, and what are you doing about it?

James Bowler: There are systems in place to get local input into local decision making and communicate that out locally. The communication part of that was not fully carried out in the areas you just suggested in mid-May, in terms of the 14 May announcements around Bolton and Blackburn. So there are two elements to local interventions on the delta variant: one is a surge testing element, and the second is what people should do in terms of guidance. The guidance suggests that people take extra care in these areas, which means staying outdoors where you can, keeping two metres apart and minimising travel.

As you say, that was not communicated as well as it should have been. That has now been rectified. The situation is that the guidance asked people in areas with high levels of the delta variant to take extra care. It is guidance, not law. And it asked people to minimise travel. When that first came to people's attention, they asked whether it was interpreted as law and whether it was saying that people should completely stop travel, and we changed the guidance to clarify that.

But the main thing we have done is to improve the communication, taking it back to what we should always have been doing here. For example, when Greater Manchester and Lancashire were asked to follow these areas earlier this week, that had immediate calls from MHCLG and DHSC Ministers to the Mayor, to MPs and to local authorities. Local authorities



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were also part—well, information on the ground was also part of the local decision making there.

So, no, it was not our finest hour, Chair, and it should have been better, but it has been rectified.

- Q5 **Chair:** It is just that it is rather puzzling this long into the pandemic that a mistake like that on basic communications on something so important could have been made. Have you identified it? Is it an isolated incident? What actually went wrong? You sound like you are rectifying it, but what went wrong and why?

James Bowler: When the communication was made to local authorities and the Mayor, after the decisions were made to have a focused intervention in areas where the delta variant was, the focus of that communication was on what the Government could offer those areas, which is surge testing, help getting vaccinations into people and better communications. So the focus was on the offer, and the guidance changing to ask people to be more cautious in those areas wasn't focused on. That was just a mistake and that has now been rectified in our communications. I speculate that it is because we had been operating at a national level for quite a while. We are now going back into some slightly more locally tailored issues and we now need to up our game on that.

- Q6 **Chair:** That is a long answer to the question. Somebody has to put the information up on the gov.uk website, but it must get signed off at a more senior level. So was there a sign-off problem?

James Bowler: No, the information was signed off. It comes from the Cabinet Office, in agreement with the DHSC on guidance. I think the fault lay in the communication.

- Q7 **Chair:** You have acknowledged the problem, so we will leave that one there, and let's hope we don't see any more of that.

I want to move on to the main session, which is about what wider lessons Government can learn. There is a lot of detail in the excellent work that the National Audit Office has done, and we have obviously had many hearings on different aspects of this. Tempted as we are to go into the detail of those, we are trying to stay quite high-level in this session, because we have a lot of hinterland, as do you. So I may pull you back if you go into too much detail, because we have a lot of that on the record.

However, before I go into some of the stuff that the NAO has done, we were a bit shocked to discover in today's *Guardian*, Sir Chris, about Exercise Alice. We have had a number of sessions in this Committee since last March, talking about Government preparedness and exercises done, and we had never heard of Exercise Alice, which modelled a coronavirus outbreak, in effect. So could you tell us, one, what Exercise Alice was and, two, why it had to be pulled out of Government through a freedom of information request rather than being offered up much sooner?

Sir Chris Wormald: This was one of a whole range of desktop exercises that PHE does as a matter of course. Now, I should make it clear that this



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is not like the much-discussed Exercise Cygnus that we have debated a lot, which was a very large cross-Government exercise looking at a pandemic—in that case, an influenza pandemic. This was a much smaller exercise.

As I say, PHE does a whole range of these exercises; it is a desktop thing. And it was not about a pandemic; it was about a MERS outbreak, I think. It was a relatively small thing. The conclusions were built into PHE's overall pandemic and epidemic planning response, but, as I say, it was not a pandemic exercise. It could have been mentioned before, but it was nothing like the main exercise that we did on pandemics, which was the much-discussed Exercise Cygnus.

Q8 Chair: Who made the decision, once the desktop exercise had taken place, that it was not going to be extended as a bigger exercise?

Sir Chris Wormald: As I say, PHE rightly do a whole range of exercises on different types of disease outbreaks at sub-pandemic level, but, as you know, we have smaller-scale outbreaks of things that we deal with both nationally and internationally the whole time, and they can do desktops on those things.

In terms of the big cross-Government exercises, they tie to the national risk register and, as you know, it was a pandemic influenza that has been on the national risk register since 2008, and therefore that was the focus of the big cross-Government exercise. There was not an explicit decision not to do a pandemic version. The big exercises were tied to our risks on the national risk register.

I should say, while we are on the subject, that the similarities in how you deal with different types of outbreak are actually quite considerable, and therefore an awful lot of what we tested in the influenza plan was relevant. The big difference is between covid and flu, SARS and MERS around asymptomatic transmission. MERS does not have significant asymptomatic transmission, either. As I am sure we will come on to, one of the big questions that we have all been thinking about is whether we were too focused on diseases that spread principally symptomatically, like SARS, MERS and flu, as opposed to the question that asymptomatic transmission has raised for us in this outbreak. Since we are on lessons, that is an obvious question that everyone keeps asking themselves.

Q9 Chair: So Public Health England has this important role, but where does the information about what they are doing and the exercises they are having feed into, first of all, you, Sir Chris, and the Department of Health and Social Care? Presumably someone is aware that those exercises are taking place.

Sir Chris Wormald: Yes. As I say, this was part of PHE's—

Q10 Chair: Okay, so you are aware they are taking place. Who makes the decision about what risk there is of these different types of pandemics coming forward and about making sure there is preparation for those? It was not on the risk register. It was the influenza one that was on the risk



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register. So the simple question is, why not?

Sir Chris Wormald: That is, of course, a very fair question. The original decision to focus on influenza, which has been there since 2008, will have been taken on the scientific advice on what the greatest risks are. You know how the national risk register is constructed, and it has to focus on particular things. My scientific colleagues would say that influenza remains a huge risk and should continue to figure prominently on risk registers. Whether we were not as focused as we should have been on those questions of diseases that spread asymptomatically is, as I say, a very fair question, but the decisions are taken on the basis of advice on what the most significant risks are. PHE rightly—the UKHSA will do similar—carries out planning and exercises for a much wider range of diseases. We are talking about what it is that makes it, as it were, on to the top level of Government risk.

Q11 **Chair:** You tell me if this is for you, Mr Case, but if this was out there—we have only just discovered it, thanks to *The Guardian* and various people who have requested the information—why wasn't it dusted off and provided to the centre of Government as soon as it was apparent it was a covid outbreak, in January of last year?

Sir Chris Wormald: As I say, this was not an exercise that was modelling a pandemic. It was used by PHE as a part of its—

Q12 **Chair:** But Sir Chris, as you have rightly highlighted—it is not a trap here—covid had this asymptomatic transmission, which was not immediately apparent, but nevertheless these other exercises modelling something that was emerging would surely have been helpful in those early days, when difficult decisions were being made at pace. You may well have had to model more than one scenario and pay up front for things like the right personal protective equipment for different scenarios, but it seems like no one seemed to be learning from it—or perhaps you can correct that.

Sir Chris Wormald: No, that is not the case at all. PHE took the conclusions and built them into its general planning for how to respond to disease outbreaks. I will check again, but I am not aware that there was anything that came out of that exercise that was significantly different from our much bigger exercise on pandemic preparedness that we were doing at the same time, and that was the basis of our response. I am not aware that there is anything that was missed as a result of this and, as I say, PHE was building it into its response plans in any case.

Q13 **Chair:** We will leave that there for now. I want to ask, in turn, Mr Case, Alex Chisholm and Sir Tom: what top three lessons would you say you have learnt over the last year? If this was to start now, what would you do differently? Mr Case, it is interesting for you, of course, because you came into the Cabinet Office, in the role of Cabinet Secretary, quite a way into this, so you have got the benefit of hindsight and you have come in and had to look at it all with fresh eyes. So may I start with you: what are the three key things that you think we should be doing differently?



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Simon Case: Forgive the slightly croaky voice, Chair, but I am recovering from a throat infection—it is not covid, I should add. The top three I would pick out are all about data—this is well documented and well discussed. I think the excellent NAO Report picks up some of these points. There were issues around interoperability of data at the start, but we have made real strides as we have gone on around the internal use of data and the external use of data.

The second thing, which in your exchange with James Bowler you picked up on, is the lessons around the working of and interrelations between central and local government. In some areas they were actually very strong—the shielding programme, which the Committee has looked at, is a very good example of interaction between central and local government. But we also know that, particularly last summer and autumn, the working on the regional tiering and some of the interaction with Test and Trace was not good enough at the start. That has improved. As you pointed out, there are still some errors being made, but I think that is another important lesson.

The third one that I would pick out is not a new lesson—it is a challenge that we have had in the past. It is integrating scientific advice into the very top level of political decision taking; translating complex scientific advice and often modelling, which includes large ranges of uncertainty, into the sort of definitive decisions that Ministers have to make and then communicate. I think there are many more lessons, many of which are pulled out in the very good NAO Report. We have some more, but those are three that struck me particularly when I came in last year.

Chair: That is helpful.

Alex Chisholm: I agree very much with the answers that Simon has chosen—particularly data, which is one that I would have emphasised—but let me add a couple more.

First, this has been the first time that we have really had a crisis of this dimension that has required a whole-of-system response in every branch of government, but also throughout the private sector, with the voluntary sector and with the general public themselves not only volunteering to help but having to adapt their own behaviour. I cannot think of a time when we have been challenged on that scale before, and that means that the level of preparedness in future needs to be much more broad-based.

Just to add one or two more, we have seen how during an extended lockdown the systems of government can operate, which has been impressive but obviously took time to adapt to fully successfully. Extended lockdown has a big effect on all kinds of other things that you then need to spring into action—job support, protecting vulnerable persons, food delivery and things like that, which we would not normally experience in a shorter crisis.

The other thing to bring out is that, rightly, the NAO Report focuses on communications. We have been at this over 16 months with pretty



extensive communications at this stage. There has been a huge amount of communicating. It has been successful—I think that 84% of people recognise and respond to the publicity that has been going out and trust it, which is excellent—but we have definitely learned some lessons around the combination of press conferences, using the media directly, local support, briefing people at a local level and finding trusted voices to get into different communities. That has been incredibly important to keep people's trust and confidence throughout this.

- Q14 Chair:** I will just pick up on a couple of those: the communications, which is not rocket science, and the level of preparedness needing to be broad-based.

Every local authority will have its own emergency planning group and will therefore often engage with local organisations. Do you think that is up to scratch? Obviously there have been funding issues in local government, which, although they have a requirement to do it, can be quite challenging. Do you think that there is more that the business and voluntary sectors could be doing to be disaster recovery-aware and risk-aware so that they are prepared for these things? Is this something Government might be considering?

Alex Chisholm: On the “not rocket science” aspect, the way in which Government communications work has become quite sophisticated in responding to a huge amount of data analysis around which of the communities are not picking up the messages—the initial “Wash hands, cover face, make space” response, but also the vaccine hesitancy, which is obviously an issue at various points. It has been very effectively addressed, and the techniques to do that are not just broadcast techniques, which as you say are well established; they are also very much on the ground.

Working with local authorities did not happen as a coincidence; that was an MHCLG-led programme. I think that £23 million was spent supporting 10,000 community champions to go out into different sectors of the local community to try to win their trust and explain why it was necessary to take these actions. That has been incredibly effective in driving unparalleled levels of vaccine take-up particularly, but also testing and understanding why people need to continue to isolate, where they need to.

- Q15 Chair:** I said it was not rocket science, but maybe it is not rocket science for elected politicians and local councils in the same way—Whitehall sometimes seems very remote from normal activity.

Lastly for you, in terms of the communication through different media, do you think that it is fair to say that the Government have tended to focus on mainstream media, but actually need to do more through local community language media, for instance? The media are very segmented now. I know that if I go to someone's living room in my constituency, the chances are that they will be watching Sky Sports, Turkish cable or BEN TV. If you don't know what BEN TV is by now, that is an example. Well, it would be interesting to know: do you know what BEN TV is? It is not a trick question, but I wonder if you have ever heard of it.



Alex Chisholm: Not BEN TV, myself, but we have—

- Q16 **Chair:** Right, okay. It communicates to a very large multinational African audience, which is a very important group to reach. I am not suggesting that you as permanent secretary would necessarily have known that; I hope that someone in Government does, but I suspect perhaps not as much as they should.

Alex Chisholm: Translation into multiple languages is incredibly important. That has been happening the whole way through, into 20 or 30 different languages. It has been recognised, in the very multicultural society that we have in the UK, how important that is.

In terms of using media, much the most important channel has been through the internet, particularly gov.uk, which has really come into its own during this crisis. Even today, 16 months in, 14 million people a week are accessing gov.uk coronavirus information, so that has been incredibly important.

In terms of trying things that work differently, not just conventional media approaches, we used a WhatsApp chat bot, for example, as a way of reaching into different communities. That was particularly effective. PHE did that in the first few months of the experience. We also did a lot of polling every day, across the country in different communities, to find out what was working and what their concerns were and using that to drive the public information. So that has been an interactive process rather than just putting out information in the hope that it will work, which is not the way we worked.

Chair: I am heartened, but also slightly worried about bits of that. Let's go to Sir Tom Scholar.

Sir Tom Scholar: For the Treasury, data is also in our top three. Simon spoke a bit about some of the issues around public services data. I would add to that further types of data. The first is economic data, as we have learned the need to improve both the quality and the granularity of regional economic data. The ONS is working on that and has quite a big programme of work. We are working with it on that, and the Bank of England is looking at the same issue.

The second area I would highlight is data in the tax system, in particular the Making Tax Digital project, which HMRC has been working on for some time. It is partially implemented, but when it is fully implemented it will mean that HMRC has got both more data and, critically, much more timely data. That will certainly help in any future situation where you are looking to use the tax system for some purpose other than simply collecting tax. It would obviously improve the collection of tax and, for both those reasons, I would hope that this Committee would be very supportive of it.

Secondly, we have looked hard at the operation of the spending control framework. As you know, the Chief Secretary has written to you and we discussed his letter and some of the issues at some length in a previous

session of this Committee, but obviously we can go back over that ground if that would be helpful.

Thirdly, on policy, looking at the major support schemes, we have been trying to learn lessons as we go along and, where necessary, adapt the schemes to incorporate those lessons. There will be fuller evaluations of the main schemes conducted later this year. Once we have done those fuller evaluations, and once we get to the end of the phase of implementing these schemes, we will then have fuller data on the experience and we will be in a better position to draw detailed lessons of policy design.

One very important thing that should come out of this experience is that we will have a set of policy measures and schemes that have previously been implemented on the shelf and ready to go, just as in the last year we have been drawing on the experience of the banking crisis 12 years ago and the eurozone crisis. So those would be our three.

- Q17 Chair:** Thank you. That is very helpful and candid. I will bring in Sir Geoffrey Clifton-Brown in a moment, but I just want to go back to you, Mr Case. If any one of us were to become Prime Minister tomorrow—I don't think there is likely to be a vacancy any time soon, but if we were to walk in—you are the man who would say, "Welcome, Prime Minister. These are the things you need to talk about." I am assuming we would probably meet someone from M15 and M16 quite early on. We would probably meet someone to talk about nuclear codes. Presumably, you would be turning fairly swiftly to the national risk register. From what you know about the pandemic, what advice would you give an incoming Prime Minister about how to be prepared for this challenge in the future?

Simon Case: That is an excellent question, Chair. At the heart of preparing for these low-probability, high-impact events is making sure, from the Prime Minister's seat, that the whole team is prepared. You co-ordinate a response from the Cabinet Room or Cobra, but actually all the large chunks of delivery lie in Departments represented here and far beyond, so my first piece of advice is: make sure that you have an early discussion with all your Secretaries of State, so that they understand their roles and responsibilities in these low-probability, high-impact events.

- Q18 Chair:** What would be on your risk register now that you would be specifically telling a Prime Minister about?

Simon Case: Do you mean in relation to pandemics or more broadly?

Chair: More broadly, and where would pandemics fit in that list now?

Simon Case: The influenza pandemic sat highest on the risk register and still does. Of course, as the months and weeks go by, cyber-attack is something—they are not probabilities; they are realities, so cyber-attack has to be right up there alongside pandemics.

Chair: There are lots of issues about how much emphasis people put on low-frequency but high-impact events in the middle of a busy working

schedule, but we will touch on some of that.

Sir Chris Wormald: I will just add one, because I think it is very relevant. There are clearly lots of lessons about planning, which we have talked about before. There is a general lesson that goes with everything my colleagues have said. What the pandemic has done is tested the underlying resilience as well as the planning. When you look at the areas where the UK has done really well, it is all the areas where we had existing strengths—areas such as science, the NHS and therapeutics—and some of the areas where we have struggled are those where we knew there were challenges. We have all discussed them, and I am sure we will in this hearing—the challenges of social care; health inequalities; we all knew about obesity; we all knew that we were over-reliant on supply chains. There are two aspects to this question: one is the planning, and the second are those underlying resilience questions. Certainly in the learning that DHSC is doing, we are looking at it in those two baskets.

Chair: That is a very thoughtful comment. I am tempted to discuss it further, but I will pass to Sir Geoffrey Clifton-Brown.

Q19 **Sir Geoffrey Clifton-Brown:** I want to ask Mr Chisholm a question. All of you today, and from the Prime Minister downwards, have emphasised the importance of data, but it is a question of which datasets you are comparing with which other ones. Your much-lauded communications strategy has well and truly communicated the medical and scientific data, but it seems to many of my constituents at times that that has completely drowned out the social and economic damage that the pandemic is doing to the country. How, in making the decisions to unlock this country, do you balance those different datasets?

Alex Chisholm: That is an excellent question. I will say a couple of things and then bring in James Bowler. First of all, I agree 100% with you about the importance of integrated data analysis. That is something that we have got much better at through the crisis, and it should be an enduring capability—our ability to take data at a very granular level right down to individual postcodes, with much more up-to-date information. If you go on to the gov.uk dashboard now and tap in your postcode, you can see the last week's data of how many cases, how many hospitalisations. It is incredible, the up-to-dateness and completeness of that data picture.

That has been vital, and it is data for the general public, not just the authorities, which is really good in terms of people being able to take action themselves and having confidence in that. But I think you are right, we obviously do not have that near real-time data on the economic picture, which takes longer to build, but we totally understand and accept the need to balance public health data alongside social and economic data.

That has been a big focus of the effort of Government, informing the action plans at each stage of the crisis. To be fair, we have got better and better at that. The one that we produced in February was the best and most complete effort at setting out that overall integrated picture. James, who was a key author, could describe that better than me.



James Bowler: I will pick up the spring strategy from February. It included a large amount of data, not only to explain the evidence that underlay the decision making, but to be transparent with the public about where we are. It had a near 50-page annexe that covered everything, notably not just health but particularly the economy and the social impact—everything from mobility to anxiety, which we are tracking and have got much better at tracking. At the start of that road map and at each step, we analyse not just the health impact, but the economic and social impact. We set that out in detail when we take each step, for Ministers to determine.

I will link to Tom Scholar's answer on some of the economic side of things—we have slightly less granular detail than we might like—so I think that is something for the future. But we look at absolutely everything we can in detail. To Alex Chisholm's point, that has got much richer, with much better analysis over the course of the year.

- Q20 **Sir Geoffrey Clifton-Brown:** May I ask one of you—whichever, I don't mind—when you consider the different datasets, how do you balance risk from one set to another in making a final decision?

Simon Case: James, do you want to pick this up as you are co-ordinating that?

James Bowler: It is a good question. The answer lies in setting out all the aspects of the impact. We are helped in particular by SAGE and the scientists, who pull together quite a lot of uncertainty into modelling. The modelling comes from SPI-M, but SAGE stares at that and tries to bring consensus to different sets of opinions. That is primarily health-related, and we have to add the economic and social aspect to that.

Then, obviously, we are into collective decision making as well, so the decisions will be made with the relevant Ministers around the table. You would expect the Chancellor, the Business Secretary and the Culture Secretary to represent some of the sectors most keenly involved, and the Health Secretary to represent the health side of things. These things are properly played out and debated, as they should be, at each step.

Chair: Thank you, Sir Geoffrey. We will now go to Gareth Bacon, MP. Over to you, Mr Bacon.

- Q21 **Gareth Bacon:** My initial question is to Mr Chisholm and probably Sir Tom. The Government had to move at pace right at the beginning on spending and to streamline things. The NAO Report noted that the "government relaxed controls and streamlined spending approvals" and so on. Obviously, one of the negative effects of that has been large sums of money potentially lost to fraud and error that you would not normally have lost in a normal circumstance. What more can the Government do to manage the risk of fraud and error during an emergency such as this? If we were to have another pandemic, three or four years down the line, what lessons have you learned from this one that you will apply to the next one to minimise the loss from fraud and error?



Alex Chisholm: That is a great question. To look at that from a couple of different perspectives, first, we have talked already about the procurement of PPE, and obviously there was a need for a huge volume of PPE—over 30 billion items in the end—to be procured in what was a very tight overall global market. There were real conditions of scarcity, everybody else wanted it, and some of the key producers in the world were obviously closed down at that time, particularly in Wuhan. In that situation, there was undoubtedly a scramble.

If we had gone for a very elaborate process, we would not have had the PPE we needed, which was vital for saving people's lives. That was done at pace, but it was still done with controls, and it is important to recognise that we applied these very rigorous tests to all the offers that we received. Around 16,000 people approached us, and that resulted in 330 or so contracts. There was a very sophisticated and rapid triage operation to try to identify which were the most useful ones within that, but there were all subject to due diligence tests. They were all subject to assessment about the capability of that particular company and that particular order, and about the value for money of that and the price as it compared with previous week's pricing. A lot of those controls were done with an integrated team from the Cabinet Office, in support of DHSC. The controls still applied, even at pace—we can do that—and that will undoubtedly have helped to minimise the fraud element there.

The other example I would focus on is in DWP, where at one stage there was actually a tenfold increase in the normal amount of applications for benefit support. Obviously, that was critical to families across the UK who were in need of benefit at that time, so there was no question that they needed to respond quickly to that. They did a very rigorous process of working through all the potential easements that could be applied in order to accelerate the throughput of handling of cases, but they also marked all those cases very carefully for what is called post-event assurance—basically, recontacting those people afterwards, once the initial surge was over, to verify whether or not they were indeed entitled to either any benefit or a particular level of benefit. That was then used with integrating data again—a theme of our hearing so far today—looking at the outputs of information about births, which obviously relates to the number of children you have and affects your benefit level, and at property valuations for the Valuation Office Agency. Those things are now available as real-time feeds coming into DWP, so they can be used, again, to try to identify errors—usually genuine errors—and sometimes fraud. Plus, a lot of very sophisticated work is now done between the different agencies and authorities in Government to try to detect serious criminal gangs, and they have been very effective in driving them away from the UK. Notwithstanding the efforts to try to access benefit and other support schemes at scale, there has been very effective protective work done there.

Q22 **Gareth Bacon:** It is not just about procurement, of course; it is also about some of the support mechanisms that have been put in place. Your former Department, BEIS, has estimated that between 35% and 60% of



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the bounce back loan scheme may never be repaid. That is very wide, obviously, but I believe that is between £6 billion to £16 billion that would just have to be written off. Is there anything—either from that scheme or more widely—that the Government has learned from this experience that that it could apply later to make that number smaller?

Alex Chisholm: Those are very early-stage, soft estimates at this stage. They are not really hard predictions, but I recognise that certainly we will not get all our money back on those loans. It depends on a lot of factors, such as how the economy goes and so on.

Going back to the conditions in which those loans were created—Tom will want to come in, because they were obviously Treasury-funded schemes—they were put together at great speed. The recognition, correctly, was that the impact of the pandemic, and particularly the lockdown, on the economy and on the business sector was going to be absolutely devastating if we did not put in place very rapid support in the form of access to liquidity and loan schemes, but also grants as well. We could have done that in a way that was slower, more cautious, required more due diligence of each of the applicants and so on. The effect of that would have been that we would have had a better scheme, but most of the businesses that could have applied for it would have failed in the meantime, so that wouldn't have been the correct response.

The particular design of those various different loan schemes went through various different iterations. If you remember, there were CBILS, then CLBILS, then bounce back loans. The particular feature of bounce back loans that was added was to reduce the involvement of the banking, because the banking process was taking days, if not weeks, to apply these tests. It is difficult to remember, because so much has happened in the last 15 months, but there was quite a furore at the time from businesses that were saying, "We are actually failing. We are applying, and we can't get the response," so that was one of the changes that was made to the bounce back loan scheme.

Chair: Sir Tom Scholar, I think, can talk us through that.

Sir Tom Scholar: I have just one thing to add to what Alex said. It is extremely important, looking at the bounce back loan scheme, to distinguish between credit losses and fraud and error. The estimate of 35% to 60% is an estimate of total losses. We don't have a separate estimate yet of the element of that that would be attributed to fraud and error. I am not sure whether the British Business Bank and BEIS will have a precise estimate, but they will be covering that in their annual report and accounts shortly. That is only going to be a small proportion of the overall total.

Most of the losses under the bounce back loan scheme will be credit losses. As Alex just said, it was completely inherent in the design of the scheme, given the speed at which it had to be deployed, and given that the loans were in many cases going to businesses with no history of business banking—they had never borrowed before from a bank and had



no established relationship with a lender—that in those circumstances, it simply wouldn't be possible for a lender to carry out the kind of credit risk assessment that a lender would normally carry out. I just want to be absolutely clear that the 35% to 60% is not fraud and error; it includes credit loss too.

- Q23 **Gareth Bacon:** I think that is understood. The driving force behind this session is lessons learned, so knowing what you know now, if you were to do things again, what changes would you make?

Sir Tom Scholar: That is a question that we can answer only once we—or, rather, BEIS and the British Business Bank—have done the evaluation of the scheme, which they are undertaking now. By the time that they have done that—it is due in the autumn, I think—we will also have the first few months of data on repayments under the scheme. Don't forget that the first 12 months were interest and repayment-free. We have only now just had a couple of weeks of repayments. We need to get the first data, and we need a proper evaluation of the scheme, to be able to answer that question.

- Q24 **Gareth Bacon:** Staying with you, Sir Tom, we saw a sharp increase in the number of ministerial directions over the last year or so, for pretty obvious reasons. Do you think they were at about the right level? I think the NAO recorded 19 in 2020, and the running average prior to that was about five a year, so it was a very sharp uptick. Is that around the right ballpark, given the risk to value for money, or would you have expected to see more than that?

Sir Tom Scholar: It is not at all surprising that there was an increase. As the NAO said, 14 directions are clearly covid-related. Four of them were directions on the ground for regularity where Departments, very late in financial year 2019-20, after the supplementary estimates, incurred completely unavoidable expenditure that was completely necessary for the pandemic but for which there was no parliamentary authority for the spending. You automatically need a direction in those circumstances. There is no question but that, in each case, the spending was necessary and the right thing to do. It was a technical matter.

As the Report says, the other 10 are on value for money grounds. Again, the speed at which Departments had to act and the uncertainty of the situation means that that is also entirely understandable. Eight of those were asked for by the Department for Business. I think this Committee has previously had the opportunity to talk to current and former accounting officers there. The short answer is that it is not at all surprising that there were more directions. The framework is explicitly designed to give Parliament confidence that Departments are correctly scrutinising value for money and the other critical elements of spending. The direction mechanism is explicitly part of the system to provide transparency and accountability to Parliament in areas where the normal standards, for whatever reason, could not be applied. The exchange between the accounting officer and the Secretary of State is then published so that Parliament can understand.



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Chair: We are about halfway through, but we might not be halfway through if we have long answers. Remember that we, like you, have heard a lot of the detailed issues before, so we can cut to the main big points.

- Q25 **Gareth Bacon:** This is more a question for Mr Bowler than Sir Tom. Another side to transparency is around contracts, and the publishing of contracts. It has been well trailed that many contracts that the Government awarded over the course of the pandemic were quite slow in finding their way into the public realm. Based on your experience in response to the pandemic, how can the Government improve that? How can the Government be more transparent about its contracts and the awarding of contracts while still working at pace?

James Bowler: I will ask Alex Chisholm to answer that.

Alex Chisholm: This has been an area to which the National Audit Office and the Committee have rightly paid attention, and the media too, and also the courts; indeed, we had a judgment just this week that touched on that. First of all, I think it is very understandable, and indeed right, that people doing the procurement of PPE and lots of the materials needed in the response to the pandemic focused primarily on the need to get hold of the products and services that were of vital need to public and frontline workers. That was their top priority. The collective wisdom of the NAO, the PAC and the courts has been to say, "Yes, we accept that, but proper record keeping of how you have taken those decisions is important for public confidence and trust and for being able to demonstrate good value for money over time." We broadly accept that, which has led to our accelerating our efforts to publish our contracts in a very timely way. Most of those contracts are NHS contracts and contracts by SCCL, the NHS subsidiary. I think they have very largely been published now, and that is true also for the Cabinet Office.

- Q26 **Gareth Bacon:** Are they all now published? You said largely. Do you know whether all the contracts awarded during the pandemic have been published now?

Alex Chisholm: Not all. I can certainly say, on the Cabinet Office ones, that all the ones that related to the regulation 32 procedure on direct awards have been published—100%. We have a couple of small, low-value and historical ones that we have to finish this month. Chris will know better about the DHSC ones.

Gareth Bacon: Chair, in the interests of time, perhaps we could be written to after the meeting with a list of contracts awarded and which have been published and which have not.

- Q27 **Chair:** We kind of go round the circles on this, but as we have said before, the British civil service prides itself on its record keeping and on keeping the paper trails intact and available. It is a bit weak, I have to say, Mr Chisholm, to say that everyone was busy so you did not publish in time. It is part of the process to publish, to build public confidence. You still seem to be defending. I know your people were working hard, but surely it is as important to tell people what has been spent of their



money as it is to deliver the things that the money is buying.

Alex Chisholm: You have published a letter on this already, and some comments, which I really agree with, saying that it was understandable in the early stage of the crisis that people were really focused on getting hold of the stuff, but that, as we have eased our way through from that initial phase, we needed to move quickly to catch up in publishing materials. We have done so. Perhaps we should have moved the through the gears more quickly, but we recognise that, and we have largely caught up. We do understand the public interest in transparency.

Chair: Ninety days is quite a long time from delivering a contract to publishing it, but that was still missed repeatedly. However, I will not labour the point; we have made it often enough.

Q28 **Gareth Bacon:** One of the good things that has emerged from the pandemic has been some pretty good examples of effective cross-Government and Government-private sector collaboration. What are you going to be doing to try to embed that in the way the Government operate going forward?

Alex Chisholm: Thank you very much for the question. Yes, I would agree with that. Just to give a couple of areas where I think we have got some important, positive lessons to learn, one is in relation to the vaccines taskforce. As well as bringing in experts from the private sector to help not only with the choice of vaccines, but with organising the supply chains—particularly with UK production, which has proved critical—we have also taken well-measured risks on that. That was a small, very capable group. It was not only people coming in, good as they were, from the private sector; we also had some brilliant people who came across from different parts of Government—from the MOD, the Cabinet Office, BEIS and UKGI—to help with that effort.

That shows what we can do, working in a very open and dynamic way with the private sector and using very specific knowledge. We were able to attract some people who had been, if you like, veterans within the industry. They understood that the actual production processes for making vaccines at scale are incredibly complicated and delicate—you have seen that some other countries have had some difficulties with that at various points. Their expertise, and being able to draw on that, was absolutely critical.

The other really positive example I would like to highlight is in relation to ventilators, on which we did have a previous hearing. Just in this context particularly, the Prime Minister went out there and said, “Look, we need help with ventilators. Who can help?” It was amazing to see companies across the UK coming forward with suggestions, dropping whatever else they were manufacturing and helping by getting into that. They were forming consortia with big companies and small ones, and I think that worked really well. We were doing that in a way that, like the vaccine process, was very well managed—we identified all the candidates for being able to come up with a successful ventilator design in time.



At each stage, we took out the least promising ones, and ended up just with the ones that we had confidence would deliver a good-quality product in time, and that was successful in delivering, as you know, some 15,000 ventilators in four and a half months, rather than the four and a half years it would normally have taken. I think we can work successfully with UK-based companies in these situations, but it does require a lot of expertise on the buying side of that and in the partnership-forming to do that quickly at scale and make good choices.

- Q29 Gareth Bacon:** One of the less good things, progressing through the pandemic, has been the timeliness of some of the Government communication. I will use the example of education in schools. To take one example, just before Christmas—I think it was the final day of the Christmas term—the Government announced that mass testing of pupils would be taking place from the first day in the new year, which cued howls of outrage from most of my headteachers, and I assume that colleagues got the same responses.

I believe that the NAO has picked up that 148 guidance documents and updates to existing material were issued between 16 March and 1 May. Often these things arrive late in the day on the last day of the week, with an expectation that they will be implemented on the Monday after the weekend. Is there anything the Government can do to improve some of that? Looking at it externally, it feels like someone is getting it out of their in-tray so they can go home for the weekend and dropping it on teachers who then find themselves scrambling around trying to get things put back together again. What can the Government do to do this differently?

James Bowler: I recognise the points in the Report about education guidance. I think it is a little bit unfair to suggest that people are getting it out of their in-trays. There was an inflection point around Christmas—

Gareth Bacon: That was what was put to me by several of my headteachers, Mr Bowler.

- Q30 Chair:** Mr Bowler, can I just say that it is not just Mr Bacon's unique experience? If you talked to anybody in a school, there was not a positive word to be said about the communication. It was not negativity for negativity's sake; it was genuine.

James Bowler: Okay, I was just reflecting that a lot was happening around Christmas, because we went from an unlocking phase to a locking-up phase. That was particularly tricky. The main learning from this, which we have implemented, is set out in that February road map—the spring strategy—which sets out what we want to do and what we intend to do, with clear gaps between it and at least a week's notice of any change. That was built in with step 1 on schools; I think we agreed we would always give two weeks' notice of any change in that. That learning and those issues around Christmas were front and centre in how we designed our policy response going into the new year, just to make sure that, even though things were changing, we had much more clarity for people and were giving people as much notice as possible.



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I am accepting that there were a lot of things flying around before the end of the year, but I think things have improved quite rapidly with that certainty that we gave in the road map and this thing, which has been quite important, of making sure that we have five-week gaps between steps, with one week's notice. That just brings some certainty to what are obviously very uncertain times. I hope that helps.

- Q31 **Gareth Bacon:** Thank you; it does. The other question, I suppose, is about the delivery of schemes on the ground and the difference—sometimes tension—between local and national delivery models. For example, on Test and Trace, could more use have been made of local authorities to implement that? Did it all have to be done centrally? I see that Sir Chris has put his hand up. Was that to answer that question?

Sir Chris Wormald: Yes, as it is about Test and Trace, it probably falls to me. Of course, we have another hearing coming up on Test and Trace, so I will not go into detail, but on the general here, there is definitely a question of what the right balance is between national action and local action. On Test and Trace specifically, as you know, we have shifted from a largely national scheme to one that is much more balanced between what we do nationally, where you get large economies of scale and so on, and use of local knowledge, particularly in the tracing and contain bit.

The thing I would say generally about the issue, however, is that, of course, the Government gets attacked both ways here. On some systems that are entirely local, such as much of social care, we are challenged to do more nationally—sometimes that is correct and we have done more nationally—and in other areas where we have started with a national approach, like Test and Trace, we are challenged on whether they should be more local. That illustrates the issue that it is all about the balance in the circumstance.

I think you are correct on Test and Trace that, initially, we probably did not get that balance quite right. It is in a much better place now, with active partnership between the national Test and Trace system and individual local authorities, but as I say, I do not think there is a yes/no answer, as the things we are challenged on, including by this Committee, illustrate.

Gareth Bacon: Okay. I will stop there, Chair.

Chair: Thank you, Mr Bacon. Over to Nick Smith. *[Interruption.]* Sorry—forgive me, Mr Smith. Sir Geoffrey Clifton-Brown was going to come in.

Nick Smith: You did surprise me then, Chair.

Chair: Sir Geoffrey is in the room with his gimlet eye, so I cave in to him. Over to you, Sir Geoffrey.

- Q32 **Sir Geoffrey Clifton-Brown:** You had a heart-stopping moment there, Nick.

May I come back to Mr Case? I make no apology for asking again about



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risk. I am afraid that the answers that I have heard from your colleagues today in respect of my question about how you balance different types of risk will have only reinforced the prejudice in my constituents that huge attention has been paid to the health and scientific risk, but it has not had the same balance as against economic and social risks. What are you doing to improve the quality and maturity of risk management across Departments and linkages to you in the centre and on to the Prime Minister?

Simon Case: I suspect that Tom will want to comment on our overall approach to risk too. The first thing I am going to do is go back to the premise of your question. I would say personally that this has been one of the most difficult aspects of managing the response to the pandemic—managing these four different inputs into every decision, particularly around the decisions to lock down: the inputs around covid health; the inputs around non-covid health outcomes; the economic consequences of any decision; and then the broader social and public services impact.

The thing that has been particularly difficult about that, as has been touched on, is data systems and input systems at different—

- Q33 **Sir Geoffrey Clifton-Brown:** We are coming on to data. I just want to stick with evaluation of different types of risk and what you are doing to get it from each Department around Government and convey that into the centre.

Simon Case: In the end, at the heart of the answer to your question is judgment and us, from the centre, being clear with Departments that we need their best judgment of the risk of any particular decision or option that is under consideration, so that when they come forward to a collective decision point, those risks are properly identified and fairly represented. Of course, one of the parts of our constitutional set-up is that when you take these decisions through our Cabinet or Cabinet Committee system—I think James talked about this—you have the Secretaries of State there representing the risks. That has been properly done at each stage, with Secretaries of State coming to the table—

- Q34 **Sir Geoffrey Clifton-Brown:** I think we are running over old ground; we have discussed collective responsibility. Mr Chisholm, you had your hand up—a brief answer please, because I want to move on to data quite quickly.

Alex Chisholm: If I could just add a couple of things, that might be helpful. As you say, Sir Geoffrey, this crisis has really reminded us about the extent of the risks that we face, and the importance of the mechanisms we have for evaluating and responding to those risks. We have taken some steps to do that, particularly in relation to cross-cutting risks. You may have seen the report that we got—*[Interruption.]*

Sir Geoffrey Clifton-Brown: May we pause for a second while the bell rings, because this is really important? Sorry to interrupt. Thank you, Mr Chisholm.



Alex Chisholm: Not at all. You may have seen the report that I sent to you, which was done for us by Nigel Boardman in response to a number of procurement activities. One of his 28 recommendations was to take the existing risk function that we have, which is part of the finance function, and to make it into a very strong profession across Government as a whole, with additional expertise, capabilities, training and accreditation. We have accepted that, and a plan is already being put in place to develop that further.

Secondly, in terms of the way in which we process the assessment of risks, one of the concerns or reflections that we have had over the last year has been that a number of those risks are within Departments, correctly, or indeed within their arm's length bodies, but do we have enough visibility and management of the cross-cutting risks that lie between Departments or right across the piece? Again, we have now accepted that we will have a quarterly process of formally reviewing those risks within the civil service board and ensuring that we attend to those risks. There is a massive analysis of them. It is not just about looking at what the risks are, but what are the—

- Q35 **Sir Geoffrey Clifton-Brown:** We have a huge amount of ground to cover, so I would be grateful if we could have fairly brief answers. Sticking with you, Mr Chisholm, what can be done to improve the data compatibility around Government, and particularly to be able to use AI to make better use of that data and speed up decisions, whether it is in a pandemic or in any other sphere within Government?

Alex Chisholm: I will try to be brief, but it is obviously a big topic in its own right. First of all, in order for data to be shareable, it obviously needs to be available in digital form, so we are continuing the work to digitise data records. Lots of historical records, such as birth records, are not yet fully digitised, so that is very important.

Secondly, around interoperability, there is a lot of sharing of data that you can do automatically, almost in real time, using APIs. We have developed a whole catalogue of APIs to be able to do that—sharing all the most commonly used datasets. I mentioned a couple of them earlier in relation to birth data, the Valuation Office outputs and things like that.

We want to ensure that the sharing of data is not overly inhibited by the necessary regulatory and legal requirements. Of course, we have to respect the law, but I do not want people to be not sufficiently understanding of the law to feel they cannot share data. Often you can, but you need to follow the correct process. You need to have existing MOUs and things. There is a big effort on data sharing across Government.

- Q36 **Sir Geoffrey Clifton-Brown:** We have got the gist of that, Mr Chisholm. The pandemic has shown that there were some woeful shortcomings, with a quite basic lack of data in things like being able to communicate with the clinically extremely vulnerable because you didn't even have addresses or correct phone numbers on the medical records. There was also an issue with data on individual social care homes, meaning you did



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not really have a total idea of how much PPE the social care sector needed, and it almost ran out on Christmas day. What can be done fairly rapidly to correct some of these great shortages of detail? I mean, MHCLG was having to send out a questionnaire to each local authority to find out what was going on. This information ought to have been automatically held at the centre. What can be done fairly rapidly to rectify these omissions?

Alex Chisholm: That is probably a question for Chris, because the data there is talking about patient records, which are held in—

Q37 **Sir Geoffrey Clifton-Brown:** But it was a general question about some fairly basic shortages among different Departments, from fairly basic data, so what can be done across Government to rectify those shortages? It is not just Chris; it is not just the DHSC, although they were in the firing line. It is other Departments as well.

Alex Chisholm: Let me answer in two parts. First of all, there was a bigger, successful effort to build up the database of vulnerable persons. It took a month to build up that list of 1.8 million people—it would have been great to have had that beforehand. It did require a matching up of patient records with local authority information and other public information, but it was done quickly and we now have that, and it has been vital to the shielding programme over the past year or more.

I agree with your fundamental point, though, which is that we should have better quality data on citizens available across Government as a matter of course. In the past, there have been efforts to develop so-called digital identity-type programmes to make it easier for people using Government services to identify themselves, and for it to be known who they are and what their situation is, but we are going to have a big new push on digital identities, which we have announced. With that, when somebody changes their address, for example, rather than having to renotify hundreds of different public authorities about that case, they will be able to tell us once and then that data is updated immediately. Equally, with phone records, obviously people mainly use their mobile phones. If their mobile phone number changes, again, tell us once, and then whatever our need might be, we have an up-to-date record of it. That will hugely add to the efficiency and quality of public service delivery.

Sir Geoffrey Clifton-Brown: Okay, we will leave that there.

Q38 **Chair:** Can I stay on that for a moment, Mr Chisholm? Tell Us Once was a long-standing Government programme that then got unceremoniously dumped. To be clear, are you now saying that you are going to bring it back?

Alex Chisholm: Yes. There have been different dimensions to it: Tell Us Once was originally introduced in a bereavement context, I think.

Q39 **Chair:** It was supposed to be the beginning of something bigger.

Alex Chisholm: It still applies. At the moment, even within gov.uk, there are over 100 different ways to log in. We want to create a single login-

type process. Obviously, doing that requires a lot of data sharing, a lot of careful regulatory legal work and a lot of system development, but that is what we are committed to do.

- Q40 **Sir Geoffrey Clifton-Brown:** Sir Tom, could I ask you a question? In terms of managing public money, my colleague Gareth Bacon quite rightly focused on fraud and on the BBLs, which is probably the biggest example. However, there have been lots of other examples throughout the pandemic. I accept that things were having to be done at speed, but now that we are, hopefully, beginning to look towards the end of the pandemic, what will you be doing to advise your colleagues on this call and those who are not on this call that they now have to pay greater attention to rooting out fraud and error in their various schemes?

Sir Tom Scholar: I think this was covered at some length in the previous session you had on fraud and error. In the interests of time, I can either give a brief answer now, or I am very happy to write to you.

- Q41 **Sir Geoffrey Clifton-Brown:** If you could give a very brief answer, what action are you taking to remind your colleagues that they should abide by that stipulation in “Managing public money”?

Sir Tom Scholar: First of all, reminding everyone that that is central to their responsibilities as accounting officers. When signing off their statements of control in the report and accounts each year, that is something they have to cover, and they have to do the work through the year to put themselves in a good position to be able to do that. Alex is strengthening the counter-fraud function right across Government, so he might want to add something about what they are doing there, and Cat Little—who leads the finance function—is doing the same with that function, as she spoke about last time.

Alex Chisholm: What is most striking about the fraud exposure that has come through over the past year is not only the massive increase in scale—obviously because of all the funding that has happened, and the speed at which that had to be put in place—but which Departments it lies in. Historically, HMRC and the DWP have always had to have capacity to deal with fraud and error, and have very established, capable teams and systems for doing that. Because of the nature of the response, you now have Departments like my old Department, BEIS, and DCMS, DEFRA and other people with increased exposure to this. One of the things that we are trying to do from the centre is surge resource and capability in support of those Departments, to compensate for their new increased exposure.

- Q42 **Chair:** Can I just check on the Tell Us Once replacement, Mr Chisholm? Has it been funded yet?

Alex Chisholm: Yes, it was funded in SR20, and will obviously be a priority bid in SR21.

- Q43 **Chair:** Right, so it is funded for its first year. This has been one of the problems. We have had Verify, which will be a painful memory for many of you. In terms of your position, Mr Case, you have to advise the Prime



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Minister and the Cabinet on making decisions about investment for some of these issues. Where would you say these issues around data and access to it and IT systems fit in the priority list?

Simon Case: I think right across Government investing in data and dealing with legacy IT is high on the list. I am sure that, as the bids wing their way to Tom and his Treasury colleagues, improving data and dealing with legacy issues will be high on the list.

- Q44 **Chair:** The problem is that they are always high on the list. One of the other challenges, of course, is that there are lots of potential IT programmes, lots of old legacy IT that needs replacing with new systems, and maybe even hardware that needs to be replaced. We have examples across Whitehall of large projects that are already delayed and expensive. You cannot possibly do it all at once, so in terms of a timeframe—Mr Chisholm, I suppose, would be the person to go to—how long is it going to be before all of these challenges are dealt with and, if there were another pandemic or another national crisis, we would be ready in terms of data and IT to deal with it?

Alex Chisholm: I don't think you actually ever finish that journey. It is the nature of legacy IT that you always have it, because when you buy some new stuff the next day it becomes—

- Q45 **Chair:** Yes, but you know what I mean. There are a lot of very old, very clunky systems that civil servants are having to work with.

Alex Chisholm: Absolutely. Our overall commitment is to move as many of those old systems on to new, modern, easy-to-use, cloud-based systems. Obviously to do that is many billions, not hundreds of millions. It is a programme that we are driving over the next three years. It has been funded and supported by the Treasury. It is recognised as a huge department, not only—to the Cabinet Secretary's point—to deal with risks on the cyber side, but because better use of data is absolutely key to future service delivery and to improving the efficiency of the overall operation. It is a very strong part of the overall proposition for—

Chair: It is very marked how everyone is talking about data. Sir Geoffrey has been on this Committee, on and off, for over 20 years. I have been on the Committee for a decade. If, between us, we had £100 for every time we mentioned the word "data" and the need for it we would probably be, in normal times, sunning ourselves in the Caribbean rather than perhaps sitting in a Committee Room in Parliament—perhaps not together, I would stress, before anyone gets any ideas. I am glad that it is flavour of the month. Let's hope that it is not just flavour of the month, but actually continues.

Nick Smith: I'd go to Barry Island.

Chair: Touché, Mr Smith.

- Q46 **Nick Smith:** Going back to PPE, in your letter, Mr Wormald, which we have just got, you say that there is plenty of supply now until next year. You give two reasons for that: "in-practice demand has turned out to be



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lower than forecast...and our buying activities were more successful than"—this was an odd phrase—"would have been otherwise prudent to predict".

Could you tell us more about these forecasts, please? How far out were they, and what was the reason for that? Did it come back to the earlier issue, pointed to across the piece, around poor-quality data? Were there understandable political pressures to buy, buy, buy? Certainly, it was an issue in south Wales in our social care sector. I was saying to my local Aneurin Bevan health board, "What's going on? Why isn't there sufficient data in social care?" How do you account for the PPE mountains that we now seem to have, please?

Sir Chris Wormald: I refer to my previous answer. It is basically two things: one is the unpredictability of the disease itself, and the second is the decision that we all took. As I said earlier, I think it was the correct decision, which was to aim for a reasonable worst case, not a mid-point. We bought for the worst that we thought could happen. Built into that was an extremely large risk that we would over-buy—by definition. We were aiming for something that was 5% to 10% likely to happen, and we are all extremely—I'm not sure what the right word is—grateful that it did not materialise. The strategy was to have a very high risk threshold and aim for that reasonable worst case. We knew that we would therefore be at risk of having too much. As I said, that is a far better position than if I was sitting here defending not having enough, so I stand by all those decisions.

If that persists, which is what I think we are getting at—we are working on this at the moment; we are not at the end of this disease, so having a very large PPE stockpile is a good thing at this point, not a bad thing—then of course we will need a strategy for what we do with the excess, which comes basically to five things. We will clearly, at the other end of the pandemic, whenever that is—

Q47 **Nick Smith:** Sir Chris, can I interrupt? It is great that we have bags of PPE available for people to use, but at the start of the session I asked what was your assessment or estimate of how much PPE we will have for next year, and you were not really able to give us an answer. I hope it is better than what it was last year. What we are trying to get at now is what you have done to improve your data and to improve your forecasts so that next year we will not have a similar problem and we will not have to worry about £1 million a day being spent on a PPE shortage. We just want to know that you have gripped it.

Sir Chris Wormald: This is what I am explaining. We will want an ongoing stockpile even after the pandemic, but clearly not of the size that we have got right now, but one of the uses that we will put our current excess to will be future decisions on the future stockpile. As I said earlier, we have in stock roughly what we used last year, so if we have another year that is exactly the same and therefore at the very top end of our expectations, we will have enough. Then we will run the stockpile down. As I explained, there are basically five things we can do with it, which will



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run it down to what is on the other side of the pandemic. There are future decisions to be taken here. We want our end stockpile to cope with future pandemics. I can go into that in a lot more detail if you like, but that is the strategy. On the forecast, in answer to your previous question, I will send you what we have, but we are not over-reliant on forecasts because, as I say, there are high levels of uncertainty around them.

- Q48 **Nick Smith:** Thank you for that. When you talked about procurement and the changes you made leading to an over-supply, in your note you said that the Department has taken several actions to ensure that your commercial staff are well equipped to do their jobs. The question is: were they well equipped to do the jobs before?

Sir Chris Wormald: We had been taking actions pre-pandemic to improve the commercial capabilities of the Department, and indeed the NHS. That was one of the overall civil service's objectives pre-pandemic, and we were a part of this. We had appointed an extremely good new chief commercial officer, Steve Oldfield—I think you have questioned him several times. He was new to the Department and has been doing that build-up. At the point when the pandemic began, we had a much-improved position, but it was still work in progress, not within the commercial functions, where we have built up considerable amounts expertise, but in commercial awareness in non-commercial staff. That was going to be our next focus.

What the pandemic did, as you know, is multiply the demands on both the Department and the NHS commercial functions enormously, way beyond what we or the NHS were staffed to do. What we did was, I think, a credit to the cross-functional leadership across the civil service. A large number of staff from the wider commercial functions of Government came to the Department and the NHS as surge capacity to meet the excess.

So, at the point when the pandemic began, our commercial functions were considerably improved but it was still work in progress. To actually deal with the pandemic we needed the surge assistance, which worked very well, of the commercial capabilities of the whole of Government.

- Q49 **Nick Smith:** I now want to talk about the quality of the PPE that we have in stock. I understand that the Department's estimate of the percentage of PPE that is not fit for purpose has increased markedly. Can you explain what has happened, please?

Sir Chris Wormald: That is not quite correct. I will talk through the categories.

Chair: To be clear, on the letter, Mr Smith, point one—

Sir Chris Wormald: There is a small amount of stock that, when we quality assured it, was not fit for purpose and it cannot be used. I think that is about 230 million items out of the—

- Q50 **Chair:** Is that what you call "exit stock" in the letter?

Sir Chris Wormald: Yes, that is stock that cannot be used.



Q51 **Chair:** Is that from medical PPE?

Sir Chris Wormald: No, and that is the important distinction. There is a category, which is rather larger, that is perfectly fit for use, but not in the most difficult settings or in clinical settings, basically. It is perfectly good to use in other sectors, but it is not of use to the NHS. That is stock that we will be using outside the NHS. Then, there is the rest, which is the vast majority—

Q52 **Nick Smith:** Can I interrupt? Can we go to this material, which is potentially billions of pieces of PPE, that isn't fit for medical use? Exactly how much is there? What are you going to do with it, so that it is of value and helps?

Sir Chris Wormald: There are about 2.9 billion items that cannot be used in medical settings. We will be using that elsewhere in the economy. That could be used anywhere that is not an NHS setting. It will be used in the many areas of the economy where PPE is used, but not in clinical settings.

Q53 **Nick Smith:** So there are nearly 3 billion pieces of PPE to be used not in medical settings. How are you going to find out who wants it and how are you going to distribute it? Please tell us more, because it is a lot.

Sir Chris Wormald: Yes, this is definitely extremely—

Q54 **Nick Smith:** And what is the value of it as well?

Sir Chris Wormald: It is about 10% of what we have got, of course, so—

Q55 **Nick Smith:** So it cost about £1.5 billion?

Sir Chris Wormald: Something like that. Of course, we are providing PPE, particularly via the portal that you know about, to lots of non-NHS settings at the moment, including social care and elsewhere. We will be building on that to develop plans to use that PPE in those many sectors of the economy that use it that are not the NHS. Those plans are being worked up right now. I will add to my letter the exact state of play on those plans, but that is the basic strategy.

Q56 **Nick Smith:** So that is work in progress. Best of luck with that. It is important you get value for money out of that—nearly 3 billion pieces and £1.5 billion in value.

Finally, of the 30 billion pieces of PPE you talked about at the start of this session, about 1 billion are yet to be produced, are in storage in China or are perhaps on the high seas. Given that you want to try to produce more PPE locally, given that we have very large stocks already, and given that the cost of that is going to be very high, will you be continuing those contracts? What are your plans for that—about a quarter of PPE that you have in hand? What are you going to do with it, please?

Sir Chris Wormald: This comes back to the five-part strategy that I was describing earlier. This is stuff that we have paid for; it happens not to be in the UK, but it is stuff that we have paid for and it is part of our overall defence against future needs for PPE.



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Where we have excess stock, whether held in the UK or overseas, we have various options, as I say, which we will work through. They go, basically: future stockpile; donating to other countries that need it, which we have been doing in some cases, as you know; use in the wider economy, as I have described; or selling it. And when we have reached the end of all four of those options, there may be some for which we have no use at all and we will have to dispose of it.

So, regardless of whether it is our UK-held stockpile or stuff that is yet to be delivered, we will be doing those five things.

Chair: Okay, we have got the message.

Q57 **Nick Smith:** That sounds like you are still not sure what to do with 8 billion pieces of PPE—

Sir Chris Wormald: No, that is not the case—

Nick Smith: Let me finish.

Chair: Mr Smith was trying to ask a question, Sir Chris.

Sir Chris Wormald: We have built up a stockpile very deliberately, to cover our future needs here, knowing that we risked an excess. We have a strategy there for what to do with it. So that question I don't accept.

Q58 **Nick Smith:** Sorry if I was speaking over you, Sir Chris; I was just trying to make a point.

Sir Chris Wormald: They are completely fair challenges, of course, but we do—

Q59 **Nick Smith:** Getting back to these 8 billion pieces of PPE, at a cost of £4 billion, I am not satisfied with your answer, Sir Chris, just because of the amount of stock and the cost of it. Clearly, this is work in progress, but would it be possible for you, as soon as possible, please, to outline exactly what plans you have for that amount of material?

Sir Chris Wormald: Yes. And I fully accept that our planning on this is not complete; that is because the pandemic isn't over. So what I am not doing—I mean, it would be very easy for me to sit here and give you false certainty about every single item that we have a plan for. We are not at that stage—

Q60 **Chair:** We recognise that. What would be helpful to us is to have a bit of your train of thought. It is a large amount, as Mr Smith has highlighted, to repurpose, redistribute, sell—whatever. And it is easy to say those things. Also, there will be expiry dates. So, it would be helpful to understand how you are managing those sorts of challenges in the supply chain, even if it is going to be supplied eventually to a third party.

Sir Chris Wormald: And as I say, these are all completely fair questions that we are—

Chair: I like to think, Sir Chris, that we do ask fair questions.



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Sir Chris Wormald: I have set out the overall strategy. As that strategy has more and more numbers attached to it, which will happen over the coming months, we will keep the Committee fully informed of where our thinking is. But, as I say, I am not going to give you false certainty where no certainty exists.

Nick Smith: That is it from me, Chair. Thanks very much. And once again, everybody is welcome to come to Barry Island to boost tourism in south Wales.

Q61 **Chair:** There you go. I don't know if that comes with an easier ride at the PAC—maybe not from the rest of us.

I just want to check something in the letter. One of the really key points that jumped out is that when we had you and David Williams here, when he was in the Department in January, he laid out figures very clearly and very definitely—he is always good on the numbers—that 1.3% of PPE was not fit for medical use; I think 1.3% is right. In the paragraph that we have just been talking about, you are saying it is 2.9 billion items. It is difficult to do the full maths, because we don't know what the baseline is, but it seems quite a lot more than 1.3%. Can you explain the discrepancy?

Sir Chris Wormald: Obviously, the position has moved on between January and May. We have done a considerable amount of quality assurance. And as I say, this is not a "yes/no"; there are the three categories. There are things that we use in the NHS, which meets the highest specification; there is perfectly useable PPE that we use in other parts of the economy; and then there is stuff that actually is not fit to be used. Again, I will set that all out, because the position has evolved since Williams—

Q62 **Chair:** If you can provide us with a regular letter along the lines of the one you sent, which was very helpful, that would be good. I have one other quick point on the letter, which we might as well finish off, as we are on the subject. You have "the 'UK Make Innovation Hub' which encourages clinicians and NHS leaders to use the forum and participate in discussion around important subjects," and you have "100 attendees" discussing a range of issues. How does that feed into making any decisions about PPE supply?

Sir Chris Wormald: This is part of our consultation process. It is a very important part, because of course the demand for PPE is the push that comes from the disease, but it is also rooted entirely in clinical decisions on what level of PPE we actually require.

Q63 **Chair:** But which NHS leaders? Are they self-selected? Do you invite them? What level are they?

Sir Chris Wormald: I will put it in the same letter. You are going slightly beyond my knowledge of the exact—

Q64 **Chair:** That is what I am slightly worried about. To be perfectly cynical, I have heard of civil service consultations before, and sometimes it is just a



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bunch of people in a room. That is not quite the same as having the right people talking about the right things and influencing decisions.

Sir Chris Wormald: It will not surprise you that we consult very closely with the leadership of the NHS.

Chair: We have covered some of this in other hearings. I don't want to go into that in too much detail, but I am always a bit sceptical.

Sir Chris Wormald: I will set out exactly this, but as I say, the question of coming to a clinical consensus as to what PPE is required is the other bit of the equation, which is separate from what we can and cannot acquire. I am quite happy to set that out too.

Q65 **Chair:** You state very clearly under point 4(viii) that "DHSC did not receive any alerts on the increasing supply risks related to PPE from China in December 2019," which is in direct opposition to very clear and honest evidence that we had from a company that said it had alerted the Department. Are you saying absolutely categorically that you did not, or do you think it went to a junior part of the DHSC and did not filter up to your office?

Sir Chris Wormald: There is a formal alert system, which is what I am talking about. Whether individuals raised a concern—I am not challenging people's recall.

Q66 **Chair:** That is something we may want to look into a bit more.

Sir Chris Wormald: There are formal alerts of shortages. As you know from our Brexit discussions, we have a very clear system for formal alerts of shortages of all medical goods. That is what I think we are referring to.

Q67 **Chair:** You know what a formal alert is, and the Whitehall system will know what a formal alert is. If you are just a hard-pressed company trying to get the information, you would not necessarily know where to send it. That is perhaps an issue we want to pick up.

Sir Chris Wormald: That is fair, and I am not accusing anyone—

Chair: I just wanted to be clear on that.

Sir Chris Wormald: We have a system, which I am reporting to you.

Chair: I will come back to domestic production, but I want to bring in Sir Geoffrey Clifton-Brown first, because we want to talk about some of the human impacts of this.

Sir Geoffrey Clifton-Brown: Can I stick with you for a minute, Mr Wormald, on your letter? Sorry, Sir Chris, not Mr Wormald—I have downgraded you. I'm very sorry.

Sir Chris Wormald: Whichever you like.

Q68 **Sir Geoffrey Clifton-Brown:** Chris might be all right.

This is the issue of when financial authority was issued to purchase PPE,



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and whether it was actually too slow, in a very fast and heated-up market, to enable our suppliers to get out into places such as China and purchase PPE early enough. You hint at this in your letter, because you say, "On 18 March 2020 SCCL were provided with delegated authority to commission air freight." Why did it take till March for them to be issued with that authority? Why were they not doing it in January, when you knew that the pandemic was coming along?

Sir Chris Wormald: This was a fast-evolving position. I may not answer in too much detail, because my Secretary of State, who is at your sister Committee right now, has been answering some of these same questions.

Q69 **Sir Geoffrey Clifton-Brown:** I am asking you the question.

Sir Chris Wormald: There was a process, which actually began in January, when we asked SCCL to go out and buy in the market and also began to release the existing stockpile. Then, over those months as the situation deteriorated and it became much clearer what PPE was required, we had a greater and greater set of delegations to go out in the market and buy. It was actually April when, as I was discussing with the Chair, our clinical guidance on what PPE was required changed. Then, with the increasing understanding of asymptomatic transmission, that was when the demand for PPE, not just in the UK but worldwide, skyrocketed. You see this in our buying numbers: that was when it really, really picked up.

We were out and active in the markets, mainly in February and March. As the position on PPE became much clearer as to what was needed, that is when it picked up. We think that those were rational decisions at the time: we took some steps in those months and then it really stepped up in April. One always has to ask oneself the question, "Of the things we did later, could we have done them earlier?" Looking back at the decisions, I think they were rational at the time, but that was the course of events.

The other thing that I should just clarify, because it has come up in other circumstances, is that there were no points where we were at odds with our friends at the Treasury on this. There was quite rightly a system of financial controls in place around what we would spend. We discussed with Treasury—

Q70 **Sir Geoffrey Clifton-Brown:** Chris, I don't want to prolong this. I simply make the observation that if you look at the evidence that we have received from the pre-panel on PPE, some of our biggest PPE suppliers were quite adamant that they could have been operating more quickly if they had been given the financial authority to do so.

Sir Chris Wormald: Yes, I saw that evidence. As I say, in retrospect one can ask those questions. I think the decisions that we took were rational at the time. The only other thing I would say—

Sir Geoffrey Clifton-Brown: No, that is fine. In hindsight, that is an honest answer, and that is really all we want. The facts are known.

Chair: As we are talking about money, maybe it would be pertinent to bring in the Treasury on spending controls. Sir Tom, was your Department



putting a brake on spending?

- Q71 Sir Geoffrey Clifton-Brown:** Maybe the problem, Sir Tom, was that it was a question of when you were asked to authorise this huge increase in expenditure.

Sir Tom Scholar: I would just agree with what Chris has said. The Treasury turned round requests very rapidly, within 24 hours, and then we quickly moved to a much bigger delegated budget, so I don't think that the approvals process was an issue at any point.

- Q72 Sir Geoffrey Clifton-Brown:** Can I move on to you, Mr Chisholm, and talk about Crown reps? Crown reps, as the Chair and I saw over the Carillion debacle, have a critical role in co-ordinating Government procurement. Can you say what the status is of your Crown reps at the moment? Are you fully staffed in every category? How are they operating? PPE is just one example, but a huge number of vastly increased procurements were necessary during the pandemic. Where is your Crown rep operation standing at the moment?

Alex Chisholm: Thanks for your question, Sir Geoffrey. Just briefly, the Crown representative scheme is about a decade old now—it was first introduced in 2011—and it has evolved well over that time. There are 24 today, of whom two are ministerial appointments—the ones who deal with SMEs and voluntary and community cases—and there are three within the MoD. They are all people who have come from the private sector with a lot of expertise; they act as independent liaison managers, as it were, with the key strategic suppliers.

As you rightly remember from the Carillion times, the PAC was very interested to make sure that we get people of the right calibre and use them effectively. I think that that is the case: we have very good-quality people and they put in a terrific amount of very important work.

In relation to the pandemic specifically, they have been very helpful to us in a number of ways. For example, with their help we were able to put in place a new scheme in the UK to support the production of facemasks here in the UK, rather than importing them all from China—that was a Crown rep-designed scheme. We were also able to use them, as you rightly say, in a lot of procurement-type situations. We have a number of companies who provide key services to government, and some of them may have been going through some financial distress because of the collapse in revenues that they were experiencing or because of a big increase in costs associated with lockdown and other rules. We have been able to nurse some of those companies through that relatively traumatic context and there have not been any failures of the kind we have seen from Carillion, and a number of those companies have been successful in raising new funds and fresh equity.

- Q73 Sir Geoffrey Clifton-Brown:** They do a great job. I am tempted to ask you a tongue-in-cheek question. You say that they come from the private sector. May I just urge you to make sure that they do not leave the Crown agencies too quickly before their term is over? I am thinking about



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Mr Crothers and making sure that we are not going to have anybody who is actually working for the civil service also working for the private sector at the same time.

Alex Chisholm: Absolutely. Their conflicts of interest are very zealously monitored and updated several times a year. One of the rules is that they cannot shadow a company they used previously to work with. We have been pretty stringent about that; even if they have a pension arrangement in that, we have said, "No, that is a no-go area." And when they do finish with us, they can't then advise and work for those companies again. We have been very keen to make sure that we get all the benefit of having this commercial expertise, without any of the taints and conflicts you mention.

Q74 Sir Geoffrey Clifton-Brown: I am not sure whether this a question for you, but I am going to start with you and then perhaps somebody else will pick it up. I accept that during the pandemic things were needing to move pretty quickly, but we have the question of guidance issued by various Departments. For example, the PHE guidance changed 30 times up to 31 July and, perhaps more worryingly, the guidance from the Department for Education changed 148 times from March till May, and it was often issued late on a Friday evening, putting teachers, schools and governors to great stress. Who actually monitors the quality of Government guidance? Is that up to each Department or is there any centralised monitoring by either you or perhaps Mr Case?

Alex Chisholm: It depends on what type of guidance one is talking about. Let us look at cross-government guidance. For example, in my area of responsibility around procurement we have updated that guidance probably six times in the last year—so we have done so quite sparingly. That goes to all people involved in commercial contracting, so that is a cross-cutting and Cabinet Office responsibility. Guidance issued to schools would, obviously, be through the DfE, and PHE would be issuing guidance to people. That would be a much more delegated approach. We have heard already a little bit about the context of that. The thing that is probably most striking is that in the early phases of the pandemic the information picture was changing every day, and that was what was driving the very rapid updating and changes in the guidance coming out, be it in the education or healthcare sector. As you look over the course of the year, you will see that the frequency of issue of guidance goes down a lot, not because people are not still working or are not caring, but because the information picture becomes more stable.

Q75 Sir Geoffrey Clifton-Brown: I would like to come to you, Mr Case, and to one of the perhaps not so concentrated on, although perhaps more serious, aspects of the pandemic. As paragraph 36 makes clear, the medium estimate is that a 30% attainment loss in disadvantaged groups of our children has occurred. It seems to me that a plethora of schemes are emerging from the DfE. How are you monitoring whether they are actually being effective and value for money in catching up this attainment gap loss?



Simon Case: First, you may have seen that DfE commissioned some external research about the attainment gap, which was published last week. In terms of how we are monitoring the effectiveness of interventions, the Committee may have seen that the Prime Minister has set up a delivery unit along the lines of former delivery units under the Blair Administration. We are using that mechanism to set out clear targets and goals and use a system of consistent monitoring of inputs on effectiveness and bringing those to ministerial-level stocktakes. It is a rather familiar approach.

Q76 Sir Geoffrey Clifton-Brown: In using the words “plethora of schemes”, I did not in any way mean to diminish the value, because those schemes are absolutely vital to the children and pupils involved. On that subject, what is being done to ensure a proper transition from virtual learning to physical learning, getting everybody at every stage in education, right up to the tutors in universities, back physically in their place of work for face-to-face learning?

Simon Case: DfE are, right across the education sector, monitoring in-person attendance. It is one of the things that gets reported on in the cross-Government dashboard, which James may want to comment on. We are monitoring that centrally. Obviously, one of the main structures that DfE are using for following up is the regional commissioners, who focus in on where there are issues.

One of the things that has not come up yet but is rather important to say is that, of course, this pandemic is not over either nationally or internationally. A lot of the discussions that we are having are, quite rightly, about lessons learnt—you are pushing us hard, as we are pushing ourselves hard, on those lessons that we are learning as we go—but actually, this is not over; it is ongoing. For example, we are paying close attention to what is happening in schools and school attendance in those areas that are particularly hit by the delta variant at the moment, as part of the discussion that we are having on a daily basis with Ministers, so that we are aware of what is happening and that when it comes to recovery, we are clear about where attention needs to be focused. James, is there anything you want to add on that?

James Bowler: I think the latest stats are that covid absence in school attendance is between 1% and 2%. I can say more if you wish.

Q77 Sir Geoffrey Clifton-Brown: Is that concentrated in any particular sectors—is it particularly concentrated in further or higher education, for example?

James Bowler: I think it is mainly secondary school that those stats relate to.

Chair: The danger with a global figure like that is that we know there are very big differences, even among our constituencies, so at this high level, we are not going to get into that detail. I think Sir Geoffrey’s point is about the catch-up programmes, is it not?



Q78 Sir Geoffrey Clifton-Brown: Yes. I am very concerned about the catch-up programmes. When I used the word “plethora”, I stressed that it was not meant to be derogatory in any way, but there are a lot of different programmes, and I am wondering what is being done at the centre to monitor the effectiveness of each of those. One might be a lot more effective than another, therefore you would need to concentrate on that programme and drop the other maybe. I accept that this is mainly a DfE problem, but nevertheless, Mr Case, it is something that you in central Government should be critically interested in.

Simon Case: As I said, we are, and we are using the Prime Minister’s new delivery unit to do that. DfE have evaluation frameworks in place for the effectiveness of these interventions, and they will be reported regularly to the Prime Minister, who will be having stocktakes on that performance to make sure that we are focusing on the right things.

Q79 Chair: When we had the Permanent Secretary from the Department for Education in front of us, there was a bit of reluctance to do an evaluation of programmes so far. The line was—I slightly misquote—“We will wrap it up with the major Government inquiry, rather than looking at that.” Are you confident that you are getting the right information from Departments about what is working and what is not in real time, so that the Prime Minister and the Cabinet are informed enough to make a proper decision?

Simon Case: Often to the chagrin of some of my colleagues on this call, I am never satisfied that we have enough information about how things are going precisely. Education attainment is a genuinely challenging thing to monitor in real time. A good deal of what goes on day to day has to be reporting from the professionals on the ground about how they see their interventions working. It will take time to get the effective information that you are talking about, but it is imperative that we get there.

Chair: Absolutely. That is a truism if ever there was one, as Sir Geoffrey highlighted.

Q80 Sir Geoffrey Clifton-Brown: I want to move from education and back to you, Sir Chris, on health, and particularly on the people who work in the service. Paragraph 39 suggests that in May 2020, 45% of doctors were suffering from depression. That seems to be a fairly extreme figure, and I do not know whether it is accurate or not. If it is anywhere near right, it is something that the nation ought to be hugely concerned about. What arrangements is your Department making for outreach screening and intervention, not just with doctors but with all your staff—nurses and everybody else connected with the health service?

Sir Chris Wormald: It is an extremely important issue that the NAO fixes on and you have raised. We and my NHS colleagues completely acknowledge that. I will not comment on that particular piece of research. There are a lot of numbers around, but in general, has our workforce been under intense pressure? Yes, it has. This Committee has always been very generous in thanking that workforce, and I am sure everyone here would want to do so again.



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There are two aspects to what we are doing to support the workforce, which I will cover briefly. Obviously, we have had whole sessions on this. The first is that clearly we need more people. The figures at the moment are the highest they have ever been. We have 10,800 more nurses than we did 12 months ago, and more doctors as well. Of course, there is the Government's commitment to 50,000 nurses over the Parliament. One of the biggest things we can do to support the workforce is ensure that our hospitals and other places are fully staffed, so those numbers are very encouraging. Training numbers are also very encouraging at the moment. Indeed, we have a considerable interest in people becoming future doctors and nurses. Of course, that is the long-term answer to workload pressure.

- Q81 **Sir Geoffrey Clifton-Brown:** There are two different issues there, Sir Chris. I anticipated that you would use those figures. The first issue arising from my question is that there is still an increasing and unknown problem with mental health issues among the medical profession that you employ.

Sir Chris Wormald: This is the second part of what we are doing. I should say that this part is led by my NHS colleagues, who I know have discussed this with you previously. I will report on what they are doing. They are supporting the existing workforce at this time of pressure. There is quite a lot of research going on into exactly what the mental health and other pressures are. As I say, I don't particularly recognise the numbers that you used, but we know that there is a problem, which is being researched further.

There is a particular scheme that the NHS is running, which put £15 million, and then £37 million this year, into direct mental health support for the workforce. There are also arrangements for counselling services—especially bereavement support helplines and so on. The NHS, with its People Plan, is also putting a lot of emphasis on flexible work and making rostering better. There is a set of national supports to meet the challenges, and then of course the direct employers have to take this very seriously as well. That is baked into the NHS planning guidance to trusts, which specifically asks them to balance, particularly as we go into recovery, the demands to be made of the workforce.

- Q82 **Sir Geoffrey Clifton-Brown:** You see, Sir Chris, there is a purpose to this train of questioning. There is an increasing problem out there with mental health problems, or indeed just general pressure on employees—I know, because my sister, who was a GP, has finally decided to retire at 62, so that is a loss to the health service. If there is a problem with people retiring early and with people absent because of mental health problems, you will need to recruit even more people to the health service. The two things mesh in with one another.

Sir Chris Wormald: I am not disagreeing with anything that you say, but what we are doing about it has to be in two parts. We have to support the current workforce, in terms of what the NHS is doing nationally, and then individual employers—I am sure you have done this when you talk to NHS trust chief execs or other NHS leaders. This is top of their list of things



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that they are thinking and worrying about. So, there is supporting the existing workforce, and then there is growing the workforce. As I say, we have some very encouraging numbers on growing the workforce, but I do not think that anyone in the NHS or elsewhere would say that either of those jobs—supporting and growing—was finished.

- Q83 **Sir Geoffrey Clifton-Brown:** A final and very simple question from me: do you have a target number which is, at this moment, the number of nurses and of doctors you need to recruit and train?

Sir Chris Wormald: On nurses, it is the 50,000 increase set out in the governing party's manifesto, which is our overall target. That remains our overall target. We do not have a similar commitment across doctors, which is of course a much more diffuse picture, obviously, around specialists. So, we do not have the same type of target there, but we are acting to expand the numbers, particularly of GPs, which is a manifesto commitment.

- Q84 **Chair:** I might come back to you in a moment, Sir Chris. I will now turn to Simon Case. Mr Case, you came into the job new, and you talked earlier about Blair-era structures of delivery units and so on. That is some time ago. Were you happy when you arrived that the command and co-ordination structures that you had within your reach—and, by extension, the Prime Minister had within his reach—were up to the job?

Simon Case: It is rather difficult to answer the question about what was going on before when I was not there. In fact, in relation to the pandemic—

- Q85 **Chair:** When you arrived—certainly emergency things have changed, but the basic structure. Basically, the structure of Whitehall coped well with this, so what would you change, if you could?

Simon Case: Of the things that I focused in on—quite a lot of these issues have been touched on already—one is the focus on prioritising and defining key delivery tasks and putting the structures in place, like the delivery unit, as mentioned.

- Q86 **Chair:** The puzzling thing there, Mr Case, is that we had a delivery unit, then it went. Do these things wax and wane? Why is that, do you think?

Simon Case: I think you probably need to address those questions to the relevant Ministers at the time, about the decisions that they took. The simple answer is yes, these things wax and wane, based on—

- Q87 **Chair:** Sorry, but should a delivery unit or whatever you call it be a political decision? Surely that is absolutely at the heart of what Whitehall does, which is that Ministers decide—manifestos make commitments, some of which are quite challenging—and Whitehall is tasked with delivering.

Simon Case: There is quite a long debate to have underpinning that question. It would certainly be highly improper for me to say that politicians could have no say over the structures that supported them in



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government. If I or any civil servant were to tell a Prime Minister that they had absolutely no choice—

- Q88 **Chair:** No, that is not what I was saying at all. Every politician who makes a policy pledge wants it delivered. You can call it whatever you want, but a delivery structure of some sort needs to be in place. That is something that I thought the civil service would have in hand. You have already made changes—you made those changes, just to be clear.

Simon Case: Indeed, the civil service has those structures in place—those delivery structures that you are talking about. What a delivery unit does, as in the past and as it will do now, is particularly focused on supporting the Prime Minister in focusing on the delivery of those priority areas for the Prime Minister, making sure that he or she has access to the latest information. I think Mr Chisholm wants to come in on some of this. I expect he will touch on ODPs and the like.

Alex Chisholm: Just briefly, to be helpful, reflecting on the whole experience of covid following on from Brexit, one important piece of co-ordination machinery in both cases has been the evolution of the committee structures. It may not sound very exciting but I think it has been very important that XO in the Brexit case, and then Covid-O and Covid-S, have meant that Ministers have been meeting almost every day, and sometimes more than once a day, with officials and experts—scientific experts—and taking very rapid decisions based on the latest information, but with proper political authority. That has been a very useful and important innovation that has helped us to deal with the crisis.

The other one, which is a work in progress rather than a finished piece, is that, as has been widely reported, at the beginning of a crisis that was affecting all parts of the economy and society, and with a rapidly changing information picture, people wanted to have integrated data feeds running into the centre to support those decisions. Neither the Cabinet room nor Cobra is ideally set up for that, which is why we have started building a national situation centre that will be staffed 24/7 and which will have those integrated data feeds to support that type of rapid decision making.

Chair: I have to say, having been in those rooms, we were lucky to get one TV screen in to beam someone from outside, so things need to move on for sure. Thank you very much for your time, Mr Case; I think we have now finished with you. I will now turn to Gareth Bacon MP.

- Q89 **Gareth Bacon:** I have one question, really, which I will aim at Mr Chisholm. If he is not the right person for it, he can push it on to someone else. It is about the lessons learned by the Government about monitoring and improving the pandemic response based on end-user feedback or frontline-worker feedback. Paragraph 26 of the NAO Report touches on this. It talks about HMRC's surveys of employers, employees and self-employed people, in terms of the support packages that that they were being offered. The very high level of satisfaction that came back told them that their programmes had been pretty well targeted.

By contrast, as we picked up in our report about PPE procurement, we



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were being told by NHS Providers that PPE was always available as it was needed and had never run out. We then got a very contrasting view from the frontline end of the NHS telling us that PPE stocks were running dangerously low, and they were all very worried and down to their last boxes of things. What structures have the Government put in place to take soundings like that in a more structured way so that we can observe and tailor our programmes according to what is coming back? Mr Bowler has put his hand up; maybe he is better placed to answer.

James Bowler: I hope that is okay, Alex. I was going to give a covid-focused answer. I will speak to three things. The thing that I think is a really interesting lesson learned for the future is that we have a fieldwork team here in the taskforce, which the armed forces has helped set up. That is going out on the ground, particularly local authority-based, looking at what works, impact, and realities of policy in its implementation. That has been really useful in what works locally. There is lots of stuff about the need to share data better, avoiding constant changes, and some of the themes you have picked out today, with a feedback loop really quite quickly through that fieldwork team.

The second bit I would talk about is something called the local action committee, which is a governance set up—bronze, silver, gold—in DHSC, which I think has worked very well, making sure that information from frontline workers locally is fed into local decision making. Thirdly, as Alex Chisholm talked about, there are these 10,000 community champions. Those are three very quick sort of downloads of how we are getting constant feedback there. I hope that is helpful.

Q90 **Gareth Bacon:** It is, thank you. How much of that is building on structures already in place, and how much has been built from scratch? Obviously, the pandemic is an emergency; it is not something we have seen before, so lots of things were being stressed to the ultimate level, and you are having to invent things all the time. Is it not normal practice to take end-user feedback and tailor programmes accordingly?

James Bowler: Absolutely. We talked about consultation and evaluation. My background is in the Treasury and I am very wedded to both as to equality impacts and so on. You are right that some of these things have been set up due to the pandemic and I think they have a longer-lasting post-pandemic application. You know the never-ending debate about whether central Government hear what local government is doing, and back again. I think these field teams are a really interesting way of looking at things. As part of crisis management, I think that the bronze, silver and gold structures that they have in DHSC, which I think are long-standing, are very good at getting a lot of people's views into a set of decision making formally and sensibly, making sure everyone's voices are heard.

Gareth Bacon: Okay. Chair, I am very aware of time, so I will stop at that point.

Chair: Sir Chris wanted to come in, and I have a couple of follow-up questions for him.



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Sir Chris Wormald: Just on James's point, which I think is exactly right, a big distinction that the pandemic has shown up is between what we know about things that national Government is directly responsible for—as James was saying, in the NHS, we have very established systems that we built on in the pandemic—and the need to do that across a whole range of things that national Government is not normally responsible for. I think that gets to the heart of the question asked. That is the big learning thing. Getting information out of the NHS—that is what we do every day. When we were going out into the wider economy, the non-national Government-run public services—those systems—were, unsurprisingly, less developed.

- Q91 **Chair:** Thank you very much, Mr Bacon. Sir Chris, I just want to quickly come back to you on the issue of PPE production in the UK. Given the time, you may need to add it to the letter—once you start writing to the PAC, it becomes a long and loving correspondence. You talk about the fact that you believe that there is a real opportunity to develop the UK PPE manufacturing market. We heard from two key suppliers that they were only focusing at the top end. Do you have a quick comment on why your view in the letter diverges quite dramatically from two of our leading PPE manufacturers?

Sir Chris Wormald: This is things we are doing right now. As I may have said earlier, at the beginning of the pandemic, less than 1% of our PPE was produced onshore, and the rest related to—

Chair: Yes, we have that background.

Sir Chris Wormald: Going forward, we now have plans for more than half of our PPE to be produced onshore. That is being worked on right now. It does not surprise me that not every manufacturer has seen that yet, because as I say, this is a work in progress to develop our future resilience. As I was talking about at the beginning, one of our big lessons is that we have to look at those wider resilience questions, as it were, in peacetime. You cannot build up huge industries from scratch when you are in the midst of a crisis. You can do some remarkable things—Mr Chisholm was pointing to the ventilator challenge—

- Q92 **Chair:** The point is that they are saying that they cannot produce it as cheaply as you seem to think they can. I am just trying to find the relevant bit in the letter. I can't find it, but you say that they can produce at a cost that is competitive.

Sir Chris Wormald: Yes, that is what we have seen. Clearly, not every supplier will agree with us. Going forward, there are lots of decisions still to take on this, but nationally there will be some circumstances where we have some choices between absolute price and wider value for money via resilience. I think we all recognise that. Those are difficult things, as this Committee above all knows, because of course we want both of those things—we want good price and we want resilience.

- Q93 **Chair:** Can we add that to the things we would like a regular update on? I am also fascinated by—it is too late to go into the detail—UK melt-blown capacity. I think this must be the fabric that masks are made from; they



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are not woven. That is interesting, and I am sure that every MP on this call is interested in what that might mean for their constituency and whether they can do that. However, it will be interesting to know why that is better to do here than in other parts of the world that may already be doing it.

Sir Chris Wormald: I won't answer in detail, but that points to a bigger point. There are questions about where your raw material comes from and then where you make it. Of course, when you are looking at the supply chain, both are crucial.

Q94 **Chair:** Is it still the case that we cannot get gloves in the UK?

Sir Chris Wormald: Gloves are a perfect example. You need rubber production. The UK does not do that, for many reasons, starting with climate, so regardless of where it is made, you are dependent on the—

Chair: On the raw materials, yes.

Sir Chris Wormald: In other aspects, onshoring gives you considerably more resilience. If you are looking for resilience, it is going to be a balance of what you buy and what you make.

Chair: Yes, whether you bring in the raw material or the finished product.

Sir Chris Wormald: That is very product specific, and—

Q95 **Chair:** Fine. I am just aware of time. You said earlier, I thought very helpfully, that, broadly—I paraphrase you—where things worked was where we had good resilience built in, so the NHS and certain other aspects of our response, such as science. Earlier, in response to one of my colleagues, you talked about the workforce and mental health challenges. You talked about things like rostering to deal with that, but do you not think that that was one of the areas where there was too little resilience? We have looked as a Committee, over many years, at the need for new medical school places—we had some very good evidence on that—and we have raised repeatedly the issue of nurses. We have seen nursing places drop between mid-2010 and 2015—in the middle of that Parliament—and then go back up again.

These are problems that cannot be resolved quickly. Do you have, or are you formulating, a plan of what you think needs to be done in terms of the resilience of the NHS and social care, in terms of numbers of people, aside from manifesto commitments? Manifesto commitments are often—well, you would not want to know how people come up with those numbers, but it is not always done particularly scientifically. As the Department responsible for this, are you going to really ramp up your workforce planning and then go and speak to the Treasury about how it is funded?

Sir Chris Wormald: We do that all the time, and—

Chair: You do it all the time but we see the same problems, Sir Chris—not enough people when we need them.



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Sir Chris Wormald: Nationally, we have some choices to make in those areas, and there is no right answer. It is an ongoing discussion. For my entire time in Government, and I suspect the period you were in Government, there has always been a question about what the taxpayer can afford and the level of public services we have at any particular moment in time. That is the heart of government and politics and decision making.

Of course, what we have learned in the pandemic will become part of those discussions, but they do not define the answer. There are countries—some of our European colleagues—that choose to have much higher rates of tax than the UK and run their public services with considerably more spare capacity. That is a choice.

Q96 **Chair:** You do not need to tell this Committee. Clearly, we have to cut our cloth accordingly.

Sir Chris Wormald: Sorry, this is the debate. We will be doing, as you would expect, the work on what we have learned from the pandemic in terms of what resilience you need, but of course that has to be balanced against everything else the Government does and all those other demands on the—

Q97 **Chair:** You do not need to tell us, as politicians and members of the Public Accounts Committee, about balancing policy—

Sir Chris Wormald: Well, it is central to the question you are asking me.

Q98 **Chair:** Nevertheless, any Minister coming into a Department will expect to know what would be the ideal, and then they will look at how to trim it for cost or effectiveness purposes. Anyone walking into a Department might find someone in the Department doing something that is not a priority for that Government that would be easy to axe overnight, for example, compared with moving backwards and forwards on nursing numbers, which leads to an inconsistency in a system where you need consistent supply of the right qualified people and where, in one Parliament, a Government cannot change and turn around the needs.

Sir Chris Wormald: I would certainly agree with that. Workforce is, of course, completely central to both health and care, and it is a long-term game. Nevertheless, Governments have to take decisions about what their priorities are at particular moments, and that will go on being the case. Is the work done? Yes. What I am saying is that that does not necessarily define the decisions.

Q99 **Chair:** Sir Chris, you are the only permanent secretary in Whitehall who has been in the job longer than six years. I have seen off every other permanent secretary, which is a bit worrying—I have not personally seen them off; they happen to have left under my tenure.

Sir Chris Wormald: I was going to say. I'm not quite sure where this is going, Chair.

Chair: The point is that you have some hinterland in Whitehall, but there



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is a lot of turnover. We will not go into that now, but there is a higher turnover of politicians. There is some need for the system to have that long-term view. I will leave it there, because you and I could probably have a long discussion about this.

Sir Chris Wormald: Yes. I will say one sentence, because I largely agree with you. The important thing is that these questions are properly exposed and debated.

Chair: Let us agree to agree on that point, definitely.

Sir Chris Wormald: What the decisions are—

Chair: —is a matter for Ministers.

Sir Chris Wormald: Yes.

Q100 **Chair:** But, also, we need to guard against bad decisions by Ministers in different Governments of different colours that might lead to long-term problems. But that is a bigger challenge for another day.

Alex Chisholm, I want to come to you one last time on the issue about the many legal cases that the Government are taking on. We have been a bit hampered in some of our work by not being able to take evidence from people who are facing legal action, because we know we will not get much from them. Have the Government got contingency funding for the cost of these cases, and have you won any yet?

Alex Chisholm: Yes, we have won a number, and when we have lost, we have generally lost on one count, rather than multiple counts. Overall, it is right that the Government are held to account for what we do. When we have spent hundreds of billions of pounds, it is natural that people say, "Has it all been spent well and correctly?" To a very large extent, the answer has been yes, but we welcome the continuing scrutiny of the courts as well as from Parliament.

Q101 **Chair:** It would have been much easier if you had just published them all earlier, and then you probably would have saved some legal action. How much has it cost so far defending these cases?

Alex Chisholm: The Cabinet Office has lost one case. We will have to pay their costs. We have not yet had an estimate as to what the costs would be, but I think they were capped by agreement prior—

Q102 **Chair:** Was there contingency built in when you were rushing hell for leather to get contracts let 14 months ago? Did you, in your accounting officer assessment of it all, assume some—

Alex Chisholm: No, we did not make a contingency. I will not bore you with the accounting rules here, but it requires a level of specificity about the amount and the timing and the probability, and we did not hit that threshold.

Chair: Okay. We see some of those papers in private, of course, so we have an idea of what you are talking about.



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Q103 Sir Geoffrey Clifton-Brown: Sir Chris, the final round of questions is to you again. Paragraph 31 makes it quite clear that NHS trusts received 80% of the PPE that they needed between March and July last year, whereas we know from evidence that some social care settings were literally running out of PPE on Easter day. When are we going to see a greater parity of treatment between health and social care?

Sir Chris Wormald: We have debated this issue on a number of occasions, so I will give you the same answer that I have given you before. These are two services set up on a completely different statutory basis—one run by the state, one largely private sector—

Q104 Sir Geoffrey Clifton-Brown: That is not quite true, is it? The taxpayer pays quite a lot of money into the social care sector.

Sir Chris Wormald: That is mainly via local government, which, as you know, has the statutory responsibility for commissioning social care. That does mean that the approaches we take have to be different. As I said right at the beginning, the pandemic has shown up quite a lot of that, and it has raised quite a lot of questions about whether there are significant things we should do nationally in the social care sector, and we have quite a lot of plans to do so set out in our White Paper, particularly around—I did not raise it at the time, but it is very relevant to the questions you were asking earlier—data, where we are taking a lot of new powers about social care data. We are also taking greater oversight of local authority commissioning, while leaving the actual responsibility to them.

With PPE, it is a very stark difference. With the NHS, it is of course the state that is providing PPE. For social care, in normal circumstances it is individual businesses who are responsible for procuring their own PPE. You know the story of what happened in the pandemic; we have nationalised that system. We are now providing PPE free to social care and running the logistics of an enormous logistical challenge in which our military friends assisted a lot. We have built an entirely new logistics system for social care during the pandemic. If you look at what we have done in terms of action, we have done far more in social care to build new systems. That was because we had to. As I said at the beginning, what the pandemic has done is shone a spotlight on where we were nationally resilient, and where we were not, and that is one of the big lessons that the NAO, this Committee and we have drawn.

Q105 Sir Geoffrey Clifton-Brown: So is there a systemic problem in the social care sector at the moment? During the pandemic, their overheads, particularly wages—I am not in any way criticising the people who work there for them; they deserve it—have gone up very considerably, yet in some social care settings, the number of patients has gone down. Are we going to see a number of social care settings getting into financial difficulties, and therefore putting the whole sector at risk?

Sir Chris Wormald: We discussed this a little over a month ago at a hearing we had on social care. We received some extremely powerful evidence at that hearing from the CQC, who were noting that, actually, turnover in the sector in terms of financial stability has been much lower



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during the pandemic, mainly because of the amount of money that we and our Treasury friends have put into the sector during it. At the moment, the sector is financially more stable than it has been in previous years.

You have put your finger on exactly the right issue: what happens when we come out of that support regime? As you say, at this precise moment, there are fewer people, particularly in residential social care. We will have to work with the sector extremely closely as we come out of the pandemic and as those support regimes are turned off, including looking at how the sector rebuilds itself. We will need to work extremely closely with local government on their commissioning role in this, which will, of course, be absolutely crucial to the financial stability of the sector going forward. There are quite a lot of yet-to-be-answered questions there, as you know, but as of today, the situation is as we described at the previous hearing and the numbers that the CQC gave you.

Q106 Sir Geoffrey Clifton-Brown: Nevertheless, your Department is responsible for both. Surely it is very important to each of the parts of your Department that each of them works optimally, because if the social care sector is not working optimally, it is not dealing with things like discharges and it is not necessarily treating patients in the optimum way to keep them out of hospital. I ask more in hope than expectation: when are we going to come up with a long-term plan for social care?

Sir Chris Wormald: I will divide that question in two. In terms of integration, that is of course absolutely central to the White Paper that we published. One of the reasons why we want—sorry for the acronyms—an ICS model of how we organise health and care locally is to drive integration, not just between the NHS and social care but with wider public health. We are making that attempt to shift the system and the NHS not only to treat illness, which of course it will have to go on doing, but to be interested in wider population health, which includes all the extremely important factors you have just listed. Having the organisation of the system via ICSs focused on those questions will—I was about to say “improve integration”, but one of the things that has happened during the pandemic is that working between social care and health has probably been better than it has ever been. People locally have just got on with it, so there is an awful lot to build on, and I know that the NAO has commented on that.

On the second bit, the longer reform, well, you will be unsurprised—

Sir Geoffrey Clifton-Brown: We do not need the longer questions in response to a longer policy.

Chair: We have covered this a lot in other hearings.

Q107 Sir Geoffrey Clifton-Brown: Can we just have your latest estimate—I need about a three-word answer—of when we are likely to see a long-term policy for social care?

Sir Chris Wormald: The position remains exactly as the Prime Minister set out at the Liaison Committee, and I have nothing to add.



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Chair: So don't hold our breath. Thank you very much to our witnesses for your time; apologies that we ran over. This is really just another stage of our work looking at the overall pandemic impact, and we will continue that work through the autumn. At the rate we are going, we might be writing the script for the public inquiry, but I thank you all very much indeed for your time. The uncorrected transcript will be put up on the website in the next couple of days, and our report will be out in due course.