Sixteenth Report of Session 2022-23

Cabinet Office, Department of Health and Social Care and HM Treasury

Managing cross-border travel during the COVID-19 pandemic

Introduction from the Committee

The UK government introduced health measures at the border from 2020 as part of its wider response to the COVID-19 pandemic, which were intended to balance protecting public health with other considerations, such as maintenance of critical supply chains and allowing people to resume international travel. It implemented controls in four main phases, and from early 2021 operated a new 'traffic light system' that broadly remained in place, with modifications, until March 2022, when all government travel measures were removed. The National Audit Office estimates that government spent £486 million on the traffic light system in 2021–22.

Government requirements under the 'traffic light system' varied depending on the country that people had travelled from, with countries placed on red, amber, or green lists depending on their level of assessed risk. These measures included: requirements for people to submit data in Passenger Locator Forms; take tests after entering the UK; and, if entering from high-risk countries, to stay in managed quarantine hotels, provided by the Managed Quarantine Service (MQS), for at least 10 days after arrival. Ministers changed the rules of the traffic light system at least 10 times between February 2021 and January 2022. From 15 February to 15 December 2021, 214,000 people used quarantine hotels provided by the MQS. From February to September 2021, five million people in England started self-isolating at home after travel. The Home Office, the Department of Health & Social Care (DHSC), and the Department for Transport (DfT) were responsible for implementing the main measures, working with the Foreign, Commonwealth & Development Office which provided travel advice. The Cabinet Office acted as the central coordinator for decision-making.

Based on a report by the National Audit Office, the Committee took evidence on 23 May 2022 from the Cabinet Office, the Department of Health and Social Care, the Home Office, the Department for Transport and Border Force. The Committee published its report on 26 July 2022. This is the government's response to the Committee's report.

Relevant reports

- NAO report: Managing cross-border travel during the COVID-19 pandemic – Session 2021-22 (HC 1148)
- PAC report: Managing cross-border travel during the COVID-19 pandemic – Session 2022-23 (HC 29)

Government response to the Committee

1: PAC conclusion: Government is not learning lessons fast enough from the pandemic and is missing opportunities to react quickly to future emergencies.

1: PAC recommendation: The Cabinet Office, before the start of the public inquiry, should capture and disseminate lessons for operational delivery in a format accessible to future generations, and publish how departments would re-introduce health measures in response to future health threats if needed.

1.1 The government agrees with the Committee's recommendation.

Recommendation implemented

1.2 Throughout the COVID-19 pandemic, departments considered the efficacy of policies implemented, and those lessons learned continue to inform contingency planning and are considered across government, including looking ahead to future public health threats.

1.3 The government retained COVID-19 surveillance such as the Office for National Statistics survey, REACT and Vivaldi to enable early-warning mechanisms and be able to react quickly to potential future Variants of Concern (VoC). The overarching contingency strategy was set out to the House of Commons in March 2022, with the core of the strategy being the use of pharmaceutical interventions such as vaccines, rather than reintroducing restrictions.

1.4 Given the response to any VoC will be informed by the prevailing epidemiological conditions of the day, its intrinsic severity and the impact of pharmaceutical interventions, it is not possible to set out specific plans, but the Living with COVID-19 strategy set out the parameters of an initial response. Governance plans have also been developed with the UK Health Security Agency leading on health security threats such as COVID-19 alongside the Department of Health and Social Care, and the Cabinet Office supporting upstream planning through its resilience functions. In addition to COVID-19 preparations, the government is also due to publish an updated Biological Security Strategy later in 2022 and is developing a wider range of scenarios for future pandemic planning if needed, including respiratory (influenza and non-influenza), contact and vector-borne scenarios.

2: PAC conclusion: Government does not know whether it achieved value for money from the £486 million that it spent implementing measures.

2: PAC recommendation: Cabinet Office, working with HM Treasury, should set out and publish, within six months, how cross-government portfolios should report and track their overall cost, including:

- ***Setting out the expected costs at the outset; and***
- ***A requirement to amend and update assessments as the situation changes, for instance if demand for services diverges from what was expected.***

2.1 The government agrees with the Committee's recommendation**.**

Target implementation date: Spring 2023

2.2 The government collates and publishes a wide range of expenditure data, much of which tracks large cross-government portfolios, including:

- spending figures in the Budget and Spending Review documents, which often cover thematic cross-government spend, for example on support for Ukraine.
- the Infrastructure & Projects Authority's (IPA's) Annual Report on major projects, which covers all projects in the Government Major Project Portfolio. Alongside the annual report, the IPA publishes data on major projects – including data on costs, delivery timelines, and delivery confidence assessments.
- standalone reports on areas of significant spend, like the government's Net Zero Strategy which covers cross-government work.
- departmental annual reports and accounts, detailing departmental spend, for example 2019-20 thematic expenditure data on preparations for EU exit.
- Whole of Government Accounts, reporting on all areas of spend across the public sector.

2.3 Through these channels, HM Treasury has central oversight of areas of significant cross-government spend. For example, the Government Major Projects Portfolio, managed by

the IPA, tracks the largest, most innovative and highest risk projects and programmes delivered by government – currently 235 projects with total whole life costs of £678 billion.

2.4 HM Treasury will consider what additional guidance should be issued to departments on how cross-government portfolios should report and track their overall cost on an ongoing basis, as part of ongoing work looking at improving joint working across government. HM Treasury will write to the Committee with an update by the target implementation date.

3: PAC conclusion: Government's failure to communicate the reasons for frequent changes to health measures made it hard for the public to understand and adhere to them.

3: PAC recommendation: The Cabinet Office should set out, as part of its report capturing lessons learned, what it has learned about communicating with the public effectively and what it will do differently in the future.

3.1 The government agrees with the Committee's recommendation**.**

Recommendation implemented

3.2 Communication was a critical lever for the government's COVID-19 response. The cross-cutting national and international Public Information Campaign endeavoured to ensure that the public understood and followed the latest guidance, including border health measures in the UK and overseas. Key lessons learned for the future on communicating with the public through cross-channel campaigns include:

- The evolving scientific understanding of the virus and how it spread required an agile approach to the public information campaign.
- All communications were created through research and feedback sessions with the general public and key stakeholders such as local authorities, Directors of Public Health, local MPs and the transport sector.
- Simple language rhyming mnemonics ('Hands, Face, Space') were used to group behaviours into core ideas to achieve greater impact.
- Communications are significantly more effective in changing behaviours when mutually supported by policy advice and regulation.
- A strategic communications and centralised insight programme can deliver regular reporting which avoids duplication, provides a single source of the truth, and valuable insight for policy-making.
- Volume, clarity and timeliness of communications are essential considerations. Clear, simple and actionable messaging backed with evidence can boost public understanding and should be communicated across channels, including accessible formats.
- Paid-for media can give an issue prominence and prime audiences en-masse or in a more targeted way. Creativity in messaging and media planning is crucial in achieving cut-through, particularly when there is audience fatigue.
- Communicating through local, regional and national partners, including the private sector (e.g. transport operators), provides credibility, authenticity and relevance to audiences.

4: PAC conclusion: Government did not strike the right balance between its reliance on the travel industry to implement travel controls and the support it provided.

4: PAC recommendation: The Cabinet Office should set out, as part of its report capturing lessons learned, how it would support industry partners if health measures were reintroduced or required as part of other programmes in future.

4.1 The government agrees with the Committee's recommendation.

Recommendation implemented

4.2 The government recognises the important role that transport operators played in enabling the UK's COVID-19 border response and the speed they had to adapt their operations to the changing situation. Ministers were always clear that they would not hesitate to act quickly to protect public health but where the government could, operators were provided with as much certainty and clarity as possible, with 11 versions of updated guidance issued to transport operators between February 2021 and March 2022.

4.3 As part of contingency planning for future COVID-19 variants and broader pandemic preparedness, the government is considering all lessons learned, including how departments worked with industry partners. The Department for Transport has engaged with the transport industry to gather views on contingency planning and will continue to work closely with the transport industry over the autumn on this and longer-term resilience. The Home Office also continues to work with the transport industry to improve automation to support international travel in a future health event. Further lessons learned through this engagement will be captured, but some of the lessons learned on supporting industry partners with implementing border health measures include:

- There should be regular engagement to communicate and provide as much certainty as possible on changes to border health measures. This engagement should provide an opportunity for industry members to seek clarity on any guidance and raise any operational impacts.
- Operator and passenger guidance on gov.uk and the government toolkit to support industry communications to passengers should be regularly reviewed and updated.

4.4 As set out in the government's recent response to the Transport Select Committee, on UK aviation: reform for take-off, there is a very high bar for implementing additional measures to respond to COVID-19 variants and the government's default approach will be to use the least stringent measures, if appropriate, to minimise the impact on travel as far as possible.

5: PAC conclusion: The Department for Health & Social Care's failure to properly set up the market for travel tests put the public at risk of fraud and poor quality of service.

5: PAC recommendation: DHSC should set out, as part of its Treasury Minute response, why it did not take on board the CMA's recommendations on the testing market, and which recommendations it would implement if health measures were re-introduced.

5.1 The government disagrees with the Committee's recommendation.

5.2 The government disagrees with the Committee's recommendation as it did take on board many of the Competition and Markets Authority's (CMA) recommendations.

5.3 When travel testing launched in Spring 2021 there was insufficient capacity in the NHS to provide testing. The government needed to grow a private market to meet this challenge, which involved striking the right balance between development and regulation of a market.

5.4 After the CMA published its report UKHSA held regular engagement with the CMA and took action to improve the service providers were giving.

5.5 UKHSA removed over 340 providers from the travel testing list (Recommendation B), carried out c500 checks into the accuracy of pricing per week (Recommendation E), and

helped ensure the test price dropped by c60% between August 2021 and February 2022 by regularly reducing the price of the government-provided tests (Recommendations D and E).

5.6 Specific actions taken:

- All new providers had their prices audited before being added to the approved list.
- Daily spot checks were carried out on all prices under £15 for accuracy and availability, and a sample of those over £15.
- All price change requests were audited before going live on gov.uk.
- Instigated a monitoring system of provider performance to ensure high quality service and removed a significant number of providers who did not meet the minimum requirements (Recommendation A).
- Enhanced the test provider listing on gov.uk by adding new filters to allow customers to make more accurate searches. (Recommendation F).
- Introduced world leading test validation regulations and a three-stage accreditation process to ensure that only high quality, accurate tests could be sold (Recommendation C)

5.7 If health measures were re-introduced, the UKHSA would continue to learn the lessons from previous iterations of travel testing, including the CMA recommendations. The exact measures to implement would depend on the context and circumstances in which the UKHSA were operating.

6: PAC conclusion: DHSC failed to adequately protect the taxpayer from fraud in the Managed Quarantine Service (MQS), and is not pursuing the fraud that it has identified vigorously enough.

6: PAC recommendation: DHSC should write to the Committee as part of its Treasury Minute response setting out:

- ***how much of the fraud and unpaid MQS bills it has recovered, how much it has written off, and how it plans to recover the outstanding amount;***
- ***how much of the outstanding amount is due to fraud, unpaid hardship plans and other reasons;***
- ***how much of the debts arising from the hardship plan are owed by people who self-certified hardship;***
- ***how much it has spent collecting unpaid MQS bills; and***
- ***how many fraud cases it has identified, investigated and successfully prosecuted.***

6.1 The government agrees with the Committee's recommendation**.**

Recommendation implemented

6.2 The UK Health Security Agency has already provided the Committee with a quarterly update on chargeback and hardship recoveries. The next letter will be sent to the Committee by the end of September whch will include responses to the recommendations above.

7: PAC conclusion: The Cabinet Office failed to bring together how risks were identified and managed across the portfolio of programmes for implementing health measures at the border.

7: PAC recommendation: The Cabinet Office should produce, within six months, guidance to accompany the Orange Book setting out how cross-government portfolios of programmes should aggregate and manage risks at a portfolio-level so that effective whole-system governance processes are in place.

To the same timescale, it should review whether other cross-government portfolios have effective whole-system governance and risk management processes in place.

7.1 The government agrees with the Committee's recommendation**.**

Target implementation date: January 2023

7.2 The Risk Profession in HM Treasury will work with the Cabinet Office to develop guidance, consistent with the principles-based approach in the Orange Book, on aggregating and managing risks at a portfolio level, and undertake a review of approaches taken on some other cross-government portfolios to understand the types of portfolios where there could be opportunities to use the new guidance. HM Treasury will write to the Committee with an update by the target implementation date.