

## **David B Treadwell – Written evidence (RSK0010)**

May I offer comments in response to your invite for the public to contribute to the consultation.

We have been subject to unprecedented levels of widespread public health threats, from the latest Covid 19 infectious virus, world pandemic. This has put a great strain on our public health infrastructure, beyond that which we would normally expect to experience, and is sorely testing our emergency planning and economy, since it was first identified in late 2019.

Having been involved with a local city/community emergency planning scheme, for citizen and community involvement.

The aims and principles were excellent, but in the writer's opinion we experienced difficulties in entering or connecting with the strategic levels of the civic structures and organization.

In my view, due to various factors, we have seen a reduction in community involvement and engagement, with civic responsibilities and the citizens relationships with authority and governance having a changed emphasis. One could argue that the relationships with central government and local government is not very good and many of the local government public infrastructures, have been allowed to decline, by default or design, and to fall away. The closure and disposal of Police Stations, is considered a strange and ill thought policy, as they are the existing national infrastructure of civic centres', which are considered an extension of order and governance. If these poor connections between agencies and the public, may be present or allowed to develop, we shall not improve, but we are hopefully witnessing an improvement with the common and state interests.

We must also give full credit and acknowledgement to all the front-line emergency services, scientists and individuals, who are dedicated to get us through these dangerous times.

However, it is suggested that we were ill prepared, even possibly casual in approach with contingency planning, PPE available stocks, poorly planned 'Test & Trace' and some purchased with doubtful accuracy, confusion in the planning and manufacture of ventilators.

There was concerns with the coordination and implementation of the approach, in returning infected patients to care homes from hospitals, underestimating the threat from the virus and slow to respond. Not helped from all the confusion and political disruption from Brexit, impacting on the responsibilities of governance and state.

We were also subjected to over ambitious promises and unreachable targets.

In conclusion, with the trust and hope of now making positive progress, our main problem was a lack of readiness and overload of a 'creaking system' from confusion and fragmentation of a public infrastructure and ethos.

A system that had been implemented, over 3 days in October 2016, called 'Exercise Cygnus', to test the UK's response to a serious influenza pandemic. To test systems in the extreme to identify strengths and weaknesses in the UK's response plans, and to inform of any needed improvements in our resilience's.

What were the recommendations from 'Exercise Cygnus' and were they taken up and acted upon, for the improvement of UK preparedness and response to major infectious diseases, and did we develop local 'Resilience Forums'? As it has been suggested that we may have seen an improved level of implementation from a Regional Health organized approach, with an accountability to parliament.

Assuming, that we have had no overview of pandemic response plans or procedures, shall this be rectified and appropriate plans instituted and put in place, following our experiences from the Covid-19 pandemic. Can we also expect that government and its agencies will operate under a flexible and local government involvement, where resources can be allocated where needed, and a better understanding of the local area and needs.

*9 January 2021*