

Prime Minister's Questions: 29 April

DISCLAIMER: This document contains a scientific fact check of the statements made at the opening of the Prime Minister's Questions Session of 29 April. This summary was compiled in near real-time (before the Hansard transcript) was publicly available so may contain mistakes or other inaccuracies resulting from misunderstanding. Our usual detail of fact-checking has not been performed due to the short turnaround time. Volunteers from Scientists for Labour have undertaken to ensure that the commentary provided in this report is accurate, but it should be taken 'as-is'. Readers are encouraged to check both the original statement made and the actual text of the source below before using this information.

Links are **orange** for news articles

Links are **green** for papers in academic journals.

Links are in **purple** for governmental statistics or advice

0. Opening Response

Statements:

- Right measures at the right time flattening the peak
- We have ensured that the NHS can treat other conditions alongside COVID-19

Relevant links:

https://www.mirror.co.uk/news/politics/coronavirus-boris-johnson-accused-moving-21684775	Former Health Sec. Jeremy Hunt said the UK moved too slowly
https://www.bmj.com/content/368/bmj.m1284/rapid-responses	UK ignored WHO advice until late March
https://www.bma.org.uk/news-and-opinion/gps-are-returning-to-practice-but-held-up-by-red-tape	Red tape holding up GPs in their return to practice

Summative commentary:

Multiple assertions have been made in the literature that the UK was too slow to react, and that provisions even now are sub-optimal. Treatment of other conditions has suffered as a result of the initial lack of capacity.

This response was dubious in its use of the phrase 'right measures at the right time'.

Question 1 - Statistics

Statements

- Deaths in hospital 21,678 as of yesterday (NHS)
- Deaths in care homes 4,343 as of yesterday (CQC)
- Deaths outside hospitals/care homes 1200 as of yesterday (ONS)
- 27,241 deaths due to COVID-19.
- 17 March – Government aim for below 20,000 deaths, now way above
- On track to worst death rate in Europe

DOES THE FIRST SECRETARY AGREE THAT THESE LATEST FIGURES ARE TRULY DREADFUL?

Relevant links:

https://bit.ly/3cWdGWG	Confirms total death figures
https://bit.ly/3aO5y92	ONS data for deaths outside care homes + hospitals
https://bit.ly/2VKpOnT	European Deaths
https://bit.ly/2SiFYmy	Gov. admits on track for highest death toll in Europe

Summative commentary:

Deaths for week ending 17 April 2020 (Week 16) were 22,351; this represents an increase of 3,835 deaths registered compared with the previous week (Week 15).

This question was accurate in its content

Answer 1

THE FIRST SECRETARY SHARES LOTO'S HORROR AT THE FIGURES BUT RESPECTFULLY STATES THAT IT IS TOO EARLY TO MAKE INTERNATIONAL COMPARISONS.

Statements:

- Progress on distinction between Care Home and Hospital deaths
- The Chief Medical Officer and Chief Scientific Officer could not have forecasted accurately
- Too early for international comparisons
- Should be on a per capita basis
- Different methods of measuring deaths in different countries
- Further evidence from SAGE required before second phase begins

Relevant links:

https://www.ft.com/content/67e6a4ee-3d05-43bc-ba03-e239799fa6ab	Article suggesting that deaths are being counted in such a way as to make totals seem lower
https://coronavirus.data.gov.uk/	Government tracker still lists deaths in hospitals only [accessed 1pm on Wednesday]
https://www.theguardian.com/world/2020/apr/24/is-comparing-covid-19-death-rates-across-europe-helpful-	Suggests that international comparisons are useful
https://www.thelancet.com/action/showPdf?pii=S2468-2667%2820%2930099-2	Suggests internal comparisons are also useful (Italy)
https://www.bmj.com/content/369/bmj.m1607	Comment on the need to use excess deaths rather than just deaths from COVID-19 as the metric
https://bit.ly/35eN00g	Data on deaths from non-COVID causes

Summative Commentary:

The FT has done an analysis suggesting that there have been 41k deaths to April 21 directly or indirectly as a result of coronavirus. In the week to 17 April more than 5k excess deaths were recorded, this indicates a much deeper crisis in the care sector than is being stated. Weekly excess deaths should help create comparative data between nations. Using this measure will ensure that we get an accurate representation of deaths due to the crisis without relying on a positive test.

Comparing different regions in Italy has been valuable for determining the efficacy of different policy decisions, as it has decentralised healthcare. This shows that comparisons between decisions are relevant and can be used to help inform. The UK's performance on a per-capita basis is also worrying.

Numerous experts seem to disagree with Mr Raab's assertion that international comparisons are not useful at this point in time. The UK's death rate on a per-capita basis is certainly not something that stands out as being impressive.

Question 2 – Care homes

Statements:

- Number of hospital admissions and deaths decreasing NS
- Numbers rising in care homes
- Equipment provision too slow
- Expressions of anxiety from care sector

CAN THE FIRST SECRETARY EXPLAIN WHY HE THINKS THAT THE VIRUS IS SPREADING SO FAST IN THE CARE SECTOR?

https://www.bbc.com/news/health-52455072	Care home deaths increasing
https://www.bmj.com/content/bmj/369/bmj.m1727.full.pdf	Care home deaths increasing
https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-daily-deaths/	UK daily deaths – statistics for England
https://bit.ly/2KlkjzN	Follow up to this Q in preamble to Q3, number of care home deaths (Fig. 3 for cumulative).

Summative commentary:

The number of deaths due to COVID-19 are decreasing. The trend of hospital admissions has generally been decreasing, however from 20-22 April a very small increase has been seen, so this will be something to watch. The WHO says 50% deaths have taken place in care homes, and recent statistics say care home deaths in the UK account for a third of all deaths. There were 2,000 coronavirus care home deaths in the week ending 17 April, bringing total to 3,096 from the beginning of the pandemic, implying deaths in care homes are increasing. It's true that the provision of equipment is too slow, the BMA has stated that current supplies in London and Yorkshire are not sufficient to deal with the COVID-19 outbreak. It's also true that there have been increased expressions of anxiety from care sector workers. On BBC Newsnight carers have spoken out about increased anxiety, especially surrounding the lack of PPE.

This question was accurate in its content

Answer 2

THERE IS ABSOLUTELY A CHALLENGE IN CARE HOMES BUT WE HAVE MADE GOOD PROGRESS IN REDUCING COMMUNITY TRANSMISSION. THE PRINCIPAL CHALLENGE IS DUE TO DECENTRALISATION AND RAPID TURNOVER.

Statements:

- Made good progress on community transmission at last review
- Greater challenge controlling ebb and flow of people in care homes because they are decentralised; this is the largest challenge
- Eligibility criteria for testing were changed on Tuesday by the health secretary.
- Expanding workforce by 20000 Health Care Workers (HCW)

Relevant links:

https://news.sky.com/story/coronavirus-8-000-more-hospital-beds-and-20-000-extra-staff-join-covid-19-fight-11961532	20,000 new staff being hired
https://www.gov.uk/government/news/further-expansion-of-access-to-coronavirus-testing-helps-protect-the-most-vulnerable	New testing guidelines

Summative commentary:

It is unclear whether the community transmission is under control since there has not been widespread testing of COVID-19 cases in the community. There is evidence of increasing number of deaths in care homes in England and Wales, which does seem to indicate that community transmission is not under control.

This answer was not incorrect, but we remain concerned about the degree of transmission in the community. Estimates of the reproduction rate R_0 vary and indeed lag the actual infection rate.

Question 3 – PPE

Follow-up to Q2:

- Mr. Raab said deaths in care homes falling on Marr – doesn't match figures for last week

ASK THE HEALTH SECRETARY TO CLARIFY

Statements:

- 10 weeks since health sec declared serious threat to life
- Royal College of Physicians (RCP) – ¼ docs not getting PPE
- Royal College of Physicians – PPE supply worsened not improved

WHAT IS GOING ON WITH THE PPE SITUATION ON THE FRONTLINE AND HOW SOON CAN IT BE FIXED?

Relevant links:

https://www.independent.co.uk/news/uk/home-news/coronavirus-uk-outbreak-health-risk-china-symptoms-death-toll-wuhan-a9326326.html	10 weeks since threat raised
https://www.theguardian.com/society/2020/apr/27/uk-doctors-finding-it-harder-to-get-ppe-kit-to-treat-covid-19-patients-research-reveals	27% experiencing PPE shortages
https://www.rcplondon.ac.uk/news/statement-phe-advice-managing-ppe-shortages	Royal College of Physicians: PPE is the limiting factor

Summative commentary:

Deaths in care homes are indeed still increasing. RCP note that 27% of medics are not getting the PPE required, based on a survey conducted by them. The RCP were quoted saying it is "patently clear to everyone that the lack of PPE is the major issue that will limit our ability to fight this virus".

This question was accurate in its content

Answer 3

DISAGREE THAT THINGS ARE GETTING WORSE AND THERE IS A GLOBAL PPE SHORTAGE

Statements:

- The latest data has positive signs, within the margin of error
- Things are not getting worse but better overall
- Social distancing has reduced the potential death toll
- International supply shortage of PPE
- UK now the international buyer of choice for PPE
- Doing everything they can

Relevant links:

https://www.independent.co.uk/news/health/coronavirus-ppe-nhs-stockpile-gowns-visors-personal-protective-equipment-a9487331.html	UK failed to stockpile
https://www.bmj.com/content/369/bmj.m1492	Two weeks ago 2/3 of surgeons did not have access to enough PPE. Unlikely to have been resolved since.
https://www.telegraph.co.uk/news/2020/04/20/exclusivemillions-pieces-ppe-shipped-britain-europe-despite/	UK equipment being shipped abroad as the government ignores supplier offers

Summative Commentary:

In terms of daily deaths, while it is true that the number of deaths attributed to COVID-19 in hospitals has been decreasing, the total number of excess deaths is not decreasing. That may be either due to undiagnosed cases of COVID-19, or due to patients not going to hospital with treatable conditions.

It is true that there is an international shortage of PPE, but there have been warnings from public health experts for several years that Just-In-Time supply lines by definition weaken the ability of governments to cope with pandemics. There are still signs from shortages of PPE on the ground.

As for the UK being an international buyer of choice of PPE, what that means is unclear. But if by that it means that it has priority in buying PPE from other countries, that is frankly false, and indeed UK private companies have been exporting PPE even while there has been a shortage in the UK. Businesses which have tried to donate PPE to the UK government have also had trouble doing this.

We disagree with a number of the assertions made in this response.

Question 4 – Testing - see Sfl report on testing (online) for background

Statements:

1. Testing has increased since last week, further extension planned
2. 73,000 capacity, 43,000 test carried out, 29,000 people actually tested as of Monday per day
3. Sites cannot cope with demand
4. 30,000 wasted tests on Monday
5. 12 March: PM said amp up testing to 250000 tests/day

CAN THE FIRST SECRETARY CLARIFY THAT 250,000 TESTS PER DAY IS STILL THE TARGET AND WHEN ROUGHLY WILL WE MEET IT?

Relevant links:

https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public	Testing figures (UK)
https://www.statista.com/chart/21316/people-tested-covid-19-uk/	Graphical representation of testing figures (UK)
https://news.sky.com/story/coronavirus-online-applications-for-covid-19-tests-temporarily-closed-due-to-huge-demand-11978070	Online portal closed due to demand
https://www.mirror.co.uk/news/politics/coronavirus-100000-tests-day-target-21806271	PM's test target – 100000 by the end of the month.

Summative commentary:

The statistics quotes are as stated by the government this week (73000 capacity, 43000 test carried out, 29000 people actually tested as of Monday). PM did indeed state a goal of 250000 tests/day in early March, though no delivery date for that number was specified. News outlets reported that the government's online testing portal had to close due to demand/capacity having been reached.

This question was accurate in its content

Answer 4

CAN LOTO ACKNOWLEDGE EFFORTS ON PPE. 250,000 IS A TARGET AND WE ARE ON TRACK TO MAKE PROGRESS. WILL NOT PUT A DATE ON IT.

Statements:

- We are coming through the peak of the virus
- PPE and the general outlook are not the same
- Success on critical care capacity and social distancing
- 73,400 tests capacity – double last week
- 44,000 tests done per day on ~29,000 individuals
- Widened eligibility
 - Anyone who must be present in work who has symptoms
 - Anyone over 65 with symptoms
 - All care home residents and staff
- 250,000 target has no date
- No date for 100,000 milestone

Relevant links:

<https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public>

Tab. 1 Discrepancy between number of people tested and number of tests

Summative Commentary:

Are we coming through the peak of the virus?

- It is early days but based on the hospital data of daily number of COVID-19 associated deaths and daily number of lab confirmed cases does appear to be flattening ([ref](#)). However, care home deaths still appear to be rising ([figure 7](#)).

Is there success in critical care?

- Concerns have been raised over who is able to be admitted to critical care, anecdotal concern relates to the elderly not being admitted; so they instead die elsewhere where they are less likely to be counted in statistics. The Clinical Frailty Scale is the general procedure for deciding whether to admit a patient to ICU ([ref](#)). Given the increase in the number of deaths in care homes this may be worth investigating further.

What are the latest figures on testing and eligibility?

- Reported 43,563 tests daily and people tested is 29,571 daily ([ref](#)). The government says capacity is 75,000 ([ref](#)). Anyone in England with coronavirus symptoms who has to leave the house daily or who is over 65 is eligible ([ref](#)). In detail:
 1. all essential workers including NHS and social care workers with symptoms
 2. anyone over 65 with symptoms
 3. anyone with symptoms whose work cannot be done from home (for example, construction workers, shop workers, emergency plumbers and delivery drivers)
 4. anyone who has symptoms of coronavirus and lives with any of those identified above
- Additionally, we are testing: social care workers and residents in care homes (with or without symptoms) both to investigate outbreaks and, following successful pilots, as part of a rolling

programme to test all care homes; as well as NHS workers and patients without symptoms, in line with NHS England guidance ([ref](#))

As of 26 April, the UK had carried out eight tests per 100,000 people, whereas Italy had done 30 per 100,000 and South Korea 12, according to data collated by online scientific publication Our World in Data from official sources. Germany had carried out 25 per 100,000 as of 19 April, according to its latest figures ([ref](#)).

This answer was correct in that the death rate is dropping, though it is climbing in care homes. Widened eligibility is good but serious concerns remain about the ease of access to testing, as opposed to whether it is 'available' or not.

Question 5 – Exit Strategy (1)

Statements:

Follow-up to Q2:

- LOTO recognises efforts on critical care and social distancing.
- Businesses, schools etc. want to plan ahead
- Accept the need for a lockdown strategy, do not ask for a timeline
- Want to support the government strategy where we can
- PM said on Monday hoping for maximum transparency

[WHEN WILL THE GOVERNMENT PROVIDE AN EXIT STRATEGY?](#)

Relevant links:

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30936-3/fulltext	Lancet commentary on the exit strategy
https://dfemedia.blog.gov.uk/2020/04/21/schools-reopening-conditions/	Latest DfE guidance on school closures

Summative commentary:

A statement was made about businesses, schools etc. wanting to plan ahead for end of lockdown, and requesting certainty about the date by which this would be available.

This question was accurate in its content. In terms of the recognition of work on critical care capacity, we have heard from some frontline sources that the critical care capacity may have been increased by imposing stricter conditions on ICU admission than would otherwise be recommended. Caution: no peer-reviewed citation for this statement at this time.

Answer 5

[CANNOT DO THIS UNTIL WE HAVE MORE ADVICE FROM SAGE](#)

Statements:

- On 16 April SAGE was reported as advised against changes to social distancing measures
- Potential substantial increase in infection rate if this is done prematurely

- Cannot responsibly set out proposals for lockdown exit until more SAGE advice is given
- SAGE revisiting in early March [later clarified to be May].

Relevant links:

https://www.gov.uk/government/speeches/foreign-secretarys-statement-on-coronavirus-covid-19-16-april-2020	Report on SAGE advice from the Foreign Secretary
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Summative commentary:

According to Mr Raab's speech on the 16 April, SAGE did indeed say that though the infection rate R_0 was below 1, it was still too high to relax lockdown measures. As we don't know what the target infection rate is, nor the current infection rate R_t , we can't compare the timeframe with other European countries that have already published their de-escalation strategy.

We know that according to official figures, the infection rates in France and Spain were respectively [0.77](#) and [0.5](#) when they announced their exit strategies. If the UK's figure is somewhere in this range, more detail would perhaps be appropriate at this point.

This answer was correct, though we note that there is no independent way of assessing SAGE's advice in the absence of minutes of its meetings, which we again state should be immediately released.

Question 6 – Exit Strategy (2)

Statements:

1. France, Spain, Scotland, Wales have published exit reports
2. Common issues: schools, businesses reopening – need to plan
3. Delay risks falling behind other countries and 4-nation approach

WILL THE GOVERNMENT ENGAGE CONSTRUCTIVELY TO DISCUSS THIS WITH THE OPPOSITION?

Relevant links:

https://www.bloomberg.com/news/articles/2020-04-28/spain-france-to-ease-virus-curbs-as-europe-seeks-to-exit-crisis	News article on other European countries' measures
https://gov.wales/sites/default/files/publications/2020-04/leading-wales-out-of-the-coronavirus-pandemic.pdf	Welsh Government response
https://www.gov.scot/publications/coronavirus-covid-19-framework-decision-making/	Scottish Government response
https://www.euronews.com/2020/04/28/coronavirus-what-are-the-key-points-of-france-s-lockdown-exit-plan	France: commentary
https://www.gouvernement.fr/info-coronavirus/strategie-de-deconfinement	France: Government response
https://www.dw.com/en/coronavirus-spain-presents-lockdown-exit-strategy/a-53266436	Spain: commentary
https://bit.ly/2yWaMCp	Spain: Government response

Summative commentary:

Citation found for the quoted series of nations who have published exit reports. These reports support the idea that schools and businesses reopening are the common issues.

This question was accurate in its content though it appears that LOTO and Mr Raab have different ideas of what constitutes an exit strategy.

Answer 6

Statements:

- SAGE evidence next week
- Scottish Government have not set out exit strategy – grounded in Raab 5 tests
- Germany is becoming more restrictive because of 2nd spike

[SHOULD NOT DO ANYTHING WITHOUT BEING GUIDED BY THE EVIDENCE](#)

Relevant links:

<https://www.rte.ie/news/2020/0427/1135080-criticism-grows-over-german-lockdown-strategy/>

Mandatory masks in Germany – to mitigate against a risk of a second spike

Summative Commentary:

The evidence used for the SAGE advice is not being made public, so we have to take it on faith that the government has good scientific advice for its statements. The Scottish government has released a document outlining its exist strategy, but this is not related to Mr Raab's 5 points, and Ms. Sturgeon has made it clear that the Scottish government is willing to do a different path to exit from the rest of the UK. Germany did end up lifting some of the elements of the lockdown, only to see an increase of COVID-19 cases. This has led the German government to reintroduce lockdown measures, and to introduce some more measures such as mandatory mask wearing.

In the absence of the minutes of SAGE, we cannot come to a clear conclusion on the accuracy of this answer.

Questions on which we have further comments:

Q10: Vaccines – the UK must ensure that procedures which are in place for equitable international distribution of vaccines are upheld. *See the Sfl report on vaccines for more information.*

Q16: PPE and Europe – we have looked into whether the UK was disadvantaged by not joining in the EU procurement scheme, but conclude that it is impossible to evaluate without undertaking a detailed analysis of the supply chain.