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Civil Contingencies Secretariat

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Dear Colleague

REVIEW OF THE RESPONSE TO THE 2009 INFLUENZA PANDEMIC: CALL FOR EVIDENCE

You will be aware that Ministers have agreed there should be a review of the UK's response to the 2009 Influenza Pandemic. The purpose of the Review is to assess the appropriateness and effectiveness of the UK strategy for responding domestically to the H1N1 pandemic, given the information and knowledge available at each stage; and to make recommendations to update and refine planning for any future pandemic. The focus will be firmly on learning lessons from the UK-wide response rather than delving into operational issues at the country level. To ensure that lessons can be learnt and any necessary changes be put in place in preparation for a possible future pandemic, the Review is due to report by the end of June, shortly before the Scottish Parliament and Northern Ireland Assembly go into their Summer Recess. A copy of the current Terms of Reference is attached at Annex A.

The Chair has yet to be appointed and will obviously wish to reflect on the key issues. However, given the urgency of making progress we wish to alert colleagues now to the range of questions we believe the Review will need to focus on. Annex B sets out a number of detailed questions linked to the broad lines of inquiry. The Chair and Review Team will wish to explore these points further in interviews.

At this stage we would welcome relevant papers and data relating to these areas of inquiry as soon as possible, and by no later than **midday on Thursday 1 April**. Please note that we have access to CCC(O), CCC, 4N(M) and 4N(O) papers. We are keen to see submissions, options papers, and data summaries or any other documents which might be relevant to the lines of inquiry. These could include, for example:

- reports to Ministers
- statistical and economic projections and subsequent measurements(e.g. dashboards)
- documents on procurement, including strategy papers, Gateway Reviews, and exchanges with suppliers on commercial aspects
- evaluations of the impact of communications - on stakeholders, including the general public and business

- papers that illuminate the scientific debate.

Please err on the side of covering all high-level aspects of the pandemic briefly. Apart from access as necessary to contingency plans, generally we wish to restrict this call for evidence to documents dating from April 2009 onwards, but you may wish to draw our attention to earlier material as well.

We also invite you if you wish to send us comments, individual and collective on any of the detailed questions, helping the review understand the factual background and proposing lessons to be learned. In particular under the general area we are anxious to capture innovations and good practice which you feel should be sustained in the future. Again we would like to receive any such comments as soon as possible, and please by no later than **Friday 9 April**.

We intend to set up the Review Reference Group to support the Review and will be in touch shortly regarding this.

As far as Freedom of Information (Fol) is concerned, we assume that in due course a number of papers relating to the Review will be made public under Fol principles. But please do highlight at this stage those papers where you would have concerns about disclosure (for example under commercial confidentiality grounds).

Please do not hesitate to get in touch with the Review Team if you have any questions. Tim Baxter can be contacted on 020 7 276 2360 (tim.baxter@cabinet-office.x.gsi.gov.uk) and Philippa Makepeace on 020 7276 2358 (philippa.makepeace@cabinet-office.x.gsi.gov.uk).

Yours sincerely

Simon Webb SRO, Review of the Response to the 2009 Influenza Pandemic

cc Tim Baxter, Secretary to the Review of the Response to the 2009 Influenza Pandemic

Philippa Makepeace, Review of the Response to the 2009 Influenza Pandemic

REVIEW OF THE RESPONSE TO THE 2009 INFLUENZA PANDEMIC:

DRAFT TERMS OF REFERENCE

Purpose of review

- To review the appropriateness and effectiveness of the UK strategy for responding domestically to the H1N1 pandemic, given the information and knowledge available at each stage; and
- To make recommendations to update and refine planning for any future influenza pandemic.

Scope

The review will include consideration of:

- a) the strategic approach at each key phase, from first cases, through declaration of the pandemic, containment, mitigation, to stand down of the response;
- b) the major elements of the response, both health and non-health (eg antiviral policy, the vaccination programme, school closures and international travel) and the background and local context against which decisions were made;
- c) whether the decisions and actions at the UK level were reasonable and represented good value for money, on the basis of the information, knowledge and advice available at the time;
- d) cross-cutting issues affecting the strategic decisions, including surveillance and data gathering, communications, scientific advice; and
- e) cross-Government co-ordination and decision making.

The review will make recommendations to update and refine planning for any future influenza pandemic.

FLU REVIEW AREAS OF INQUIRY

General

1. What aspects of the Pandemic Flu Response worked well? What would you wish to do differently in another pandemic?
2. What aspects of the Pandemic Flu Response would have had to change in the event of a more severe pandemic?

Vaccines

3. What lead to the decision made to opt for 100% rather than 45% coverage of the population, based on two doses per patient?
4. On what grounds was the decision to purchase 30m extra doses of vaccine made?
5. What drove the procurement policy (e.g. number of companies, break points etc)?
6. What were the factors driving the distribution policy of focusing on high risk groups?
7. What was the impact of the WHO alert levels on procurement of vaccines, for example in relation to APAs?
8. Which options were considered for delivering vaccines and what lead to the choice of GPs?
9. Could negotiations with GPs have been initiated in advance of any pandemic emerging?

Containment

10. How were the decisions made on containment? What issues drove the policy?
11. What were the triggers for moving away from containment, and what were these based on?
12. What drove the policy on school closures, and how were individual decisions made?
13. What was the policy on port health inspections, and what issues drove this policy?

14. What was the policy on travel advice, and what issues drove this policy?
15. What was the policy on mass gatherings, and what issues drove this policy?
16. What was the policy on prophylaxis and what issues drove this policy?

Treatment

17. What was the policy on antivirals procurement and distribution, and what factors under-pinned this policy?
18. What issues drove the different implementation decisions across the Four Nations? [NB: we are not seeking to assess the operational decisions in the Four Nations, but rather trying to elucidate how far the UK-wide response facilitated locally-sensitive responses]

Central Government Response

19. What was the central government machinery and decision-making structure? Did the approach differ from other crises?
20. What was the rationale for the membership of CCC and CCC(O)?
21. What was the reason for the introduction of Four Nation Health Ministers meetings? What impact did this have on the response?
22. What were the expectations on DH as lead department? Did these change over the course of the pandemic?

Scientific/Clinical Advice

23. What scientific advice was available to Government, and how was this presented to Ministers?
24. What was the balance of expertise on SAGE?
25. How was the relationship between SAGE and JCVI?
26. What was the role of PICO in relation to SAGE?
27. What surveillance systems were in place in April across the different countries of the UK, and how did these develop over the course of the pandemic?
28. What data was collected and how was it used?
29. What was the role of the Standing Committee on Ethics in decision-making?

Communications

30. Who were with key stakeholders identified in April 2009. What arrangements were in place for engaging them, and how did these develop subsequently?
31. What arrangements were in place or put in place to ensure a consistent set of messages across the four nations?
32. How were the media and social networks monitored and engaged?
33. What evidence is there on public responses to the handling of the pandemic?
34. How was scientific advice communicated to the media and public?
35. What evidence is there on clinical responses to the handling of the pandemic?
36. What evidence is there on the response to the pandemic of other stakeholders?

Wider Health Issues

37. What work was done on preparing for more deaths? How prepared was the system for the impact of a more severe pandemic?
38. What work was done on preparing emergency legislation? Was everything necessary in place to enable such legislation, had the pandemic been more severe?
39. What work was done on sickness certification? Was everything necessary in place to enable necessary changes to be made, in the event of a more severe pandemic?