

## ANNEX

### Explanation of exemptions applied

*Section 25(1)*: An exemption under section 25(1) applies to some of the information requested, specifically the published extracts of conversations. As this information is already published and available to you, we do not have to provide you with copies. If, however, you are unable to access it from the website linked above, please let us know.

*Section 30(b)(ii)*: An exemption under section 30(b)(ii) of FOISA (free and frank exchange of views for the purposes of deliberation) applies to some of the information requested.

The exemption under s.30(b)(ii) applies because disclosure would, or would be likely to, inhibit substantially the free and frank exchange of views for the purposes of deliberation. This exemption recognises the need for clinical advisers and officials to have a private space within which to discuss and explore options before the Scottish Government reaches a settled public view.

The exemption under s.30(b) is subject to the 'public interest test'. Taking account of all the circumstances of this case, we have therefore considered whether the public interest in disclosing the information outweighs the public interest in applying the exemptions. We have found that, on balance, the public interest lies in favour of upholding the exemption. We recognise that there is a public interest in disclosing information as part of open, transparent and accountable government, and to inform public debate. However, on this occasion, there is a greater public interest in allowing clinical advisers and officials a private space within which positions can be explored and refined prior to providing formal advice to decision-makers. This private thinking space also allows for all options to be properly considered, so that advice has a sound basis and good decisions can be taken. Disclosure is likely to undermine the full and frank discussion of issues between clinicians and officials, which in turn will undermine the quality of their advice and the subsequent decision-making process, which would not be in the public interest.

*Section 37(1)(b)*: An exemption under section 37(1)(b) of FOISA applies to documents that are (i) lodged with a person conducting an inquiry or arbitration, for the purposes of that inquiry or arbitration or (ii) created by a person conducting an inquiry or arbitration for the purposes of that inquiry or arbitration. This exemption is not subject to the 'public interest test', so we are not required to consider if the public interest in disclosing the information outweighs the public interest in applying the exemption. It has been applied here only to the group discussions discussed above supplied to the SG by the UK Covid-19 Inquiry and subject to their general restriction order (under s.37(1)(b)(ii)), and to brief personal exchanges from the individual conversations that do not constitute government business (under s.37(1)(b)(i)).

*Section 38(1)(b)*: An exemption under section 38(1)(b) (personal information) of FOISA applies to some of the information in the message exchanges because it comprises personal data of a third party and disclosing it would contravene the data protection principles in Schedule 1 to the Data Protection Act 1998.

[06/03/2020, 18:48:19] CMOs, HPS and Policy lead: Messages and calls are end-to-end encrypted. No one outside of this chat, not even WhatsApp, can read or listen to them.

[06/03/2020, 18:48:19] Derek Grieve: Derek Grieve created group "CMOs and Policy lead"

[06/03/2020, 18:48:19] CMOs, HPS and Policy lead: Derek Grieve added you

[06/03/2020, 18:49:25] Jim McMenamin: Hello Derek!

[06/03/2020, 18:50:43] Derek Grieve: Hi Jim. I hope everyone finds this helpful as I wanted a way for us all to connect rather than have to send individual texts. Please be assured if there is anything of substance we will follow up with email so there's an audit trail. D

[06/03/2020, 18:51:39] Jim McMenamin: Should Colin Ramsay and David Goldberg be added too Derek so not resting on single HPS person?

[06/03/2020, 18:52:46] Derek Grieve: <attached: 00000007-David Goldberg and 1 other contact.vcf>

[06/03/2020, 18:53:07] Derek Grieve: I've just added Colin and David.

[06/03/2020, 18:53:17] Jim McMenamin: Great

[06/03/2020, 18:53:35] Gregor Smith: [Redacted - s.37(1)]

[Redacted - s.37(1)]

[06/03/2020, 18:54:22] Jim McMenamin: [Redacted - s.37(1)]

[06/03/2020, 18:54:45] Derek Grieve: <attached: 00000012-Syed.vcf>

[06/03/2020, 18:54:51] Gregor Smith: [Redacted - s.37(1)]

[06/03/2020, 18:55:04] Derek Grieve: Derek Grieve changed the group name to "CMOs, HPS and Policy lead"

[06/03/2020, 18:58:08] [Redacted - s.38(1)(b).] Jim, the info you just sent by text is fine to share here.

[06/03/2020, 18:58:25] Jim McMenamin: Fab

[06/03/2020, 18:59:28] [Redacted - s.38(1)(b).] I've put an email to Ministers on the new cases. Don't think I need to confirm back to HPS but correct me if I am wrong please Derek.

[06/03/2020, 19:08:47] Derek Grieve: That's all good [Redacted] The note to Ministers is the start of the audit trail.

[06/03/2020, 19:22:00] Jim McMenamin: Case 16 is a travel associated case

[06/03/2020, 19:48:06] Derek Grieve: <attached: 00000020-Jason Leitch.vcf>

[06/03/2020, 20:43:56] Gregor Smith: [Redacted - s.37(1)]

[Redacted - s.37(1)]

[06/03/2020, 20:52:27] Derek Grieve: [Redacted - s.37(1)]

[Redacted - s.37(1)]

[07/03/2020, 08:09:35] CMOs, HPS and Policy lead: Derek Grieve added Jason Leitch, ~ David Goldberg, and 2 others. Tap to see all.

[07/03/2020, 10:36:42] Jason Leitch: Derek, thanks. Do me a favour and add my other number instead of this one. Please. So [Redacted - s.38(1)] cheers

[07/03/2020, 11:35:41] Jason Leitch: Derek Grieve added Jason Leitch

[07/03/2020, 11:35:49] Jason Leitch: Derek Grieve removed Jason Leitch

[07/03/2020, 14:48:29] Gregor Smith: HPS - Current SAGE modelling suggests an equal requirement for invasive and non-invasive ventilation BUT increasing case reports from countries suggesting move straight to endotracheal intubation to reduce IC risks of aerosol procedure. This will have big impact on capacity. I'm in discussions with England about this just now - any advice on use of CPAP and IC mitigating strategies?

[07/03/2020, 15:18:02] Jim McMenamin: Gregor I am can relay the IC question just now (off today and tomorrow). Colin or David can relay response to you. Jim

[07/03/2020, 15:18:31] [Redacted - s.38(1)(b).] I am working Jim. I can email Colin and David.

[07/03/2020, 15:20:33] Jim McMenamin: Okay thanks [Redacted] IC person today is [Redacted - s.38(1)(b).]

[07/03/2020, 15:20:59] [Redacted - s.38(1)(b).] Noted Jim.

[07/03/2020, 15:26:39] Gregor Smith: No rush for this weekend but something we need to think about over next few days and give guidance.

[07/03/2020, 15:31:24] Jason Leitch: [Redacted - s.30.]

[Redacted - s.30.]

[07/03/2020, 15:36:50] ~ David Goldberg: Thanks , will engage with [Redacted] asap.

[07/03/2020, 15:43:36] Gregor Smith: Thanks - Steve Powis has asked his Respiratory NCD and JVT to look at it too. If I hear anything back I'll let you know.

[07/03/2020, 16:16:10] [Redacted - s.38(1)(b).] Gregor, there's an email response from [Redacted - s.38(1)(b).]

[07/03/2020, 16:28:03] Gregor Smith: Thanks - had a look and have asked more. I can see this being an

issue. [Redacted - s.30.]

[07/03/2020, 17:23:45] [Redacted - s.38(1)(b).] Gregor, are you joining COBR(O) tomorrow at 3.30?

[09/03/2020, 12:31:55] Gregor Smith: Morning All - FM/CMO have press conference after COBRa at 1245. If any of patients are showing cause for concern, please phone me before this or confirm "none". Thanks. Have spoken to Jim and he is unaware of any, but I recognise this is dynamic.

[09/03/2020, 12:33:46] [Redacted - s.38(1)(b).] None. 1 discharged.

[09/03/2020, 21:44:37] Jason Leitch: I may have dropped of the new cases emails again. If there have been any. Can someone forward? Please.

And thanks Catherine for the new case definition news.

[09/03/2020, 21:46:50] Derek Grieve: Jason- there's an email in the system rather than via this. 4 new cases today 2 in Lothian and 2 in Grampian. All travel related.

[09/03/2020, 21:47:16] Cath: 4 more but can't discuss til 2pm. Try to forget about them. Current number is 23 confirmed

[09/03/2020, 21:47:41] Jason Leitch:

[09/03/2020, 21:48:06] Jason Leitch: I didn't have the email Derek

[09/03/2020, 21:49:18] Derek Grieve: Ok. Sorry about that. Not sure why you've dropped off the list. Things have been manic so apologies for that.

[09/03/2020, 21:54:13] Derek Grieve: Can someone please share the change in case definition please.

Apologies but I must have missed this.

[10/03/2020, 07:38:04] [Redacted - s.38(1)(b).] I'll get these distribution list issues sorted this morning.

[10/03/2020, 07:56:24] [Redacted - s.38(1)(b).] Jason is there anything you need for your media this morning?

[10/03/2020, 07:57:17] Derek Grieve: There's something running about Glasgow airport. He'll need a line even if it's just a holding one.

[10/03/2020, 07:57:50] [Redacted - s.38(1)(b).] Ok

[10/03/2020, 08:48:55] Gregor Smith: [Redacted - s.30.]

[Redacted - s.30.]

[10/03/2020, 08:49:24] [Redacted - s.38(1)(b).] [Redacted - s.30.]

[10/03/2020, 08:50:11] Jason Leitch: [Redacted - s.30.]

[10/03/2020, 08:50:19] Jason Leitch: [Redacted - s.30.]

[10/03/2020, 08:51:46] Derek Grieve: Jason - Theres an email with lines for you. The bbc are unlikely to run with this as it hasn't been verified but you stuff in case it comes up.

[10/03/2020, 10:04:48] Gregor Smith: [Redacted - s.30.]

[Redacted - s.30.]

[10/03/2020, 10:23:46] ~ David Goldberg: [Redacted - s.30.]

[Redacted - s.30.]

[10/03/2020, 14:36:25] [Redacted - s.38(1)(b).] David/Jim which lab is self verifying please?

[10/03/2020, 14:41:04] Jim McMenamin: Glasgow

[10/03/2020, 15:46:28] Gregor Smith: Message from John Harden

Hi all,

Message from the frontline: In light of the updated PHE guidance on the management of suspected cases there has been a bit of confusion in the clinical settings around what is the best thought to do as this

increases the burden for testing and broadens the suspected group. I wonder if clarification is needed sooner rather than later to clinical teams re the guidance to follow in Scotland and the rationale behind this. John [10/03/2020, 15:53:26] Jason Leitch: Im also being asked from that same frontline about whether they can move from PPE to masks and gloves!

[10/03/2020, 15:53:49] Jim McMenamin: Thanks Gregor. Discussed with Catherine a few mins ago. We have agreed revised Infection prevention and control to appropriate level that will facilitate change in investigation and management of cases presenting to hospital.

[10/03/2020, 15:55:26] Jim McMenamin: HPS about to cascade this

[10/03/2020, 15:55:46] Jason Leitch: Great. Make sure I get it please Jim. For media.

[10/03/2020, 22:40:36] Derek Grieve: [Redacted - s.30.]

[Redacted - s.30.]

[10/03/2020, 22:43:16] [Redacted - s.38(1)(b).] [Redacted - s.30.]

See the spreadsheet Jim sent earlier.

[11/03/2020, 08:54:05] Gregor Smith: Did guidance for management of cases under new case definition go out? [Redacted - s.30]

[11/03/2020, 08:57:48] Jim McMenamin: Yes Gregor. I will forward this - was issued yesterday

[11/03/2020, 09:02:22] Jason Leitch: If it's online let's use social media too.

[11/03/2020, 09:02:29] Gregor Smith: It's clearly getting stuck within the system of cascade then. Are there any inconsistencies between advice from different agencies?

[11/03/2020, 09:10:01] Gregor Smith: <attached: 00000072-PHOTO-2020-03-11-09-10-01.jpg>

[11/03/2020, 09:19:13] Jason Leitch: [Redacted - s.30]

[Redacted - s.30]

[11/03/2020, 11:13:45] Jason Leitch: [Redacted - s.30]

[Redacted - s.30]

[11/03/2020, 11:15:20] Derek Grieve: [Redacted - s.30]

[11/03/2020, 11:15:56] Jason Leitch: [Redacted - s.30]

[11/03/2020, 11:41:07] Jason Leitch: [Redacted - s.30]

not to come back. They finish this we

[11/03/2020, 11:42:00] Derek Grieve: [Redacted - s.30]

[Redacted - s.30]

[11/03/2020, 18:17:08] [Redacted - s.38(1)(b).] WHO have declared a pandemic

[11/03/2020, 18:49:30] Jim McMenamin: Thanks [REDACTED] Yes saw this. We have at least 17 new cases reported thus far today. More on these later

[11/03/2020, 19:08:06] Derek Grieve: Wow. That's a fair old jump.

[11/03/2020, 19:09:18] ~ Syed: Possibly evidence of sustained community transmission.

[11/03/2020, 19:10:47] Jason Leitch: Exactly as predicted....by you in fact Syed!!!!

[11/03/2020, 19:12:03] Derek Grieve: I'm guessing the almost doubling of confirmed cases overnight is significant. [REDACTED] this feels like the headline in any statement to Parliament.

[11/03/2020, 19:44:37] Gregor Smith: [Redacted - s.30.]

[Redacted - s.30.]

[11/03/2020, 20:20:58] Jim McMenamin: Updated figure - 24 cases - Checking line listing but all but 2 appear to be travel or close contacts of confirmed case. Both enhanced surveillance are resp viral screens on inpatients (1 or 2 final checks taking place just now) rather than enhanced surveillance

[11/03/2020, 20:22:01] [Redacted - s.38(1)(b).] Gosh. I will feed that in to the system.

[11/03/2020, 20:24:49] ~ Syed: Majority of travellers to date seems to be linked with Italy. I think Italy is the game changer for the UK.

[12/03/2020, 16:33:45] Gareth Brown: Gareth Brown joined using this group's invite link

[12/03/2020, 22:45:53] Gregor Smith: <attached: 00000090-PHOTO-2020-03-12-22-45-53.jpg>

[12/03/2020, 23:03:24] Jason Leitch: Can I just say that if you'd told me when I was studying dentistry I'd spend an evening reading about age-structured stochastic transmission dynamic models I may have chosen a different route.....

[12/03/2020, 23:17:13] Gregor Smith: ....there's still time....

[12/03/2020, 23:24:30] Jason Leitch: Ain't that the truth. There's an empty practice in Cumbernauld....

[15/03/2020, 11:43:57] Gregor Smith: This article is causing confusion and alarm amongst GPs - can we get it clarified with BBC and comms about role of GP, the surveillance programme and the community hubs. At the moment it's being interpreted as routine testing in GP practices. <https://www.bbc.co.uk/news/uk->

scotland-51895936.

[15/03/2020, 11:51:56] Gregor Smith: So far [Redacted - s.38(1)(b).] contact about it.

and [REDACTED] all been in

[15/03/2020, 11:52:25] Gregor Smith: And now [Redacted - s.38(1)(b).] Can we move on this quickly?

[15/03/2020, 11:53:55] Derek Grieve: Is there something on the GP surveillance scheme I could provide to comms by way of clarification. If you don't have this I can ask primary care.

[15/03/2020, 12:02:02] Jim McMenamin: I will write a paragraph for this just now

[15/03/2020, 12:02:23] Derek Grieve: Thanks Jim. [Redacted - s.37(1)]

[15/03/2020, 12:04:00] Jim McMenamin: [Redacted - s.37(1)]

[15/03/2020, 12:14:30] Jason Leitch: [Redacted - s.37(1)]

[15/03/2020, 12:16:04] Gregor Smith: [Redacted - s.37(1)]

[19/03/2020, 18:50:26] Jason Leitch: Jim...or someone...give the brief science challenge for not being able to test at a large scale. What's the problem? Kit? Tech? Virus? What?

[19/03/2020, 18:50:34] Jason Leitch: Fast please. By 7..15

[19/03/2020, 18:59:15] Derek Grieve: I'm sure Jim and the team can answer but it's more likely to be capacity. Work is in hand to max out the labs we have and that will deliver up to 3k tests a day. Work is in hand to explore other options such as universities but this takes time to get kit, train people and develop the systems. Jim can correct me if this is wrong though.

[19/03/2020, 19:05:09] Gregor Smith: That's my understanding too Derek. This is about platform capacity and training.

[19/03/2020, 19:19:40] Jason Leitch: But if it's capacity just get more? That sounds like a buy your way out problem?

[19/03/2020, 19:21:16] Derek Grieve: We can't magic up the labs. That's the big challenge I think but Jim can confirm. There isn't huge private sector capacity in Scotland. There is a bit more in England I'm told.

[19/03/2020, 19:25:01] Jim McMenamin: Thanks Derek the other aspects to consider as information exchange with the NHS that meets information governance approval re confidentiality and data transfer.

[19/03/2020, 19:50:51] Jason Leitch: I love you Jim but you can never been live on STV.

[19/03/2020, 19:52:06] Jim McMenamin:

[19/03/2020, 20:36:05] Gregor Smith: Jim - one to watch here. [Redacted - s.30(b).]

[Redacted - s.30(b).]

[19/03/2020, 21:16:24] Jim McMenamin: Okay. Thanks Gregor

[19/03/2020, 21:25:57] Gregor Smith: Sorted. [Redacted - s.30(b).]

[Redacted - s.30(b).]

[29/03/2020, 11:05:26] Jason Leitch: URGENT - did we take part in Cygnus in 2016? Just yes or no is good for me for TV at 1015

[29/03/2020, 11:29:49] Gregor Smith: Yes

[29/03/2020, 12:38:47] ~ Daniel K: Derek Grieve added ~ Daniel K

[06/04/2020, 21:35:13] Jason Leitch: Jim - I'm doing an off the record briefing for media at 4pm tomorrow by Zoom about deaths and reporting. Scott and Peter whitehouse are on it. I think I'd like you to help me if you can. Please.

[06/04/2020, 21:36:33] Derek Grieve: Hi Jason. I'm sure Jim will be great at this and I think Scott Heald in PHS is on the case to support you and the team too.

[06/04/2020, 21:36:50] Jason Leitch: He is.

[06/04/2020, 21:37:09] Jason Leitch: [Redacted - s.37(1)]

[06/04/2020, 21:37:29] Gareth Brown: [Redacted - s.37(1)]

[06/04/2020, 21:41:04] Jason Leitch: [Redacted - s.37(1)]

[06/04/2020, 21:41:14] Derek Grieve: [Redacted - s.37(1)]

[06/04/2020, 22:06:39] ~ Daniel K: <https://www.theguardian.com/world/2020/apr/04/why-what-we-think-we-know-about-the-uks-coronavirus-death-toll-is-wrong>

[06/04/2020, 22:07:13] ~ Daniel K: Jason et al - I think this is as good a generalist scener setter as I've seen.

[06/04/2020, 23:58:47] Jim McMenamin: Apologies for the delay. Have been on call this evening. Can't get the old Tefal advert out of my head now. Happy to catch up tomorrow Jason. When would be convenient?

[07/04/2020, 10:36:48] ~ Daniel K: And from today.

<https://www.bbc.co.uk/news/health-52167016>

[16/04/2020, 18:28:06] Jason Leitch: Hi all.

[Redacted - s.30.]

[16/04/2020, 18:30:21] [Redacted - s.38(1)(b).] Yes, sounds right.

[16/04/2020, 18:30:53] [Redacted - s.38(1)(b).] Length of time this would be needed for should be considered. Until a vaccine presumably.

[16/04/2020, 18:34:33] Derek Grieve: Jason. Richard F has been doing a huge amount of work so a quick call with him might be worthwhile. We have an outline plan from PhS which is both ambitious and credible that he can talk to.

[16/04/2020, 18:36:10] Jason Leitch:

[16/04/2020, 18:43:13] Gregor Smith: Jase - I've sent you a copy of a paper RF and I are going to catch up on.

[16/04/2020, 19:08:32] Jason Leitch:

[23/04/2020, 11:59:59] Jason Leitch: [Redacted - s.30]

[Redacted - s.30]

[23/04/2020, 12:03:05] Jason Leitch: [Redacted - s.30]

[Redacted - s.30]

[22/01/2021, 09:48:58] Gareth Brown: Gareth Brown left

[28/02/2021, 22:46:56] [Redacted - s.38(1)(b).] left

[28/04/2021, 12:07:32] Jason Leitch: Jason Leitch left

[03/08/2021, 16:55:15] [Redacted - s.38(1)(b).] left

**[Material prior to Jim McMenamin joining group out of scope for this request.]**

[16/12/2021, 14:09:58] Nicola Steedman: Hi Jim- I was just asking this cheery group:

If we are at 45% SGTF, why aren't we seeing the increased hospitalisations yet? Just too soon?

[16/12/2021, 14:10:14] Jim McMenamin: <attached: 00000012-GIF-2021-12-16-14-10-14.mp4>

[16/12/2021, 14:10:30] Nicola Steedman: Exactly!!!!

[16/12/2021, 14:10:40] Jim McMenamin: ? That's what I meant - we are not there yet

**[Redacted: Section 30(b)(ii).]**

[16/12/2021, 14:40:40] David Crossman: These slides in the Warwick paper are brilliant

**[Redacted: Section 30(b)(ii).]**

[16/12/2021, 14:41:03] Nicola Steedman: It's a model though... not a prediction...

[16/12/2021, 14:42:13] Daniel Kleinberg: Deploying an omicron vaccine will take how long... assuming we definitely get one.

[16/12/2021, 14:43:43] Nicola Steedman: March at earliest, maybe longer. And then there's roll out... and then the next variant..?

**[Redacted: Section 30(b)(ii).]**

[19/12/2021, 20:28:21] Daniel Kleinberg: Sage just in for 11-12 tomorrow.

[19/12/2021, 20:29:07] Daniel Kleinberg: This message was deleted.

[19/12/2021, 20:29:34] David Crossman: Can go if wanted - will move something with notice.

Bw

David

[23/12/2021, 08:34:18] Jim McMenamin: Good morning. I can't attend today's SAGE meeting as I am chairing the NIMT. The paper from EAVE/PHS is in the pack as is Neil Fergusons paper too. I assume these are for information to guide the discussion. Is someone able to take any questions on this should they come up? I will keep an eye on this chat and if necessary come into the SAGE call asking someone to hold the NIMT chair if necessary. Thanks

[23/12/2021, 08:44:12] David Crossman: I'll be there

[23/12/2021, 10:42:31] Daniel Kleinberg: Interesting sage. I'll do my note. Whitty asides worth looking out for.

[23/12/2021, 10:43:18] David Crossman: Thanks - can have a call after if you like

[23/12/2021, 10:45:54] Daniel Kleinberg: Keeping up so far - I'll chuck my usual note out for comment. Worked well last time.

[23/12/2021, 10:46:08] Daniel Kleinberg: Powis' update heartening.

[23/12/2021, 10:46:17] Gregor Smith: Thanks - always very helpful

[23/12/2021, 10:48:24] David Crossman: Encouraging but I am very cautious - regression to mean comes to mind

[23/12/2021, 10:49:51] Daniel Kleinberg: Indeed. Not yet cheery.

[23/12/2021, 10:50:19] Daniel Kleinberg: And omicron and delta circulating concurrently seems an invitation to further variants.

[07/01/2022, 11:50:07] Jim McMenamin: Interesting stuff from Callum. I can't access the repository- can we request that data is shared?

[07/01/2022, 11:50:47] David Crossman: Agree - I can't see it either

[07/01/2022, 12:22:21] Daniel Kleinberg: I think **[name redacted under section 38(b)(1)]** can get it but worth asking in chat bar?

[07/01/2022, 12:23:13] Jim McMenamin: Yes please - had to come off the call for meeting with CDC and Israel

[07/01/2022, 12:29:04] Jim McMenamin: I have cc'd you to an email request to the team in to pass this to us too

[07/01/2022, 12:34:55] Gregor Smith: **[Redacted: section 30(b)(ii).]**

[07/01/2022, 12:35:40] Daniel Kleinberg: Sage fascinating on kids. I'll not circulate my usual notes beyond clinical colleagues and sage members.

[07/01/2022, 12:35:54] Daniel Kleinberg: Not terrifying - just too sensitive and complex

[07/01/2022, 12:36:37] David Crossman: Agree with Daniel - we need to be careful on messages. I will call Daniel after

[07/01/2022, 12:36:53] Jim McMenamin: Yip. For CDC/Israel/UKHSA I wanted to hear the UK bit as have not heard the update so hanging on for this...

[07/01/2022, 12:37:49] Jim McMenamin: I await the COCIN data from the UoEdin team

[13/01/2022, 14:11:17] Jim McMenamin: I have asked **[names redacted under section 38(b)(1)]** to confidentially look at EAVE re Type 1 DM in children. I can update later

[13/01/2022, 14:13:36] Nicola Steedman: Thanks Jim. V helpful.

[13/01/2022, 14:40:22] Jim McMenamin: They agree that data should be available from SMR re first diagnosis which would be expected to result in admission. There may also be something on first prescription that I can talk to pharmacy side on too

[13/01/2022, 14:41:57] Nicola Steedman: Yes, prescription data would be good as some may not be admitted of course. Good to look at seasonal effect too which I wasn't aware of before.

**[Redacted: section 30(b)(ii).]**

[28/01/2022, 11:20:45] Nicola Steedman: Yes. Need evidence now to support things like testing given economic costs.

[10/02/2022, 11:46:37] Daniel Kleinberg: Nicola - are you going to sage later. Feels like we need to push on sharing of the assumptions and modelling behind paper 3a. Generally the uk is not sharing its public health rationale for the policy decisions it seems on the cusp of making.



[10/02/2022, 11:48:16] David Crossman: Agreed - I don't have this in my diary. I assume that's correct. If not let me know - I have some flexibility

[10/02/2022, 11:49:44] Nicola Steedman: Yes I'll be attending. Happy to raise this if needed?

[10/02/2022, 11:51:26] Daniel Kleinberg: I think it might be Nicola. Anything that puts down a marker that a 4N approach to sharing the scientific basis for decision making feels pretty critical but sensitive just now.

[10/02/2022, 11:51:44] Nicola Steedman:

[10/02/2022, 11:52:21] David Crossman: It's also unlikely to be argued with! (At least at SAGE)!

[10/02/2022, 11:52:36] Daniel Kleinberg: Yep. In theory!

[10/02/2022, 11:53:16] Daniel Kleinberg: David - Andrew can't make it so CMO's office could bid for you to attend in lieu of him (just don't use the word policy observer).

[10/02/2022, 11:53:28] Daniel Kleinberg: I will email them and copy you.

[10/02/2022, 11:55:45] Nicola Steedman: Yes please- happy to support the bid from CMO PO for David to attend in place of Andrew.

[10/02/2022, 11:56:10] Daniel Kleinberg: Sent already

[10/02/2022, 12:15:22] Nicola Steedman: Daniel- I'm thinking that the assumptions in paper 3a are just the vaccine efficacy assumptions that aren't in the annex as usual? Nothing else is different in the medium term predictions modelling though? This is the same as the one they produce for every meeting?

[10/02/2022, 12:16:46] Nicola Steedman: Sorry- paper 2a I mean.

[10/02/2022, 12:39:56] Nicola Steedman: Therefore presuming it's paper 3b you're referring to in terms of needing to see the modelling (and not paper 3a)

[10/02/2022, 12:57:33] David Crossman: I've had a meeting invite and then withdrawn. I assume I am not needed?

[10/02/2022, 12:57:52] Daniel Kleinberg: I don't think that's right.

[10/02/2022, 12:58:07] David Crossman: Ok I will join

**[Redacted: section 30(b)(ii).]**

[10/02/2022, 13:30:55] Daniel Kleinberg: Tom thought the NERVTAG paper underestimated T and B cell contributions to immunity.

[10/02/2022, 13:31:22] Nicola Steedman: This scenarios paper is not rocket science. And it's just a list of possibilities.

[10/02/2022, 13:31:35] Daniel Kleinberg: Yep.

[10/02/2022, 13:32:01] Nicola Steedman: We just don't know about cellular immunity at all...

[10/02/2022, 13:32:57] Daniel Kleinberg: David - are you in?

[10/02/2022, 13:40:38] David Crossman: Just rejoined - had a call

[10/02/2022, 13:58:13] Daniel Kleinberg: So, Sage and our public health advice largely aligned. This isn't over and the pandemic remains volatile. So, if you're packing it all up you should have a plan to stand back up.

[10/02/2022, 13:59:58] Nicola Steedman: Yes. I'm just wondering if spi-M are going to model the planned changes in testing and isolation policy.

[10/02/2022, 14:00:09] David Crossman: Also this behaviour discussion on messaging, message and who does this