

COVID-19 – A Framework for Decision Making

April 2020

COVID-19 – A FRAMEWORK FOR DECISION MAKING

CONTENTS

| | |
|----------------------------------------------------------|----|
| Foreword | 2 |
| Our Approach and Principles | 4 |
| Section 1 Scotland's Approach | 5 |
| Section 2 Harms from COVID-19 | 7 |
| Section 3 Preparing for Transition | 9 |
| Section 4 Framework for Decisions | 12 |
| Section 5 Options for Easing or Imposing Restrictions | 16 |
| Section 6 Controlling the Pandemic – Respond and Recover | 18 |
| Section 7 Renew – Living with the Virus | 22 |

Foreword

The emergence of the COVID-19 virus is the biggest global challenge that humanity has faced for generations. Internationally, we have seen people and governments across the globe face similar challenges and choices. We stand in solidarity with the global effort to address the threat of COVID-19.

The steps we have taken in Scotland to contain the virus are unprecedented and have changed life as we knew it, but the defining factor is how people have responded to them. I want to start by saying thank you to the people of Scotland for diligently following our public health advice to stay at home.

This gratitude extends to all sectors of our communities: our health and social care workers, who have mobilised with a world class response; the other public service workers who have continued to provide vital public services and taken on new tasks to protect those most in need; our shop workers and our business community, who have found new ways to work and flexed their businesses to respond to our new circumstances; our food producers and delivery drivers who have ensured that the food we need is there when we need it; and our third sector which has found new ways to support our people.

Given the uncertainty that surrounds our global understanding of the disease, we will need to continue to work together to ensure that we protect ourselves, our families, our communities and our nation from the threat presented by COVID-19.

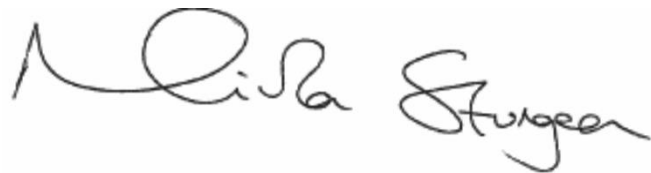
The path before us is through uncharted territory and will need careful navigation. Our guiding values should be kindness, compassion, openness and transparency.

While we hope that scientific advances, such as treatments and a vaccine, will provide solutions in the longer term, in the more immediate future we will need to learn to live with this virus, possibly for some time to come. Our challenge therefore is to work out if and how we can continue to suppress it and minimise its harms, while restoring some semblance of normality to our everyday lives. We will always take a careful approach that seeks to protect life and reduce harm.

These decisions will not be easy. The challenge and necessary change that lie ahead of us will require us to adapt how we live our lives. That will require a concerted effort from all parts of Scottish society. Individual and collective responsibility will be needed to keep our country safe and we will need to draw on the collective ingenuity, innovation, creativity and perseverance that Scotland's people have at their core.

Everyone in Scotland has a part to play.

The document that follows sets out some of these challenges and how we will approach them. This is very much the first version of what will be a living document - we will update it as evidence, modelling, and our assessment of the different options open to us develops.

A handwritten signature in black ink that reads "Nicola Sturgeon". The signature is written in a cursive, flowing style.

Nicola Sturgeon

First Minister of Scotland

Our Approach

- **Suppress** the virus through compliance with physical distancing and hygiene measures, ensuring that the reproduction number remains below 1 and that our NHS remains within capacity
- **Care** for those who need it, whether infected by the virus or not
- **Support** people, business and organisations affected by the crisis
- **Recover** to a new normal, carefully easing restrictions when safe to do so while maintaining necessary measures and ensuring that transmission remains controlled, supported by developments in medicine and technology
- **Protect** against this and future pandemics, including through effective testing, contact tracing and isolation
- **Renew** our country, building a fairer and more sustainable economy and society

Our Principles

These are the principles by which we will make our decisions:

| | |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Safe | We will ensure that transmission of the virus remains suppressed and that our NHS and care services are not overwhelmed. |
| Lawful | We will respect the rule of law which will include ensuring that any restrictions are justified, necessary and proportionate. |
| Evidence-based | We will use the best available evidence and analysis. |
| Fair & Ethical | We will uphold the principles of human dignity, autonomy, respect and equality. |
| Clear | We will provide clarity to the public to enable compliance, engagement and accountability. |
| Realistic | We will consider the viability and effectiveness of options. |
| Collective | We will work with our partners and stakeholders, including the UK Government and other Devolved Nations, ensuring that we meet the specific needs of Scotland. |

Section 1 – Scotland’s Approach

- We will act in accordance with our values.
- We will listen to the best evidence.
- We will engage the people of Scotland.

The World Health Organisation was notified of the first cases of a new disease - COVID-19 - over 100 days ago, and declared the Coronavirus disease (COVID-19) a global pandemic on 11 March 2020. The first cases in Scotland were notified on 1st March.

As of 23rd April, 9409 people in Scotland have been confirmed to have been infected with the virus, and as of Sunday 19th April, 1,616 people have been recorded as having sadly lost their lives¹.

The impact on Scotland has been profound. Every life has been affected. No individual, community or business has been untouched, and for many that has meant real and possibly long-lasting hardship. But the response from the Scottish people has been equally profound. Despite the cost to business and society, we have complied with restrictions and thereby reduced the pressure on our health and social care services, and saved lives.

That response reflects the core values of our National Performance Framework: kindness; dignity; compassion; respect for the rule of law; openness and transparency. It also aligns with our overarching commitment to human rights, equality and social justice. In confronting the threat posed by COVID-19, we are determined that no member of Scottish society will be forgotten or left behind.

It is clear that we cannot immediately return to how things were just over 100 days ago. But it is equally clear we cannot stay in complete lockdown indefinitely, because we know that this brings damaging consequences of its own. So we must adapt to a new reality. With scientists around the world working on vaccines and treatments that are still potentially many months away, we need to find a way to live with this virus and minimise its harms. We need to ensure, that as far as we can, our children are educated, that businesses can reopen, and that society can function. But we must ensure that those things happen while we continue to suppress the spread of the virus.

While it is obvious that government cannot guarantee that no-one will become infected with this virus in future, we are clear that an assumption that there is a proportion or section of the population that it is safe or acceptable to allow to be infected forms no part of the Scottish Government’s policy or approach.

¹ This figure is all deaths where COVID-19 is mentioned on the death certificate. As of 23rd April the number of patients who have tested positive who have died is 1120.

Every individual member of Scottish society matters and our entire strategy is focused on preventing every avoidable death. There is no such thing as a level of “acceptable loss”. That is an approach which reflects our commitment to safeguarding human rights and upholding human dignity. It is the ethically correct approach to take. And it reflects the caring, compassionate and inclusive ethos of Scottish society.

Our objective is to contain and suppress the virus in order to minimise the harm it can do.

Our challenge is to consider if and how we can achieve that objective while restoring as much normality to everyday life as possible.

Although the decisions on if, when, and how to ease restrictions must be made by government, they cannot be made in isolation. We are listening to the best scientific advice and will apply our best judgements to that. We must also listen to the people of Scotland. Transparency and engagement is fundamental. This document sets out the situation as we understand it, and the principles on which we will base our decisions to ease the current restrictions or, should it become necessary to prevent harm to re-impose or further tighten restrictions.

Section 2 – Harms from COVID-19

- The pandemic is a health crisis, a social crisis and an economic crisis that is causing harm on an unprecedented scale.
- Difficult decisions are required to balance these various, inter-related harms so as to minimise overall harm.
- The harms caused do not impact everyone equally.
- We will protect those most at risk and protect human rights.

COVID-19 causes harm in at least four ways. First, the virus causes direct and tragic harm to people's health. We have seen this in these first phases of the pandemic in Scotland in the daily growth in number of new cases; number of new hospitalisations; number of people requiring treatment in Intensive Care Units; and, sadly, the number of deaths related to the virus.

Second, the virus has a wider impact on our health and social care services in Scotland; how our people are using those services; and how this impacts on non-COVID health harms. We have mobilised our health and social care services to an unprecedented degree to respond to COVID-19. That has meant the postponement of other types of care and treatment.

Despite the NHS remaining open for those who need it, we have seen significant reductions in people seeking help. This will impact on those most at risk. The health impacts brought about by greater inequalities may themselves be significant over years to come. We must adapt to ensure that our health and social care services can resume this wider care as soon as possible, and this forms part of our planning for the period ahead.

Third, the restrictions which Scotland, together with the other UK nations, has necessarily put in place to slow the spread of the virus can in turn cause harm to our broader way of living and society, including, for example, the negative effects of increased isolation, particularly for those living alone, and the impact on children's well-being from closing schools.

Fourth, along with the wider negative impacts of the global pandemic, the lockdown has had an enormous impact on our economy, with a potential fall of 33% in GDP during the period of lockdown. This is unprecedented and is causing deep uncertainty and hardship for many businesses, individuals and households. The damaging effect on poverty and inequality may be profound.

Closures and job losses have been inevitable, even with the unprecedented support provided by government. And the impacts will intensify the longer the lockdown continues: we will see more businesses unable to recover and we risk the scarring effects of unemployment. The risks of increasing hardship and increasing poverty are real. This in turn risks damage to the health of the population. We must do everything possible to avoid permanent, structural damage to our economy.

All these harms are related; health harms impact on society and the economy, just as the societal and economic effects impact on physical and mental health and wellbeing. Navigating the right course through the crisis will involve taking difficult decisions that seek to balance these various, inter-related harms so as to minimise overall harm.

COVID-19 affects everyone but the harms caused by the pandemic are not felt equally. Our response to this pandemic must recognise these unequal impacts. Just as we have sought to shield those most at risk, we must continue to provide additional support for those who need it and seek to advance equality and protect human rights in everything we do.

The lockdown measures set out in emergency legislation have been carefully considered in light of medical and scientific advice and are necessary to protect public health in Scotland. The measures are proportionate to the nature of the disease and the scale of the crisis. Consideration of the impact on human rights, and the need to protect those rights has been central to that decision-making process.

The pandemic is a health crisis, social crisis, and economic crisis of unprecedented scale with profound and permanent implications for our society. Our collective endeavours, with the people of Scotland, with the other nations across the UK, and with our partners in the European Union and beyond, to respond effectively, will help us to minimise the harms, respond to the pandemic, recover as a people and, however difficult, renew as a society.

In all these efforts – to respond, recover, and renew – Scotland will continue to be guided by evidence and judgement. That evidence will be needed to drive real innovation across every sector of society if we are to adapt to living with the virus.

Scotland is a responsible global citizen – an outward-facing, connected nation which listens to the advice and expertise of the World Health Organization, to the European Union and its Centre for Disease Control, and to our UK and Scottish sources of expertise, evidence and advice. It is by acting and learning with others that the most effective ongoing public health response to COVID-19 for Scotland will be found.

Section 3 – Preparing for Transition

- We must suppress transmission of the virus ($R < 1.0$).
- We must continue to adhere to the advice: stay at home if symptomatic; keep physically distanced; and maintain good hand hygiene and cough hygiene.
- We must develop the public-health capability to deal with cases and outbreaks in a way that prevents widespread community transmission.

Scotland, with the other three UK nations, entered lockdown on 23rd March 2020. Under law, we are committed to reviewing that lockdown at least every three weeks. This ensures the impact of restrictions remains proportionate to the threat posed and that limitations, such as those on our freedom to travel and gather together, do not remain in place any longer than is necessary. On 16th April, all the restrictions and requirements under the Health Protection (Coronavirus) (Restrictions) (Scotland) Regulations 2020 were reviewed.

The regulations contain restrictions on movement and physical distancing and requirements on businesses to close premises. Following the review, based on advice from the Chief Medical Officer in Scotland and informed by broader evidence of economic and societal impacts, a decision was made that all current restrictions and requirements continue to be necessary to protect public health, in accordance with the requirements for the review process set out in the regulations.

In common with nations across the world, Scotland is planning for a managed transition away from current restrictions in a way that enables the suppression of transmission to continue. This will include ongoing physical distancing, the continued need for good hand hygiene and public hygiene, and enhanced public health surveillance - while seeking to very carefully open up parts of our economy and society.

As and when we lift restrictions, we will need to put in place public health measures to stop cases becoming clusters, clusters becoming outbreaks, and outbreaks becoming an uncontrolled peak that would require a return to lockdown to avoid enormous loss of life and the overwhelming of our health and care system.

Expanding public health services will not be sufficient to deal with the virus in future—although it is vital that we do so. We will require to take other measures to control transmission.

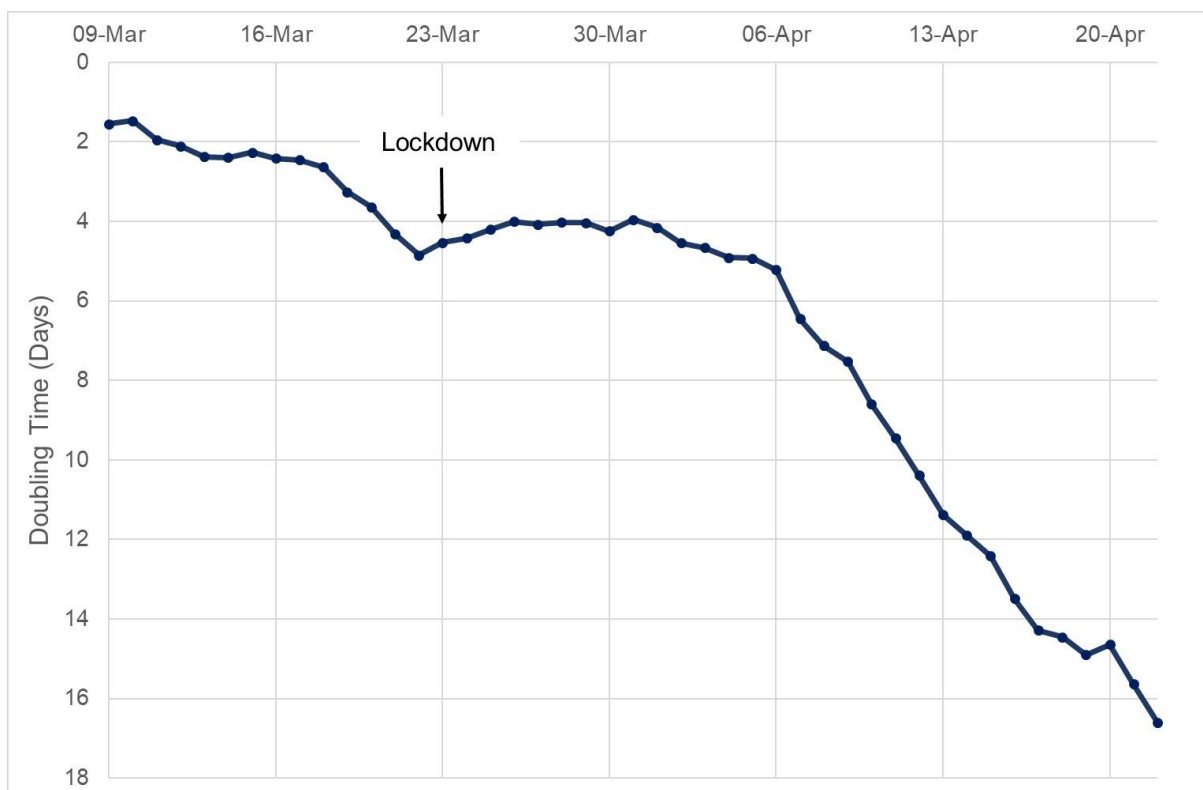
As a result of the current lockdown, there are early signs the virus has been slowed – but it has not been eradicated. We will need people in Scotland to continue to live their lives in ways that minimise the spread of the virus. So even as we lift some of the more restrictive measures, better hand hygiene and appropriate physical distancing will need to remain in place, at home, on the streets and in the workplace.

With the lockdown measures currently in place we are seeing early signs that the impact of the virus is being contained. By complying with these restrictions people have protected our NHS and saved lives.

The Scottish Government publishes on a daily basis: the number of new cases; number of hospitalisations; numbers requiring ICU care; and new deaths related to the virus. In recent days, there are signs that the rate of growth in new cases has slowed. This slowing has only been made possible by the actions of the public in adhering to physical distancing measures.

The chart below shows the impact of the lockdown. Before lockdown, cases would double around every 4 days. Cases now take over two weeks to double. This means far fewer people have become infected than otherwise: the actions we have all taken have saved lives.

Figure 1 – Doubling Time of COVID-19 Cases



The single most important measure to help us understand how fast the virus is spreading and the degree to which it is under control is the “reproduction number” or “R”². The reproduction number is a measure of the contagiousness or transmissibility of a virus – in other words, the number of cases each infected person passes the virus on to. To contain the virus we must keep the R number below 1, and this means minimising the risk of spreading the virus at every turn. When R is over 1, exponential growth returns.

Our best estimate is that due to restrictive measures the reproduction number could now be between 0.6 and 1.0. This has only been achieved because so many workers are working from home, in general less than 1% of children are attending the emergency provision in schools and other settings, levels of use of public transport have fallen to more than 90% below usual levels, and very high numbers of people are sticking to the physical distancing best practice. We know too that the sum is greater than the parts – the combination of measures is more effective at reducing R than individual measures. It is also important to note that the reproduction number will be higher in specific settings like care homes. That does not leave us much scope to ease restrictions. Even very small increases in the reproduction number will have large impacts on transmission and can lead to a significant peak in hospitalisations and death. The World Health Organisation has stated that before any decision is made to lift restrictions, transmission of COVID-19 must be controlled. That means that we must see R stabilise below 1.0 and ensure that the impact of any decision to ease restrictions must maintain R below 1.0.

And bringing down the number of new cases per day matters too. Lowering the number of new cases per day as much as possible, together with an R below 1, will mean fewer cases and reduced harm.

We will continue to gather the data we need to assess progress of the virus. This includes community enhanced surveillance through testing integrated into the work of our community hubs treating COVID-19 and the telephone COVID triage service. We are also working alongside the other UK nations to develop serological (antibody) testing which will allow us, if and when available, to assess the extent of immunity in the population.

We need to be confident that community transmission is under control before we consider changes to the current restrictions. The advice from our advisers on the best estimates for Scotland of the reproduction number will be a critical component of our decision making. As part of this, we will continue to monitor – and publish – daily numbers of cases, of people in hospital, and of people in ICU. We will need to see sustained evidence that on these measures the spread of the virus is slowing down.

R₀ . “R naught” - as it is called - is the number of new cases that one case could generate in a fully susceptible, non-immune population in the absence of interventions that reduce the transmission rate. R is the number of new cases that one case generates in the current state of a population. In this document we use R throughout.

Section 4 – Framework for Decisions

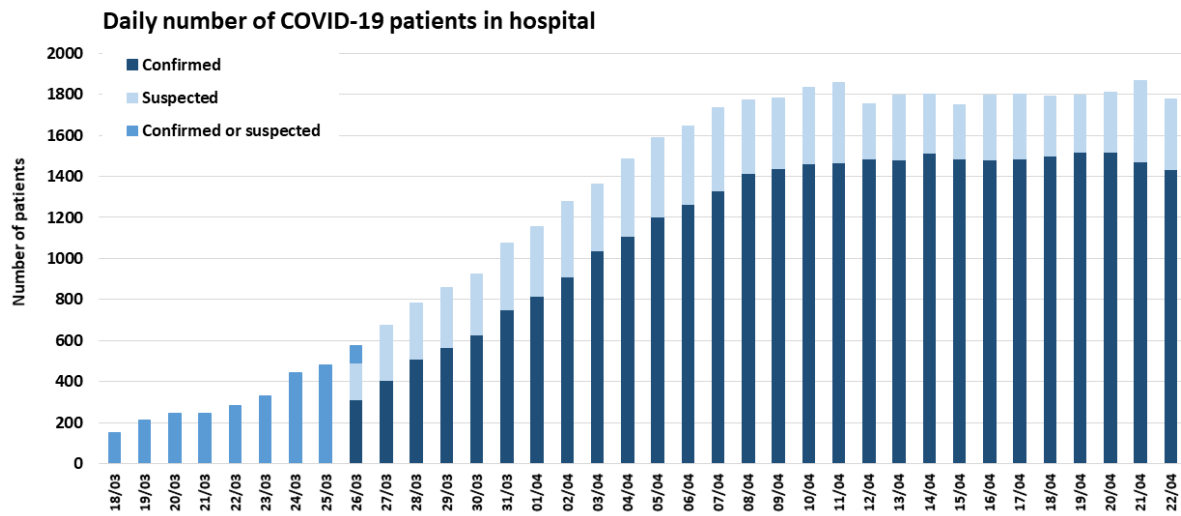
- We want to ease restrictions but must be prepared for them to be re-imposed as well as lifted.
- Any lifting of restrictions will rely on high levels of support and compliance from the whole population with any continued physical distancing.
- We will be open and transparent about the evidence we have.
- We will consider how our decisions impact on all parts of society.

It is important that there are clear criteria to guide decisions on whether to maintain, tighten or relax the lockdown. There is a process in place to guide us. We will follow the evidence and apply judgement to it. We will consider the advice from experts across science, public health, the economy, and beyond. Our Chief Medical Officer's Advisory Group, in alignment and discussion with the advisory structures in other parts of the UK including SAGE, is advising us on the public-health impacts of the crisis and how to mitigate them. We are also able to draw on the range of economic and social policy expertise from the across government and beyond to inform our decision making.

While we will continue to operate within a four nation UK framework and align our decisions as far as possible, we will take distinctive decisions for Scotland if the evidence tells us that is necessary.

The evidence we now publish daily on cases, hospitalisations, ICU admissions and deaths will tell us if community transmission is controlled. The following chart shows the trend in recent weeks of daily numbers of COVID-19 patients in hospital. There are signs it has plateaued. The capacity of our health and care system to care for our people when any restrictions are lifted will be a factor. Evidence on the impact on the economy and society, in particular more at-risk communities, will also be critical to any decision making.

Figure 2 – Daily Number of COVID-19 Cases in Hospital



We need a better understanding of the transmission of the virus in particular places - especially our hospitals and care homes – and how that may impact community transmission. And – within the overarching constraint of keeping transmission suppressed – understanding the impact of our options on our economy and our society, on our children’s ability to learn, and on meeting the needs of those most at risk will be critical.

Our values matter too. We will ask of each option, how does this impact on different groups in society – is it ethical, does it promote solidarity, does it promote equality and does it align with our legal duties to protect human rights? At all times we will ensure that the action being taken is necessary and proportionate. Restrictions should be eased as soon as it is safe to do so, but we should be clear that it may be necessary to re-impose restrictions if the evidence indicates that this is the best way to safeguard public health and the right to life.

In acting in an open and transparent way we will explore new ways to engage with the public as this pandemic progresses. We will also continue to publish on a daily basis the key measures of how the pandemic is progressing, and we will share our thinking at every stage.

Assessment Framework

Determining when and how to ease, maintain or (re)impose physical distancing measures will be some of the most important decisions that we will make in relation to the crisis.

We will need to assess existing measures, and potential new measures, individually and in combination. We will consider how they interact with other factors such as testing and contact tracing, and hopefully, in the longer term, any breakthroughs in treatment or vaccine – though we are not counting on these now.

We will be assessing physical distancing options for their contribution to minimising overall harm to our health, economy and broader society. To do this, we will use the best available evidence and analysis (e.g. modelling of the epidemic and of the economy, and the interaction between the two), supported by external expertise.

Our assessment of the options will be constrained by the need to keep transmission of the virus under control (in technical terms, to keep the R below one). It is likely that we will need small, incremental steps initially in terms of easing the measures.

To make sure this would not lead to an unmanageable acceleration in COVID-19 cases, we will use evidence about the scale of change: how many more people would come into contact with others in each option and what that means for the likely spread of the virus. When we do ease restrictions, we will then continue to monitor new cases daily, as well as regular monitoring of the other health, economic and social harms stemming from COVID-19, to validate our existing assessment and inform future assessments.

We will also assess options against broader considerations including how well any measures can be communicated and understood, how likely they are to be complied with, whether their impact on human rights is proportionate to the current level of risk, and their impact on different equality groups – as we know that both the virus and the physical distancing measures affect different groups in society in different ways.

Within these considerations, we will also assess the merits of tailoring options to, for example, specific geographies and sectors, or parts of the rural economy, or those able to work outdoors – but only if that is consistent with the aim of minimising overall harm and can be implemented effectively. We will also take account of other relevant factors such as how people and goods move around the country. We understand the importance of work to people's health and wellbeing and we want to be able to allow businesses to re-open and people to go back to work just as soon as it is safe to do so.

These assessments will inform the decisions we take about the Health Protection (Coronavirus) (Restrictions) (Scotland) Regulations 2020 that determine the legal aspects of physical distancing, and which must be reviewed at least every three weeks and lifted when there is no longer a need for them.

These assessments will also inform our discussions with the UK Government and other devolved administrations, as part of a process of collective assessment and decision making when appropriate.

This framework for decision-making will, on its own, be insufficient to achieve our aims of controlling transmission of the virus and minimising broader health, economic and societal harm. Achievement of these aims will require unprecedented levels of support and compliance from the whole population. The virus has not been eradicated.

Assessment Framework

1. Options for physical distancing measures – easing, maintaining, (re)introducing – are **technically assessed** using the best available evidence and analysis of their potential benefits and harms to health, the economy, and broader society so as to **minimise overall harm** and ensure that **transmission of the virus is suppressed**.
2. Potential options – individual and combinations of measures – are **assessed for their viability**, for example taking account of how easy they are to communicate and understand, likelihood of public compliance, the proportionality of any impact on human rights and other legal considerations.
3. Broader considerations also include **equality impacts** and consideration of **tailoring measures**, for example to specific geographies and sectors.
4. Assessments will inform the required **reviews of the Coronavirus regulations** and collective assessment and **decision-making with the UK Government and other Devolved Administrations** as appropriate.

Section 5 – Options for Easing or Imposing Restrictions

- Any easing of restrictions will be conducted in a phased and careful manner.
- We will do what is right for the people of Scotland.
- We will adapt as we learn more about this virus.

It is essential that we understand that living with the virus will mean continued uncertainty and changes to how we live our lives. A key consideration around easing restrictions is how to do so safely. Even as we lift some of the more restrictive measures, we are likely to require continued adherence to the advice on staying at home if symptomatic and to the advice on physical distancing.

We are likely to require that gathering in groups, for example in pubs or at public events, is banned or restricted for some time to come. And good hand hygiene and cough hygiene must become fundamental habits. We cannot afford to have exceptions. Each one of us will have to adapt to this as the new normal, at least until we are sure that we can be more protected by a vaccine or treatment.

If, after easing any restrictions, the evidence tells us we are unable to contain the transmission of the virus then we will have to re-impose them, possibly returning to lockdown with little notice. While we will do our best to avoid this, it is possible that such a cycle may happen more than once until we reach a point when we have in place an effective vaccine.

Around the world, nations are considering different options for easing or re-imposing restrictions. It is too early to tell from international comparisons what the safest and most effective approach might be. Most countries are just at the starting point of lifting interventions and there will be a time lag between lifting and seeing the impact. We can learn from others' experience.

Taking careful account of all the harms caused by the virus, the Scottish Government will participate in the UK four nations expert advisory groups and collective decision-making process. On occasion, expert advice may point to different approaches reflecting the specific circumstances in each country or to different optimal timings for easing or tightening restrictions across the varying geography of the UK. On such occasions, the Scottish Government would consider the appropriate course of action to best meet Scotland's specific needs and circumstances.

There may also be some actions that require co-ordination and co-operation with the UK government which the Scottish Government considers necessary, for example border control and health surveillance of people coming into the UK. In these circumstances, we will seek support for such measures through the four nations framework.

Our assessment is that now is not the right time to relax restrictions. Over the next few weeks, based on the evidence and expert advice, a number of options will be considered – not all of which may be selected. These are likely to include the easing of restrictions in a phased manner, opening up different parts of the economy sector by sector, considering different restrictions in different areas dependent on how the pandemic is progressing, and considering options for different groups of the population – as is currently the case with those shielded for clinical reasons. It may be that restrictions on some outdoor activity are eased before those on indoor activities - however, all of this will be evidence led.

Easing restrictions will not mean returning to how things were before the virus. Physical distancing, hand hygiene, and other critical behaviours will be essential in each sector. We will engage with experts in each sector to understand the practical consequences, for example, of what physical distancing would mean for schools and education, transport, business, and recreation. The capacity of business and industry to innovate to find different ways to function will be critical here.

In addition to the effect of different options for easing restrictions on the transmission of the virus, we will consider the practicality of measures, their sustainability, their proportionality, the ease of reintroducing measures in the event that exponential transmission was to reoccur, and the clarity of the message for the public.

Some form of continued shielding to protect those who are most at risk will almost certainly be required as restrictions are lifted. This means that we will have to redouble our efforts as a government and society to support those people who have to remain shielded.

There is still much to learn about this new disease. Our options for lifting restrictions will be informed by global learning on how the virus progresses. Under the existing legislation, the enforceable measures will be reviewed at least once every three weeks. This ensures that restrictions do not go further than is actually required and do not remain in place longer than is strictly necessary.

Options for varying the restrictions include full and partial lifting of existing measures. Looking forward, they also include the potential introduction of new restrictions and (partial) re-imposition of measures to keep the virus suppressed, guided by the evidence and broader considerations we have set out.

In terms of partial adjustments to measures, there are a number of approaches that can be taken and we will consider them in accordance with the principles set out in this document. These include variations by geography, by sector, or by specific groups of the population (such as is already the case with our shielding measures).

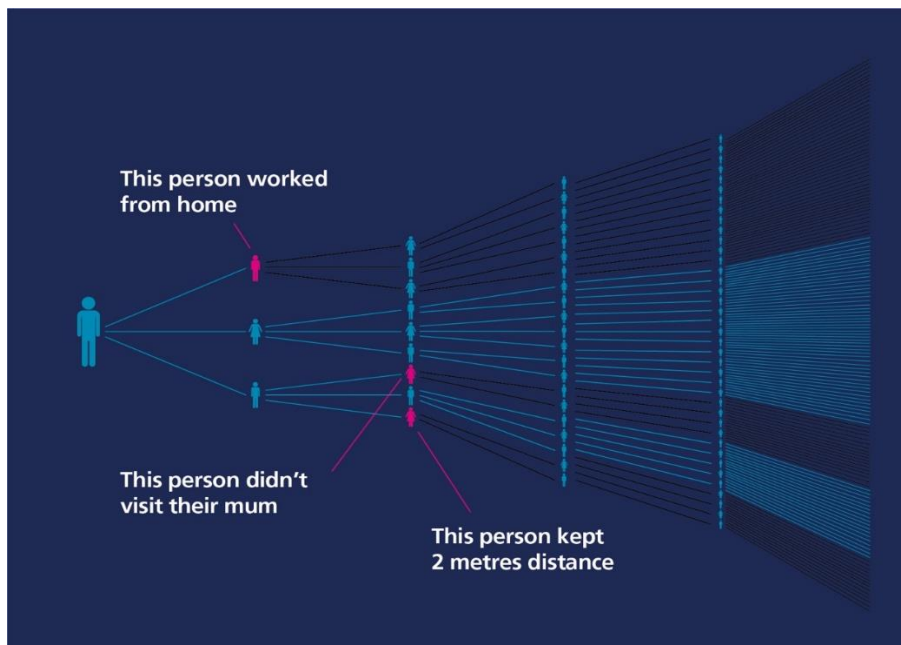
Easing restrictions in particular settings is likely to see the continuation of physical distancing and other hygiene measures (such as maintaining 2 metre distancing when premises re-open and/or limiting the number of people that can be in confined spaces at the same time).

Section 6 – Controlling the Pandemic – Respond and Recover

- We will use surveillance to identify and track the spread of the virus.
- We will develop and deploy the public health services we need to tackle outbreaks.
- We will work with all sectors of society including schools and businesses to develop policies and practices that contain transmission.

All our consideration of options for physical distancing measures will be constrained by the need to minimise the transmission of the disease, so that we do not re-enter a new phase of sustained community transmission.

Figure 3 – Breaking the chain of transmission



Efforts to prevent the spread of the virus will need to be sustained, and, in advance of effective treatments or a vaccine becoming available, we will all need to keep up the strong hygiene practices and elements of physical distancing that are beginning to impact on the spread of the virus.

Our plans to respond and recover must take account of the possibility of a cycle of lifting and re-imposing restrictions. The steps we take to rebuild our economy or restore some degree of normality in society must recognise the possibility of restrictions being re-imposed quickly. That will require fundamental change to how all sectors of society organise themselves.

Unprecedented efforts to understand this virus, its potential treatments and to produce a vaccine are underway across the world. But we must be clear that there can be no guarantee of quick success nor of permanent success. Other viruses – like influenza - require seasonal vaccination.

We will be led by the science and focused on reducing the harms to human wellbeing caused by the virus and the unintended impacts of the measures in place to control it.

We will do this by drawing on WHO, European, UK, Scottish and wider international expertise to understand the virus and our responses to it. The best scientific advice suggests that it will in due course be possible to relax lockdown, but that strong measures to sustain low levels of transmission will be required until either a vaccine or cure is developed.

Some of the range of lockdown relaxation options described above are beginning to be put in place in different countries. We will learn from the international community, in particular those further ahead than Scotland in their pandemic curves. At this time, it seems likely that the most promising approaches for Scotland are likely to involve some combination of the following key measures:

- Innovative approaches to maintain and enhance physical distancing
- Continued focus on strong hygiene practices
- High public community awareness of symptoms and prompt action in response
- Active surveillance
- Case finding, contact tracing and quarantining
- Shielding of clinically at risk groups

If we see evidence of outbreaks of the disease we will need to be ready to act decisively to suppress them and so prevent wider transmission. This will require both a very high degree of virus-aware public behaviour along with enhanced public health services. These services would come in five stages. Work on all of these is underway in Scotland and we will set out further detail shortly.

1. Effective disease surveillance. We need to understand where the virus is and how prevalent it is.
2. Early identification and isolation of possible cases. High population awareness of symptoms, clear action on what to do if you have them, high propensity to act.
3. Early and rapid testing to confirm cases.
4. Early and effective tracing of everyone a confirmed case has been in contact with over a certain period. This will need to involve digital tools and require active support from the public, as well as support from contact tracing teams.
5. Early and sustained isolation of contacts. Chains of transmission can only be broken if those who could transmit the disease to others are isolated so they cannot do so, and get the support they need to maintain that isolation.

Continuing to increase our testing capacity is a critical part of this challenge. Our ability to ease restrictions will be related to our testing and tracing capacity and, ultimately, to issues like the public uptake and acceptance of (possibly repeated) testing of individuals.

In tandem, we will redouble our efforts to prevent transmission in particular settings, including hospitals and care homes. Throughout the world, hospital acquired infection and virus spread in care homes has been a great challenge. We need to understand more about how this virus spreads through institutions and adapt our buildings and practices to limit its potential to do so. Ensuring sufficient supply of Personal Protective Equipment (PPE) is a crucial part of this.

The safety of our essential frontline workforce is an absolute priority, and we will continuously monitor and improve the supply and distribution of PPE. We recognise that workers need absolute clarity on what type of PPE they should wear in which setting or scenario and we will work continuously to ensure our guidance is in line with the science as our understanding develops.

Working together under the 4 Nations PPE Plan, we will continue to ensure we benefit from mutual co-operation on the procurement and distribution of PPE where appropriate.

The Scottish Government will continue to develop our own supply, procurement and logistics arrangements, working with manufacturers in Scotland and globally to ensure we have adequate supplies.

We will also, with the other nations across the UK, need to carefully consider 'port health' – the impact of international travel on transmission of the virus. It is unlikely that we will be able to contain the virus domestically, without some form of surveillance of those coming into the country from elsewhere. We will urge the UK Government to have this as a part of their approach.

We need better data to identify areas of spread and the rate of exposure and immunity in the population, locally, regionally and nationally so that we can monitor the impact of any changes and make decisions in as close to real time as possible.

Stopping a resurgence of the pandemic – another peak – will allow us to work with our partners in business, trade unions, local government, the voluntary sector and in broader society to redesign workplaces, education settings and other premises so they are places where spread is minimised - allowing people to get back to work, children to return to school, and our young people to continue their education through our colleges or universities, when it is safe to do so.

We will support businesses and other organisations in this redesign so they can be places where physical distancing can operate. Our health and safety professional communities will play a critical role.

We will need to consider compliance with physical distancing advice in the workplace and in other settings. We have already begun the conversation on how to respond, re-set, restart and recover with our business community and our trade unions. Businesses are already learning about safe working with physical distancing in place, showing how effectively they can adapt and change their business models.

Partnership must be at all levels to be effective – national, local, and community. And this partnership requires support – for individuals, families, communities, organisations and businesses.

Our support for business, for example, is now around £2.3 billion and complements UK Government schemes. This support will need to continue for as long as necessary and we will work with the UK Government to secure this. Business support must be responsive to the business needs of each nation, and informed by evidence and expert advice.

To date, we have rightly focused the majority of our efforts on protecting as many businesses and jobs as possible through either financial support or to help them repurpose. We are developing guidance for businesses to safely return to operation when the scientific and health advice supports this.

This epidemic is evolving rapidly, and our understanding of best responses will evolve as well. Additional evidence, context, and insights about the epidemic become available every day and we will continually adapt our response in the light of greater understanding.

Section 7 – Renew – Adjusting to a New Normal of Living with the Virus

- We will rebuild Scotland’s economy, overcoming inequality and advancing human wellbeing.
- We will work with Scotland’s communities to build cohesion and mutual support.
- We will work with and learn from governments around the world as we learn to live with the virus.

We have seen an unprecedented response from the people of Scotland. We have seen communities and businesses support each other like never before. Our “Scotland Cares” campaign has had a tremendous response and we thank each and every person who has registered an interest so far. Our volunteers will have important roles to play in the weeks and months to come, as we support our communities. Our voluntary sector has provided much needed support.

Despite the terrible impact of the virus, these responses are hopeful signs and a basis upon which to build toward a new future. We face a major challenge in navigating the uncertainties that the virus has created and rebuilding our economy and public services. But we want to go beyond rebuilding, and look to the social and economic reforms necessary to achieve the best future for Scotland.

Before this crisis we were focussed on our mission of making Scotland a greener, fairer and more prosperous country and this has not changed. But the place from where we are starting has.

The pandemic has changed the way societies and economies across the world operate and Scotland is no different. In some ways this has driven forward changes that we have already been pursuing such as using online tools to reduce the need for travel. In others it has meant radical action to change how we use our NHS or to tackle social problems such as homelessness.

It has taught us about the art of the possible under the most demanding circumstances – with the Louisa Jordan hospital providing a fantastic example of that.

We must take these lessons into how we recover from this crisis. The austerity driven response to the 2008 financial crash did not work and worsened the inequality that was part of its cause; we must not repeat those mistakes. Inequality is also worsening the outcomes for those people impacted by the coronavirus. Our younger people deserve a fairer and more secure economic future.

Our focus must be on how we support our people to adapt to the new world that lies ahead of them. This means giving them the skills to respond to the inevitable changes in the labour market. It means helping businesses deal with the transition out of this crisis by changing their business models and practices with an eye to the markets that will grow in the future. It means investing to enhance the security and resilience of our economy.

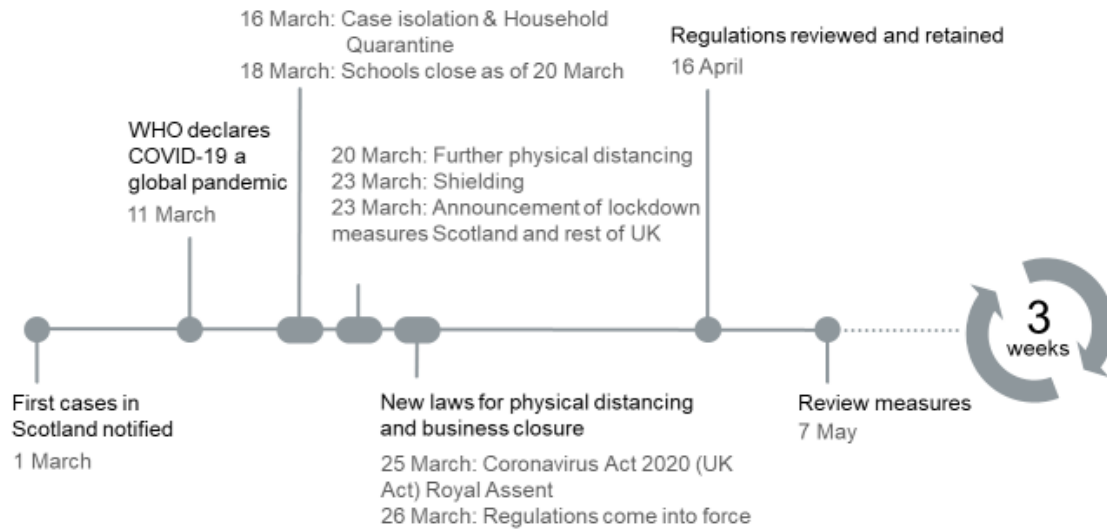
Our public services will also have to change to help our people recover from this shock and also to harness the kindness and compassion that has poured from people up and down the country.

We must also look outwards. Billions of people have faced the same challenges that we do now and will find their own innovative and inspiring ways to recover. We will engage with, learn from and collaborate with other countries, including in Europe and with the group of Wellbeing Economy Governments with whom we share values and purpose. And we will continue to support our international development partner countries.

We have seen an unprecedented response from the people of Scotland to an unprecedented challenge. It has been innovative and compassionate. It is up to us how we move through this crisis and come out of the other side. This document sets out the basis on which we will act, based on common values, principles and the best scientific knowledge. When things come apart, there is always the opportunity to put them back together differently. We can work together to design the Scotland we want to emerge from this crisis.

Timeline

The Scottish Government will review the regulations at least once every 3 weeks





Scottish Government
Riaghaltas na h-Alba
gov.scot

© Crown copyright 2020

OGL

This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3 or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at www.gov.scot

Any enquiries regarding this publication should be sent to us at

The Scottish Government
St Andrew's House
Edinburgh
EH1 3DG

ISBN: 978-1-83960-709-7 (web only)

Published by The Scottish Government, April 2020

Produced for The Scottish Government by APS Group Scotland, 21 Tennant Street, Edinburgh EH6 5NA
PPDAS731406 (04/20)

W W W . g o v . s c o t