Covid inquiry: Hancock is grilled on care homes, lockdowns, and testing

The former health secretary Matt Hancock returned to the stand last week to face questions on the government’s decision making during the pandemic. Gareth Iacobucci reports

Gareth Iacobucci

Matt Hancock, the UK health secretary between 2018 and June 2021, acknowledged major deficiencies in the country’s preparedness for covid-19 when first giving evidence to the UK covid-19 inquiry in June 2023. Last week he was resummoned to answer key questions about the government’s response to the pandemic.

Should the UK have locked down three weeks earlier?

Hancock told the inquiry that with hindsight the government should have imposed a lockdown three weeks earlier than it eventually did on 23 March 2020, which he said would have saved “many, many lives.” He said that after a Cobra meeting on 2 March, the official advice to ministers from the chief medical officer and chief scientific officer was not to go too early because of other considerations, such as the impact of a lockdown on wider society. He defended the government’s actions as “entirely understandable” at the time given the “enormous uncertainty” about covid-19 and the low number of cases. He acknowledged that based on modelling, “fewer than a tenth of the number of people would have died in the first wave” had the government acted earlier.

How was NHS and intensive care capacity being monitored?

Hancock was asked to comment on concerns in March 2020 that NHS intensive care capacity would become overwhelmed if action wasn’t taken to control the number of covid cases and deaths. Hancock said that while nobody knew exactly what an overwhelmed NHS would look like, it would have been “catastrophic.” He said various factors like staffing ratios would have indicated a crisis point, but that he was “absolutely determined” that everyone would still be able to get access to treatment. He said that he pushed for the NHS to expand both the physical bed capacity and staffing for any extra beds.

When was the directive made to discharge people to care homes?

On 18 March 2020 the government published requirements on hospital discharge which resulted in patients being moved to care homes when it was deemed medically appropriate to do so. The inquiry published a message sent in mid-March 2020 from then deputy chief medical officer Jenny Harries, who now heads the UK Health Security Agency, to the Department of Health and Social Care. In it, Harries advised officials that “the reality will be that we will need to discharge covid-19 positive patients into residential care settings” if covid cases grew exponentially, even though this would not be welcomed by families.

Pressed by Anna Morris KC, the legal representative for the Covid Bereaved Families for Justice group, on why this directive was given, Hancock said that leaving patients in hospital may have meant they were “more likely to have caught covid because of the risks of nosocomial infection” and that it was “rational and reasonable to make sure that they were in the safest place that they could be.” He added, “Every decision was a choice between difficult options, and nobody has yet brought to me a solution to this problem that, even with hindsight, would have resulted in more lives saved.”

What protections were in place for care homes?

Asked whether any assurances were given that there would be sufficient testing available from 19 March onwards, Hancock admitted, “We didn’t have enough tests.” On his second day of evidence he added, “The reason that we did not at that point have as much testing in care homes as many would have wanted, was that we didn’t have enough tests and the clinical prioritisation of who got tests in what order was absolutely something that I wouldn’t have interfered with.” Asked to outline what concrete steps were put in place to protect care homes when hospitals were told to discharge patients to them, Hancock said his department gave guidance and provided free personal protective equipment (PPE).

Hancock was also shown a warning from Public Health England in February 2020 that NHS patients should not be discharged to care homes during the pandemic. “I didn’t see this document at the time, but my reading of it is that in the case of an outbreak in the care home then there should be no discharges to that care home,” he said.

Did care homes have a “protective ring” around them?

Hancock was asked to reflect on his comment at a Number 10 press briefing in May 2020, when he said, “Right from the start, we’ve tried to throw a protective ring around care homes.” Asked whether he acknowledged that the phrase “protective ring” was open to interpretation, Hancock said he wanted to make it clear that the government was trying to protect care homes. Lead counsel Hugo Keith KC
quoted Jonathan Van Tam, former deputy medical officer for England, who said “a ring is a circle without a break in it.” In response, Hancock said Van Tam was right, meaning that the protections provided did not form an unbroken circle around care homes.

**Video 3 “That gave the impression of an impermeable barrier”**

**Did Hancock advocate for healthcare workers?**

The BMA’s legal representative Brian Stanton asked Hancock about the extent he was able to advocate on behalf of health workers who had suffered the trauma of attending to patients in a crisis during the first wave of covid, and desperately needed an opportunity to recover from this. Hancock said, “I felt that argument very deeply.”

“To stop healthcare workers dying, you had to tackle covid,” he said. By summer 2020, he said a “very significant” testing operation was in place, including in hospitals. He added that healthcare workers were prioritised for PPE and were among the first to be offered the covid-19 vaccine when it became available.

**How did the government communicate with regional leaders?**

Giving evidence to the inquiry on 27 November, three regional mayors all spoke about a lack of communication from central government. London mayor Sadiq Khan claimed he was “blocked” from attending Cobra meetings until 16 March, despite the pandemic impacting London ahead of the rest of the country and challenges in the capital’s intensive care units. “I think lives could have been saved if we were there earlier,” he said. Greater Manchester’s Mayor Burnham said he “repeatedly” asked to attend Cobra meetings but was not invited to any during the pandemic. Liverpool City Region mayor, Steve Rotheram, said officials had to wait for the evening news bulletin to find out “nearly every major announcement.”

During his evidence on 1 December, Hancock said he held constructive discussions about social restrictions with some regional leaders but said some were less helpful and “put politics ahead of public health.”

**Is the testing capacity there for future pandemics?**

Asked to reflect on the UK’s testing capacity, Hancock said that from mid-March 2020, the UK did manage to boost its testing capacity but this was “slower than it should have been.”

“It’s a vital lesson for the future that we need a testing system ready to go,” he said. “And I’m worried that that is not there right now.” He acknowledged that it was reasonable for the government to step down testing capacity post-pandemic, but said he had concerns about whether it can be stepped back up. Noting that a major testing laboratory was recently put up for sale, he said, “It would be better if it were mothballed and ready to go at the flick of a switch.”

**Video 4 “I think it would be better if it were mothballed and ready to go at the flick of a switch”**