

# Prime Minister's statement on coronavirus (COVID-19): 5 January 2021

Good afternoon,

I want to update everybody about vaccines

because across this entire country today there are people – everybody – making another huge sacrifice.

Teachers and pupils coping with online learning

Businesses who have borne the brunt of successive lockdowns and, of course, the amazing staff of our NHS and our care workers who are grappling with a new variant – this new variant – of coronavirus.

And I believe that when everybody looks at the position people understand overwhelmingly that we have no choice

when the Office of National Statistics is telling us that more than 2 per cent of the population is now infected

- that's over 1 million people in England –

and when today we have reported another 60,000 new cases

and when the number of patients in hospitals in England is now 40 per cent higher than at the first peak in April.

I think obviously – everybody, you all – want to be sure that we in government are now using every second of this lockdown to put that invisible shield around the elderly and the vulnerable in the form of vaccination

and so to begin to bring this crisis to an end.

And I can tell you that this afternoon

- with Pfizer and Oxford/AstraZeneca combined – as of this afternoon

we have now vaccinated over 1.1 million people in England and over 1.3 million across the UK.

And that includes more than 650,000 people over 80

- which is 23 per cent of all the over 80s in England –

And that means that nearly 1 in 4 of one of the most vulnerable groups will have in 2 to 3 weeks – all of them – a significant degree of immunity.

And when you consider that the average age of Covid fatalities is in the 80s

You can see the importance of what we have already achieved.

And that is why I believe that the Joint Committee on Vaccination and Immunisation was right to draw up a programme aimed at saving the most lives the fastest.

So by February 15th, as I said last night, the NHS is committed to offering a vaccination to everyone in the top four priority groups including older care home residents and staff, everyone over 70, all frontline NHS and care staff and all those who are clinically extremely vulnerable.

And to help us with meeting this target we already have 595 GP-led sites providing vaccines, with a further 180 coming on stream later this week.

We have 107 hospital sites – with a further 100 later this week

So that is almost a thousand sites – vaccination sites – across the country by the end of this week

And next week we will also have 7 vaccination centres opening in places such as sports stadia and exhibition centres.

We know that there will still be long weeks ahead in which we must persevere with these restrictions

but I want to give you – the British people – the maximum possible transparency about this vaccine roll out with more detail on Thursday and daily updates from Monday so that you can see day by day

and jab by jab

how much progress we are making.

Thanks very much I am now going to hand over to Chris to do the slides.

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## [Maggie Carver CBE Appointed as Interim Chair of Ofcom](#)

News story

The Secretary of State has appointed Maggie Carver CBE as the Interim Chair of Ofcom from 1 January 2021 to 30 June 2020, whilst the appointment process for a permanent Chair is completed.



Maggie Carver is currently Deputy Chair of Ofcom, a post she has held since she joined the Ofcom Board in September 2018. She is also Chair of the Racecourse Association and a Director of the British Horseracing Authority. She has extensive experience as a non-executive director, having served on the boards of 18 companies, public, private and not-for-profit. These include chairing news and programme provider ITN, multiplex operator SDN, and the British Board of Film Classification, as well as being a director on the boards of Channel 5 Television, RDF Media plc, Satellite Information Services, armed forces broadcaster BFBS, and British Waterways. Maggie's executive career was in investment banking, television production, broadcasting and retail.

This appointment has been made in accordance with the [Cabinet Office's Governance Code on Public Appointments](#). The process is regulated by the Commissioner for Public Appointments. This role is remunerated at £120,000 per annum. The Government's Governance Code requires that any significant political activity undertaken by an appointee in the last five years is declared. This is defined as holding office, public speaking, making a recordable donation or candidature for election. Maggie Carver has not declared any activity.

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## [New leadership for construction of 40 new hospitals](#)

- Natalie Forrest brings a wealth of health, construction and project management experience, most recently as Chief Executive of Chase Farm Hospital
- Cumbria, Northumberland, Tyne and Wear set to upgrade mental health and learning disability services and Salford Royal will start work on a new hospital that will include a major trauma centre

The government's commitment to build 40 new hospitals by 2030 has been

boosted today by the appointment of Natalie Forrest to oversee the building programme.

Forrest has worked in the NHS for over 30 years and is a registered nurse. She most recently led the construction and operationalisation of NHS Nightingale London in response to the pandemic. Alongside this role, she was also Chase Farm Hospital's Chief Executive in North London, where she successfully led operational and clinical teams to design an innovative and groundbreaking new hospital, delivered to time, on budget and without interrupting services.

In total, 48 hospitals will be built by 2030, with £3.7 billion committed so far. In the North East, one of these schemes has just received final approval to upgrade mental health facilities in the region. Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust's new £72.6 million facilities – which will be finalised by 2023 – will improve the quality of mental health and learning disability services in the regions by combining innovative design with a holistic approach to patient care and safety.

Final approval has also been secured on Salford Royal's £67.4 million new hospital building, and construction work will begin soon. This will be home to a major trauma centre treating patients who have experienced life-changing or life-threatening injuries – for example, after a serious road traffic accident or fall.

Health and Social Care Secretary Matt Hancock said:

I'm delighted to appoint Natalie into this role. She not only brings unrivalled experience in health management and nursing, but also the construction and project management knowledge that helped turn the Excel conference centre into a Nightingale Hospital in just 9 days, as well as overseeing the rebuild of Chase Farm Hospital at pace.

The New Hospital Programme – as part of our Health Infrastructure Plan – will transform the delivery of NHS healthcare infrastructure to build back better and will ensure our country has world-class healthcare facilities right across the country for decades to come.

Senior Responsible Officer of the New Hospital Programme Natalie Forrest said:

I am determined to build trust in our national capability in planning and delivering hospitals, not just with health and construction stakeholders but with the staff and patients who will benefit from them on a daily basis.

My goal will be to deliver these new hospitals cost-effectively and at speed, and to foster an ecosystem that owns, learns from and improves healthcare design.

With over 12 years spent in NHS senior leadership roles, Forrest has extensive experience working with key clinical, board-level and other NHS stakeholders.

Starting this month, she will oversee a delivery board across the Department of Health and Social Care and NHS England and Improvement, which will work closely with a network of NHS trusts.

Overall, the New Hospital Programme within the government's long-term [health infrastructure plan](#) will help develop new sustainability standards, planning capabilities and care and workforce models. It will also implement cutting-edge digital technologies across the NHS, and will support an integrated approach to building new healthcare infrastructure using modern methods of construction.

The full list of 48 hospitals is available in the press release, '[PM confirms £3.7 billion for 40 hospitals in biggest hospital building programme in a generation](#)'.

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## [Listr and the Career Framework](#)

News story

The Operational Delivery Profession's Loans, Secondment and Interchange Tool will provide products and services to support your ODP career.



The Loans, Secondment and Interchange tool and the Career Framework are two fully interactive products, made bespoke for the Operational Delivery Profession.

These tools are designed to support your progression and development, whatever that might look like to you and regardless of your background, grade or location. Listr will enable you to connect with other professionals to form informal mentoring, qualification buddying or coaching relationships. The Career Framework will support you in planning your career and flourishing

as an ODP professional.

Peter Schofield, Permanent Secretary for the Department of Work and Profession and Cross-Government Head of Operational Delivery Profession, tells us how useful he thinks these products will be; “Listr is an online tool that facilitates personal development, it allows users to connect and engage with other people, whether they’re in your own department or somewhere else across government. It’s an online space where you can find buddying and mentoring opportunities that can help you to develop your skills and capability within your current role and to progress onto the next. Listr will really help ODP members on their personal development journeys and career paths, whilst also helping to connect and build the wider ODP community.”

The bespoke website was officially launched during our ODP Engage event in October 2020, to find out more, please visit our ODP Engage website to watch the Listr and Career Framework session from day two of the event.

We would love to hear what you think about the tool and how you have used it in your progression journey. If you would like to share your story, please email the team [odpcentralteam.talent@hmrc.gov.uk](mailto:odpcentralteam.talent@hmrc.gov.uk)

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## **[RPC Launches New Opinion Templates](#)**

The Regulatory Policy Committee’s (RPC) key role is to provide independent scrutiny of the assessments which departments and regulators prepare when proposing new regulatory measures. These include impact assessments (IAs), post-implementation reviews (PIRs) and business impact target (BIT) assessments. Our review and opinions on the quality of evidence and analysis supporting new regulatory proposals are an important part of the policymaking process. In our opinions, we comment only on how effectively the relevant department or regulatory has assessed the policy’s potential impacts, but not on the merits of the policy itself.

To help improve clarity and transparency of our views, we are launching new opinion templates. We believe the updated format for our opinions will help ensure that policymakers, Parliamentarians and other stakeholders can readily understand the key messages in our opinions. In the new format, we set out our key messages up front in a more “bitesize” way, while still providing detail in the body of the opinion for those that want it.

### **RPC formal ratings**

In many cases, we formally rate IAs (and other submissions such as PIRs) as “fit for purpose/not fit for purpose” on specific areas set out in the [Better](#)

[Regulation Framework \(BRF\)](#) and the [Business Impact Target: Statutory Guidance](#). For example, in our opinions on final stage IAs, we give formal ratings for two areas: the equivalent annual net direct cost to business (EANDCB) and the small and micro business impact assessment (SaMBA).

For the areas on which the RPC provides a formal rating we use the following ratings (based on the criteria indicated):

Rating	Criteria
<b>Green (“fit for purpose”)</b>	The IA (or other submission) is fit for purpose. The RPC has no significant concerns over the quality of the IA, or there are some minor issues that could be improved. There may be many points for improvement, which the department should consider.
<b>Red (“fit for purpose”)</b>	The IA (or other submission) is not fit for purpose. The RPC has major concerns over the quality of the evidence and analysis, and the overall quality of the IA (or other submission), that need to be addressed.

## **New RPC quality indicators**

In addition, in our opinions, we often comment on the quality and robustness of the evidence and analysis in other areas, on which we do not provide a formal rating. We note, in such cases, where the analysis is of particularly high quality, and areas where we consider improvements are needed.

In the interests of increased clarity and transparency, we have introduced “quality indicators” in our opinion summaries, covering key areas, which we consider in our opinions, but which are not formally rated. For example, for IAs these areas include the quality of analysis and evidence supporting the ‘rationale and options’, ‘cost-benefit analysis’, ‘wider impacts’ and ‘monitoring and evaluation’ (and similar areas in other types of submissions).

We use the following quality indicators:

Quality indicator	Criteria
<b>Good</b>	Addresses the issue well. The analysis is sufficiently robust and addresses the issue properly. The analysis is based on good to high-quality, proportionate evidence and uses appropriate assumptions. It could be improved only in minor areas (if at all) and provides good support for decision-making on these aspects of the assessment.
<b>Satisfactory</b>	Addresses the issue adequately. The analysis is considered satisfactory. The analysis is based on adequate, proportionate evidence and uses appropriate assumptions. Some improvements could be made, but it provides sufficient support for decision-making on these aspects of the assessment.

**Weak** Weak analysis of the issue. The analysis is not sufficiently robust to address the issue. Improvements are required in one or a number of areas. It provides inadequate support for decision-making on these aspects of the assessment.

**Very weak** Very weak analysis of the issue. The analysis is poor and has significant flaws. Significant improvements are required in one or a number of areas. It provides inadequate support decision-making on these aspects of the assessment.

We believe that the new opinion templates will help us convey our key messages in a clearer and more consistent way. We hope that our key messages will stand out more clearly in the new format, so that all stakeholders can easily see our key findings, without sacrificing the detail where it is needed to explain our views.

We are intending to review how this new approach is working in around six months. In the meantime, we are always keen to hear from our stakeholders. If you have any comments, please pass them on to your regular contacts in the Secretariat or email [regulatoryenquiries@rpc.gov.uk](mailto:regulatoryenquiries@rpc.gov.uk).