

Freedom of Information Team Department of Health and Social Care 39 Victoria Street London SW1H 0EU

www.gov.uk/dhsc

Ms Carole Waldon

By email to: request-886817-0c98d5f4@whatdotheyknow.com

30 September 2022

Dear Ms Waldon,

Freedom of Information Request Reference FOI-1415351

Thank you for your request dated 15 August to the Department of Health and Social Care (DHSC), a copy of which can be found in the accompanying annex.

Your request has been handled under the Freedom of Information Act 2000 (FOIA).

DHSC holds information relevant to your request.

However, we are withholding this information under section 22, which states that public bodies are not obliged to disclose information that is intended for future publication.

Section 22 is a qualified exemption, and we are required to assess as objectively as possible whether the balance of public interest favours disclosing or withholding the information.

We recognise that there is strong public interest in information on the decision to not procure Evusheld being made as freely available as possible, and that disclosure leads to greater transparency in Government. However, there is also very strong public interest in ensuring that information is made available to everyone at the same time, thereby ensuring equity of access. Releasing this information now may also interfere with our established process for publishing information to ensure that only accurate and validated data is released.

Therefore, DHSC concludes that the public interest in withholding this information outweighs the public interest in its release at this time. DHSC takes the view that the public interest in the disclosure of this information will be satisfied by its publication. The information will be available on the Antivirals and Therapeutics Taskforce webpage: <a href="https://doi.org/10.100/JNC.1001/JNC.100

With regard to your question about the names of panel members, a list of the RAPID C-19 decision makers can be found here RAPID-C19-oversight-group-membership.docx (live.com).

Please also find attached a list of the names of the UK National Expert Policy Working Group membership in the document 'UK National Expert Policy Working Group membership_redacted.pdf'. However, please note that some of this information has been redacted under section 40(2) of the FOIA, which provides for the protection of personal

information. Section 40 prohibits a public body from disclosing personally identifiable information, as doing so would contravene data protection principles.

If you are not satisfied with the handling of your request, you have the right to appeal by asking for an internal review. This should be sent to freedomofinformation@dhsc.gov.uk or to the address at the top of this letter and be submitted within two months of the date of this letter.

Please remember to quote the reference number above in any future communication.

If you are not content with the outcome of your internal review, you may complain directly to the Information Commissioner's Office (ICO). Generally, the ICO cannot make a decision unless you have already appealed our original response and received our internal review decision. You should raise your concerns with the ICO within three months of your last meaningful contact with us.

Guidance on contacting the ICO can be found at https://ico.org.uk/global/contact-us and information about making a complaint can be found at https://ico.org.uk/make-a-complaint.

Yours sincerely,

Freedom of Information Team freedomofinformation@dhsc.gov.uk

Annex

From: Carole Waldon <request-886817-0c98d5f4@whatdotheyknow.com>

Sent: 15 August 2022 08:59

To: FreedomofInformation <freedomofinformation@dhsc.gov.uk>

Subject: Freedom of Information request - Decision process re Evusheld preventative

treatment

Dear Department of Health and Social Care,

Following last week's announcement by Stephen Barclay that DHSC has decided not to rollout Evusheld treatment for the immunocompromised and immunosuppressed communities in Autumn 2022 (it being required to go through the lengthy NICE stages which mean spring/summer 2023 at the earliest), I would like to know the following regarding the decision making process used to come to this decision:

- 1 who within DHSC made the decision? Was there a panel of members? If so please provide their names and areas if clinical/medical expertise.
- 2 please provide details of the evidence /studies/tests considered in determining that the long term efficacy of Evusheld against the Omicron variant is not yet proven. (There are lab studies and long terms real life studies available that show it's efficacy against Omicron which 32 other countries have chosen to follow)
- 3 what factors were used in making the decision? Was economic cost one of the factors?
- 4 why has Evusheld gone through a different process/order of events to all other Covid treatments? Who made the decision for this?
- 5 was consideration given to issuing immediate interim approval for Evusheld pending the full NICE review? Who was involved in this decision and what was their clinical/medical expertise?
- 6 I am aware that the COVID-19 Neutralising Monoclonal Antibodies (nMABs) and Antivirals Access Independent Advisory Group had generated the patient groups at highest clinical risk from Covid. I believe this group had no involvement in the decision not to rollout Evusheld for Autumn 2022. Please confirm.

I look forward to your response

Carole Waldon