

Call for evidence: Collaborative use of live facial recognition technology



Coronavirus (COVID-19) update

The evidence gathering event has been postponed from 30 April 2020 to 29 June 2020 in central London due to coronavirus (COVID-19). The call for evidence remains open.

As part of ongoing evidence gathering views on this specific use are now sought from:

- manufacturers of LFR technology
- public and private sector users of LFR technology
- past users, or potential future users of LFR technology, such as councils, land owners and police or security forces

An evidence gathering event focusing on the technology and its users is being held on 30 April 2020 in central London.

The BFEG has already held an evidence gathering session which received views from civil liberties groups and regulators in this space and as such will not be accepting further comments from these participants.

Please register your interest in providing oral or written evidence to the BFEG Secretariat at BFEG@homeoffice.gov.uk and provide a brief description of the organisation you represent, and the type of information you can provide on the use of Live Facial Recognition (LFR) technology in collaborations between police forces and private entities.

Please be advised that attendance at this day is by registration only and spaces are limited.

Published 3 March 2020

Last updated 1 April 2020 [+ show all updates](#)

1. 1 April 2020

Added call to action with coronavirus update and updated call for

evidence deadline.

2. 3 March 2020

First published.

[PM statement at coronavirus press conference: 3 March 2020](#)

Good morning and thank you for coming along, and I am very glad to be joined this morning by the government's Chief Medical Officer and Chief Scientific Advisor.

Today we have published the Coronavirus Action Plan setting out how all four parts of the UK will take all necessary and reasonable steps to tackle this outbreak.

The plan has four strands. Containing the virus, delaying its spread, researching its origins and cure, and finally mitigating the impact should the virus become more widespread. That is, contain, delay, research, mitigate.

And let me be absolutely clear that for the overwhelming majority of people who contract the virus, this will be a mild disease from which they will speedily and fully recover as we've already seen.

But I fully understand public concern, your concern, about the global spread of this virus. And it is highly likely that we will see a growing number of UK cases.

And that's why keeping the country safe is the government's overriding priority. And our plan means we're committed to doing everything possible based on the advice of our world leading scientific experts to prepare for all eventualities.

Let's not forget – we already have a fantastic NHS, fantastic testing systems and fantastic surveillance of the spread of disease.

We will make sure the NHS gets all the support it needs to continue their brilliant response to the virus so far.

The plan does not set out what the government will do, it sets out the steps we could take at the right time along the basis of the scientific advice.

Our country remains extremely well prepared, as it has been since the outbreak began in Wuhan several months ago.

Finally, crucially, we must not forget what we can all do to fight this virus, which is to wash our hands, you knew I was going to say this, but wash our hands with soap and water. And forgive me for repeating this but there will be people who will be tuning into this for the first time: wash your hands with soap and hot water for the length of time it takes to sing Happy Birthday twice.

It's simple advice but it's the single most important thing we can do, as I think our experts would attest.

But at this stage, and with the exception of all of the points I have just mentioned, I want to stress that for the vast majority of the people of this country, we should be going about our business as usual.

[NHS prescription charges from 1 April 2020](#)

The National Health Service (Charges for Drugs and Appliances) (Amendment) Regulations 2020 ("the Amendment Regulations") will be laid before Parliament to increase certain National Health Service charges in England from 1 April 2020.

This year we have increased the prescription charge by 15 pence from £9 to £9.15 for each medicine or appliance dispensed. The cost of prescription pre-payment certificates (PPC) will also be increased: 3-month PPC increases by 55p to £29.65 and 12-month PPC increases by £1.90 to £105.90. The increase is in line with inflation. Charges for wigs and fabric supports will also be increased in line with inflation.

Details of the revised charges for 2020 to 2021 can be found below:

Prescription charges

- Single charge: £9.15
- 3-month PPC: £29.65
- 12-month PPC: £105.90

Wigs and fabric supports

- Surgical brassiere: £30.05
- Abdominal or spinal support: £45.35
- Stock modacrylic wig: £74.15
- Partial human hair wig: £196.40
- Full bespoke human hair wig: £287.20

New figures show 3.5 million unlicensed erection pills seized in 2019

The MHRA is warning people not to take a chance with fake medicines as it launches the next phase of its #FakeMeds campaign, this time focusing on fake erectile dysfunction (ED) medicines sold online.

Erectile problems in general affect up to 21% of men in the UK, which is equivalent to 4.3 million men in the UK. Despite this, it has been found that 44% of men with ED aged 40 and over have not sought medical help and may be buying fake products online.

Fake ED drugs can lead to more than just a let-down in the bedroom. There is no way of knowing what is in them nor the negative health effects they can have. Whilst it might seem appealing to skip the need for an assessment from a healthcare professional by buying medicines online, men with erectile problems may be putting their health at risk. Fake medicines may not contain any active ingredients, or worse, may contain toxic ingredients which could lead to serious health consequences.

The MHRA's enforcement team has worked with UK Border Force to seize millions of unlicensed medicines at the border. Often illegal traders pose as legitimate suppliers, selling medications that are unlicensed for the UK market and offering tempting prices lower than the real deal. Since the launch of the #FakeMeds campaign in 2016, the MHRA has been continuing to crack down by closing illegally operating sites selling unlicensed products.

More than half of all medicines and medical devices bought online are fake or counterfeit, highlighting the need for enforcement activity and public awareness to protect and improve the UK's public health.

With this new phase of #FakeMeds the agency is using the campaign to encourage people who buy medication online to make sure they are purchasing from safe and legitimate sources. It also encourages people to report suspected dodgy ED drugs, and any side effects experienced to the Yellow Card scheme

Mark Jackson, MHRA Head of Enforcement, said:

Fake ED drugs might not give you the result you want or even make you ill. Any medication bought from an unregistered website may be fake and will not meet quality and safety standards. We encourage people not to take a chance with fake medicines – make sure you are buying from a legitimate source.

Visit the [#FakeMeds](#) website for tools and resources to help people purchase medication or medical devices safely online. If you have any questions about ED, please speak to a healthcare professional.

Ends

Notes to editor

1. The [#FakeMeds](#) campaign is a public health campaign which aims to reduce the harm caused by purchasing fake, unlicensed or counterfeit medical products online. Phase 3 of the #FakeMeds campaign will focus on the issue of fake erectile dysfunction (ED) medicines and raise awareness of the prevalence of fake ED medicines online and encouraging audiences to buy from legitimate sources. Previous phases of the campaign have focused on dodgy diet pills and fake self-testing STI kits. Follow #FakeMeds on [Twitter](#), [Facebook](#) and [Instagram](#).
 2. The [Medicines and Healthcare products Regulatory Agency](#) is responsible for regulating all medicines and medical devices in the UK by ensuring they work and are acceptably safe. All our work is underpinned by robust and fact-based judgements to ensure that the benefits justify any risks.
 3. The MHRA is a centre of the Medicines and Healthcare products Regulatory Agency which also includes the [National Institute for Biological Standards and Control \(NIBSC\)](#) and the [Clinical Practice Research Datalink \(CPRD\)](#). The MHRA is an executive agency of the Department of Health and Social Care.
 4. The [Yellow Card scheme](#) helps the MHRA monitor the safety of all healthcare products in the UK to ensure they are acceptably safe for patients and those that use them.
 5. Erectile problems in general affect up to 21% of men in the UK according to [Kantar TNS Omnibus Survey Dec 2010 – in a survey of 1,033 men.](#)
 6. 44% of men with erectile dysfunction (ED) aged 40 and over have not sought medical help according to [Opinium for Pfizer: ED market research, February 2018.](#)
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Review of Merchant Shipping Regulations

By way of a Consent Order dated 18 February 2020, the Administrative Court have provided that the Merchant Shipping (Bridge Visibility) (Small Passenger Ships) Regulations 2019 (SI 2019/1025) are quashed and are of no effect. Consequently, the Merchant Shipping (Bridge Visibility) (Small Passenger Ships) Regulations 2005 (SI 2005/2286) have been reinstated and will continue to have effect. This Order is the result of a judicial review claim.

I have, through the Maritime and Coastguard Agency, assessed the safety implications of this decision and believe that there are no regulatory safety concerns arising from this decision.