Five tests for adjusting the lockdown

1. The NHS has capacity to provide critical care right across the UK
2. A sustained and consistent fall in daily deaths from Coronavirus
3. The rate of infection decreased to manageable levels across the board
4. Operational challenges including testing and PPE are in hand with supply able to meet future demand
5. Confident that any adjustments to the current measures will not risk a second peak of infections
Transport use change (Great Britain)

Road traffic volumes on Saturday 25th April are 62% lower than the first week of February. Traffic volumes on Saturday 25th April have shown a small increase of 5 percentage points compared to the previous Saturday (18th April, traffic volumes were 67% lower). Rail and Tube use are down by more than 96%.

Source: Department for Transport. Bus (exc London), TFL tube and Bus data has been adjusted to compare against typical usage for the Easter break, whereas motor vehicles and national rail have not. Data on TFL Buses is not available from Sunday 19th April due to the change in boarding policy.
Apple mobility trends data for UK - seven day rolling average

Since lockdown the number of requests for directions involving walking, driving or public transport has decreased. The number of requests for directions involving public transport has dropped by over 80% from normal usage. From the 4th to 25th April the number of requests for walking and driving directions has increased by around 8 percentage points.

Source: Apple Mobility Trends Reports (https://www.apple.com/covid19/mobility - Accessed 27/04/2020). 100% is equal to the directions requests on 13/01/2020. Sample may not be representative. On Apple Mobility Trends Reports Public Transport is referred to as "Transit".
New Cases (UK)
Cases are reported when lab tests are completed. This may be a few days after initial testing. Testing capacity is increasing, the number of observed cases has remained stable over the last 7 days, though there are likely many more cases than currently recorded here.

Source: Department of Health and Social Care. Pillar 1: NHS swab testing for those with a medical need and, where possible, the most critical key workers. Pillar 2: Mass swab testing for critical workers in the NHS, social care and other sectors and symptomatic household members, delivered by a partnership of universities, research institutes and companies.
Over the last week the number of people with COVID-19 in UK hospitals has fallen from 18,667 to 15,712, a decrease of 16%.

Source: NHSE, Welsh Gov., Scottish Gov., Northern Ireland Executive. National data may not be directly comparable as data about COVID-19 patients in hospitals is collected differently across nations.
Critical Care Beds with COVID-19 patients (UK)

Percentage of all critical care beds that are being used for COVID-19 patients. Critical care comprises of all beds in HDU and ITU wards. They are a combination of Ventilator and Oxygen+ (V and O+) beds.

Daily COVID-19 Deaths in Hospital (UK)

UK hospitals reported an additional 360 deaths of people, in hospital, who had tested positive for coronavirus.

Source: Department of Health and Social Care, based on data from NHS England and the devolved administrations. UK deaths are reported when paperwork is filed, rather than time of death. Deaths are reported in the 24 hours up to 5pm on the previous day. The figures on deaths relate in almost all cases to patients who have died in hospital and who have tested positive for COVID-19. Slight differences in reporting in devolved administrations may mean that they include a small number of deaths outside hospital. 7-day rolling average (mean) of daily deaths.
Global Death Comparison

Country data is aligned by stage of the outbreak. Day 0 equals the first day 50 cumulative deaths were reported.

Source: ONS, NRS, NISRA, Public Health England, Johns Hopkins University. The figures on deaths relate in almost all cases to patients who have died in hospital and who have tested positive for COVID-19. Slight differences in reporting in devolved administrations may mean that they include a small number of deaths outside hospital. ONS, NRS and NISRA reporting of UK deaths for all settings is based on information from death certificates, and therefore lags daily hospital data. International reporting procedures and lags are unclear, so may not be comparing like-for-like.