

Name Redacted

From: Michael Gove <[redacted] PD>
Sent: 21 June 2023 15:30
To: [redacted] PD
Subject: Fwd: Coronavirus

----- Forwarded message -----

From: Michael Gove <[redacted] PD>
Date: Mon, 16 Jan 2023 at 15:07
Subject: Fwd: Coronavirus
To: [redacted] PD, [redacted] PD

----- Forwarded message -----

From: Michael Gove <[redacted] PD>
Date: Tue, 10 Mar 2020 at 11:15
Subject: Coronavirus
To: Matt Hancock <[redacted] PD>, Dominic Cummings <[redacted] PD>
Dominic Cummings <[redacted] I&S @no10.gov.uk>
Cc: [redacted] PD, Name Redacted <[redacted] @cabinetoffice.gov.uk>

Dear Matt and Dom

Just following up from Cobra yesterday.

I think the DHSC team, the CMO and the CSA are all doing a great job in public health terms at the moment. We should all be v grateful to them.

I wanted to follow up on some of what was discussed yesterday as we seek to stay ahead of the curve. If what I suggest/say is already in hand/off-beam/counter-productive, please say. You are both very much more across the detail than I am so apologies if this is all superfluous.

1/If we assume that we are at D-13 when D equals the moment we urge people with only mild symptoms to self-isolate what are we doing now to ensure retailers/food companies etc are ready - what conversations overall are we having with the food and hospitality sector to ensure resilience?

2/ICU capacity - what actions have been taken to increase - what more could be done? are we using all available resource? military field hospital resource? requisitioning private capacity? re-purposing existing wards?

3/Equipment - what are we doing now to ensure staff have the PPE they need, and crucially, additional respirators and ventilators? What are we doing to improve production and secure supply? How much capacity do we now have and what is the upper limit of expansion? If training is needed to operate what are we doing to train people now? Are we identifying and enlisting support from voluntary organisations/retirees now to supplement existing staff?

4/Education - are we providing online or other training now for all GPs, pharmacists, community nurses etc to ensure they are ready to deal with more cases?

5/111 - why don't we create a dedicated line (112?) just for coronavirus work?

6/Hospital organisation - does every hospital have a team - with managers, infection specialists, consultants and A and E staff brought together daily to consider how to use resource?

7/Screening - I know the CMO and the CSA say temperature screening may miss those who are in the early stages of infection - but surely it will catch some who would otherwise not be caught - what is the published scientific reasoning of other countries and where are the flaws in their reasoning?

8/Ditto on public gatherings - I am all for schools etc staying open, but what is there in the published scientific reasoning of, say, Spain, that suggests they may have the closure of schools in Madrid wrong?

We must of course be guided by science, but that involves testing the propositions put forward and weighing up different choices....

As I say, if all of the above is unnecessary, do say - hope it helps!