Message

From: Paul Macnaught [paul.macnaught@cabinetoffice.gov.uk]

on behalf of Paul Macnaught <paul.macnaught@cabinetoffice.gov.uk> [paul.macnaught@cabinetoffice.gov.uk]

Sent: 14/04/2020 11:18:43

To: Ben Warner [BWarner@no10.gov.uk]

CC: Ridley, Simon - CO (OFF-SEN) [Simon.ridley@cabinetoffice.gov.uk]; Imran Shafi [IShafi@no10.gov.uk]; Jack Feintuck

[jack.feintuck@cabinetoffice.gov.uk]; NR pno10.gov.uk]; Tom Shinner [TShinner@no10.gov.uk]

Subject: Re: nosocomial infection (in hospital) epidemic [OFFICIAL]

Ok Ben, we will dig around and go to the source of that SAGE paper and get a briefing on it. It came up in the 9:15 meeting this morning, didn't it, in the sense of Vallance and Whitty saying that R is greater than 1 in hospitals and care homes, whereas it is now below 1 in the community. So what is the plan for getting R below 1 in those settings.

Paul

Paul Macnaught

Director, C-19 Health MIG, Cabinet Secretariat

I&S

On Tue, 14 Apr 2020 at 09:44, Ben Warner < <u>BWarner@no10.gov.uk</u>> wrote:

Hi Paul,

A submission to SAGE suggests that around 20% of infections and 10% of deaths are due to infections acquired in hospitals. Given this and the fact that this could cause wide scale disruption across the government's response to the crisis, I think that it might be worth pushing quite hard on why this isn't an issue of concern.

Regards,

Ben

From: Paul Macnaught <paul.macnaught@cabinetoffice.gov.uk>

Sent: 13 April 2020 18:34

To: Ridley, Simon - CO (OFF-SEN) < Simon.ridley@cabinetoffice.gov.uk>

Cc: Ben Warner < BWarner@no10.gov.uk >; Imran Shafi < IShafi@no10.gov.uk >; Jack Feintuck

<<u>jack.feintuck@cabinetoffice.gov.uk</u>>; NR <u>@no10.gov.uk</u>>; Tom Shinner <<u>TShinner@no10.gov.uk</u>>

Subject: Re: nosocomial infection (in hospital) epidemic [OFFICIAL]

I've spoke to William Vineall. His initial reaction was that this is not an issue of concern but I've asked him to work on a note tomorrow.

Ben - if you have data of concern or intel please share.
Paul
On Mon, 13 Apr 2020 at 17:56, Paul Macnaught < paul.macnaught@cabinetoffice.gov.uk > wrote: Jack,
The DHSC lead is William Vineall. I will give him a call and get him to give us an assessment.
Paul
On Mon, 13 Apr 2020 at 17:39, Simon Ridley < simon.ridley@cabinetoffice.gov.uk > wrote: Thanks. I have seen no data on this and we don't have people looking at it at the moment. It is a good idea and we will pick it up.
Paul/Jack - could you ask the department/NHS/PHE in the morning and find out who is looking at this set of issues so owe can direct a commission in the right way
Best wishes Simon
Simon Ridley Director General, Cabinet Office E: simon.ridley@cabinetoffice.gov.uk M:

On Mon, 13 Apr 2020 at 17:01, Imran Shafi < IShafi@no10.gov.uk > wrote:
Copying Simon Ridley. If he agrees, think best this comes through the Cab Office process
Imran Shafi Private Secretary to the Prime Minister 10 Downing Street, London SW1A 2AA I&S Diary Manager: NR @no10.gov.uk)
Jon, Manager, Landson, Landson
From: Tom Shinner Sent: 13 April 2020 17:01 To: Ben Warner < BWarner@no10.gov.uk >; Imran Shafi < IShafi@no10.gov.uk >
Cc: NR
Subject: RE: nosocomial infection (in hospital) epidemic [OFFICIAL]
I don't have anyone on this, and I think this is a good idea, yes.
Tom Shinner
Senior adviser to the Prime Minister
I&S
Private Secretary: NR @no10.gov.uk
Diary Secretary: NR @no10.gov.uk
NR NR
From: Ben Warner Sent: 13 April 2020 16:28

To: Imran Shafi <ishafi@no10.gov.uk>; Tom Shinner <tshinner@no10.gov.uk> Cc: NR</tshinner@no10.gov.uk></ishafi@no10.gov.uk>
Subject: nosocomial infection (in hospital) epidemic [OFFICIAL]
Hi Imran & Tom,
ni imran & rom,
I am becoming increasingly concerned about nosocomial infection rates in hospitals (i.e an infection acquired in hospital).
nospitaly.
If there is large scale infection in the hospitals, then we will have a number of problems - Higher absences in the work force, and further stories about PPE and testing.
- Problems with care homes, including not being able to discharge patients and potentially creating infections in
care homes.
- Also, this may stop us lifting social measures early, so could end up hugely expensive.
I don't know who where responsibility sits between DHSC, PHE, and NHS. Sage have a small scale working group,
that has met once or twice, which I think is co-chaired by Sharon Peacock and someone from the NHS. This is
unlikely to be able to drive that much change and also suggests that responsibility is split across different orgs, further raising my concerns.
Have we commissioned any work in this area?
nave we commissioned any work in this area:
Tom - do you have anyone looking into this issue?
If the answer is no to both, I would suggest we commission DHSC to produce a short note along the lines of:
1. What the current level of nosocomial infection rates are?
What is the variation by region.
2. What is the current plan to limit these infection rates?
- Who is in charge of this?
3. At what level does this become a major issue?

	4. What is the plan if the level rises to this trigger point?
	5. How does this change our planning assumptions, or demand forecasts for items such as for PPE?
	Do you think this is necessary?
	Do you think that we are missing anything?
	Regards,
	Ben
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