

meeting tmr at 9am...but I expect we will need to kick HMT

[25/03/2020, 20:21:24] Matt Hancock: Ok. Let me know

[25/03/2020, 20:23:06] Helen Whately: Will do. I have been told that - despite many care homes not accepting patients from hospital - the discharges are going well. Though you probably have more visibility of that than me.

[27/03/2020, 10:14:24] Helen Whately: To flag - Munira is messaging me a lot about abortion, v concerned about backlash, Grazia etc primed to cover lack of access to abortion during pandemic. I've been in regular contact with Emma about it but mindful we haven't had a chance to discuss situ.

[27/03/2020, 10:33:09] Matt Hancock: We need to ensure there is exactly the normal access to abortion during the crisis

[27/03/2020, 10:37:12] Helen Whately: That's a very clear steer, thank you. Providers are telling me that's not possible - however, I will revert to see how we can make it so.

[27/03/2020, 10:37:21] Matt Hancock: thank you

[27/03/2020, 13:09:49] Helen Whately: I am going to have another session with policy team ASAP on ways to maintain abortion access - though they seem to think it will be v hard to do so, just so you are aware.

[27/03/2020, 13:23:22] Helen Whately: Just saw you tested positive...are you ok?

[27/03/2020, 13:24:05] Matt Hancock: Thank you! Thankfully mild symptoms - still working away from home. No rest for the wicked!

[27/03/2020, 13:24:51] Helen Whately: I know you're super human but can you please look after yourself a bit!

[27/03/2020, 14:05:28] Helen Whately: FYI Worcestershire care sector have nearly run out of PPE and being told by suppliers they cannot provide more. I have messaged Steve Oldfield and Jo C direct.

[27/03/2020, 14:07:16] Matt Hancock: Pls ask Jonathan Marron - he's got to hold the ring on the policy wise

[27/03/2020, 14:11:36] Helen Whately: 👍

[27/03/2020, 14:17:09] Helen Whately: Jonathan is on it

[27/03/2020, 19:48:23] Helen Whately: I'm told the hospices funding decision is with David Williams

[27/03/2020, 19:48:35] Helen Whately: Would be very good to get it sorted

[27/03/2020, 19:54:48] Helen Whately: Sorry to bother you again on Abortion...I'm told it's likely to be a broadsheet front page this weekend, lots of problems with access (25 of 71 clinics closed, over 1,000 appts cancelled).

[27/03/2020, 20:01:48] Matt Hancock: Oh no. Why?

[27/03/2020, 20:02:52] Helen Whately: Clinics are closed due to staff sickness/isolating or because "the health centres they are located in aren't operating as normal"

[27/03/2020, 20:03:29] Matt Hancock: Aargh!

[27/03/2020, 20:06:17] Helen Whately: I have policy guys working on ways to maintain services without allowing both pills at home eg could we use local GP combined with a telemedicine option to abortion specialist...though it's clear they don't favour this

[27/03/2020, 20:07:36] Helen Whately: I am also waiting for home office view on domestic abuse/coercion risk of both pills at home (my original concern about the proposal)

[27/03/2020, 20:08:09] Matt Hancock: Yes. But at least if we do move now it's because there's a real problem.

[27/03/2020, 20:08:38] Helen Whately: Indeed, rather than a worry about it.

[28/03/2020, 09:26:31] Matt Hancock: Shd we start a recruitment campaign to get those who have been infected working in care homes? Might this diminish chances of these awful scenes of 1/3 dying as it sweeps through? Im v worried re care homes in general -- lots of scope for fear on the ground leadign to v vulnerable left neglected?

[28/03/2020, 09:26:51] Matt Hancock: Just got this from Dom Cummings. Are we doing anything like this for now?

[28/03/2020, 09:34:32] Helen Whately: The team is working on a central recruitment campaign - and I'm told separately by care agencies that recruitment is going well. CST confirmed yesterday furloughed staff can top up pay eg working in care, which is helpful and needs to be more widely communicated. We definitely need to test care staff as soon as testing capacity allows: I'm expecting them to be in the prioritisation matrix James Bethell is overseeing. I am also wary of the NHS trying to force care homes to accept patients with Covid symptoms - and expecting to review discharge guidance this weekend.

[28/03/2020, 09:36:14] Helen Whately: The 2 big care sector risks we are working to reduce are 1. Covid

sweeping through a Care home and 2. Vulnerable elderly abandoned because care staff are sick/isolating (as in Spain)

[28/03/2020, 09:37:19] Matt Hancock: Yes. Shouldn't the recruitment campaign specifically target those who've had it and so are now immune?

[28/03/2020, 09:39:31] Helen Whately: It's a good idea - but until we have testing at scale, only a small number of people know if they've had. Loads of people are speculating that they have, but don't know for sure (I include myself!) Do you know when we'll have antibody testing?

[28/03/2020, 09:40:14] Matt Hancock: Couple of weeks. First large delivery arrives by 10 April

[28/03/2020, 09:42:36] Helen Whately: V helpful. Will factor that in. Would be v grateful for your help making sure social care gets a sensible share of capacity. NHS voice is so much louder, and people in the testing team have started out with the assumption that the majority should go to the NHS, even though more people work in care.

[28/03/2020, 09:43:25] Helen Whately: Good that Dom/no 10 is thinking about Care sector.

[28/03/2020, 09:52:21] Matt Hancock: Yes

[28/03/2020, 12:38:11] Helen Whately: I'm hearing hospices £ still not signed off and urgent. Can you help?

[28/03/2020, 12:44:16] Matt Hancock: Yes I've chased this morning

[28/03/2020, 13:18:38] Helen Whately: Excellent, thank you

[28/03/2020, 18:24:21] Helen Whately: Do you have sight of the methodology for allocating testing capacity? I am nervous the rationale for testing in social care will be overlooked, because it's being driven by NHS demand. Have asked to see it but nothing has come my way.

[28/03/2020, 18:34:45] Matt Hancock: - Any abortion will require a telephone or e-consultation with a doctor.

- This change will be made on a temporary basis only, and is time limited for two years, or until the crisis is over, on the same timetable as the emergency legislation. It is not permanent.

- This applies for medical abortions up to ten weeks, as it is currently.

[28/03/2020, 18:36:11] Helen Whately: Thx

[28/03/2020, 19:27:55] Helen Whately: I've spoken to Therese. She seems ok about it if not best pleased.

[28/03/2020, 19:46:15] Matt Hancock: Thank you

[30/03/2020, 12:10:09] Helen Whately: Hi. I'm told you're attending Michael's 1.30pm call today. Would you like me to join as usual vs v happy to leave you to do it. I find it is usually 5 mins useful for 55 mins listening each time.

[30/03/2020, 12:28:45] Matt Hancock: Your call!

[30/03/2020, 12:29:02] Matt Hancock: I'm going to stop him screwing things up on testing

[31/03/2020, 09:54:06] Matt Hancock: Hi **NR**

I've worked at Martin House for nearly 14 years and aware you worked here.

We have a current situation where a family want to be admitted for end of life care but their child has a temperature.

We are currently not taking children with covid 19 symptoms so therefore this child has to die at home.

If the child had a swab and was negative they could come to the hospice.

The swabs currently are not being used for this purpose and **I&S** have said they will not test the child and it's out of our hands.

If there is anything you can do to help it would be very much appreciated.

Kind regards

**I&S**

[31/03/2020, 09:54:28] Matt Hancock: From Stuart Andrew - can you call him? Do hospices need testing?