

[21/03/2020, 20:48:03] Directors COVID: Messages and calls are end-to-end encrypted. No one outside of this chat, not even WhatsApp, can read or listen to them.

[21/03/2020, 20:48:03] ~ Elinor Mitchell: ~ Elinor Mitchell created group "Directors COVID"

[21/03/2020, 20:48:03] Directors COVID: ~ Elinor Mitchell added you

[21/03/2020, 20:48:29] ~ Elinor Mitchell: Hi - this is our new work group for work chat

[21/03/2020, 20:49:44] ~ Gillian Russell: Thanks

[21/03/2020, 20:52:14] Jason Leitch: 🍷

[21/03/2020, 20:56:13] ~ Donna: 🍷

[21/03/2020, 20:59:22] M: 🍷

[22/03/2020, 10:37:33] ~ Richard Foggo: Catherine/Gregor - are you both on today? I have an urgent email that needs your input.

[22/03/2020, 10:38:17] Catherine Calderwood: I can look when I get home or phone me now.

[22/03/2020, 10:46:30] Gregor Smith: I had a pretty full day yesterday so was going to try and get some time today. But phone or text me if you need me.

[22/03/2020, 10:49:50] ~ Richard Foggo: Don't worry about it. I am on the phone to Catherine

[22/03/2020, 10:50:52] ~ Richard Foggo: I will email you so you know what's going on.

[22/03/2020, 10:53:44] ~ Richard Foggo: Catherine and I have spoken. She plans to look at the modelling and engage with other CMOs immediately. On basis of that we propose to agree how to engage with Ministers.

[22/03/2020, 10:57:33] ~ Gillian Russell: Noted

[22/03/2020, 11:05:01] M: Richard, could you send the modelling through to me please?

[22/03/2020, 11:06:57] Catherine Calderwood: I am now meeting FM at 1

[22/03/2020, 11:11:26] Gregor Smith: Ok. Sounds as though today is going to be just as busy. Let me know what is needed.

[22/03/2020, 11:23:19] ~ Fiona: Are we needing further restrictions to essential shops only (clothes, hairdressers, etc closed?). Supermarkets are unable to have social distancing due to public behaviour. Boots in I&S only letting 20 people in to whole store at a time

[22/03/2020, 11:27:27] Gregor Smith: I've seen reports on I&S WhatsApp group of long queues in diy stores. Social media full of reports book shops still opening etc. And I&S full of older people yesterday. I suspect restrictions are necessary and inevitable.

[22/03/2020, 11:27:51] Catherine Calderwood: Agree. I'm meeting FM at 1.30

[22/03/2020, 11:30:02] ~ Fiona: Thanks Catherine - seems not to be limiting older people - and not fair on shop workers - old people out buying seeds and soil - feels a bit reckless

[22/03/2020, 11:34:15] M: Agree with Gregor. I'm getting a lot through my networks calling for much stronger measures in shops and restricting travel. The pressure building up on local services in I&S will result in its demand which won't be met and further demand on sas to transport. Message to stay put at home.

[22/03/2020, 11:37:09] ~ Gillian Russell: I sent something yesterday. Shops could do a lot more to create social distancing etc in those that need to stay open for essential items. Donna- one for George Burgess

[22/03/2020, 11:58:28] ~ Donna: George Burgess is denying all knowledge but have got Kevin quinlan activates.

[22/03/2020, 12:00:46] ~ Gillian Russell: Good

[22/03/2020, 16:44:17] ~ Gillian Russell: Is this of any interest?
https://twitter.com/_riut/status/1241621456041246720?s=12

[22/03/2020, 17:51:34] Catherine Calderwood: Small private art galleries are still open. Hopefully not after today but I don't know who should be closing them - they are small businesses.

[22/03/2020, 17:51:51] Catherine Calderwood: Can move to online viewing

[22/03/2020, 18:59:44] ~ Fiona: It feels to me as though there are too many places still open ?

[22/03/2020, 19:38:02] ~ Fiona: RCN asking when guidance in pregnant workers coming out? Anyone know?

[22/03/2020, 19:48:19] ~ Richard Foggo: Mr Fitzpatrick doesn't want it to do out until he's spoken to Catherine or someone in the team.

[22/03/2020, 19:48:53] Jason Leitch: The RCOG guidance is OUT

[22/03/2020, 19:49:32] ~ Richard Foggo: Oh. Can someone who understands it please speak to Mr F!!!

[22/03/2020, 20:09:36] ~ Fiona: But are we following RCOG guidance? NR (rightly) saying getting stuff on social media and not from SG. NHS also need us to issue it. Have we issued guidance ?

[22/03/2020, 20:10:28] Jason Leitch: We haven't changed the NHS inform guidance. The CMOs chose not to yesterday. The RCOG is additional guidance....

[22/03/2020, 20:11:01] Catherine Calderwood: It's out. Issued. Lots of churn and imperfect. We don't need Mr Fs opinion. I'm not available

[22/03/2020, 20:14:33] ~ Fiona: I am clearly simple. The NHS inform guidance suggests to me pregnant women shouldn't be working ? I have seen stuff that says no wiring from 28 weeks. We would normally issue guidance for staff to Boards- we did issue it- I thought we were nuancing first pregnant workers. I will get our teams to give me a guide to what we have done

[22/03/2020, 20:19:26] Catherine Calderwood: You are Not simple Fiona. We say pregnant women in risk group. Then RCOG guidance finesses it to >28 weeks being worse. May need to nuance the nhs inform wording a little. We are doing the same for HCWs who get flu jab too. Let them all settle down. Done will want to work and actually read it. Some will not want to work- that's ok. The advice will change. Probably quite quickly as we have more data. Literally there is no one who got coronavirus in early pregnancy who has had their baby yet as the virus has only been around for 4 months. We are working in a data vacuum here..... just 23 years looking after pregnant women guiding here. Nothing else.

[22/03/2020, 20:24:58] ~ Fiona: Thanks Catherine - SPF are likely to want guidance from us- think we have already issued and that causes confusion!! If it were I&S I would not want them to work unless in protected environment

[22/03/2020, 20:31:46] Catherine Calderwood: I would be ok with I&S working in a protected environment even in healthcare. Not in icu etc. The >28 weeks is good advice. Probably not at more risk before then. Probably

[22/03/2020, 20:43:00] ~ Fiona: 🙌

[23/03/2020, 07:20:09] ~ Gillian Russell: Just checking in on an approach to getting more strategic command capacity to enable operational deployment across the NHS/ social care. NR has said he will help and see if he can free up some strategic command capacity to get this up and running. I also think we can call on the army. This is about logistics but potentially people depending on how the virus impacts ie hit spots and regional variation. John C. I know you are in effect the strategic command on the operational side but I think you need more boost around that.

Donna and Fiona both sighted and agree we should work up. Other views?

[23/03/2020, 07:22:26] ~ Richard Foggo: Cab Sec raised this with me yesterday. I suggested we all need about a new Directorates worth of useful help. Immediately. Perm Sec has agreed to repurpose whole Directorates to respond. In delivery space, probably better with more practical help.

[23/03/2020, 07:22:56] ~ Richard Foggo: Police command might suit.

[23/03/2020, 07:23:47] ~ Gillian Russell: Thinking also former senior fire strategic commanders. If I get a green light I will make some calls this morning.

[23/03/2020, 07:40:56] Catherine Calderwood: Army is difficult- whole UK response. The medics have a rapid field hospital response which can be requested via MACA and is available now. Gill- I'll send you an email which Ken Thomson is looking at. Former senior army leaders offering assistance.

[23/03/2020, 07:41:39] ~ Gillian Russell: That sounds promising.

[23/03/2020, 07:43:33] ~ Gillian Russell: I think we are looking for their command and planning expertise at this stage. Navy were also potentially considering naval hospitals on ships? Not sure where that idea has got to within navy. I have a contact if interested

[23/03/2020, 07:54:47] John Connaghan: Gillian I am not tuned into the strategic command idea. Is this about field hospitals. Or is it something connected with how our Health Boards and CEOs respond???

[23/03/2020, 08:01:31] M: Let's work up these ideas quickly. We are well into delivery and response mode. Do we need a discreet division to manage operations across the system. I had a very useful conversation with CS late last night. Support for JC and the delivery function needed. Let's discuss at 10.

[23/03/2020, 08:05:47] ~ Fiona: Are there such things as Naval Hospitals as ships? If so I do think we need to think about it

[23/03/2020, 08:06:53] ~ Gillian Russell: That can happen but would need to be discussed with UKG

[23/03/2020, 08:08:55] ~ Gillian Russell: Not field hospitals per se but field hospitals could be part of the logistical response. Really about being able to run the NHS more through a central command and control structure if that makes sense

[23/03/2020, 08:29:43] Gregor Smith: I'm less concerned about hospital system than community. That's not to say we don't need it beefed up but there's a response structure that is tangible. In community care

we're trying to build a series of disparate units into a cohesive and mutually supportive response. It's here that the battle could be won - the more we keep at home, oxygenate early and isolate the better. Plus all the BAU illness too.

[23/03/2020, 08:30:46] ~ Gillian Russell: Happy to be advised about how wide to go. I see the complete logic in that Gregor.

[23/03/2020, 08:31:11] Gregor Smith: Getting our strategic command right here might make all the difference. Good paper in NEJM at weekend suggesting that this is another lesson from Italy - keep as many OUT the hospitals as possible. It's community based care that is important.

[23/03/2020, 08:32:11] ~ Gillian Russell: Ok.

[23/03/2020, 08:33:16] Gregor Smith: <https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0080#>

[23/03/2020, 08:39:49] ~ Aidan: Transport to and from assessment centres likely to be an issue as numbers grow. Can't rely on sas for that I don't think. Army one option, but Opportunity to use black cab fleet and cabbies with screens/cleaning plan/training arrangements? Unused community resource now? If it's got legs as an idea I could get transport Scotland to lead with clinical input?

[23/03/2020, 08:42:46] ~ Gillian Russell: Aidan

I know resilience had a lot of offers from coach/ taxi firms who are in desperate straits. I suggested this needed to be collected and considered. I think that is in economic hub. I would make links with them ASAP as I think some of these businesses were clearly in difficulty

[23/03/2020, 08:43:48] Jason Leitch: I agree with Gregor. I have confidence in the secondary care likes of communication and "command and control" of John and is. I'm less confident outside and even less confident in food supplies and other supports.

[23/03/2020, 08:44:29] Jason Leitch: Resources are a different point and we should quickly work out "what" is available and at what pace.

[23/03/2020, 08:46:01] ~ Donna: Yes on resources - mike Healy needs help to run the acute function.

[23/03/2020, 08:46:44] ~ Donna: I sent on about 20 emails re ppe etc yesterday and that's the tip of the iceberg

[23/03/2020, 08:50:36] Gregor Smith: Military logistics for stock resupply? They're the experts.

[23/03/2020, 08:50:55] ~ Elinor Mitchell: Yes I agree about our capacity and coordination on the community side. Local government doing a phenomenal job - way ahead of us in terms of redeploying their workforce - but care at home services are a real challenge - even to know how we distribute available resource is something we've never had to do before. It's a much a different model we need - but not sure what that looks like

[23/03/2020, 09:07:15] ~ Elinor Mitchell: We have strategic leadership locally in the form out the LG chief execs and we're engaging solace on all this too. I'm thinking a paper/note on where we are and what's happening on the primary and community side would help get wider engagement and so we can identify gaps and overlaps. I'm taking that as an action

[23/03/2020, 09:10:29] ~ Fiona: Elinor- that would be helpful- and also where the IJB intersection is with wider health board channels

[23/03/2020, 09:23:44] ~ Donna: The medic woman on call Kaye is giving out a bit of disinformation. Not sure who it is. Telling all pregnant women not to leave the house and to self isolate for 12 weeks. Might be where we end up but not now?

[23/03/2020, 09:25:50] ~ Fiona: That was my concern about what guidance we are giving.m to staff- think that is for last 12 weeks

[23/03/2020, 09:27:31] ~ Donna: It's Linda bauld - public health prof at Edinburgh. Some of it is ok but a bit alarmist.

[23/03/2020, 09:28:35] ~ Elinor Mitchell: More generally I think we need to consider a more nuanced message for our teams. We are considers to be key workers (as announced - public servants working on covid response) and there seems to be a bit of shaming going on about people who are choosing to come to work - when they are perfectly entitled to make that decision . Why don't I get something drafted and share round?

[23/03/2020, 09:29:21] Jason Leitch: They asked FM to stay on so replaced her with that lady.

[23/03/2020, 09:33:18] Catherine Calderwood: Linda bauld uni of Stirling. Usually v good. Coming to work for me. May not be up to date with RCOG guidance

[23/03/2020, 10:02:11] ~ Donna: Ok good.

[23/03/2020, 10:02:29] ~ Donna: Hearing music. Do I need to put in the chair code or is someone else

[23/03/2020, 10:26:33] ~ Richard Foggo: Can't hear anything on this call. Digital distortion suggesting

bandwidth. There are hundreds of these calls happening.

[23/03/2020, 10:27:44] ~ Donna: Agree - it's difficult to hear. Can everyone phone in from their mobile with headphones and mute when not speaking.

[23/03/2020, 10:38:24] Caroline Lamb: Teams accounts coming out to all on this call today. As a starting point.

[23/03/2020, 10:39:28] ~ Richard Foggo: That's essential. I could only hear 50% of that.

[23/03/2020, 10:46:52] Gregor Smith: An insight from China to think about in our planning. Our response to surge and response to post-lockdown are two different things. First relies on "war fighting", second relies on "counterintelligence / search & destroy". Planning and capabilities for both these are important and different. So we need to think about both these in parallel.

[23/03/2020, 10:48:33] ~ Gillian Russell: That is really helpful

[23/03/2020, 12:42:18] ~ Fiona: Just wondering where we are with involving staff side? Rcn are really worried that they are not being involved and therefore don't have a view- I think BMA and Rcn are under pressure from their members Can we pick up as a matter of urgency please?

[23/03/2020, 12:43:52] ~ Gillian Russell: BMA was on the workforce call. RCN did not manage to field anyone. It is now a daily action focussed meeting. Seemed constructive. We are drafting and will circulate actions.

[23/03/2020, 12:46:34] ~ Gillian Russell: image omitted


[23/03/2020, 13:52:55] ~ Richard Foggo: COBR(M) 17:00

[23/03/2020, 15:49:42] ~ Fiona: Just FYI. there is a lot of stuff about no or the wrong PPE. The HPS guidance has it within it but I have asked for an info graphic to be developed and distributed. There is no doubt some people do not have the correct PPE - however I think there is a lot of misunderstanding (and therefore stuff being used unnecessarily) Fiona - will send it out through resilience channels

[23/03/2020, 17:21:51] Jason Leitch: Can someone send me sgorr m call details please?

[23/03/2020, 17:25:09] Jason Leitch: Or are we not doing it?

[23/03/2020, 17:25:55] ~ Richard Foggo: Cancelled. COBR happening now

[23/03/2020, 17:26:01] Jason Leitch: 

[23/03/2020, 17:26:02] ~ Richard Foggo: New measures to be announced tonight

[23/03/2020, 17:27:47] ~ Fiona: Let us know what they are when you can Richard

[23/03/2020, 17:31:14] ~ Richard Foggo: All people to stay home, except essential activities (food shopping, 1 form of exercise, medical, travel to work).


Closure of all non essential retail and wider list of businesses, play parks etc

Ban all gatherings of more than 2 people

Ban all social events exc funeral with immediate family

[23/03/2020, 17:36:41] ~ Fiona: Sounds good

[23/03/2020, 18:16:57] John Connaghan: When from

[23/03/2020, 18:17:43] ~ Gillian Russell: 

[23/03/2020, 18:19:31] ~ Richard Foggo: Tonight

[23/03/2020, 18:26:20] Jason Leitch: Feck

[23/03/2020, 18:27:45] ~ Elinor Mitchell: PM addressing the nation at 2030

[23/03/2020, 19:58:02] John Connaghan: image omitted

[23/03/2020, 19:58:30] ~ Gillian Russell: Donna. Are you now PM

[23/03/2020, 19:58:49] John Connaghan: Meet our new moral officer


[23/03/2020, 19:59:27] ~ Fiona: I think she would be a good PM- morals - indeed !!


And you should be at home Donna - home and feet up please

[23/03/2020, 20:03:44] Jason Leitch: I'd vote for her.

[23/03/2020, 20:03:57] Jason Leitch: Home yes. Feet up no.

[23/03/2020, 20:10:05] ~ Aidan: Shouldn't that be morale officer. We could all do with cheerier news!

[23/03/2020, 20:10:46] ~ Fiona: Lol- think we're going to get news at 8.30 . Maybe not cheerier

[23/03/2020, 20:13:01] ~ Donna:  John meant morale -morals slightly questionable? Something todo with Star Trek and having a funny shaped head?

[23/03/2020, 20:13:48] ~ Fiona: You've lost me there with the Star Trek ...

[23/03/2020, 20:20:43] ~ Richard Foggo: image omitted

[23/03/2020, 20:21:04] ~ Donna: Separated at birth
 [23/03/2020, 20:21:07] ~ Richard Foggo: Neelix, star trek voyager
 [23/03/2020, 20:21:43] ~ Donna: The likeness is uncanny
 [23/03/2020, 20:22:26] ~ Fiona: 😊😊
 [23/03/2020, 20:22:44] ~ Fiona: Is FM doing a briefing ? Or just PM?
 [23/03/2020, 20:23:02] ~ Gillian Russell: I was just thinking the same thing
 [23/03/2020, 20:23:17] ~ Richard Foggo: Sorry, this is the wrong chat for banter. Apologies.
 [23/03/2020, 20:23:33] ~ Richard Foggo: FM and CMO doing 845 briefing
 [23/03/2020, 20:25:42] ~ Fiona: Indeed re banter - that is our other chat- what chance do we have in running a pandemic when we can't post pictures on the right group- we can try harder tomorrow 😊
 [23/03/2020, 20:28:00] ~ Gillian Russell: Can I check whether we are now to work from home? I&S
 I&S Sorry just trying to apply our staff message to myself too
 [23/03/2020, 20:29:06] ~ Gillian Russell: Views on this?
<https://twitter.com/ellenbarrynyt/status/1241767407242416130?s=12>
 [23/03/2020, 20:29:27] ~ Fiona: We probably need to have a conversation about it. My understanding is if it is possible to work from home you should. The more people circulate the more people are infected.
 [23/03/2020, 20:30:15] ~ Fiona: I think we are planning to care for as many people at home as possible. That is our plan?
 [23/03/2020, 20:31:35] ~ Gillian Russell: Nearly all of my Directorate are home working. A few of us are in. Maybe 5 out of 90.
 [23/03/2020, 20:31:51] Jason Leitch: Stay home if you can and still do your job
 [23/03/2020, 20:32:05] ~ Gillian Russell: Ok.
 [23/03/2020, 20:46:07] Gregor Smith: I'm going to work from home as much as is possible from tomorrow. Realise that's not always possible but will at least try to start off that way tomorrow.
 [23/03/2020, 20:46:26] Jason Leitch: Me too. I even bought an iPhone tripod for media.
 [23/03/2020, 20:46:59] ~ Richard Foggo: Will parliament convene tomorrow?
 [23/03/2020, 20:48:29] ~ Fiona: Think we need to role model and stay at home where possible - impossible to ignore the advice.
 Interesting question about Parliament
 [23/03/2020, 20:51:16] ~ Richard Foggo: Parliament will sit, reduced numbers, three seats apart, no public gallery.
 [23/03/2020, 20:51:40] ~ Gillian Russell: That seems out of keeping with these messages
 [23/03/2020, 20:51:48] ~ Elinor Mitchell: Parliament still on as far as I know. Some of my team are supporting cab secs
 I&S . I find it almost impossible to work at home but will do my best to demonstrate leadership around staying at home
 [23/03/2020, 20:54:12] ~ Fiona: I find it really hard to be on the phone most if not all of the day - and can sit in one position for hours. It is hard - but I suspect we have to get used to it and find ways to cope.
 [23/03/2020, 21:53:17] John Connaghan: Donna !!!! I really did mean morale. J
 [23/03/2020, 23:01:17] ~ Donna: Hi all, we are instituting home working for the covid response directorate with immediate effect. No real reason for people to be in as they do most of their work by email and phone. They have struggled to get responses from some hubs. Can I ask you to please reinforce deadlines, accuracy and quality to your hub teams please. They are spending a lot of unnecessary and stressful time chasing stuff up. I will let you know if there is specific action do you tomorrow and on an ongoing basis. Thanks in advance.
 [23/03/2020, 23:12:09] Jason Leitch: 👍
 [23/03/2020, 23:14:33] Catherine Calderwood: Can we stop the dining room having full staff and food. So many levels this is wrong ... Richard F and I favour a trolley with sandwiches...
 [23/03/2020, 23:15:37] ~ Richard Foggo: We will raise tomorrow at OROG but I suspect this evening changes the situation with the building.
 [23/03/2020, 23:15:52] ~ Donna: I think NR has plans to do this . I'll mention at orog tmrw that's it cmo advice to do so. People less likely to come in if they can't get fed.
 [23/03/2020, 23:16:22] ~ Donna: Message crossed. We will raise
 [23/03/2020, 23:24:04] Gregor Smith: Really important this isn't just SAH - VQ and AQ still staffed with external contractors in other DG families.

[23/03/2020, 23:25:42] ~ Donna: Plans for other buildings to close is in train. SAH can't as a national asset or something. Can be scaled right back though.

[23/03/2020, 23:36:10] ~ Gillian Russell: SAH has facilities in it like SGORr room which do need to function as communication. We also have higher level security room.

[24/03/2020, 08:29:51] ~ Gillian Russell:

<https://www.google.com/amp/s/www.cnbc.com/amp/2020/03/23/coronavirus-tracking-site-built-by-amazon-apple-google-volunteers.html>

[24/03/2020, 08:30:01] ~ Gillian Russell: Caroline- of interest

[24/03/2020, 08:32:33] Caroline Lamb: Thanks. Call with 4 nations on this topic later today and Richard is helpfully identifying a lead.

[24/03/2020, 08:43:39] ~ Gillian Russell: 🙌

[24/03/2020, 10:05:12] ~ Richard Foggo: Statement now 1:40 with FM first. So needs rewritten. I will stay off the call but need immediate response to drafting comments in statement.

[24/03/2020, 10:10:46] Jason Leitch: I've sent on

[24/03/2020, 10:11:37] ~ Richard Foggo: 🙌

[24/03/2020, 10:57:50] ~ Gillian Russell: Brigadier and planners in SAH 2pm

[24/03/2020, 11:51:24] ~ Donna: Dear all, for the past week We have been asking your hubs to provide core fmq briefs on their areas and on specific hot topics to support cab sec. these need to be updated daily alongside the sit reps. New issues need to be highlighted when they come up. We have not received these. The team are now again trying to cobble together briefing and q&a for the statement today. I realise this is hard for everyone, but getting into a routine so that we are not rewriting briefing every day is essential for us all. Can I ask you to speak with your hubs and get this running today please. We need to behave as if we have fmqs every day for the foreseeable future and get into that habit.

Thanks

[24/03/2020, 16:35:54] Jason Leitch: https://twitter.com/los_fisher/status/1242444828497108999?s=21

[24/03/2020, 16:40:29] Catherine Calderwood: I've spoken to the Brigadier. It's a step down facility and will be nhs staff. For Covid patients. Military provide leadership and set up logistics. Speaking to Surgeon General at 5 to ask for details re a facility for Scotland but we would have to have workforce for it.

[24/03/2020, 16:40:55] Jason Leitch: 🙌

[24/03/2020, 16:41:00] Jason Leitch: Thanks Catherine

[24/03/2020, 17:18:50] ~ Gillian Russell: Hello all, for those that couldn't make this morning's session on learning from Singapore's handling of Covid-19, here are some points. With many thanks to Hassan for his insights and also other Fellows for offering to help each other with advice e.g Siobhan to Sarah on pregnant women on the army base and Suhaila offering to share tips on working from home.

Singapore was the first country after China to have a case identified (540 cases since January 15th). The country has managed to keep the spread of the virus quite controlled through:

1. Very rigorous backward and forward case tracing and testing – identifying how someone caught the virus and 3 levels of contact tracing and testing – all put in quarantine. Everyone was admitted to hospital with symptoms, even mild cases and only released when they were tested negative (on average after 22 days). All those who are suspected of coming in contact with a patient are tested.
2. Trust established through high level of communications – the Government sent 2 or 3 updates per day via a public What's App number and the details of each case was shared transparently (without their name, that's the only privacy)– where they live, where they work, when they contracted it, what shops they've visited etc. People felt information was more important than privacy. The PM and Ministers communicated frequently and health updates are posted on their website 2 or 3 times a day. There was also a lot of behaviour change messaging and the Government hasn't tried to build a narrative that all is good but rather it will just look at it every day and decide what's needed.
3. Fight fake news. Within a few hours, the Government picked up rumours or fake news and debunked it on their website and Govt WhatsApp. They were very tough on people sharing fake info.
4. Avoid creating panic; behaviours changed and people have adapted to new norms. All schools, offices and shops are still open, with guidance on safety measures. Nothing is locked down. A lot of

businesses created team A and team B – work one week each in the office, over the weekend the office gets disinfected, which allows for business continuity. Singaporeans are very law-abiding citizens so the restrictions worked.

Other points discussed:

- In other Asian countries where Save the Children works there are more challenging contexts to deal with an outbreak with weaker health systems.
- With a decentralised organisation, the enormity of the challenge didn't hit until the virus hit Europe so decision-making was difficult. Advice is to take decisions locally, not centrally in these circumstances.
- How to deal with pregnant women. There is currently an incomplete picture of whether they are higher risk but recommend treating them as the 'vulnerable group'.
- On the Army base in Cyprus everyone is asked to keep a running physical contact list, which also makes them more conscious of who they are coming into contact with.

· Tips for working from home and managing children who are not at school.
[24/03/2020, 17:20:45] ~ Gillian Russell: Sent on my Leadership Programme read out from experience of how Singapore has handled in case of interest
[24/03/2020, 20:29:24] John Connaghan: Richard. Don't know if you were in the call but modelling looks more positive with latest measures factored in. J
[24/03/2020, 20:29:45] John Connaghan: They now need to work
[24/03/2020, 20:30:05] ~ Richard Foggo: Yes. You happy to clear?
[24/03/2020, 20:30:14] ~ Fiona: Now that is goodness is that SAGE?
[24/03/2020, 20:32:03] Gregor Smith: I'm guessing that's our internal modelling. SAGE have asked SPI-M to produce revised RWCS now that basket of measures implemented.
[24/03/2020, 20:32:22] ~ Richard Foggo: Running the latest numbers sees ICU demand at peak get as low as 500.

BUT more to come and SPI-M Thursday will add. Numbers can go up as well as down!

[24/03/2020, 20:33:01] Gregor Smith: When does that peak come in?
[24/03/2020, 20:33:15] ~ Richard Foggo: Week 11-12
[24/03/2020, 20:35:06] ~ Fiona: Will be good to see the modelling and figures- fingers crossed (not much of a plan I know).
[24/03/2020, 20:36:23] ~ Richard Foggo: Also worth saying that the deprivation effects are increasingly clear.
[24/03/2020, 20:37:40] ~ Fiona: The underlying health stuff- disappointing but not surprising
[24/03/2020, 21:05:32] John Connaghan: Big question is what week we are in. I think we may have a chance if matching capacity to demand if we are 3 weeks out. Depends on our doubling assumptions.
[24/03/2020, 21:07:01] ~ Fiona: It feels doable if we have the machines - think we have a way for the nurse staffing for that number
[24/03/2020, 21:17:31] Gregor Smith: I don't think 3w or more out is unreasonable - be close to that but if judgements of modellers in sage are sound we are probably no closer than that.
[24/03/2020, 21:23:07] ~ Fiona: Can pick it up tomorrow but I'd like a number of us to understand where we are with kit and staff over the next month across the country
[24/03/2020, 21:45:05] ~ Fiona: John- are we quadrupling the number of infusion pumps to match the increased number of ventilators?
[24/03/2020, 21:46:31] John Connaghan: Yes. Just spent 1.5m on that today. But don't know the delivery dates. So don't know if delivery profiles match.
[24/03/2020, 21:50:21] ~ Fiona: Excellent re buying
[24/03/2020, 21:50:51] John Connaghan: Might be a good idea for me to send a complete list around tomorrow if what's on order.
[24/03/2020, 21:50:59] John Connaghan: Of
[24/03/2020, 21:53:30] ~ Fiona: Ideal John-thanks

[24/03/2020, 21:57:13] ~ Elinor Mitchell: I was talking to Malcolm today about the importance of keeping a contemporaneous record of decision and spend etc. Makes like easier than doing it after the fact. So yes - let's all commit to keeping track of what we've decided. whose agreed what and why, so we have clear audit and governance trails

[24/03/2020, 21:57:51] ~ Fiona: 👍. Assume through the hub?

[24/03/2020, 21:59:30] ~ Elinor Mitchell: I'd say yes Fiona. If - and that's a big if - these decisions are going thorough any of our hubs

[24/03/2020, 22:01:41] ~ Fiona: Sounds like the proper way forwards

[24/03/2020, 22:02:13] ~ Donna: Not if nobody tells us Fiona.....I have been going on about this for weeks. I'm even boring myself now. Richard M also worried about it. Command and control stuff may help and even recording at daily directors would be a start. Some of it appears in the sit reps but no audit trail behind it that I know about. We can discuss again but entirely dependent on people declaring new work and associated spend.

[24/03/2020, 22:04:13] John Connaghan: Joe Welsh is in the case already

[24/03/2020, 22:04:42] John Connaghan: On

[24/03/2020, 22:05:06] John Connaghan: London looks bad

[24/03/2020, 22:05:21] ~ Donna: Great news. I know you're re big spender John 💰💰 but others are spending too.

[24/03/2020, 22:10:01] Gregor Smith: London is bad. Reports I'm getting sound awful and I know Jason is hearing similar. I guess we need to retain focus on what we can do here and be thankful we have slightly longer to prepare. The lessons we learn from there will be important.

[24/03/2020, 22:16:01] Jason Leitch: Agreed Gregor. It's bad

[24/03/2020, 22:23:36] John Connaghan: Reports on drug shortages in France. Do we know what that's about?

[24/03/2020, 22:28:25] ~ Donna: Was just looking at the old no-deal plan (not for fun-was commissioner to) and medicines is obviously in that. Do we need to do anything additional?

[24/03/2020, 22:42:37] ~ Gillian Russell: <https://ansm.sante.fr/S-informer/Informations-de-securite-Ruptures-de-stock-des-medicaments>

[24/03/2020, 22:43:26] ~ Gillian Russell: From my friends who is a I&S

[24/03/2020, 22:46:37] ~ Gillian Russell: Above liste of current drugs in short supply from the french healthcare national authority

[24/03/2020, 22:48:50] ~ Gillian Russell: Aware of this?

<https://theface.com/life/oxvent-prototype-ventilator-health-nhs-covid-19>

[24/03/2020, 22:49:48] John Connaghan: Nope. Maybe others might know

[25/03/2020, 06:57:29] John Connaghan: image omitted

[25/03/2020, 06:58:07] John Connaghan: How do I turn on my hotspot. It's not letting me do it.

[25/03/2020, 06:58:37] Caroline Lamb: Is that a SG machine?

[25/03/2020, 06:58:50] John Connaghan: Yes it's sg

[25/03/2020, 06:59:07] Caroline Lamb: And where are you trying to connect to?

[25/03/2020, 06:59:25] John Connaghan: My sg Android phone

[25/03/2020, 07:00:20] John Connaghan: My internet is low grade bt and is usually ok but not working right now

[25/03/2020, 07:01:57] Caroline Lamb: Ok. I don't think SG kit allows connections to mobile hot spots. You need to turn on the personal hot spot on your phone (I have no idea if SG devices allow this I always use me personal device to 'tether'). Then go to WiFi and search for available networks. The phone should appear on the list.

[25/03/2020, 07:07:11] John Connaghan: I have that enabled but not letting in. I think it's possible if so I will get I fix to sort. NR will be in and can help. Thanks John

[25/03/2020, 07:07:37] Caroline Lamb: I cannot tell you how frustrating it is to be trying to manage this level of activity with the utterly shit technology that you have to accept as normal if you work for Scottish Government. It is NOT NORMAL!

Getting Teams to you is a nightmare because the tech is so outdated it doesn't know what to do with it and iTECs don't know either. Getting them some Teams accounts today so that they can figure out how it works. FFS. This is everyday tech in any other organisation.

[25/03/2020, 07:08:16] Caroline Lamb: Rant over (well maybe not)

The internet providers BT etc need to up their games too.

[25/03/2020, 07:19:29] John Connaghan: So I feel same way. [redacted] I don't know what's happening to my internet here. I switch it in and off and it works a but then drops off. Maybe I have a competition here with [redacted] doing homework. But not at 6.39 in the morning. I asked for a dongle last week but that's no longer allowed (used to be) . The message in my laptop says settings hidden by your organisation. See photo below. Don't worry I have an illegal plan to get it sorted meantime. I will forward to my personal address and access from my other laptop which is exactly same make and spec as SG. At 9.00 I will get I fix . Cheers John

[25/03/2020, 07:19:47] John Connaghan: image omitted

[25/03/2020, 07:48:24] ~ Gillian Russell: So I still have my mifi. When I asked re other staff I was told not provided any more as too expensive.

[25/03/2020, 07:50:15] ~ Donna: I use my work iPhone to tether. That works for me.

[25/03/2020, 07:50:34] ~ Donna: Or I use my own iPhone. it works as well.

[25/03/2020, 07:53:50] ~ Elinor Mitchell: Itecs have run out of mifis and iPhones. You can connect your movie to your mifi. But you can't connect your tablet or laptop to your hotspot.

You can tether to your own laptop. Or iPad and then send things back and forth. It's pretty crap but does work.

And so Caroline - Im on teams ! Worked for me at least but I know that's not ideal if only a few of us are on it

[25/03/2020, 07:54:21] Caroline Lamb: No. We are getting there. About to check who is missing!

[25/03/2020, 08:03:39] Jason Leitch: John. You need to switch every off. Turn on the hotspot on your iPhone. Settings/personal hotspot/on. Then laptop back on. Boot up. Bottom right for networks and it should find your phone.

Microsoft teams will also work on your personal laptop, same details Caroline sent.

[25/03/2020, 08:04:58] ~ Gillian Russell: Can I check cost here. One conference call on my personal phone cost me £30 a few months ago as charged at very high rate. Same for own phone data?

[25/03/2020, 08:05:15] Jason Leitch: No. Nothing like it.

[25/03/2020, 08:05:29] Jason Leitch: Most will be included in your package.

[25/03/2020, 08:06:53] Jason Leitch: My data is included up to 8gb for £18 a month. I've breached it once. (Baseball).

[25/03/2020, 08:13:01] Catherine Calderwood:

<https://twitter.com/mgalandjuana/status/1241764185740107782?s=12>

[25/03/2020, 08:17:00] Jason Leitch: It's excellent Catherine. I'll share.

[25/03/2020, 08:17:05] Gregor Smith: That's a really good piece Catherine - the +/- streams, buddy working and zoning in particular

[25/03/2020, 08:27:19] ~ Gillian Russell: Can I check how/ who advises on models like this to feed into workforce planning assumptions. Is it through your clinical group.

[25/03/2020, 08:28:41] ~ Fiona: Yes it will be Gillian.

[25/03/2020, 08:28:59] ~ Gillian Russell: 🙏

[25/03/2020, 09:39:55] John Connaghan: So I have now connected my personal laptop to my phone and transferring stuff to my personal e mail account.. it's breaking all SG rules and illegal. But I see they are now letting prisoners go free.. so no worries. If they catch me I will need a character reference from you

[25/03/2020, 09:41:25] John Connaghan: image omitted

[25/03/2020, 09:41:28] ~ Fiona: John- when have you ever bothered about asking permission 😂😂

[25/03/2020, 09:47:48] ~ Gillian Russell: image omitted

[25/03/2020, 10:07:24] Jason Leitch: John C -

[25/03/2020, 10:07:29] Jason Leitch: image omitted

[25/03/2020, 10:10:45] ~ Gillian Russell: Do they have that capacity?

[25/03/2020, 10:13:18] Jason Leitch: Excel. I'm about to tell you...

[25/03/2020, 14:06:58] Gregor Smith: John - touch base with me or Derek. I've put DB in touch with our respiratory adviser Dave Anderson as word from England was going for bilevel NIV rather than CPAP. He has confirmed a better option. Respiratory consultants more used to using this type of intervention

[25/03/2020, 14:07:48] ~ Fiona: And if Diane linked in for training of nursing staff really helpful

[25/03/2020, 14:11:26] ~ Donna: Agreed on daily updates - can we start adding detail to the sit rep please.

[25/03/2020, 14:11:50] Caroline Lamb: Diane is absolutely linked in around training is nursing staff.

[25/03/2020, 14:12:37] Caroline Lamb: Diane is working on planning projections today.
[25/03/2020, 14:12:50] ~ Fiona: Thanks Caroline - I had asked her to get a sense of ramping up and how we match nurse staffing - she says that's precisely what you are doing
[25/03/2020, 14:14:06] Gregor Smith: Sorry Caroline - is this more for you now than John?
[25/03/2020, 14:15:50] Catherine Calderwood: I have this offer from a friend at [I&S] He needs a shopping list with product codes.

[I&S]

Hi Cath- I know you are very busy right now. We understand there are supply sides shortages of certain equipment / items and we might be able to help- for example with sourcing items from our overseas business contacts. E.g. We have a close relationship with [I&S] in China, his Foundation has been sending protective equipment overseas. As a Partnership, we intend to commit several million pounds in aid and support (we have already sent £100k today to the NHS Covid Appeal, and more is on its way) and if we can be of any other help, please let me know.

[25/03/2020, 14:17:57] Caroline Lamb: Gregor. Yes but [NR] is my key contact on this so all good.

[25/03/2020, 14:18:38] Gregor Smith: We should speak about [NR]

[25/03/2020, 14:19:06] Caroline Lamb: Ok. Happy to do that

[25/03/2020, 15:33:53] ~ Elinor Mitchell: Donna are you picking up Catherine's friend offer through the hub?

And conference calls - we need to use [I&S] numbers. There are usually options

[25/03/2020, 16:12:02] Jason Leitch:

<https://twitter.com/chrisceohopson/status/1242844185025220608?s=12>

[25/03/2020, 16:35:26] ~ Donna: It's gone to the supply chain mailbox who are dealing. We will want to triage of that box though too- Baillie Gifford v man with old ventilator in his garage. Will speak to the army people about it at 5 when it's my turn. Ta

[25/03/2020, 16:36:29] ~ Donna: Are the numbers you suggest just the beep rather than "joined the conference" "left the conference" ones. It would do us all good to use them.

[25/03/2020, 16:38:58] Jason Leitch: The meeting tomorrow with the military and a rep from each of us. I am nominating Michael but I am not sending him into SAH for meetings.

[25/03/2020, 16:43:01] ~ Fiona: My person won't be in the building either -

Agree re the beep only numbers

[25/03/2020, 17:10:07] Gregor Smith: Is anyone else experiencing network problems trying to access outlook?

[25/03/2020, 17:10:48] Jason Leitch: Mine has been good all day but that's not true every day. On and off and on again fixed it yesterday.

[25/03/2020, 17:14:05] ~ Fiona: Same here - sometimes freezes - but blackberry works til it sorts

[25/03/2020, 19:06:16] M: Just off the phone to Simon Stevens. London field hospital just the first. Maybe up to another 9. Taking patients already ventilated and stable. Different staffing ratios. ? 1 CC nurse to 6. Plus RGNs and non qualifieds. I mentioned Jason's idea of getting someone in there to see how it works I think we should do this. Jason, could you progress with Catherine's advice?

[25/03/2020, 19:07:22] Jason Leitch: Gregor and I have identified someone. I'm waiting for England to agree.

[25/03/2020, 19:07:26] Jason Leitch: Agree

[25/03/2020, 19:08:33] Jason Leitch: He's wrong about the already ventilated thing. They want to move sick, not yet ventilated. But still....

[25/03/2020, 19:10:20] M: Thanks Jason. Scale and pace. Our analysis of the modelling data needs to be a catalyst for triggering this or something akin in Scotland

[25/03/2020, 19:13:01] ~ Gillian Russell: My leadership partner [NR] is senior public sector partner for KPMG. She is there in Excel working with military and DH. She had offered a chat when she gets a moment.

[25/03/2020, 19:15:05] ~ Fiona: We have been working on the nursing ratios for ITU and agreed a supervision model. This will be part of the work Caroline is leading. Four U.K. CNOs have worked on this in partnership with colleges and CC society. Not ideal but a stepped systematic approach. We're publishing it tonight

[25/03/2020, 19:18:24] Caroline Lamb: Had a call with Diane tonight. Guidance going out to Nurse Directors. Diane and team are also pulling together nursing workforce data from the mobilisation plans

and will be going back to Board.

Gillian we will need to engage HRDs to establish a process by which we will deploy staff across Board boundaries where we need to. Will drop you a note.

[25/03/2020, 19:22:26] ~ Gillian Russell: Sure. Part of why I created the strategic leadership group. We have whole sector represented so we should consider how we socialise with them.

[25/03/2020, 19:29:01] Gregor Smith: Malcolm - I've identified an intensivist with military management experience. Set up ICU transfers at Bastion. If England signal it's ok then we'll approach DMS to request his secondment through formal channels. I know [NR] or we'll go through other routes as appropriate.

[25/03/2020, 19:29:01] [NR] but he's warm to the idea of doing this.

[25/03/2020, 21:16:42] M: I think we should pursue this. If appropriate I could approach NHSE

[25/03/2020, 21:17:48] Jason Leitch: We're pursuing it.

[25/03/2020, 21:33:00] Catherine Calderwood: I've spoken to JC and asked [NR] Commanding Officer of 205 field hospital (tours in camp Bastion & Basra) to chair a group looking at SECC or elsewhere and field hospital options for Scotland. He will also have ins to the Excel people to help. Recce of SECC at 1400 tomorrow. He's great and can be released from max fax in tayside (no pub brawls to mend). Can discuss. Think complimentary to what you describe here. C

[25/03/2020, 21:34:29] ~ Gillian Russell: Catherine

Loads of planning has been done re SECC for COP26. Wonder whether some of that would be helpful? It was to be the blue zone.

[25/03/2020, 21:35:37] ~ Gillian Russell: ACC Higgins Gold Command [NR] has all the contacts?

[25/03/2020, 21:35:42] ~ Fiona: And we have other reservists who have been senior in Bastion who can help.

[25/03/2020, 21:36:22] John Connaghan: So I have [NR] and reps from local Boards standing by as part of the team.

[25/03/2020, 21:37:02] Catherine Calderwood: Helpful. Gregor- [NR] will have worked with the intensivist and others from 205. I spoke to [NR] this morning- he is happy to help in any way. No specifics asks from me this am but events have moved apace today

[25/03/2020, 21:37:59] Caroline Lamb: [NR] currently working for NSS was previously army, Colonel. Set up Bastion and ran the training at Strensall for a while. He called me this evening. Keen to help..

[25/03/2020, 21:39:13] Catherine Calderwood: [NR] will know them all. Let's let him decide who to involve. There are some military sensitivities here too and a chain of command.

[25/03/2020, 21:40:28] Caroline Lamb: Sounds good.

[25/03/2020, 21:41:13] John Connaghan: Brighter end to the day. it's a possibility we can use our remaining anaesthetic machines in theatre as surrogate Vents with adaptation. So meeting Med Physics tomorrow with all Boards on call. If it works we have a possible solution to getting more machines in a couple weeks or so. Caroline I might have another 250 for you to deploy.

[25/03/2020, 21:41:33] ~ Fiona: Agree Catherine - let the process take over and give military their head

[25/03/2020, 21:42:13] Caroline Lamb: That is good news. Will be on the call tomorrow John.

[25/03/2020, 21:47:20] ~ Fiona: Good news John

[26/03/2020, 09:20:43] Jason Leitch: image omitted

[26/03/2020, 09:21:33] ~ Gillian Russell: Interesting.

[26/03/2020, 09:28:37] Caroline Lamb: Does that mean we can send patients there?

[26/03/2020, 09:29:13] ~ Gillian Russell: I wondered that and whether from islands.

[26/03/2020, 09:29:16] Catherine Calderwood: No. It's for England

[26/03/2020, 09:57:20] ~ Aidan: In the army session in sah. John, have you got a rep for it? Bit of a gap here

[26/03/2020, 09:58:04] John Connaghan: Are we dialling in at 10 or 10:15

[26/03/2020, 09:59:11] John Connaghan: Aidan. We have nominated Andrew Fleming was he invited? I will phone him

[26/03/2020, 09:59:26] ~ Elinor Mitchell: I thought 1015

[26/03/2020, 10:01:09] Jason Leitch: I'm chairing directors. 1015

[26/03/2020, 10:01:35] ~ Gillian Russell: With a firm hand 🙌

[26/03/2020, 10:02:27] Jason Leitch: I can do a variety of versions. Lol

[26/03/2020, 10:05:19] ~ Gillian Russell: Wait until the military move into the ET space...

[26/03/2020, 10:06:39] ~ Aidan: Thanks John

[26/03/2020, 10:14:18] ~ Aidan: Separate focus on nightingale this afternoon. Might be Andrews going to that

[26/03/2020, 10:14:33] ~ Elinor Mitchell: A friend sent me an email from GP Plus last night saying they are purchasing vibalytic analysers so that they can offer covid testing and results in a matter of hours. Seems odd to me? Whose leading on testing and I'll send on

[26/03/2020, 10:34:46] Gregor Smith: This call isn't working for me. We need opportunity to discuss things rather than just transmit. What is our mechanism of taking decisions and escalating issues/ agreeing mitigations?

[26/03/2020, 10:35:53] ~ Gillian Russell: Suggest you speak to **NR** about that.

[26/03/2020, 10:36:00] ~ Fiona: If we give it a go- I'm waiting to see if we are offered anything at end.

[26/03/2020, 10:36:25] ~ Fiona: Maybe it is the planning group upstairs who will do the stuff and we oversee?

[26/03/2020, 10:36:49] Jason Leitch: I agree

[26/03/2020, 10:38:47] ~ Donna: There is a separate meeting request that Malcolm sent for the wider discussion I think.

[26/03/2020, 10:40:31] Gregor Smith: I've not had anything but others may be involved

[26/03/2020, 10:41:32] Caroline Lamb: I'm a bit uncomfortable too. I'm concerned about the join up across different streams of work, and our ability to sense check.

[26/03/2020, 10:42:41] ~ Fiona: Don't think I've seen a meeting request - agree we need a time to discuss - but I do like the no faffing

[26/03/2020, 10:43:09] Caroline Lamb: Yes. Agree with the no faffing!

[26/03/2020, 10:55:20] ~ Donna: We must get a new number that just beeps and not announcing us all.

[26/03/2020, 10:55:52] ~ Fiona: Agreed re number

Do we have a 10.45 call now?

[26/03/2020, 10:56:02] ~ Richard Foggo: Donna's point about how CEX chain of command connects to DG policy and coordination function critical.

[26/03/2020, 10:56:15] Catherine Calderwood: If you don't say your name but just press # you just join silently

[26/03/2020, 10:56:27] Jason Leitch: 🍌

[26/03/2020, 10:57:15] ~ Donna: But "silence- has joined the conference"

[26/03/2020, 10:57:32] ~ Donna: You don't just beep in. It's driving me mad.

[26/03/2020, 10:57:45] ~ Richard Foggo: We could consider Teams or Zoom.

[26/03/2020, 10:57:48] ~ Fiona: That's why you are top doc

[26/03/2020, 10:59:03] Jason Leitch: Donna's right. You still get the computer voice.

[26/03/2020, 10:59:57] ~ Donna: I'll speak to **NR** In the scheme of things it's a small annoyance but it might be the one that ends me.

[26/03/2020, 11:00:21] Jason Leitch: 😊

[26/03/2020, 11:03:58] M: Thanks colleagues for the call. I'd welcome feedback on how we develop this. I like the pace and focus. We also need to share and discuss to get the best outcomes/solutions.

[26/03/2020, 11:28:15] ~ Donna: We spoke and **NR** will sort the phone thing.

[26/03/2020, 11:32:06] John Connaghan: If this is simply a phone call to report to DG and colleagues we can do that by sending a short brief in writing and spend our 30 minutes in discussion on where colleagues need help or guidance. We have lost that element and what's app is no substitute.

[26/03/2020, 11:33:08] ~ Elinor Mitchell: I liked the pace too and the fact we got round everyone in the time we had. I thought it was focused and there were clear actions at the end

[26/03/2020, 11:34:45] ~ Fiona: It's helpful to know what people are doing. I feel there are areas I can be making a contribution and I am not- so knowing what others are doing helps me then I can catch up- agree we need a conversation about things

[26/03/2020, 20:16:11] Jason Leitch: Well done **NR** and others...here's some unedited feedback from someone who did their first shift at the Fife hub today....

Hub was very well organised and prepared

Well staffed but in Scotland we are still waiting for the tsunami that has started in London

I have copied the email I sent my colleagues - I have just done a copy and paste job

'Hi

I just finished my shifts in the red zone

Main points are below:

- Please phone [redacted] I&S prior to shift so that you can obtain an adastra log in - you will need to provide your GMC number. Computer system used is adastra (identical to OOH).
- Enter from the back door
- Well organised and set up
- Based in diabetes centre in VHK - just behind hospice. Car parking available next to this centre
- Very quiet at the moment - 2 patients during my 6 hour shift between 6 clinical staff - 4 GPs and 2 ANPs - that's is 2 patients between all 6 of us during my 5 hour shift. I saw one patient
- Very good PPE available - gowns and visors available.
- Scrubs also provided - no need to bring your own
- All equipment in rooms including medication e.g antibiotics/Steroids etc, no need to do scripts. Nurse stethoscope in the room and so may want to bring your own stethoscope - only equipment needed. No need to bring anything else
- No shower facilities at the moment but this will change soon - maybe next week
- Healthcare assistant calls patient in when they arrive (waiting in car) and put on mask on patient and takes them to the room for GP to see
- Healthcare assistant is excellent and disinfectants the room immediately and thoroughly
- It is GP type cases that are presenting - full and detailed history has already been taken and so just examination required
- No specific criteria for hospital admission just to use your clinical judgement as normal
- Do not do CPR on a COVID patient - major infection risk and futile - generally due to respiratory cause and not cardiac. Can use defibrillator. I think [redacted] NR has sent more information on this
- Don't nebulise these patients - whilst nebulisation is not strictly considered an aerosol generating procedure, the red zone believe this is similar to an aerosol generating procedure and should be avoided. Can multidose with inhaler instead.

I have taken some screen shots of the information boards in the hub and I have attached this.

Just ask if any questions

Cheers

[26/03/2020, 20:18:36] ~ Fiona: 👍

[26/03/2020, 20:18:58] Catherine Calderwood: In case you missed it

<https://twitter.com/janeygodley/status/1243174528123092992?s=12>

[26/03/2020, 20:27:28] ~ Donna: This is hilarious. another episode in the life of Dr (no) Fun. No fun *at all * allowed 😂😂 you've really arrived if you've got a janey godley.

[26/03/2020, 20:29:44] ~ Gillian Russell: A Big Bang down in the caravan...🤔🤔.

[26/03/2020, 20:30:12] Caroline Lamb: Hahaha. That is brilliant. Chief Banging Officer.

[26/03/2020, 20:30:23] ~ Donna: CBO

[26/03/2020, 20:30:32] Caroline Lamb: From now on...

[26/03/2020, 20:32:18] ~ Fiona: Forever 😂😂😂

[26/03/2020, 20:41:01] Jason Leitch: 😂

[26/03/2020, 21:27:14] John Connaghan: Once a week. Well well 😂

[26/03/2020, 21:28:50] John Connaghan: Does anyone know what time the dial in for the CEOs is? Is it 10 or 11

[26/03/2020, 21:39:45] ~ Fiona: I thought we had our call 10- not sure if CEO is 10.30 or 11

[26/03/2020, 21:39:52] M: It's 11. Directors at 10

[26/03/2020, 21:50:51] ~ Aidan: Thanks for the hub feedback Jason! Does sound good. I think they'd see

more if 111 less busy. Still some ending up at gps.

[27/03/2020, 09:02:11] Catherine Calderwood: New SECC hospital will need governance structure- CEO, Med & nurse Director etc. ASAP I'm afraid

[27/03/2020, 09:05:43] ~ Fiona: Ok

[27/03/2020, 09:08:43] Jason Leitch: Malcolm and I discussed. We can report at 10

[27/03/2020, 09:54:18] Gregor Smith: Malcolm - have discussed with Alison Strath the email she sent to you Thurs 14:50 about supply of critical care medicines and her inability to get into discussion and information from DHSC. I've asked for short urgent SBAR for you with recommendations- this likely to require urgent intervention to ensure resilient Scottish supply of medicines to expanded ICU before ministers become aware.

[27/03/2020, 10:05:02] ~ Richard Foggo: Terrible line again

[27/03/2020, 10:49:38] Catherine Calderwood: Please no mention of decision tool until we have our ducks in a row. Then will brief Ministers no won't say anything until we are ready to brief so no one else must either or hates will run.....

[27/03/2020, 11:24:58] ~ Richard Foggo: <https://www.bbc.co.uk/news/uk-52060791>

[27/03/2020, 11:35:03] ~ Fiona: 😂😂

[27/03/2020, 13:18:36] Caroline Lamb: Matt Hancock too.

[27/03/2020, 13:20:20] Jason Leitch: Social distancing eh!!!!

[27/03/2020, 21:11:10] ~ Gillian Russell: UKG is asking about ventilator capacity within UK in relation to imminent international procurement exercise. **NR** in Scotland Office has asked question. He has asked for numbers and whether NSS has been asked to join procurement. Seems imminent. E mail sent on

[27/03/2020, 21:13:20] John Connaghan: Ok thanks. UKG declined to join the EU procurement exercise which we urged them to do. This must be another proposal. So let's see the e mail.

[27/03/2020, 21:14:04] ~ Gillian Russell: It should be in in box. **NR** very helpful and trustworthy so give him a call if you need more

[27/03/2020, 21:14:40] John Connaghan: Watching the nine we are getting a pasting on ppe

[27/03/2020, 21:16:11] ~ Gillian Russell: Says intl procure so maybe now joining in with EU? We will get that as now Diffit org taking difft approach to risk as well. Further advice still in prep on this. Anxiety not just HSC workforce but more general

[27/03/2020, 21:17:56] Caroline Lamb: Is this a new procurement exercise or the one already being run from NHSE that we are already part of?

[27/03/2020, 21:19:16] John Connaghan: Don't know Gillian has sent an e mail. So we can look at that tmirrw

[27/03/2020, 21:20:35] Caroline Lamb: Seen it. A bit concerned that they want to 'fix numbers'. Talk tomorrow.

[27/03/2020, 21:28:41] John Connaghan: Ok. Maybe catch up after Directors.

[27/03/2020, 21:30:08] Caroline Lamb: Ok.

[27/03/2020, 22:47:12] M: Cab sec wants to know if we've had any indication of BMA coming to us with specific instances of PPE shortages? Following the nine broadcast. She intends to speak to Lewis Morrison on Monday. Also did we have any indication of rolling out tests across NHS Scotland with machines from South Korea. She hadn't picked this up through Comms. M

[27/03/2020, 23:39:12] John Connaghan: Nil from me. Unlikely I would have missed anything but need to check with Mike H if he has had contact.

[27/03/2020, 23:59:04] John Connaghan: There is correspondence 20 Mar re BMA meeting that mentions Protective Equipment. Colleagues from Wfirc can advise. J

[27/03/2020, 23:59:49] Jason Leitch: Nothing to me.

[28/03/2020, 07:19:27] John Connaghan: Mike Healy has had no contact with BMA.

[28/03/2020, 07:34:33] ~ Aidan: SGPC did a couple of weeks ago relating to GPs and lack off ppe/low quality but we sorted that a couple of weeks ago with new guidance and delivery of boxes of ppe to every practice which arrived last weekend. Issue largely gone away since.

[28/03/2020, 08:48:35] Gregor Smith: Separate subject: I'm beginning to receive overtime payment queries- given that Catherine and I haven't had a complete day off in over 6weeks I'm having to swallow hard before responding. Do we have an agreed position on how to handle this? Both for CS and seconded staff?

[28/03/2020, 08:56:31] ~ Gillian Russell: I have put a fuller note in the system to reflect the present

position

[28/03/2020, 10:07:07] ~ Gillian Russell: Fiona- I have set up a new small team to work with mental health colleagues on issues for staff support including welfare. New person starting Monday. Will link in with your staff in this

[28/03/2020, 10:12:56] ~ Donna: MH have plenty of ideas on this. Incl expansion of trauma work that rivers centre is doing with lifelines. We will work up the package and hope to have v soon.

[28/03/2020, 10:13:41] ~ Gillian Russell: [NR] starting on this

[28/03/2020, 10:25:46] ~ Fiona: Fab- thanks. England probably announcing something next week

[28/03/2020, 10:27:17] ~ Donna: Staff wellbeing also being massively impacted by things like ppe, transport and logistics. Understandably making people anxious. If some of that is sorted it will make a massive difference.

[28/03/2020, 10:27:43] ~ Gillian Russell: Yes. All of that sits in same work stream.

[28/03/2020, 10:32:50] ~ Fiona: Agreed

[28/03/2020, 11:02:38] ~ Gillian Russell: Can Michael Kellet get in touch with me?

[28/03/2020, 11:03:46] ~ Fiona: Will ask him to phone you Gillian

[28/03/2020, 11:08:27] ~ Gillian Russell: Thanks

[28/03/2020, 11:54:24] ~ Elinor Mitchell: Gregor I agree consistency is important. For everyone below scs who is working on the hub and doing over their normal hours. And /or weekends we have offered overtime. For scs is to try to keep an eye on excess hours - be mindful of own resilience - and have a think about budding and cover arrangements to allow people to get a break. I totally get how impossible that must dds for you and Catherine though.

[28/03/2020, 12:02:05] Gregor Smith: It's a particular issue for our docs who are seconded or on SLAs and doing overtime. One or two are grumbling but not anything close to becoming a revolt. We are very reliant on discretionary effort here.

[28/03/2020, 12:04:57] ~ Fiona: Agree with Elinor. We should probably pay the SLA people OT if we think they cannot get their time back? In line with CS staff?

[28/03/2020, 14:14:29] Jason Leitch: I have to do media so will miss the 2.30 and probably the 3. I'll try.

[28/03/2020, 14:21:19] ~ Fiona: No worries - you can comment on paper

[28/03/2020, 14:29:14] ~ Donna: Not planning to come on the 2.30 call. Just to ask though- have all other options been exhausted before the secc? Could you convert a prison or a university halls to do it rather than building from scratch?

[28/03/2020, 14:30:12] ~ Gillian Russell: Will ask. Maybe empty space better? Will need the experts to advise on that.

[28/03/2020, 14:34:12] ~ Fiona: Thanks - gill happy for you to raise ?

[28/03/2020, 14:34:59] ~ Gillian Russell: Yes. Will do.

[28/03/2020, 15:44:08] ~ Gillian Russell: NES Portal going live this evening - back office testing has shown good functionality. International recruitment unit reporting 2,000 expressions of interest... all will be written to at 09:30 tomorrow and be invited to next stage - i.e. logging details for pre-employment checking

Looking to process 3000 final year nurses by Weds.

Picking up a discussion with [NR] on deployment of Medics on Mon.

Comms to boards tomorrow to clarify that local efforts should conclude and thereafter through the portal.

Press release on Mon/Tues to publicly announce.

COSLA/SSSC have offered to staff a parallel team to manage social care deployment through the portal

[28/03/2020, 15:44:16] ~ Gillian Russell: Some good progress.

[28/03/2020, 15:49:30] ~ Fiona: Just had some briefing from my team- good progress indeed - good to see

[28/03/2020, 15:50:48] Jason Leitch: Wow. Well done All

[28/03/2020, 15:50:56] ~ Donna: Great news. Well done.

[28/03/2020, 15:51:30] ~ Gillian Russell: NES have been excellent

[28/03/2020, 15:52:27] Caroline Lamb: That is very good to hear.

[28/03/2020, 15:53:38] M: Well done! 🤔👍

[28/03/2020, 15:54:01] ~ Elinor Mitchell: Wow!! That's truly amazing. What an amazing thing to have achieved in such a short timescale

[28/03/2020, 15:54:20] ~ Gillian Russell: Steve has been a star. Will keep fingers crossed that system can cope with numbers.

[28/03/2020, 15:56:08] Caroline Lamb: It's a really good example of what can be achieved really quickly with clear direction.

[28/03/2020, 16:31:15] John Connaghan: Gillian👍

[28/03/2020, 23:34:44] Gregor Smith: Just to be aware short notice calling of SAGE for tomorrow morning at 930. Looks like the only agenda items are further discussion on RWC and Optimistic scenarios.

[28/03/2020, 23:38:30] ~ Fiona: Will be good to hear how it goes

[28/03/2020, 23:54:08] Jason Leitch: 👍

[29/03/2020, 08:18:45] John Connaghan: Chief Nurse of England Ruth May on telly this morning in her uniform asking for nurses to return to work.

[29/03/2020, 10:08:39] ~ Gillian Russell: Gove just said on Marr NHS workers can get tested in Boots. Do we know anything about this?

<https://twitter.com/chris-masonbbc/status/1244189342727311360?s=12>

[29/03/2020, 10:14:54] ~ Richard Foggo: Yes, it's the Amazon/Boots testing scheme that's been in development last few weeks. We are signed up to it but it's not operational yet.

[29/03/2020, 10:15:36] ~ Gillian Russell: Thanks. Now Jason in my living room!

[29/03/2020, 10:15:48] ~ Elinor Mitchell: Nice to see a friendly face!

[29/03/2020, 10:16:29] ~ Gillian Russell: Sorry hadn't known detail of Boots drive through part.

[29/03/2020, 10:17:05] ~ Gillian Russell: Now live.

[29/03/2020, 10:18:41] ~ Elinor Mitchell: Jason - you are a genuine star

[29/03/2020, 10:35:41] Jason Leitch: Awww....you're kind. I think my zebra on the wall may be becoming a star

[29/03/2020, 10:36:14] ~ Gillian Russell: Scott did comment on the zebra. Very clear. 🙏

[29/03/2020, 10:42:18] Jason Leitch: There have been some suggestions the zebra gets a twitter account.

[29/03/2020, 10:45:52] Caroline Lamb: Go zebra! It's only fair.

[29/03/2020, 11:00:18] ~ Fiona: I've been contacted by ICU nurse in Glasgow who is saying GGC not allowing them to cancel leave in April as it will mean a backlog later in the year. I suspect this is a combination of workforce and mobilisation plans. I find it hard to think that ITU nurses would be even allowed holidays at our peak and am astonished that management are not allowing them to cancel leave - thoughts?

[29/03/2020, 11:01:37] Jason Leitch: It's been all over social media. I think if their planning says they can do it the. It's probably smart. GRI ICU last night we're sitting about.

[29/03/2020, 11:09:22] ~ Fiona: Fair enough- but in mid April? Assume it will be on an as and when basis then?

[29/03/2020, 11:11:47] Jason Leitch: You're right to check though....

[29/03/2020, 11:30:33] ~ Elinor Mitchell: I thought we were now allowed to spread leave over 2 years? Might that help GGC's planning?

[29/03/2020, 11:36:24] Gregor Smith: SAGE: extraordinary meeting to agree parameters to 2 revised planning scenarios; RWCS & Optimistic; these were agreed, paper will be updated and I'll circulate this when I receive it later today.

[29/03/2020, 11:40:38] ~ Fiona: Elinor - hadn't heard over the two years- that makes sense - perhaps a civil service thing. ?

[29/03/2020, 11:49:09] Caroline Lamb: Not heard of 2 years in health.

[29/03/2020, 11:51:06] ~ Fiona: We may need to do something

[29/03/2020, 11:55:22] ~ Gillian Russell: UKG announced so think it applies generally will check this out.

[29/03/2020, 11:56:35] ~ Gillian Russell: Suggest I put this on Workforce Leadership Group agenda tomorrow. Also need to think about staff post peak and what they may need as part of the supporting workforce work stream which I am starting to staff up more.

[29/03/2020, 12:47:36] ~ Gillian Russell: For example on manufacturing capacity

<https://twitter.com/faisalislam/status/1244229170974134273?s=12>

[29/03/2020, 14:48:46] ~ Elinor Mitchell: Here's the 2 year announcement re annual leave
<https://www.cityam.com/coronavirus-employees-can-defer-annual-leave-for-two-years-says-business-secretary/>

[29/03/2020, 14:50:42] ~ Fiona: Ok- and in the DA's - Gillian assume will be taken up by your team?

[29/03/2020, 14:56:32] ~ Gillian Russell: 🙌

[30/03/2020, 10:33:30] ~ Donna: Hi just on another PPE note, PPE for other public/third sector came up on the orog call. There is confusion about who should be wearing what, where in the same way as health. Eg police, prisons etc. There was a bit of confusion as to who is leading that. I will find out before it becomes our problem.

[30/03/2020, 10:35:34] ~ Fiona: Ok- there is some of that on the four country stuff- let me know if you need anything

[30/03/2020, 10:37:52] Catherine Calderwood: The police think they need FFP3 and 630 have had face fit tests. I have asked for an urgent reconsideration of their actual risks. As this seems to have been decided by the police themselves with no consideration of supplies. FM office looking in to this.

[30/03/2020, 10:41:29] ~ Donna: It came up on the call. They're looking at it a bit like armed response - specific officers in v specific situations. They have responded to FM/ Joe Griffin. Agree not a coherent picture though and not ideal re supply chain. We might also want to consider proper national procurement - Ian howie in Sg procurement is leading work on collaborative procurement for the wider public sector - needs to link in with NSS work. Not sure how much it is.

[30/03/2020, 10:42:16] ~ Donna: When I say armed response I mean they have a risk assessment process and clear deployment plans.

[30/03/2020, 10:44:19] ~ Gillian Russell: A note went at end of last week. It was a UKG decision making on policing.

[30/03/2020, 10:44:37] ~ Fiona: Happy to get HPS to give advice- or if decided- fine

[30/03/2020, 10:45:46] Jason Leitch: One source of truth. So HPS via Fiona M for all....

[30/03/2020, 10:48:19] Gregor Smith: Fiona - SA are not involved in PPE consultation. How do we get them involved? I've not seen any of the refreshed documentation either.

[30/03/2020, 10:49:01] ~ Donna: Think wider PS colleagues would welcome that. They are struggling with same issues. Loads of people looking for FFP3 etc who don't need it. They are referring everyone to HPS guidance but they're just doing what they like. Clearer, accessible guidance needed. Will get on to Paul J.

[30/03/2020, 10:49:41] ~ Fiona: Catherine's office should have details - will have a look to see if I have **NR** details - she seems to be an organiser if things - do you know her?

[30/03/2020, 10:52:38] ~ Donna: No I don't. Have messaged Paul J to ask him to get someone on it. Will make the connection when he responds. Thanks

[30/03/2020, 10:53:25] Catherine Calderwood: **I&S**

[30/03/2020, 10:53:58] ~ Donna: Thanks

[30/03/2020, 10:58:52] Catherine Calderwood: **NR** is president of Acadrmy of medical Colleges and has been liaising with them all weekend. She's v good.

[30/03/2020, 11:45:20] Gregor Smith: Anyone else having problems with network today?

[30/03/2020, 12:52:53] ~ Fiona: All- have just spoken to Northern Ireland colleague they are calling their SEC facility NI Nightingale. Can I suggest we call ours Scotland's Nightingale?)if we don't already have a name)

[30/03/2020, 13:41:55] John Connaghan: Fine don't have a problem with any name really. McQueen centre??

[30/03/2020, 13:47:33] ~ Fiona: Tempting - but no 😂😂

[30/03/2020, 13:59:05] Gregor Smith: Updated SAGE scenarios still not authorised by Cabinet Office. I'm not sure there's anyone left in there now....

[30/03/2020, 15:31:15] Catherine Calderwood: Friend of mine. **I&S**. See Excellent offers below. Who would take forward?

1) Data and analytic support to understand the actual demand (Covid demand plus traditional health service demand) coupled helping understand and model availability of NHS, independent sector, field hospital beds/ventilators and people to service that demand. This include implementing mortality planning for body recovery and disposal (using an app that has been designed for this)

2) Project Management Office and support - coordination support of all covid activities across the NHS England region

- 3) Management of the use of NHS resource across multiple provider organisations
- 4) Establishing field hospitals for additional surge capacity
- 5) Coordination of CEO communications back into the system to make actions system based
- 6) Support the running of the Incident Command Centre 24/7
- 7) Establishing a recovery workstream - how will the NHS safely return back to Business as usual - although I suspect this could fundamentally change the ways we work.

Let me know if you or someone wants to chat through - life gets stranger by the day.

[30/03/2020, 15:49:15] ~ Donna: Interested in 1,2,6 &7 particularly. We'll get outputs from MoD colleagues later today or tomorrow and it will give us a set of next steps including those above. Would be useful to see what help we could get in shaping them. Particularly concerned about 6). Thanks

[30/03/2020, 16:03:40] ~ Fiona: 7 critically important

[30/03/2020, 16:07:21] Caroline Lamb: I think 1 is being picked up by a group that Andrew Morris is convening. Saw an early proposition today. Additional capacity might be helpful.

[30/03/2020, 16:08:15] Caroline Lamb: Agree 7 really important. What have we learned? What are we already doing differently? What were the key challenges/ constraints?

[30/03/2020, 16:11:22] Catherine Calderwood: I've let Malcolm and Cab Sec know. I've sent Malcolm the email from [REDACTED] I&S - my friend.

[30/03/2020, 16:13:06] ~ Fiona: Is there further info on the group Andrew Morris is chairing ?

[30/03/2020, 16:17:14] ~ Richard Foggo: Do you want to see ToR or do you mean very latest? They are meeting now.

[30/03/2020, 17:06:08] ~ Donna: Important that the SAG (Andrew Morris group) has a clear way into policy so that there is at least a short opportunity to think about what the findings are, the implications and how that translates into action. Also using our analysts to best effect. Richard F is on the case with that.

[30/03/2020, 17:06:49] Catherine Calderwood: Daniel Kleinberg and Roger Halliday on the SAG

[30/03/2020, 17:09:53] ~ Donna: Yes that's great. I meant policy in the wider sense too. We will want it to come to whatever version of directors we're running, for sharing and discussion of implications. Need to find the right route to do that and make sure it's timely, so action is based on that evidence as far as poss.

[30/03/2020, 17:18:56] ~ Elinor Mitchell: Really interested in this Catherine - can you share the email you sent to Malcolm. Questions from - how does this sit with the work that the army are doing. And on the recovery workstream - there is work being progressed at this at ET level - but Malcolm will of course know this. I suspect this might be something we keep in house . Agree we need help on the others

[30/03/2020, 17:21:07] Gregor Smith: Donna - good links into policy from Daniel Kleinberg and Niamh O'Connor and obviously links back through Roger to SG statistics networks too.

[30/03/2020, 17:23:23] ~ Donna: Great, are we expecting Daniel and Niamh to pull this into shape for directors then? Just want to get clarity about how it feeds all of our work. It's important that we're all aware and working on the same basis. Even if that is within a set of confidence levels. Let me know what you think? Thanks

[30/03/2020, 18:25:25] ~ Richard Foggo: On recovery Alyson Stafford is leading with [REDACTED] NR doing at least some of the initial work. [REDACTED] NR has been repurposed to work on this for HSC, supporting rather than supplanting all the work everyone will be doing on recovery in their own patches

[30/03/2020, 19:39:13] M: <https://twitter.com/theresafrcn/status/1244670750272954370?s=21>. Deeply annoying tweet and letter from RCN RCGP and Scottish Care. Can we get an answer for CS Tues am as to any advance warning on this? I know that Gillian Elinor Aidan and Fiona are in regular contact. Could I get some lines for 9 tomorrow morning? Thanks. M

[30/03/2020, 19:56:30] ~ Fiona: Rcn is working across U.K. to help agree guidance. Not a mention from Theresa on this

[30/03/2020, 19:59:23] Jason Leitch: Helpful!

[30/03/2020, 19:59:49] Jason Leitch: No contact with me. I'm particularly disappointed in Carey

[30/03/2020, 20:00:46] Gregor Smith: image omitted

[30/03/2020, 20:01:33] Gregor Smith: In fact she retweeted it too.

[30/03/2020, 22:36:46] ~ Elinor Mitchell: Yeah. I agree not helpful - we've had letters of thanks from Scottish care for our help with ppe too. Sigh and yes - on it

[31/03/2020, 07:34:22] Catherine Calderwood: Fiona there's a further call at 7 today re PPE. We got to a

compromise last night with the group u dialled in on previously with me-C

[31/03/2020, 07:44:09] ~ Fiona: Ok- thanks-will pick up with team

[31/03/2020, 09:02:38] ~ Donna: Elinor, [NR] will speak to you about mobilising other SG agency call handlers to support nhs 24. Came up at orog this morning.

[31/03/2020, 09:31:20] ~ Fiona: Morning - I hear the name of the SEC facility is NHS Louisa Jordan - anyone know where this came from?

[31/03/2020, 09:32:01] Catherine Calderwood: FM !

[31/03/2020, 09:32:13] ~ Gillian Russell: Found this
<http://www.scotlandswar.co.uk/jordan.html>

[31/03/2020, 09:33:13] ~ Fiona: Never heard of her - although have now 😊

[31/03/2020, 09:38:06] Catherine Calderwood: Nurse. V important part of Scottish women's hospital. Lots of people will hear of her now....

[31/03/2020, 09:49:53] ~ Gillian Russell: I have an offer from Chief Fire Officer Martin Blunden for SFRS to help in any way they can. Especially around local logistics etc. Happy to facilitate a call with him if that would be helpful. Gillian

[31/03/2020, 10:04:38] ~ Elinor Mitchell: My sense the bigger issues are around messaging/comms/usage. And lack of supply rather than logistics? But that's maybe just perception from my stakeholders

[31/03/2020, 10:05:26] ~ Gillian Russell: SFRS are offering support to us so maybe for Donna to pick up.

[31/03/2020, 10:06:02] ~ Donna: Yes will take that help please

[31/03/2020, 10:13:55] ~ Gillian Russell: Donna

Also, [NR] is about to retire. He is Deputy Chief Officer and excellent if you needed command and control support. Really good on wider partnership working too.

Martin is on [I&S]

[31/03/2020, 10:45:29] ~ Gillian Russell: I would like feedback on quality and timeliness of material being provided for Sitep and related issues. We need more real time data going forward. It would be good to know if this is being considered as a more general issue so we all have shared daily dataset. Thanks

[31/03/2020, 10:50:53] ~ Donna: Yes it is. HSCA have a data pack now which is great. We are shaping that up into a more focussed sit rep.

[31/03/2020, 10:56:16] ~ Donna: Wider issue about timeliness, accuracy and nature of ministerial support (briefing and comms) which Richard mentioned at directors is linked to this.

[31/03/2020, 11:00:17] ~ Richard Foggo: A very simple point, all briefing (for statements, core briefs and sitreps) needs to be of FMQ standard inc sign off. Short, factual, up to date, and on time. Not enough is.

[31/03/2020, 13:07:51] ~ Fiona: I am hearing music on portfolio- have in the wrong number ?

[31/03/2020, 13:07:58] Jason Leitch: You must have.

[31/03/2020, 13:08:16] Jason Leitch: image omitted

[31/03/2020, 13:08:29] ~ Fiona: Ah

[31/03/2020, 13:09:25] ~ Fiona: In now- thanks

[31/03/2020, 13:10:53] ~ Donna: Gregor - Just to be clear that modelling info needs to go to resilience partners as well. Probably even more important than boards given that they currently have nothing. Richard and/or I Happy to speak before you speak to cab sec. I got absolute pelters on the SCG call earlier and Dfm likely to pile on if we don't give them something.

[31/03/2020, 13:13:49] ~ Donna: Taking on board points made about board positions of course.

[31/03/2020, 13:14:28] John Connaghan: I thought we already had FM clearance to send out national level modelling data to everyone. Only decision that remains us whether or not we send out localised data. I think that national level is enough at this stage. ...

[31/03/2020, 13:15:54] ~ Richard Foggo: Cab Sec has not endorsed FM's agreement and is now saying FM agrees with her.

[31/03/2020, 13:16:47] John Connaghan: Okay. But odd. So we don't release national now.

[31/03/2020, 13:17:51] John Connaghan: I think I send same message then. All Boards must plan to absolute Max. You content?

[31/03/2020, 13:19:56] Jason Leitch: Yep

[31/03/2020, 13:20:46] ~ Donna: we need national data for all other resilience partners. Boards must still plan to the max. Both things need to be said.

[31/03/2020, 13:21:21] ~ Fiona: Agreed

[31/03/2020, 13:30:17] Gregor Smith: We can get this data out - it just needs to be the right data and the

stuff I saw last night wasn't. Roger is on it and hopes to have this by later today.

[31/03/2020, 13:41:43] ~ Richard Foggo: We will circulate draft of letter to HS Committee just mentioned for further development shortly. Quick turnaround needed.

[31/03/2020, 13:42:18] John Connaghan: Ok. Is it just for checking it do you need material?

[31/03/2020, 13:43:03] ~ Donna: I am totally relaxed about what the modelling is. Happy to be told. But we need to give resilience partners something they can work from/with.

[31/03/2020, 13:43:39] ~ Richard Foggo: Needs checked, updated, and gaps filled.

[31/03/2020, 13:48:25] Caroline Lamb: Fiona. Email just referred to has been sent to Michael Kellett.

[31/03/2020, 13:49:07] ~ Fiona: Thanks

[31/03/2020, 14:03:51] ~ Richard McCallum: ~ Elinor Mitchell added ~ Richard McCallum

[31/03/2020, 14:22:36] ~ Donna: Hi Richard, welcome, this is the serious, work related chat. The incredibles one is for nonsense and things of interest.

[31/03/2020, 14:37:32] ~ Richard Foggo: 🍌🍌🍌

[31/03/2020, 15:58:42] ~ Richard McCallum: Delighted to be here!!

[31/03/2020, 21:14:17] John Connaghan: Jason [REDACTED] in Scotland with two local strikes. Posties scared of handling mail. Who can advise?

[31/03/2020, 21:15:31] John Connaghan: Lochgelly is one Depot asking for ppe before they go back out

[31/03/2020, 21:21:31] ~ Fiona: John- assume just gloves? Do they not provide that anyway. There has been a commission to HPS to ask for advice on PPE for the general workforce

[31/03/2020, 21:32:27] Jason Leitch: They don't need anything at all except some hand sanitizer. Gloves if they'd like.

[31/03/2020, 21:33:52] John Connaghan: Ok helpful

[31/03/2020, 23:10:38] ~ Elinor Mitchell: So presumably (without stating the obvious) this is the kind of chat Fiona and Jason are going to get on the teleconf with the unions tomorrow. I just want to check you guys have what you need from us. And if you don't - what do you need?

[01/04/2020, 07:22:12] ~ Fiona: Think we should be ok thanks Elinor. Have we sorted the distribution and purchase of PPE for all organisations - I heard that the Edinburgh Hospice we're struggling

[01/04/2020, 07:56:27] ~ Elinor Mitchell: I'll check

[01/04/2020, 08:20:59] Catherine Calderwood: I talked to Malcolm about whole Govt procurement of PPE for public sector so health & social care aren't fighting with the police for their supplies nor ordering from the same stocks and competing. I dint know if HPS will have capacity to advise other sectors but it would help. Police are going on HSE advice that FFP3 masks are 'gold standard' ! No risk assessment across sectors nor cognisance of limited supplies.

[01/04/2020, 08:23:36] ~ Fiona: Ok- will chase HPS - don't think they'll be able to advise on an individual basis. But can put guidance out. For the big PS orgs though they should be available to advise.

Someone has picked this up - will check

[01/04/2020, 08:30:26] ~ Elinor Mitchell: Checked round team - no intelligence about Edinburgh hospices running out of ppe

[01/04/2020, 08:32:09] ~ Fiona: Thanks Elinor. Do all social care orgs now get supplied by NSS -so all care homes and care at home ?

[01/04/2020, 09:06:29] ~ Elinor Mitchell: Yes they do, in theory. Heard from Scottish care this morning that they have had contact from all but 2 HSCPs to agree distribution routes (the two are Edinburgh and Renfrewshire). And we're chasing that up

[01/04/2020, 09:12:42] ~ Donna: Shirley R holds the responsibility for cross PS ppe advice and procurement. I know they are trying to get guidance out for proper, risk based procurement and use. Ian howie in Sg procurement is doing a cross sector approach. Richard M is it worth talking to her/him?

[01/04/2020, 09:18:43] ~ Fiona: Thanks Elinor

[01/04/2020, 09:20:53] ~ Richard McCallum: Donna. Thanks - was picking up with Alan Johnston who is leading on non-health PPE. R

[01/04/2020, 09:27:45] Jason Leitch: Fiona and I will be on with COSLA at 10. Michael should be on call but is at SEC. nothing urgent but a couple of updates someone could feed in;

1) London coping with ICU surge and reconsidering nightingale's role to look more like us. No patients today as planned. Maybe Friday. Regulators have inspected and HATE it. On every level.

2) Duke and Duchess of Cambridge calling Monklands at 2.40pm. Comms afterwards. News release and social media.

3) discussing briefings for staff with Andrew and Michael at 1

[01/04/2020, 10:34:51] ~ Donna: Sorry have been on a very productive call about data flows and info. Will catch up in due course.

[01/04/2020, 14:45:44] ~ Gillian Russell: Jason
On reagents. Has anyone been in touch with GSK in Montrose?

[01/04/2020, 14:53:02] ~ Fiona: They have plants in Irvine as well

[01/04/2020, 14:53:40] Jason Leitch: I don't know. But it's a good idea. My understanding is the two SCOTTISH factories are faulty specialised. One makes penicillin, the other makes ventolin. They're both needed at scale so I'm not sure they'll adapt. BUT - I bet they know people who can.

[01/04/2020, 14:57:50] ~ Gillian Russell: [] I&S said need preparatory recipes but he thinks Roche have made these available. I know someone in senior management there if you want a contact?

[01/04/2020, 14:58:24] ~ Gillian Russell: "Recipes for reagent systems"

[01/04/2020, 15:02:16] ~ Fiona: Elinor, Gillian - think we need to more closely examine returners and also student workforce - I hear Elinor saying something similar - needs a look

[01/04/2020, 15:03:35] ~ Gillian Russell: Sorry Fiona- examine for what- I will action through Steve.

[01/04/2020, 15:04:07] ~ Elinor Mitchell: Yeah - boards and councils saying there is no workforce available. So mobilisation plans talk about hotels - yet we do have people sitting waiting - so what's getting in the way? Is it that the social care and community side isn't being clear about its workforce needs?

[01/04/2020, 15:06:17] ~ Fiona: Gillian - Examine where the returners want to work and what skills they have - are we going to place them in boards

[01/04/2020, 15:07:41] ~ Gillian Russell: Yes. That is part of the daily process. They are segmenting and taking through in phases. Will ask Steve to send round a note. SC colleagues leading on that side

[01/04/2020, 15:08:33] ~ Fiona: Elinor - jut sure. I think year 1 students could do care at home work - other students in Care Homes - and the year three students embedded in community teams.

Gillian- I'll check with [NR] how we are taking this forwards - thanks re note coming round

[01/04/2020, 15:11:17] Jason Leitch: I'm not sure who's the techy contact for testing Richard?? Still Derek?

[01/04/2020, 19:11:50] ~ Gillian Russell: So the demand profile for social care needs to be led by IJB chief officers and their designated HR folk. In terms of the NES portal, SSSC and COSLA jointly take responsibility for matching and employing staff once NES have done the front end stuff. SSSC are writing to 51000 former registrants and anticipate take up of c. 10% - but see behind GMC and NMC etc.

[01/04/2020, 19:12:13] ~ Gillian Russell: Elinor- from Steve on returnees.

[01/04/2020, 19:28:41] ~ Fiona: Understand that TURAS will be up and running from Friday for getting people through. ITU nurses and doctors being prioritised - not sure if we can bring that forwards -still 5 or 6000 people to be processed. I will be speaking to nurse directors about placing and deployment of staff- they should not be 'interviewing' but accepting and deploying. Also 4-6000 students going into workforce- as well year ones- who could do social care. Two & 3 should be deployed into community and care homes not just hospitals- am keeping eye on where - in particular year 3s are deployed to make sure sufficient in community

[01/04/2020, 22:08:13] Catherine Calderwood: I've asked [NR] and [NR] to deal with this for the doctors. Who should they co ordinate with from policy?

[01/04/2020, 22:09:39] ~ Fiona: [NR] (can't remember his surname) one of [NR] LR team

[02/04/2020, 07:08:39] Caroline Lamb: Is anyone else having issues with mailbox size? We normally have 250mb and it's been increased to 800mb but I'm still struggling on that (for comparison NHS MS365 accounts have 3GB).

[02/04/2020, 07:11:34] ~ Fiona: Almost always Caroline- so last weekend was deleting some things just to make sure I could receive and send - not ideal for good mail management F

[02/04/2020, 07:19:17] Caroline Lamb: Thanks Fiona. I got a very curt response from SG Digital, which didn't help! I'll follow up with Colin Cook today.

[02/04/2020, 07:22:04] ~ Fiona: You just need a few large documents- and have no control over what is coming in to inbox - then stuck without being able to send - can be really tricky if you are out and about -

[02/04/2020, 07:25:25] ~ Richard Foggo: John will be on any second . . .

[02/04/2020, 07:25:36] ~ Richard Foggo: Just wait . . .

[02/04/2020, 07:25:48] ~ Richard Foggo: This message was deleted.

[02/04/2020, 07:27:01] John Connaghan: If it helps I declined to accept an upgrade 2 weeks ago to 1gig. My watch has more storage! So I now have no limit.

I just kept going up the chain of command until SG Digital agreed it was a good thing to do. So all Directors need that.

[02/04/2020, 07:27:19] John Connaghan: Haha

[02/04/2020, 07:27:23] John Connaghan: 😊

[02/04/2020, 07:27:43] ~ Fiona: You're a mind reader Richard!!

[02/04/2020, 07:27:58] ~ Fiona: Agree with John-

[02/04/2020, 07:28:00] Caroline Lamb: Ok. I will escalate for all of us. And if that doesn't work I'll set John on them!

[02/04/2020, 07:28:15] ~ Fiona: 👍

[02/04/2020, 08:00:20] ~ Elinor Mitchell: Yeah I went straight to Colin and he fixed it for me

[02/04/2020, 08:01:59] ~ Fiona: 😊😊 and I've been doing as I was told for the last 5 years

[02/04/2020, 08:02:13] Jason Leitch: Not anymore....

[02/04/2020, 08:18:52] Gregor Smith: 🤔🤔🤔

[02/04/2020, 09:05:50] Caroline Lamb: image omitted

[02/04/2020, 09:07:58] ~ Fiona: Fab

[02/04/2020, 09:08:48] Jason Leitch: Well that looks good. Well done Caroline.

[02/04/2020, 09:09:47] Caroline Lamb: Not me. A whole team.

[02/04/2020, 09:10:19] Jason Leitch: Of course. Thanks anyway. 😊

[02/04/2020, 09:11:17] Caroline Lamb: 👍

[02/04/2020, 09:11:54] Jason Leitch: I deleted the directors agenda. Can someone send me the dial in please???

[02/04/2020, 09:16:27] ~ Fiona: image omitted

[02/04/2020, 09:16:40] Jason Leitch: 👍

[02/04/2020, 09:17:54] ~ Donna: Sent

[02/04/2020, 09:31:01] ~ Donna: Hi all, discussion at orog about getting NSS to take over procurement of ppe for public sector. Likely to come up at sgorr later today and questions asked about why they can't do it if we say no. I exposed the issues about need to focus on HSC and also the resilience of NSS. We could however use this to our advantage and manage who gets what? ie ffp3 not to bin men but to nhs? We will come under pressure if we don't have a good answer. Happy to raise at directors meeting.

[02/04/2020, 09:35:13] ~ Richard McCallum: Donna. I got an email to this end last night which I'll send on to you. My concern is capacity within NSS. Focus needs to be on health and social care. I'll speak to Colin now though.

[02/04/2020, 09:37:43] ~ Donna: Colin apparently happy to do it?! Think Shirley has spoken to him.....I made the point on orog that they're not doing a super job for hsc, never mind anyone else so they can't be further distracted. Would need to come with concrete assurances that they will have more people to do procurement and that other services need to sort out their own distribution.

[02/04/2020, 09:39:42] ~ Fiona: Would we not be better to say yes and increase capacity?

[02/04/2020, 09:49:53] ~ Richard McCallum: Colin's not mentioned any conversations with Shirley and when we just spoke there it certainly seemed like news to him. His definite worry is over-promising and under-delivery. On procurement side I think capacity could be built by bringing in Scotland Excel. It's the logistics/supply that I'd have more concern about.

[02/04/2020, 09:59:57] ~ Donna: I think if they can do a partnership with Scotland excel that would be great. Leave distribution to the other services to sort. NSS still not quite there with hsc distribution. Shirley has definitely spoken to someone at nss - she clearly said they were agreeable but not sure who said it.

[02/04/2020, 10:05:16] Caroline Lamb: We are now starting to see significant amounts of ICU ancillary kit and consumables arriving and concern being expressed by the NSS Procurement Leads about whether the NDS is sufficiently resourced to be able to handle those urgent supplies being distributed in a timely fashion. Can we factor that in too?

[02/04/2020, 10:13:00] Jason Leitch: London position overnight is new layer of surge beds now being opened. Nightingale admissions postponed. Now scheduled for next Tuesday at the earliest. Stepping back from 'ventilated' to less sick. Hoping to not need at all.

[02/04/2020, 10:33:38] ~ Richard Foggo: Can we not use speakers. If there are colleagues in SAH can they call separately please.

[02/04/2020, 10:33:46] Jason Leitch: Yep

[02/04/2020, 10:33:54] ~ Richard Foggo: It's impossible to hear

[02/04/2020, 10:33:59] ~ Donna: Agreed, the echo is shocking

[02/04/2020, 10:34:55] Caroline Lamb: Trying to move to Teams in the next couple of days. People will still be able to call in if that suits them better. Tracy is on it.

[02/04/2020, 10:41:22] Jason Leitch: Can I also just remind everyone we are all over the media telling everyone to stay at home as much as they can.

[02/04/2020, 10:54:26] ~ Donna: Elinor on your point about shielding people - they know they are shielding for 12 weeks minimum so not the first time they will have heard it.

[02/04/2020, 11:04:34] ~ Elinor Mitchell: Is this not for everyone though? It talks about keeping schools and universities etc closed. I think they are huge ramifications beyond health and I'm just wondering how the rest of SG policies are getting played in

[02/04/2020, 11:05:07] ~ Elinor Mitchell: Jason - is the increase in deaths point because we are now counting care home deaths? There has been real confusion over this point?

[02/04/2020, 11:06:26] ~ Gillian Russell: From Directors this morning it seemed like there was recognition of need to bring all this together ie relative risk health/ economic/ communities. Is Ken in strategic lead?

[02/04/2020, 11:07:01] ~ Richard Foggo: I&S We are leading a SGoRR deep dive on countermeasures and release etc next week. That's to prepare for COBR. More info to follow.

[02/04/2020, 11:09:29] ~ Elinor Mitchell: Great thanks. Happy to be involved or not. But some big societal issues - eg some groups saying now we've signed DNRs and don't need or want my life prolonged so why can't I live the life I want. Not to mention impact of social distancing on our list vulnerable and the trauma of not being able to visit loved ones in care homes. It's so so complex

[02/04/2020, 11:38:50] Jason Leitch: No. It's because we're not waiting to be sure families are informed and therefore waiting for 14 different responses.

[02/04/2020, 11:39:39] Jason Leitch: I need Pauline Howie's mobile number please someone.

[02/04/2020, 11:43:20] M: I&S

[02/04/2020, 12:10:10] Jason Leitch: 🍌

[02/04/2020, 13:10:58] Jason Leitch: Gillian. What's the headline figure for NHS absence. Last I read was 7%. The RCN agave told the BBC 14%

[02/04/2020, 13:11:03] Jason Leitch: Have*

[02/04/2020, 13:30:24] Catherine Calderwood: Problem with reagent for antigen testing. Who do I speak to?

[02/04/2020, 13:30:37] Catherine Calderwood: In lothian and soon in Aberdeen

[02/04/2020, 13:40:05] ~ Gillian Russell: Catherine NR advised me that these issues were being led by Ainslie McLaughlin in procurement

[02/04/2020, 13:45:42] Jason Leitch: image omitted

[02/04/2020, 13:48:28] ~ Fiona: USA will be opened by Easter

[02/04/2020, 14:03:44] ~ Gillian Russell: As of last night overall 6% of workforce absent due to having COVID, displaying symptoms or self isolating.

[02/04/2020, 14:21:38] Jason Leitch: Thanks Gillian

[02/04/2020, 15:40:59] ~ Elinor Mitchell: Oh nhs staff? Higher in sas and mhs24 and anecdotally in social care

[02/04/2020, 16:00:44] ~ Gillian Russell: 9,719 today (5.9%) of workforce absent due to Coronavirus.

[02/04/2020, 16:06:01] ~ Gillian Russell: No national oversight because of the system of c. 2,000 private providers of service and most LA services will be commissioned also from private providers. The fig is directly employed health board staff

[02/04/2020, 16:11:37] Jason Leitch: Thanks villainy

[02/04/2020, 18:02:40] ~ Donna: Catherine/Gregor commission for sgorr deep dive on Monday on social distancing is live. This will probably be your lead on the day but we need to get the cross government data and evidence together. There's an email in your inboxes which sets out the dimensions. Gregor, can we have a quick call tmrw morning to set out what we want to present and then we can get that aligned with the economic and social impacts please. Keen to get people elsewhere working on this before the weekend. Thanks Donna

[02/04/2020, 18:18:37] Gregor Smith: Absolutely- topic of discussion at sage today. Incomplete information to make decisions before 13/4. Let's speak tomorrow

[02/04/2020, 18:20:14] ~ Richard Foggo: This was covered in SGoRR(M). FM wants to "lay the ground" for future decisions.

[02/04/2020, 18:22:55] ~ Donna: Great. Have emailed to get some time early ish tmrw Gregor.

[02/04/2020, 18:41:03] ~ Elinor Mitchell: The Scottish aquaculture marine centre in Oban has 2 PCR testing machines which they are offering us. Who should that offer go to?

[02/04/2020, 18:56:39] ~ Aidan: Donna/Gregor, just to flag I'm happy to help on this.

[02/04/2020, 18:56:56] Gregor Smith: 👍

[02/04/2020, 19:11:48] ~ Elinor Mitchell: Yes me too.

[03/04/2020, 08:03:50] ~ Gillian Russell: Hi All

I am representing DGHSC at the Strategic Resilience Group this morning. I had asked for a brief note on what I could now say re Health overview including modelling. Can I get an update. Call is at 9.30.

Thanks

[03/04/2020, 08:07:11] ~ Gillian Russell: Richard see at 6.15am we don't have a response. Is there anything more general I can say. Week we are in? Expected peak? Expectation people prepare for X. Or simply note waiting decision from Ministers who are considering urgently?

[03/04/2020, 08:13:32] Gregor Smith: I e got a meeting later on this morning with FM about it. The latest Scottish modelling work is at odds with what is coming out if the SAGE modelling groups and there's anxiety across all 4 NHS that SAGE scenarios don't fit for planning purposes.

[03/04/2020, 08:16:02] ~ Gillian Russell: Ok. So in light of that can I have a steer on what I can say. It may be high level and broad brush.

Thanks

[03/04/2020, 08:17:12] ~ Richard Foggo: **I&S** I don't think we can offer views on weeks etc due to not having ministerial agreement and also because we are still working through modelling.

[03/04/2020, 08:18:23] ~ Gillian Russell: Ok. That's no problem. Last time I used top lines in Sitrep. Maybe just do that again and say bear with on the modelling

[03/04/2020, 08:18:47] ~ Richard Foggo: Exactly. That's best. The sitrep is good.

[03/04/2020, 11:11:05] Gregor Smith: Just to let you know I'm on BCE call now. Got caught by another call.

[03/04/2020, 11:29:56] ~ Donna: image omitted

[03/04/2020, 11:30:59] ~ Donna: Sorry mainly for Gregor - meant to send to him 🙏 however comments from others welcomed. Excuse my tech drawing skills.

[03/04/2020, 11:34:27] ~ Donna: I am dipping out of cexs call.

[03/04/2020, 12:37:10] ~ Elinor Mitchell: Donna I'm not sure if it's covered in your notes but is there not something in modelling the impact of keeping the vulnerable shielded for longer but letting other get back into the economy? I think that's what the Swedish are doing?

[03/04/2020, 12:39:33] ~ Donna: Thanks Elinor- not that sophisticated yet but will get that fed in. Ta

[03/04/2020, 12:44:54] ~ Elinor Mitchell: Thanks - it's getting the balance between getting the economy back while protecting the vulnerable and not overwhelming the nhs. There has to be a sweet spot there somewhere?!?

[03/04/2020, 12:55:07] Jason Leitch: The Swedish are off in an entire world of their own....

[03/04/2020, 14:38:17] Catherine Calderwood: I think we need to be careful here about who is asking what and be clear also about what is being considered elsewhere. Andrew Morris group has Roger Halliday on it and has been set up to do exactly this analysis on request so this needs to go through the proper channels and then have expert scrutiny and discussion before presentation to directors and then ministers. There is no governance in individual directors making requests of SG analysts without broader context and scientific and clinical advice.

[03/04/2020, 14:57:43] Gregor Smith: Separate issue: I'm hearing locally of coffee shops and McDonalds planning on reopening to provide take-away. This doesn't sound like essential work - any intelligence on this? I thought they'd been advised to close.

[03/04/2020, 15:14:18] ~ Elinor Mitchell: Thought take away food and drink was allowed? Plenty of take away seat me open?

[03/04/2020, 15:14:51] ~ Fiona: Same - delivery and pick up?

[03/04/2020, 15:26:55] Caroline Lamb: Yes. Same near me. Delivery and pick up. Please don't make me cook!

[03/04/2020, 15:41:10] ~ Fiona: I was too embarrassed to say that- but please don't make me cook...

[03/04/2020, 15:55:08] Gregor Smith: I'd thought we moved away from it with last round of measures. I'm a coffee shop lover but hardly essential...

[03/04/2020, 15:55:41] ~ Fiona: Agree re not essential 😊

[03/04/2020, 16:02:59] ~ Donna: Thanks all. Monday's deep dive won't be a decision making forum and

there are obviously a lot of uncertainties as discussed with Gregor this morning. We will pull together what we have across HSC, economy and public services and see where we get to. I expect Monday will result in more work for Andrew Morris and co, as well as our analysts to get into, so rest assured we're not commissioning anything other than an overview to inform Ministers for COBRA. That might just be a straight NO to any change next week, but we need to get them thinking ahead as pressure to lift SD measures is significant from various factions, both immediately and in the medium term. We need to present the evidence we have now to refute or support that. I'll copy CMO/DCMO in to the commissioning note but don't expect you to provide anything at this point (unless you particularly want to?) Expect to have a worked up version by Sunday which we'll share and then perhaps a call on Sunday/Monday am would be helpful? Sgorr see this as a health lead so assume CMO/DCMO in the lead for the meeting? You can let me know. Thanks Donna

[03/04/2020, 16:13:23] ~ Elinor Mitchell: Thanks - that's really helpful Donna. And I know [NR] is leading evidence gathering on the DG economy front, with of course Chief economic adviser input. It's all coming together! Sounds like Monday will be a great session for whoever is there. Happy to discuss anytime Donna

[03/04/2020, 17:20:11] ~ Gillian Russell: Thanks for sharing and taking forward. Critical to bring all factors together as you are suggesting. Good to get read out and let me know if you need anything from me

[04/04/2020, 14:30:21] Jason Leitch: Colin Sinclair's mobile number please someone?

[04/04/2020, 14:31:23] ~ Richard McCallum: Contact card omitted

[04/04/2020, 14:32:57] Jason Leitch: 🍌

[04/04/2020, 14:33:10] Jason Leitch: I need to talk to him about commodes. I kid you not!!!

[04/04/2020, 14:40:44] ~ Richard McCallum: You get all the glamour jobs

[04/04/2020, 14:41:15] ~ Fiona: Good enough for him 😂😂

[04/04/2020, 14:44:40] Jason Leitch: Livin' my best life....

[04/04/2020, 14:44:44] Jason Leitch: No job tomorrow small....

[04/04/2020, 14:44:48] Jason Leitch: Too*

[04/04/2020, 16:31:50] ~ Gillian Russell: I can see we are now working through bodily functions. Let me know what the commode issue is.

[04/04/2020, 16:38:04] Jason Leitch: It's lack of at Louisa JordN....Colin is, so to speak, ON IT!

[05/04/2020, 10:21:31] Caroline Lamb: Anyone got a mobile number for [NR]?

[05/04/2020, 10:40:19] ~ Richard McCallum: Contact card omitted

[05/04/2020, 10:43:26] Caroline Lamb: Thanks!

[05/04/2020, 11:01:11] Caroline Lamb: Catherine. Hard on an audio conference but you have our absolute support. Take care.

[05/04/2020, 11:03:11] Catherine Calderwood: Thanks. Appreciated

[05/04/2020, 12:05:42] ~ Elinor Mitchell: Really, really tough being in the limelight Catherine. You've done nothing wrong and you have the care and support of all of us behind you

[05/04/2020, 12:10:45] ~ Gillian Russell: ❤️❤️

[05/04/2020, 13:12:43] ~ Richard Foggo: We are all in this together. Take care Catherine.

[05/04/2020, 15:02:02] ~ Elinor Mitchell: So hard Catherine. You were contrite and straightforward on the briefing. Well done.

[05/04/2020, 16:51:25] John Connaghan: Catherine well done in difficult open session today.

[05/04/2020, 17:48:14] Catherine Calderwood: Thank you for all the support. A news release announcing that I will continue as CMO in advisory role but will step back from public facing role for the foreseeable future. I am sorry again that I have let everyone down. I am happy to talk to any of you individually. Catherine

[05/04/2020, 17:58:22] ~ Gillian Russell: Please don't think like that. You just wanted some down time with your family after months of working like a Trojan. We are your colleagues. In it together. Sending love. Gillian

[05/04/2020, 18:03:00] Caroline Lamb: Everything that Gillian said. Catherine you have been an absolute star. This is nonsense. Sending love and support. Caroline

[05/04/2020, 18:11:32] ~ Elinor Mitchell: Oh I'm so sorry to hear that Catherine. I've never heard the FM support someone so publicly. She obviously trusts you enormously and values your judgement. As do all of us. You're still [I&S] hero!

[05/04/2020, 19:55:49] ~ Richard Foggo: [I&S] [I&S] from PO looking for you to clear a line.

Liz Lloyd chasing apparently.

[05/04/2020, 20:13:52] ~ Fiona: Yes- think it is CMO territory

[05/04/2020, 20:24:18] ~ Richard Foggo: 👍

[05/04/2020, 20:24:36] Catherine Calderwood: Ok. I'll look now.

[05/04/2020, 21:40:56] Catherine Calderwood: Friends and colleagues. It is with a heavy heart that I am resigning this evening. My continuing in the position risks a distraction from the fantastic work you are all doing. Please keep in touch. I will be cheering from the sidelines. Catherine

[05/04/2020, 21:43:42] ~ Gillian Russell: Gutted about this Catherine. Thinking of you and family. Gillian

[05/04/2020, 21:44:42] ~ Donna: Catherine so sorry to hear this. Sad for you and for us. ❤️

[05/04/2020, 21:45:00] ~ Fiona: Catherine - look after yourself

[05/04/2020, 21:49:37] Caroline Lamb: Really sorry to hear this Catherine. Thinking about you. X

[05/04/2020, 21:51:03] ~ Elinor Mitchell: Oh Catherine - sorry it's come to this. Thinking Of you x

[05/04/2020, 22:26:24] ~ Richard Foggo: So sorry that it's come to this. Very best wishes.

[08/04/2020, 10:44:26] ~ Donna: Elinor sorry I can pick up risks. I was chatting away on mute.

[08/04/2020, 12:42:11] ~ Gillian Russell: CSH does not want letter withdrawn. Should hold that space.

[08/04/2020, 12:42:55] ~ Elinor Mitchell: Where is pressure to rescind come from

[08/04/2020, 12:44:13] ~ Fiona: Should I just accept that rather than trying to persuade her? She has asked for other words that give greater clarity- ?

[08/04/2020, 12:46:10] ~ Gillian Russell: Very strong views from all the TUs that it undermines 4 nations Guidance. That was not intent do question is how they are talked down.

Steve is doing a note.

She thinks your advice is right. She sees this as a COSLA/ LG issue although our TUS see this as an issue in round. CSH also thinks we have 6/8 weeks of supply of masks so I think advice needed on risk around supply.

[08/04/2020, 13:04:40] ~ Fiona: Thanks Gillian

[08/04/2020, 13:19:00] ~ Gillian Russell: There is a clear view that the letter and COSLA issues are separate from our arrangements with Health. However there is a broader point that other Cab Secs have been speaking to TUs on HSC issues and CSH would like all of that to be better aligned. This is in Colin McAllister space.

[08/04/2020, 13:22:28] Catherine Calderwood: ~ Elinor Mitchell removed Catherine Calderwood

[08/04/2020, 20:59:10] ~ Fiona: Gillian - would you or one of your team mind having a look at the proposed statement please? COSLA were keen to get out tonight - but sure we'll get Ministerial clearance tonight . Fiona

[08/04/2020, 21:08:54] ~ Gillian Russell: Fiona

Not a health workforce point but I noted that COSLa refer to social care staff in 1st para.

Essential services workforce in the 4th para and health and social care staff in final para.

In my notes of the call reference was to social care staff.

Has Elinor commented on the correct workforce reference as the context of this was social care workforce?

[08/04/2020, 21:10:43] ~ Fiona: Will copy Elinor - apologies Elinor

And agree - was social care staff

[08/04/2020, 21:11:53] ~ Gillian Russell: The original text refers to health and social care staff.

CSH was clear on call that was her primary interest.

I think if agreement drifts into other workforces the issue about masks might become a problem?

[08/04/2020, 21:13:13] ~ Elinor Mitchell: I'll have a look now

[08/04/2020, 21:13:50] ~ Gillian Russell: If the agreement goes wide then real question about where all these supplies would come from. Unions on call clearly trying to expand out who would get but I think this needs more consideration as many people may just need to wash hands frequently

[08/04/2020, 21:14:35] ~ Fiona: Thanks Elinor - and advice about how much to push this tonight. Assume we are content will go to our Cab Sec then once she is content DFM and Ms Campbell- doesn't seem doable tonight?

[08/04/2020, 21:15:21] ~ Fiona: Gillian- agree re hand washing - and LAs to be sensible as well rather than trying to insist four people in a refuse lorry

[08/04/2020, 21:17:52] ~ Gillian Russell: I think we should deal with the issue at hand which was the social care workforce. I think it is helpful to refer to health and social care as in the eyes of Unions they see this interchangeably hence the strength of feeling by union reps for "health".

[08/04/2020, 21:21:20] ~ Elinor Mitchell: I've commented on email.

I'm worried about losing the link to social distancing and hand washing advice

Colin said stocks look ok

I think we need to offer everything and work through that. The point about equality of access is the key. It's doesn't matter who you are or what you do - if you do hands on care , then you should be able to access the same level of ppe. And we all know how much this is about how people feel. So moving this conversation on feels quite important

[08/04/2020, 21:22:53] ~ Fiona: Thanks Elinor - I wonder if social distancing and hand washing would be a red herring for the unions - as they wanted agreement re masks?

[08/04/2020, 21:46:25] ~ Elinor Mitchell: So we've given them masks. That's now a given. I just wonder if this is now the moment to say something along the lines that we've agreed parity of access to ppe for health and social care workers. So there is equal access to masks, gloves and aprons. But, the most important things we do is observe social distancing where we can and wash our hands frequently with soap and water or hand sanitiser. (Oh, and we've sorted the hand sanitiser supply now)

Make sense?

[09/04/2020, 13:36:25] Gregor Smith: All - can I let you know that I've agreed with NSS to release Nicola Steedman as my Interim DCMO. She will be well known to many of you having been an SMO in HP for many years. I hope that she'll be in place as soon as next week.

[09/04/2020, 13:41:43] ~ Fiona: Fab- great news Gregor

[09/04/2020, 13:43:09] ~ Richard Foggo: 🍷🍷🍷

[09/04/2020, 13:44:13] John Connaghan: Great 🍷

[09/04/2020, 13:45:31] ~ Elinor Mitchell: Great!

[09/04/2020, 13:56:58] M: 🍷🍷🍷🍷🍷

[09/04/2020, 14:07:03] Jason Leitch: Fantastic. Some brains at last.....

[09/04/2020, 18:31:40] John Connaghan: Folks. If Wuhan has now lifted most restrictions is it time to test second wave theory?

[09/04/2020, 19:31:14] ~ Richard Foggo: image omitted

[10/04/2020, 10:52:33] ~ Donna: The data pack should have been going to everyone? We can check with hsc.

[10/04/2020, 10:53:16] Jason Leitch: It hasn't. [NR] discovered it yesterday and I got it from her for the first time.

[10/04/2020, 10:53:35] ~ Donna: Also the stuff on non-covid harm will feature in the paper for Monday as we need something to bring it all together.

[10/04/2020, 10:53:57] ~ Donna: Will check the dist list. It is very good indeed.

[10/04/2020, 10:58:44] ~ Donna: It goes out with the sitrep so some of you aren't getting that either.

Seems a bit random. Will check

[10/04/2020, 11:36:33] ~ Elinor Mitchell: Pretty sure I've not seen anything in non-covid harm or options for lifting restrictions

[10/04/2020, 11:39:50] ~ Fiona: Haven't seen anything from our routes. There is a growing discussion in professional press about poor vaccination rates, which needs to help guide decision to lift - will help with stratification of who is allowed out and in which region

[10/04/2020, 11:53:07] ~ Richard Foggo: This comes from modelling and FM deep dive slides. It's difficult to keep track but I can send again.

[10/04/2020, 11:54:39] ~ Richard Foggo: This is critical. Should we discuss? Nosocomial came up on Andrew Morris's group yesterday, they were keen to understand how we respond to SAGE interest and UK sub group. Quick call?

[10/04/2020, 11:59:51] ~ Donna: Yes it's important we see this in the round.

[10/04/2020, 12:00:31] ~ Donna: Or we can circulate the paper so everyone has the same knowledge base and then discuss?

[10/04/2020, 14:04:28] ~ Donna: Is [NR] giving the cmo update at Sgorr o? I heard he was but just making sure. Who else is phoning in?

[10/04/2020, 14:04:41] ~ Donna: I can do btw

[10/04/2020, 14:16:35] Jason Leitch: I'll be on

[10/04/2020, 14:16:45] Jason Leitch: I can do it

[10/04/2020, 14:17:35] Jason Leitch: Elinor. There was a very specific question about care homes in Falkirk at the press conference. We're you or someone watching and can you or someone please check it out?

[10/04/2020, 14:19:24] ~ Donna: Ok [NR] might appear. Not sure. Will I tell [NR] you're doing it?

[10/04/2020, 14:22:05] Gregor Smith: [NR] is doing the clinical aspect while I'm with Cab Sec - may need some assistance with wider health issues.

[10/04/2020, 14:30:10] ~ Donna: Ok he wasn't on the list for some reason. I'm sure it'll be fine.

[10/04/2020, 15:55:55] ~ Elinor Mitchell: Jason - will pick up

[10/04/2020, 16:01:02] ~ Elinor Mitchell: Jason - a note about to cab sec on this

[10/04/2020, 16:54:21] John Connaghan: Jason is nosocomial same as HAI?

[10/04/2020, 16:58:01] ~ Fiona: Yes

[10/04/2020, 17:02:00] Gregor Smith: One of the keys here is improving our gene sequencing capacity. This may be useful in other areas in next phase eg if we begin to relax internal travel due to successful suppression but tighten port health. May give clearer intelligence in and out institutions around how we track infections.

[10/04/2020, 17:31:43] Jason Leitch: Thanks Elinor.

[10/04/2020, 17:32:45] Jason Leitch: Yes john. Any infection that's health and social care acquired. Gregor's right. We'll eventually know if the virus frank has is the virus [NR] had but we don't have sequencing yet.

[10/04/2020, 17:33:09] Jason Leitch: If we get MRSA now we can do that. Cohort etc.

[10/04/2020, 17:57:18] ~ Donna: Does it apply to prisons etc ie all institutions? Or just hsc?

[10/04/2020, 18:00:07] ~ Fiona: We're beginning to look at while genome sequencing and environmental sampling which will help. Prisons if e are in hospital- so really just HSC

[10/04/2020, 18:33:59] Jason Leitch: But the same principle could apply.

[10/04/2020, 18:47:49] ~ Annabel Sutcliffe: ~ Elinor Mitchell added ~ Annabel Sutcliffe

[10/04/2020, 18:48:24] ~ Elinor Mitchell: Since we are talking about testing. I'm reminded to add Annabel

[10/04/2020, 19:08:34] Jason Leitch: Oh. Welcome.... 🍌

[10/04/2020, 19:16:59] ~ Annabel Sutcliffe: Hi everyone

[10/04/2020, 19:17:18] ~ Fiona: Welcome

[10/04/2020, 19:24:33] M: Great to have you on the team Annabel. What fab start!

[10/04/2020, 19:24:53] M: Can we get Paul in too?

[10/04/2020, 19:36:35] ~ Donna: Hi Annabel 🍌 🍌

[10/04/2020, 19:40:49] ~ Gillian Russell: Welcome Annabel. This is the serious What's App. Are you on the other too? Sharing teenage hairstyles de rigeur over there...

[10/04/2020, 19:42:39] ~ Annabel Sutcliffe: Ooh, count me in for that. !

[10/04/2020, 19:43:08] ~ Donna: You say that now annabel. Wait til you see the photos.

[10/04/2020, 19:43:10] ~ Gillian Russell: I don't know who controls access.. you might need to sign a disclaimer 2st

[10/04/2020, 19:43:30] ~ Gillian Russell: Donna. We are still waiting for yours...

[10/04/2020, 19:45:33] ~ Donna: Have added you to the other one. Sadly mine are all at my dads. I'm bound to have a few. Will look them out.

[10/04/2020, 20:52:29] ~ pcackette1960: ~ Elinor Mitchell added ~ pcackette1960

[10/04/2020, 20:52:49] ~ Elinor Mitchell: Welcome Paul to our directors group!

[10/04/2020, 21:01:05] Jason Leitch: Thank goodness. Not a moment too soon.....

[10/04/2020, 21:20:47] ~ Fiona: Shh- we shouldn't sound too enthusiastic- he might get suspicious - PPE- a dawdle 😊

[10/04/2020, 21:23:00] ~ pcackette1960: Ha ha. Great to be back with the old gang again

[10/04/2020, 21:31:12] ~ Donna: Hello and welcome Paul 🍌 🍌

[11/04/2020, 14:45:50] Jason Leitch: Annabel....do you have any idea what he's talking about?

[11/04/2020, 14:45:53] Jason Leitch:
<https://twitter.com/AngusMacNeilSNP/status/1248965099542450176>

[11/04/2020, 15:00:08] ~ Richard Foggo: Mary Morgan talked about the cartridges being delivered imminently to WI on yesterday's call.

[11/04/2020, 15:03:29] ~ Annabel Sutcliffe: The testing is still happening and samples are being analysed

in Aberdeen. Adds a bit of time in but doesn't stop testing. I'll pick up.

[11/04/2020, 15:04:53] ~ Annabel Sutcliffe: They have the machines that can turn around answer in 45 mins now but cartridges arrive next week, although prioritised for shetland, orkney and Elgin as higher prevalence

[11/04/2020, 15:07:58] Jason Leitch: Perfect. Can you answer him on Twitter too? Or are you not keen to be as public? I can say someone will be in touch soon if you'd prefer?

[11/04/2020, 15:08:40] ~ Annabel Sutcliffe: I'm not keen to be as public. Yes, in drafting something now

[11/04/2020, 15:12:19] Jason Leitch: 🍑

[11/04/2020, 15:12:26] Jason Leitch: I'll take the heat...

[11/04/2020, 15:41:55] ~ Gillian Russell: We have a set of running issues on deaths of health and social care workers.

FM has asked how many have died; what system we have in place; can we break into staff groups.

Steve wrote out to Boards on 7/4 but I am not sure that would cover all workers identified above and we have engaged with SC.

The National have asked whether Matt Hancock figures of 19 include Scotland. We have not provided them with information to date.

[11/04/2020, 15:42:34] Caroline Lamb: Has anyone got a contact number for [NR]?

[11/04/2020, 15:44:04] Jason Leitch: I've just done BBC for a number of outlets. It's was ALL care home.

[11/04/2020, 15:44:08] ~ Donna: Hsca have been engaged in this too as have the policy team. I don't think they have an accurate breakdown of employment status. May be available from the NRS records. Nicola/Anita can give you an update on that?

[11/04/2020, 15:44:22] Jason Leitch: Contact card omitted

[11/04/2020, 16:08:14] ~ Fiona: I know of two. Health care support worker in Greenock and social care worker Dumbarton. That doesn't mean to say there are not more

[11/04/2020, 16:10:34] Gregor Smith: I've got other numbers for [NR] if you can't get her on that mobile.

[11/04/2020, 16:11:14] Caroline Lamb: I've left a message on that mobile.

[11/04/2020, 16:19:32] ~ Gillian Russell: Fiona

I agree from media reporting there are 2 but at present we don't have a way of knowing whether there may be more. I think there are options but needs to be considered over next couple of days.

[11/04/2020, 16:24:02] ~ Fiona: Agreed Gillian- probably through employers telling us- although difficult with their sector

We also need to consider excess deaths - PHS and HPS are looking at that

[11/04/2020, 16:35:56] ~ Donna: Have you asked hsca about this- they do have a plan. Nicola and Anita have done a lot of work on this from a data point of view. Might be necessary to ask employers but there are also other routes. Do you want me to ask them or can you factor them into your plans?

[11/04/2020, 16:47:04] ~ Gillian Russell: I have asked they are copied in and engaged on plans going forward so our Hub has that action. To

[11/04/2020, 16:51:39] ~ Donna: they have done some advanced thinking on what it could look like so should be helpful.

[11/04/2020, 16:55:32] Jason Leitch: Are the two in the number Hancock used?

[11/04/2020, 17:03:59] ~ Gillian Russell: I don't know the answer to that. I spoke to my opposite number in DH but he did not know and was not involved in that number. We were trying to follow up through resilience hubs.

[11/04/2020, 17:12:00] Jason Leitch: Hancock is annoying....

[11/04/2020, 17:14:03] ~ Fiona: Agreed

[12/04/2020, 10:27:23] ~ Richard Foggo: Apologies for missing call [I&S]. Let me know if there are any actions for me.

[12/04/2020, 10:28:14] ~ Annabel Sutcliffe: Ditto on missing it [I&S] tho).

[12/04/2020, 10:35:39] ~ Richard Foggo: Happy Easter btw!

[12/04/2020, 10:37:46] ~ Fiona: Richard - a bit risky asking our colleagues about actions - they'll now all be for you. Hope family well

[12/04/2020, 10:42:50] ~ Richard Foggo: [I&S]

[12/04/2020, 10:56:58] ~ Elinor Mitchell: Annabel - I was asked to pick up with you in social care staff testing. Cab sec needs briefing on this for statement today (it's all over the press). Thanks

[12/04/2020, 11:18:30] ~ Annabel Sutcliffe: Elinor - we spoke and will get you the info

[12/04/2020, 14:58:28] Gregor Smith: Paul - England running into critical problems with gowns shortage for PPE. A call is being convened at 5pm about it. Are we in a better or similar position?

[12/04/2020, 15:01:13] M: Can we check our goggle position too?

[12/04/2020, 15:12:30] ~ Elinor Mitchell: Is Colin on this?

[12/04/2020, 15:12:53] M: That's what I'm asking

[12/04/2020, 16:02:22] ~ pcackette1960: My understanding from something Jason alerted me to that gowns are ok here. I understand steps in hand re goggles. I can join the call at 5

[12/04/2020, 16:02:59] ~ Elinor Mitchell: Assuming I'm not needed for 5pm call

[12/04/2020, 16:06:35] Gregor Smith: Diane is joining for Fiona and Andrew dialling in for me. I don't think you're needed Elinor but Paul may find the conversation useful.

[12/04/2020, 16:07:53] Gregor Smith: Before the call we need to know our exact position regards gowns - we may be approached for mutual aid as part of the conversation though I suspect those conversations have already happened in the background and the result of that is these further steps to mitigate shortage.

[12/04/2020, 16:13:35] ~ pcackette1960: Noted

[12/04/2020, 16:42:10] ~ Fiona: I think we should only give mutual aid if we have a confidence that we will not run out. Remember -English stock is widely dispersed and they don't know what they have within trusts

[12/04/2020, 16:45:18] Gregor Smith: I agree entirely.

[13/04/2020, 12:25:51] ~ Elinor Mitchell: Does anyone have Sean Neils mobile number thanks

[13/04/2020, 12:26:44] Caroline Lamb: Contact card omitted

[13/04/2020, 12:59:52] ~ Gillian Russell: Elinor

We are putting together a paper to provide briefing in round this pm.

Gillian

[13/04/2020, 14:24:12] ~ Elinor Mitchell: Super thanks

[14/04/2020, 11:45:47] ~ Fiona: Elinor - excellent news about reduction in delayed discharges- over a thousand people now in a suitable safe place - and neither sitting it out in hospital or in a Travel Lodge - you and your team have moved heaven and earth- well done 🍊

[14/04/2020, 11:50:44] Jason Leitch: I agree. I think the NHS mobilisation combined with the delay work has been astonishing. It is why we are not Lombardy

[14/04/2020, 12:19:37] ~ Richard Foggo: 🍊🍊🍊 amazing. It's made an incredible difference to so many lives.

[14/04/2020, 12:25:58] Gregor Smith: It's good news.

Do we have any data on discharges to care homes who subsequently become CV positive? Hearing some stories of an association between some CH cases and recent discharge. Are we likely to get data on this from somewhere?

[14/04/2020, 12:29:57] ~ Elinor Mitchell: Hmm I don't know Gregor. We would have to be tracking individual patients. The CI data is currently just notification of cases. But I guess if we looked at length of stay of those with suspected covid we would get an idea? I will ask

[14/04/2020, 15:55:03] ~ Fiona: Elinor- I'm concerned about the FM's questions - unless someone in your directorate has more info- what we have (CH advising CI by phone) needs to be strengthened. We can say we are working across the sectors to make sure the good practice in some areas is widened across the country ?

[14/04/2020, 16:04:45] ~ Elinor Mitchell: We spoke. And we have a plan

[14/04/2020, 21:32:51] John Connaghan: Paul. Could we catch up tomorrow. Conscious we have never spoken much. Are you around at say 9 or 9.30? John C

[14/04/2020, 21:35:36] ~ pcackette1960: Yes let's do that

[14/04/2020, 22:04:09] John Connaghan: Ok. I will phone you

[15/04/2020, 12:22:00] ~ Donna: Jason/Gregor are either of you doing clinical update at sgorr o? Or is mike Gillies in the frame. Sgorr looking for someone.

[15/04/2020, 12:22:53] ~ Donna: One of the policy team can do a utilitarian version of it if not. Thanks

[15/04/2020, 12:23:58] Jason Leitch: Yes. I'm there....

[15/04/2020, 12:30:51] ~ Donna: Brilliant. Will put you down for the clinical update. 🍊🍊

[15/04/2020, 15:22:23] ~ Donna: Jim or Alan will come to you for the update Jason. Thanks 🍊🍊

[15/04/2020, 15:29:55] ~ Aidan: I'm down on health too. Can do numbers if needed and will also cover

care homes deep dive

[15/04/2020, 20:14:18] ~ Fiona: Paul- are you sighted on supply issues for non health care PPE and whether or not there will enough? Fiona

[15/04/2020, 20:28:40] ~ pckette1960: Thanks Fiona. That sounds like a loaded question of an unpleasant problem coming my way. I've got the core brief and lines. Is there something specific?

[15/04/2020, 20:35:18] ~ Donna: Paul, so you are aware. Having an exchange with mike Healy re the ppe slide on supply. He is on the case but it says we run out of various things today. I know there is stock in boards so it's not a true reflection so he'll find a form of words and is being helpful. Probably needs consideration tmrw though as it's a recurring issue.

[15/04/2020, 20:38:36] ~ pckette1960: I've spoken to Mike tonight to. John raised it with me this morning and he was into it but still needed a wee clarification tonight. I agree it needs worked on tmrw

[15/04/2020, 20:52:53] ~ Fiona: Paul- HPS have issued guidance. Some will reduce (police) others I think will increase use - child care workers and others - are we aware of impact on supply? I'll sen it in to you F

[16/04/2020, 19:33:11] Jason Leitch: Well done all and particularly you Annabel and Richard. Great job. Imagine for a moment how bad it could have been....

[16/04/2020, 19:40:00] M: 🍊

[16/04/2020, 19:40:18] Gregor Smith: Annabel, Richard - I thought you did brilliantly there after a tough opening- you could see the complete change in mood by time things had finished. Very nicely handled 🍊

[16/04/2020, 19:42:26] Jason Leitch: I was the quite deliberate sacrifice Gregor. It was planned. With my full knowledge....

[16/04/2020, 19:43:09] Jason Leitch: And DFM did not understand the test...to be clear....my science was to stop him intervening....

[16/04/2020, 19:43:58] ~ Donna: Yes well done. Good result, and well handled everyone.

[16/04/2020, 19:45:11] ~ Elinor Mitchell: Didn't hear it but sounds like a great result! Well done all

[16/04/2020, 19:47:10] ~ Elinor Mitchell: I have a different question. Got into a difficult conversation with chief officers tonight because we've stopped ppe supply to hubs in advance of drops to care homes. It's making me feel really uncomfortable about visibility of stock supply. Are we close to running out?

[16/04/2020, 19:49:49] ~ Gillian Russell: Sounds like a really good outcome. Well done all.

[16/04/2020, 19:50:36] ~ Fiona: Not sure why we would have stopped drops to hubs. Are they not also supplying care at home providers?

Think we may be struggling with gowns, goggles

- but gowns shouldn't be an issue for community ?

[16/04/2020, 19:56:58] ~ Donna: image omitted

[16/04/2020, 19:58:21] Jason Leitch: Hibs don't need anything. The season got cancelled....

[16/04/2020, 20:08:32] ~ Elinor Mitchell: Yeah they stopped deliveries this week (worried about stocks)

[16/04/2020, 20:17:13] ~ Donna: Thanks Jason. I am reminded of that fact by NR Nearly every day.

[16/04/2020, 20:21:02] ~ Richard McCallum: Elinor - do we know how much stock is being held at local hubs and are there particular areas that are running especially low? The info for Sitrep will give a picture from a national perspective, but obv more we push out to boards, hubs and care homes, NSS will lose a sense of what's being held locally.

[16/04/2020, 20:24:44] ~ Donna: The plan to check consumption again supply only seems to cover boards - does hub supply come through boards? I don't know I'm an amateur- Richard or Paul will know.

[16/04/2020, 20:38:10] ~ Richard McCallum: No supply goes straight from NSS to hubs. I can certainly pick up with Colin...although sounds like he's a bit of a regular at chief officers meeting so maybe they can raise with him direct tomorrow!?

[16/04/2020, 22:47:32] Gregor Smith: Paul - CMO Eng indicated tonight that England about to run out of central supply of gowns and will issue advice to staff tomorrow on what to wear instead. Other nations are rechecking stock - question posed as to whether we would wish to be part of this alert or not - our new DCMO, Nicola, urgently clarifying the Scottish position with NP (she's just come from NSS).

[16/04/2020, 22:52:57] ~ Elinor Mitchell: Thanks guys. Think we're about to run out of masks too? I'm just feeling really anxious about ppe and not sure what I can do

[16/04/2020, 22:55:29] ~ pckette1960: I understand that Boards have their own stocks of gowns and goggles but our capacity to replenish is very limited. I will check re masks

[16/04/2020, 22:57:16] ~ Elinor Mitchell: Doesn't really matter where stocks are held. The minute a front

line service has none this will be a nightmare. I got a message out tonight to chief officers to say if hubs are running out we will replenish . I just hope we can

[16/04/2020, 22:59:08] Gregor Smith: Do we need to be part of this alert? We will need to know first thing whether a stock-out is likely and likelihood any of our services will be left with no provision. At the beginning of the week there was thought to be enough to see us through with expected deliveries?

[16/04/2020, 23:00:48] ~ Elinor Mitchell: I think we do. But I'm not an expert and I'm not sure what being part of the alert means

[16/04/2020, 23:02:49] Gregor Smith: It's specific advice on what teams should do if they run out of gowns. It may cause uproar if issued.

[16/04/2020, 23:07:03] ~ Donna: There is a bit in the sit rep about gowns -see above. New supply due to arrive 24/4 advice to icu/hdu on coveralls to supplemt gowns in meantime. Does that mean the same thing? And uproar.

[16/04/2020, 23:15:40] ~ pcackette1960: We have 1-2 weeks supply with new supply due soon as Donna says. Daily detailed update says 62,400 delivered to Boards this week with the remaining stock due tomorrow. This will allow gowns to be retained for AGPs. Future potential orders are being pursued to speed up delivery

[16/04/2020, 23:17:07] ~ pcackette1960: RAG analysis is Red though which is less than 3 weeks stock remaining

[16/04/2020, 23:22:51] ~ pcackette1960: Elinor - FFP3 masks look ok but dependant on a large order not in delivery yet.

FRSM's have 12 weeks+ supply, 73% of the demand for which is social care

[16/04/2020, 23:38:53] Gregor Smith: Thanks Paul.

[17/04/2020, 07:14:12] ~ Fiona: In which case I think we don't issue. Coveralls can substitute for gowns but that is not what England are saying. Gowns should only be used for AGPs- if we think there is overuse we should be encouraging people to follow guidance (at risk of appearing to be Hancock). There will be huge media interest when England issues.

[17/04/2020, 07:16:31] ~ Fiona: There were pointed statements about mutual aid on the call last night and why other countries didn't need to issue warning

[17/04/2020, 08:07:13] ~ Gillian Russell: There is already a running issue about poor quality gowns issued in Fife that was raised with CS this week. This has been raised with relevant people and advice to be provided. The staff side remain very concerned about PPE. If there is a developing picture it would be very helpful to discuss with them or we risk losing their confidence again on this issue. Next call with them is at 11am

[17/04/2020, 08:09:38] ~ Fiona: Gillian- that is a good approach. The advice from England will be issued around lunch time- they are keen not to have anything leaked but it would be disingenuous not to raise. Assuming we have sufficient then we should say England are doing so but we believe we have sufficient? Paul- assume that is safe to say?

[17/04/2020, 08:12:47] ~ pcackette1960: I'm happy that we can say that but with obvious caveats about it being the current position and that over the period immediately ahead we continue to work hard to maintain and replenish stock in a difficult global market

[17/04/2020, 08:14:48] ~ Fiona: Thanks Paul- have we thought through at what stage we would need to intervene and say we won't have enough? Is that a mixture of stock level in Boards and NP?

[17/04/2020, 08:16:24] ~ Gillian Russell: We have time to work out what we say. People have valued us being honest and open and do recognise this is bigger problem. However, they will immediately ask other questions so should ensure we have sufficient to say. Will take this to my SLT asap.

[17/04/2020, 08:16:54] ~ Fiona: Thanks Gillian

[17/04/2020, 08:17:09] Gregor Smith: Thanks everyone- I'm driving in again just now but happy to take calls if anyone wants to speak

[17/04/2020, 08:17:33] ~ pcackette1960: I will check the first question. Yes to the second but I'm not sure how to truly detailed our knowledge of the Boards position is. We are working to improve knowledge though

[17/04/2020, 08:26:57] John Connaghan: Paul. Would you want me to check quietly with a few CEOs what the position is on the ground?

[17/04/2020, 08:36:52] ~ Gillian Russell: CS also meeting Unions at 9am. Just putting note in system.

[17/04/2020, 08:38:46] ~ Elinor Mitchell: And I think yesterday's update said we are running out of normal

masks and Colin called that out on the call

[17/04/2020, 08:38:56] ~ pckette1960: If we could check without suggesting we don't know (if you see what I mean) then fine

[17/04/2020, 08:41:58] ~ Gillian Russell: I have put a note in system. CSH is meeting Unison this morning so I have suggested she is made aware of position in advance of that call. Steve and Diane are on the call.

[17/04/2020, 08:56:31] John Connaghan: Paul. Spoke to a couple of CEOs will ring you. Can you take a call

[17/04/2020, 08:56:58] ~ pckette1960: Yes

[17/04/2020, 09:04:57] John Connaghan: Paul. As discussed. Let's have a discussion in detail with CEOs and Colin Sinclair on PPE stock and distribution immediately after CEOs call at 11.00.

[17/04/2020, 09:06:32] ~ Fiona: Can I be invited in the call please?

[17/04/2020, 09:10:12] ~ Gillian Russell: I have put a note in system and shared with Ms Freeman given her meeting with staff side.

Perhaps let **NR** know plans for this morning?

We will develop some suggested lines for this morning that I can use and clear round.

[17/04/2020, 10:33:01] ~ Gillian Russell: The Strategic Resilience Group were expecting Paul on call today. Not sure whether other priorities have come up?

Shall I say Tuesday?

[17/04/2020, 10:36:24] ~ Donna: He is on the directors call?

[17/04/2020, 10:36:37] ~ Donna: Assume will go straight to cexs?

[17/04/2020, 10:36:47] ~ Donna: Has he not got a sub yet?

[17/04/2020, 10:37:01] ~ Donna: If not yes Tuesday.

[17/04/2020, 10:37:10] ~ Gillian Russell: This message was deleted.

[17/04/2020, 10:37:12] ~ Donna: This message was deleted.

[17/04/2020, 10:38:37] ~ Gillian Russell: Can't be in 2 places at once. I think they will be ok. It is Paul's first week after all.

[17/04/2020, 11:00:06] Gregor Smith: I'll try to remember that... I want a time splitter for **I&S** 🗣️

[17/04/2020, 11:14:27] ~ Fiona: Ah- **I&S**

[17/04/2020, 11:15:28] Jason Leitch: **I&S**

[17/04/2020, 11:22:40] ~ Fiona: He's worth it!!

[17/04/2020, 11:49:57] Gregor Smith: Nah. Not yet- wee while to go. **I&S**

I&S

[17/04/2020, 12:05:06] ~ Fiona: So tattoo studios and hairdressers...

[17/04/2020, 12:07:11] Jason Leitch: Last on the list....flights to Mauritius are first

[17/04/2020, 12:07:11] ~ Annabel Sutcliffe: Hancock announced hospitals may not have enough gowns.

All over news now

[17/04/2020, 12:08:46] ~ Annabel Sutcliffe: I've got to come off call, sorry

[17/04/2020, 12:47:20] ~ pckette1960: Thanks Gillian. I now have a DD Robbie McGhee and will ask him to attend these on my behalf. More of a team under construction still

[17/04/2020, 13:36:41] ~ Gillian Russell: That's good to hear. You def need that!

[17/04/2020, 13:56:18] Gregor Smith: Just to follow up on directors discussion: Cab Sec / FM support the idea of task force around care homes, linking with scientific advisory group and DsPH. Also agree we don't participate in PPE CAS and shouldn't issue guidance unless we're facing immediately a stock out position.

[17/04/2020, 13:58:55] ~ Donna: Hi who is on Sgorr M this afternoon? Just checking to ensure we're covered.

[17/04/2020, 14:01:05] Jason Leitch: I don't have it in my diary

[17/04/2020, 14:01:16] Jason Leitch: I didn't know there was one

[17/04/2020, 14:02:06] ~ Donna: It's 2.30

[17/04/2020, 14:02:37] Jason Leitch: I have Louisa Jordan governance but can step out, it's quite dull despite Fiona's leadership of it.

[17/04/2020, 14:03:09] ~ Aidan: I'm on to cover any care home questions that ministers might ask...good that cab sec up to date from Gregor. Good result

[17/04/2020, 14:03:42] Jason Leitch: Tell SGORR to add me Donna. They should know this!!!!

[17/04/2020, 14:05:06] ~ Donna: Have forwarded you the meeting request Jason

[17/04/2020, 14:06:29] Jason Leitch: Ok. So Fiona...you and Michael for LJ. I'll do SGORR.

[17/04/2020, 14:08:35] ~ Donna: image omitted

[17/04/2020, 14:09:47] ~ pckette1960: Apparently I'm doing PPE at 2:30 at SGoRR(M)

[17/04/2020, 14:12:40] Gregor Smith: I'm there

[17/04/2020, 14:12:46] Jason Leitch: 👍

[17/04/2020, 14:27:29] Jason Leitch: Is that the right number? I have music?

[17/04/2020, 14:27:51] Jason Leitch: Bad music

[17/04/2020, 14:28:38] Jason Leitch: Help....

[17/04/2020, 14:29:10] ~ Donna: image omitted

[17/04/2020, 14:31:36] ~ Donna: Sorry was the previous one. Trying to do 6 things at once.

[17/04/2020, 14:31:51] ~ Donna: Are you in now?

[17/04/2020, 14:38:49] Jason Leitch: I am.

[17/04/2020, 14:38:53] Jason Leitch: 👍

[17/04/2020, 14:43:23] ~ Fiona: And I've been called worse than dull 😂😂😂

[17/04/2020, 14:43:37] Jason Leitch: Me too. Even today....

[18/04/2020, 10:47:28] ~ Fiona: What time did the respond renew document come in- not seeing it in my in box

[18/04/2020, 10:47:47] ~ Annabel Sutcliffe: I've forwarded

[18/04/2020, 10:50:09] ~ Fiona: Ty

[18/04/2020, 10:52:54] ~ Gillian Russell: Can I have too. Thanks

[18/04/2020, 10:55:04] ~ Annabel Sutcliffe: Done

[18/04/2020, 10:55:17] ~ Gillian Russell: 🙏

[18/04/2020, 19:09:40] ~ Aidan: Gregor/Fiona, there's a draft letter from cabinet secretary on testing due to go today if poss. Got an outstanding clinical issue re testing and being as clear as possible about when residents and staff should seek testing. Can you check in box. Sorry!

[18/04/2020, 19:12:35] ~ Fiona: No worries - will have a look Aidan

[18/04/2020, 19:16:07] ~ Fiona: Aidan- what time did it come in? F

[18/04/2020, 19:26:00] ~ Annabel Sutcliffe: Should be coming any minute from covid19 operational testing Fiona, thank you very much

[18/04/2020, 19:29:24] ~ Fiona: Thanks Annabel

[18/04/2020, 20:31:04] ~ Fiona: Annabel- I'm just wondering if the paper has gone to the CNO COVID box? I don't have access to that- my personal e-mail would be the one please? Thanks

[18/04/2020, 21:02:28] ~ Fiona: Commented Annabel and happy to discuss

[19/04/2020, 09:36:36] ~ Gillian Russell: We have been asked for urgent briefing for CSH re a pre record for STV on recruitment and returnees. Can I check whether she is doing briefing today. Asking to understand what else needs to be commissioned

[19/04/2020, 09:56:26] Jason Leitch: She is. With me

[19/04/2020, 10:56:17] ~ Richard Foggo: Sorry I missed director call. Let me know if anything urgent for me or Donna.

[19/04/2020, 11:01:44] ~ Fiona: Nothing urgent Richard- we agreed to talk through some of the analysis to underpin decisions for recovery- Carol was on the call and JC talked about NHS recovery.

[19/04/2020, 12:44:04] ~ Elinor Mitchell: Gregor - know you are not working today but cab sec about to phone you are whether to not we offer tests to non-covid people in discharge (either to care home or back home) to improve assurance. Guidance also says we should offer tests if available. Clinical cell not keen to shift view that 14 day isolation is better (I'm suggesting both). Sorry - but forwarned is forarmed

[19/04/2020, 12:50:39] Gregor Smith: I've just spoken to Nicola about it. There is a clinical call about to take place to discuss this. Why the push now? This is unhelpful.

[19/04/2020, 17:37:10] ~ Donna: Elinor, derek has emailed about the care home advice and has suggested some options. I've also added in attempt to be helpful. Are your team writing the advice? Just want to check that we know who's doing what.let me know and happy to help. Thanks

[19/04/2020, 18:00:51] ~ Elinor Mitchell: Hi all - it's a clinical lead of course. But fm and cab sec are keen to be able to provide assurance to the care home sector (in particular) and say that we will test before admission. I understand that the more important aspect is self isolation which we are already working on. And Gregor - I'm not sure there is a new push. My sense is that from the FMs perspective this was something we thought we might move to following the deep dive

[19/04/2020, 18:03:51] ~ Donna: Ok. who's actually writing it? There are wider options that may/may not involve testing in line with the clinical advice and will need thought from community care. Derek's note sets them out. Can you let me know? Thanks

[19/04/2020, 18:06:52] ~ Elinor Mitchell: I don't know Donna sorry. I'm not writing it (nor is anyone from my directorate). I'm finding it hard to know who is leading. And more than happy to help if I can

[19/04/2020, 18:12:15] Gregor Smith: We have an advisory group structure to provide evidence based advice on this. I understand the concern and the feeling some will have on need to do something. Clinicians have been consistent in emphasising the importance of isolation on admission due to marked limitations of test. Any reliance on testing would be false reassurance. Andrew Morris and his group are considering this and the new task force can take any advice and contextualise /operationalise it. If there's a political will to move in advance of this then so be it.

[19/04/2020, 18:14:23] ~ Fiona: I'm not sure what we are talking about with regards to guidance? Elinor your team are leading with an overarching plan? There will be the task force that will feed advice into your team for onwards transmission of instruction/advice (although that is only my view we haven't all agreed that). There is the extant work in admissions etc to Care Homes. I think there are a number of strands that need to come together. The science and evidence is emerging and not written in stone. We are closing our hospital wards where we have outbreaks -I have asked my team to find out what we are doing with Care Homes.

I think we need to be more confident that we are not introducing infection via a new resident. At the moment that is isolation for 14 days- which we should be doing anyway with social distancing

Gregor - I wonder is there is a compromise of developing a Care Home bundle that looks at testing on admission as well as isolation, an intervention with regards to IPC as well as staffing to support social distancing. I am also concerned about staff transmission. Happy to discuss

[19/04/2020, 18:21:48] ~ Donna: I think it's essentially about care homes in the round rather than testing? CMO clinical cell has provided advice that says testing isn't the answer and isolation is. The options that Derek and I have suggested include step- down/ step in care for isolation which you'll want to think about. Assume the pressure is for her to be able to be definitive on Tuesday when she wants to say more about the care homes action plan? Assume testing is an action she wants to announce? And clinical cell disagrees. We need to offer an alternative that provides reassurance. can you get graham Ellis to look at some of the options? If there is a worry about introducing risk into vulnerable popns, can we avoid that? Isolate elsewhere before admission? With clinical standard infection control rather than dependent on care homes? Staff transmission still a problem but removes one source of risk. FM/Cab sec Advice is needed tonight or tmrw morning so need to make sure advice is rounded with the rest of the work on the action plan. So think it needs to be considered in that context. Can you give some thought to this Elinor? Thanks

[19/04/2020, 18:24:58] ~ Donna: How many people are we talking about for new / returning entrants to care homes?

[19/04/2020, 18:25:40] Gregor Smith: The clinical cell won't say "don't test" - I think the advice will be more permissive than that. They just can't recommend it based on current evidence. The rapid review Andrew's group are doing may provide new evidence, but I suspect not in these tight timescales. It may form part of a broader bundle as Fiona describes, but that was always the aim of the task force - identify the high impact interventions that should be done with consistency across the country.

[19/04/2020, 18:31:42] ~ Donna: This is needed for tonight/tomorrow/Tuesday in different phases. Worried we'll get into a position where we're doing unnecessary testing- not clinically recommended and also we have capacity to do this now but may not in the future. Is there another way to do this that protects care home residents? Sorry to go on, but conscious that Elinor has been commissioned for 2pm tmrw and we have a linked and similar request for fm. Don't think we can wait for the task force to consider unless they're doing it tmrw morning.

[19/04/2020, 18:33:52] ~ Fiona: If we wrap up- the clinical task force and include testing - but also wider measures to be implemented and quickly evaluated it may divert test everybody. So instructing the clinical task force to advise on high impact actions, including adding testing to the measures we have in place ?

Don't know numbers being admitted to CHs but owners will want to fill the beds as the deaths will have left them short of income - we need localities to be careful in filling large volumes of empty beds-

possibly should say until until clear of CV no new admissions - would need better IPC advice than my random thoughts.

Will we ask Graham and others to create a bundle of work - that includes testing in a couple of CHs testing - as well as other measures ?

[19/04/2020, 18:39:33] Gregor Smith: I think this is the way to go - an admissions bundle - whether from community or hospital - that may have testing as part of it but doesn't rely on it. I've asked the question to cab sec as she's contacted me again separately.

[19/04/2020, 18:40:25] ~ Donna: I think she'll ask for it by Tuesday.

[19/04/2020, 18:42:09] ~ Donna: And who has the "pen" on this. Small bit of it currently sitting with derek g, but he can't do the totality. Will frank Strang liaise with the task force? Let me know what you think? Thanks

[19/04/2020, 18:49:18] ~ Annabel Sutcliffe: Is this same commission by 2pm tomorrow to update on testing including testing of all patients being discharged to care homes/ care at home? Agree with comments above re testing not being sole thing. An anticipating that at some point we may have to choose between social care residents testing and test, trace and isolate depending on demand.

[19/04/2020, 18:50:45] ~ Donna: Yes to commission and to the points you make re contingent risk.

[19/04/2020, 19:01:01] ~ Donna: I think the actual question is what will keep care home residents safe? Yes to the Admissions bundle but we will get bounced into testing as our solution if we don't have a wider view which isn't helpful for the reasons outlined above and won't necessarily improve safety's Can this be picked up as part of the action plan Elinor?

[19/04/2020, 19:41:54] Gregor Smith: Cab Sec has agreed to the task force developing an admissions bundle that will improve IPC and safe transition of patients into care home environment. Testing may feature as part of that.

[19/04/2020, 19:44:34] Jason Leitch: Well done Gregor. It may get taken away from her. Liz was pretty determined. I did my very best.

[19/04/2020, 19:45:09] Jason Leitch: This message was deleted.

[19/04/2020, 19:45:20] Jason Leitch: The 4-country distinctions are getting harder

[19/04/2020, 19:46:12] ~ Donna: Well done Gregor. 🙌🙌

[19/04/2020, 19:55:46] ~ Elinor Mitchell: Yes well done Gregor. I totally agree we need to balance the science (isolation is the most important thing - which care homes are currently doing although they are working on a 7 day isolation plan rather than 14 days which we need to move on). I think what was suggested was something on top of that to help with assurance for a sector that is really under the cosh. Anyway - sure we will pick up tomorrow

[20/04/2020, 11:05:05] Caroline Lamb: Donna, can you send me the latest TTI proposal from PHS.

Trying to get a deep dive from Digital perspective sorted either tomorrow or Wednesday.

[20/04/2020, 11:09:55] ~ Donna: Yes will do

[20/04/2020, 16:00:43] Jason Leitch: Sgorr call number please someone?

[20/04/2020, 16:00:53] Jason Leitch: I keep forgetting it's not in the diary entry

[20/04/2020, 16:02:06] ~ Donna: image omitted

[21/04/2020, 09:32:49] ~ Donna: Sorry sent that photo to the wrong WhatsApp! Don't grass me for info security.

[21/04/2020, 09:33:09] ~ Donna: Annabel is anyone coming on the SCG group to cover testing?

[21/04/2020, 09:34:03] ~ Donna: Brilliant you're on.

[21/04/2020, 16:37:30] Gregor Smith: Is the pre-meet call still going ahead? All I'm getting is muzak....

[21/04/2020, 16:37:50] ~ Donna: I think I'll join as chair

[21/04/2020, 20:59:57] ~ Richard Foggo: Cab Sec would like to turn tomorrow's Portfolio call into a zoom video call. She would like to see us. Private Office arranging.

[21/04/2020, 21:02:13] ~ pckette1960: Does that mean I've got to wear a tie? Don't know where I put it....

[21/04/2020, 21:02:32] ~ Gillian Russell: Do we have zoom?

[21/04/2020, 21:10:27] ~ Fiona: I use it for other stuff- easy to download the app

[21/04/2020, 21:11:25] ~ Gillian Russell: I have at home but not used through work. Will check out

[21/04/2020, 21:21:13] Jason Leitch: Elinor and Paul. I just promised on the Nine that someone would personally contact the Gibson Care Home that's been on the BBC News all day saying they haven't had PPE and correct that. Can someone please do that?? Thank you.

[21/04/2020, 21:21:26] Jason Leitch: I said tomorrow. Not tonight.

[22/04/2020, 08:22:35] ~ Elinor Mitchell: On it Jason
 [22/04/2020, 08:28:13] Jason Leitch: 👍
 [22/04/2020, 08:33:29] ~ Elinor Mitchell: Can get through itecs - my office being trying for some time - but def allowed if the work is covid related. So I think we count!!
 [22/04/2020, 15:06:39] ~ Richard McCallum: Andy is taken roll
 [22/04/2020, 15:06:47] ~ Richard McCallum: Call starting now
 [23/04/2020, 10:17:10] ~ Donna: I'm trying a new thing, so let's see if this works. Rather than go into it all at 10am meeting. I might have to set up another chat that includes Sean and Aidan - or they can join this?
 Hot issues from private office this morning:
 Paul - cab sec worried about the Dfm submission - she will speak to You again today to stress the message that it's HSC first and other services second. Think you know this and it's tricky but just so you are prepared. She's also worried about turnaround for the ppe mailbox. Andy In PO previously offered staff to help but they weren't used? He will go back to them and ask them to help to resolve some of your staffing issues. Andy would like a note of the turnaround times for Corres please.
 Fiona *Gregor* - she is worried about the issuing of new IPC guidance from NHI causing further confusion. I think cmo office are on this but she has asked for urgent advice this morning. Might need you to look at.
 Gillian - she is wondering about the handling of deaths of hsc workers - how should she and fm respond. I said this was tricky (explained complexity) and you were thinking about. I think you said you'd having something with her later this week?
 Thanks
 [23/04/2020, 10:18:54] ~ Richard Foggo: This is excellent. Really cuts through the guesswork.
 [23/04/2020, 10:19:04] ~ Gillian Russell: Perfect!
 [23/04/2020, 10:25:15] ~ Fiona: Thanks re IPC guidance - think sorted

Also good to know what got issues from PO are

[23/04/2020, 10:25:44] ~ Donna: I think she is emailing from the car so might short circuit some stuff?
 [23/04/2020, 10:27:16] ~ Gillian Russell: Deaths are not sorted. Very tricky what Ministers do and GMB now calling for statutory FAls. We are further exploring and note need to get advice by tomorrow
 [23/04/2020, 10:30:47] Jason Leitch: Donna, that's VERY helpful
 [23/04/2020, 10:31:25] Jason Leitch: I have bad music. Is someone joining as chair?????
 [23/04/2020, 10:31:51] ~ Fiona: Gillian an option for staff deaths is that we carry out SAER (or equivalent) - happy to contribute to the note of helpful F
 [23/04/2020, 10:37:19] ~ Gillian Russell: Thanks Fiona
 [23/04/2020, 10:38:45] ~ Donna: On deaths I explained the myriad of issues without going into too much detail. It was mainly about handling- what they should do, but she'll def want to know the points about the unions.
 [23/04/2020, 10:42:39] ~ Donna: Am I on the right call? Still hearing music.....
 [23/04/2020, 10:44:08] ~ Gillian Russell: No. We are there.
 [23/04/2020, 10:44:15] ~ Annabel Sutcliffe: Its started. I&S
 [23/04/2020, 10:44:45] ~ Gillian Russell: Beat me to photo the screen!
 [23/04/2020, 12:26:03] ~ Donna: Feedback from cab sec on morning sitrep for info. Have asked the hub to follow up with your teams:
 Annabel: pipeline of key workers - do we know the the breakdown of nhs and social care workers being tested? Are we likely to get that?
 Paul Elinor - did the submission go on the functioning and improvement of hubs? Andy not seen it? Says in sit rep they'd have it.
 fiona infection control in hospitals - wants to see the detail. Does this include work to get red/green zones in place?
 Me - get media info into sitrep - I am doing.
 [23/04/2020, 12:32:03] ~ pcackette1960: Submission on the hubs going up in the next 5 minutes
 [23/04/2020, 12:32:36] ~ Donna: Magic thanks
 [23/04/2020, 12:33:00] Jason Leitch: There's a further ask from Liz about work and 'guidance' about public face coverings. Who will provide?
 [23/04/2020, 13:06:04] ~ Fiona: Public health?

[23/04/2020, 13:10:52] Jason Leitch: I think so.

[23/04/2020, 13:10:58] Jason Leitch: It's a tiny copy list

[23/04/2020, 13:36:08] ~ Donna: Andrew Riley has come back with a view to gregor and others.

[23/04/2020, 14:08:47] Gregor Smith: She now wants this guidance for face coverings by later this afternoon. Expecting a No10 announcement.

[23/04/2020, 14:14:07] ~ Elinor Mitchell: So Gregor will you put this advice up once you're happy with it?

[23/04/2020, 15:00:52] Gregor Smith: Yes - but I've gone back to the small group again because I'm not clear with whom this sits?

[23/04/2020, 15:02:39] Jason Leitch: No one is clear. I think it's Liz Sadler in population health in consultation with PHS and us

[23/04/2020, 15:06:29] ~ Richard Foggo: Email 14:02 from [NR] in me and Donna's team. She has picked up. Need to check she knows deadline.

[23/04/2020, 15:16:32] Jason Leitch: 🤔

[23/04/2020, 15:16:48] Jason Leitch: "NCD makes U turn on masks"

[23/04/2020, 15:17:10] ~ Fiona: 😂😂

[23/04/2020, 15:18:01] Jason Leitch: 🤔

[23/04/2020, 15:41:36] Gregor Smith: Not masks.... face coverings....

[23/04/2020, 16:24:06] Jason Leitch: Of course. You're doing that media for the next five days!!!

[23/04/2020, 16:27:23] ~ Annabel Sutcliffe: Donna, we gave figs today but I need to check them as dont look right. Were getting these twice weekly from now

[23/04/2020, 17:36:41] ~ Elinor Mitchell: Directors daily updates moving to 9am as discussed this morning at pag

[24/04/2020, 08:50:11] ~ Donna: I'm speaking to ken Thomson at 9, but will call into directors once that's finished.

[24/04/2020, 09:31:55] ~ Richard Foggo: Can I make a plea that unless it is necessary that colleagues don't use speaker phones. As mentioned on Directors call, ET all got good quality headphones with decent mic. The poor sound quality of this call really is an issue.

[24/04/2020, 10:33:59] ~ Donna: Hot issues from po today:

[NR] * C - Ppe complaints into the mailbox for social care. She's getting a lot of grief on social media about this and it's getting her down. I emailed Jamie and Paul about this yesterday. Can we make sure this is adequately staffed and rapid please. Maybe you can pick up when you discuss ppe today.

Paul she wants to have a zoom call with oppositions spokespeople on Monday about ppe. She will want absolute certainty about progress and action by Sunday.

Other stuff on tti and briefing that I'll pick up.

Thanks

[24/04/2020, 10:40:39] ~ pckette1960: Thanks Donna. A note to her on the first point is under prep but I will accelerate that.

Second point noted and understood

[24/04/2020, 13:13:51] ~ Elinor Mitchell: I know [NR] is who is complaining about volume but who does that team sit under?

[24/04/2020, 13:18:38] ~ pckette1960: It was in John C's Directorate but when this became the hot issue it is I got involved to apply diagnosis and additional resource and suggested bringing into PPE Dir - a bit like what we between us agreed on social care.

Not worked out yet which DD will lead re that

[25/04/2020, 12:00:46] Jason Leitch: <https://www.bmj.com/content/369/bmj.m1435/rr-43>

[25/04/2020, 12:55:45] ~ pckette1960: Noone will be surprised that my attention was caught by the point about risks from unmodelled impacts on the supply chain

[25/04/2020, 13:07:51] Jason Leitch: Yep.

[26/04/2020, 09:48:51] ~ Annabel Sutcliffe: Richard/ donna/ john Have we picked up that from tomorrow, england are testing all non elective patients admitted into healthcare settings that require a bed. Symptomatic and asymptomatic

[26/04/2020, 11:03:51] ~ Donna: Will check with the team. We should seek clinical advice on this as it's not currently part of the plan. Can we add Nicola to this group please - don't want to pester Gregor if he's off. I've not got her number. Thanks

[26/04/2020, 11:04:52] Jason Leitch: Contact card omitted

[26/04/2020, 11:05:05] Jason Leitch: Elinor has to add. She's admin..

[26/04/2020, 11:10:57] ~ Donna: checked- Non elective admissions to hospital didn't appear in the Quint paper as something in the pipe line or listed as a likely next call on testing. Next area was expected to be asymptomatic staff in care facilities. Not sure where this has come from.

[26/04/2020, 11:11:40] Jason Leitch: Nope. Me neither....

[26/04/2020, 11:14:45] ~ Donna: Are you seeing that in the media Annabel or from other sources?

[26/04/2020, 11:15:11] Jason Leitch: Cab Sec misunderstood the testing question on Sunday politics. Wrong answer.

[26/04/2020, 11:17:52] John Connaghan: In any case why would we only test non elective? What about daycase admissions? What about Diagnostics etc etc

[26/04/2020, 11:22:55] ~ Donna: Sorry John possibly my words- it would be good to understand the English proposition to know what they're covering. If it is "non-elective admissions that need a bed" that's v wide. Once Annabel is off the key workers call she's leading we can find out more. Thanks

[26/04/2020, 11:22:59] ~ Nicola Steedman: ~ Elinor Mitchell added ~ Nicola Steedman

[26/04/2020, 11:23:30] ~ Elinor Mitchell: Welcome Nicola

[26/04/2020, 11:23:40] ~ Nicola Steedman: Thank you! 😊

[26/04/2020, 11:23:41] Jason Leitch: 🙄

[26/04/2020, 11:23:48] ~ Donna: 🙄🙄🙄

[26/04/2020, 11:26:28] ~ Donna: Hi Nicola, welcome. Sadly this group is the work one- the chat one is separate. We will add you to the other one too. Quick question Annabel posed. "___Have we picked up that from tomorrow, england are testing all non elective patients admitted into healthcare settings that require a bed. Symptomatic and asymptomatic". _ checked with our team and they say it's not in any of the quint papers. Can you shine any light? Thanks Donna

[26/04/2020, 11:31:28] ~ Nicola Steedman: I've responded to Annabel and I'll forward it on to you. She and I then also had a chat on the phone about what we can say. I'll try to scribble something quickly to you on this.

[26/04/2020, 11:31:32] ~ Annabel Sutcliffe: Nicola, this predates our conversation.

[26/04/2020, 11:36:41] Gregor Smith: Just to note this hasn't come up on any CMO conversations.

Separately, but linked, I've asked Tom Evans (Chair of our clinical guidance cell and also ACDP) to do a rapid review paper on evidence for asymptomatic / pre-symptomatic transmission and testing. This will go to SAG for consideration. I've also asked for it to be included on next UK CMO agenda (may need to go to NERVTAG for definitive position)

[26/04/2020, 11:39:10] ~ Nicola Steedman: It came up on last Quint and was mentioned on SAGE last week- hence my "heads up" email on Thursday which went to at least some of us. Got a plan as to what to say I think but depends on whether Ministers will like it or not...

[27/04/2020, 10:39:35] ~ Donna: Daily update from PO:

All- tomorrows statement- this is out to you just now for comment on what we can say, particularly on the future. Given Dfm comments this needs to build on what we have done so far. Grateful for additions on that - virtual consultation, near me etc.

Paul- PPE call with the opposition- think she has everything she needs but stand ready as she's just come in.

Gillian- Laundry- wants an update on where we are but you have this in hand already.

Elinor- care homes legislation- Alison has in hand.

*Elinor/JC *- Dph engagement in care homes- in sit rep last night that we've had 11/14 responses from boards, with one due today. She is looking for detail on the responses.

Gregor- you'll have seen traffic from Ken/Dominic on the Cabinet paper/deep dive/publication this week on living with the virus. Evidence base is sketchy at the moment. I've asked cmo sag to look at the propositions in it today. More likely that we'll get a set of principles for them rather than specifics on garden centres etc. But you never know. I've told private office the story, but Can you let cab sec know when you see her that this is in the offing and we'll provide briefing after the cmo sag today to prepare her to contribute at cabinet please? It's the first thing FM will ask- what's the evidence base...

Thanks

[27/04/2020, 11:42:36] Gregor Smith: FM not in a good place today - this is likely to have implications for deep dive later. Two particular frustrations - what she perceived as lack of progress in utilising all our testing capacity and lack of Scottish guidance she asked for on use of face-coverings.

[27/04/2020, 11:51:19] ~ Donna: Thanks Gregor, we're talking about the testing stuff now.

[27/04/2020, 11:51:42] Jason Leitch: 3300 people got tests in SCOTLAND yesterday....

[27/04/2020, 11:55:37] ~ Donna: All- the draft cab sec statement is in your inboxes now. Can you have a look and respond before 2 please. Important that this is good and up to the minute. Thanks

[27/04/2020, 11:59:19] Jason Leitch: I don't have it

[27/04/2020, 11:59:28] Jason Leitch: Or I missed it

[27/04/2020, 12:00:01] ~ Donna: Ok I'll look

[27/04/2020, 12:15:15] ~ Annabel Sutcliffe: It's not 3300 as i dont know what the nhs level was as theyre lower on a sunday

[27/04/2020, 12:15:59] Jason Leitch: Ok...

[27/04/2020, 14:01:28] ~ Donna: Annabel, we are likely to get asked about the work on the 4 areas suggested for more testing- o75s and the other . Fm will ask. We spoke about o75s to Jim this morning- the team are checking that he has a story to tell by 2.30 as fm will ask about the others too.

[27/04/2020, 14:02:46] ~ Elinor Mitchell: What are they?

[27/04/2020, 14:03:32] ~ Donna: "Over 75s", "all hospital admissions" "point prevalence studies to track HAI" and "options for widening care home testing - potentially to include mildly symptomatic or asymptomatic staff"

[27/04/2020, 14:05:58] ~ Nicola Steedman: I've responded briefly to Cab sec on these this morning too- Annabel- you're coped in.

[27/04/2020, 14:07:38] Gregor Smith: I think we'll need more than the response that went up. They're more interested in when it's starting - feel there's been no progress.

[27/04/2020, 14:14:11] ~ Aidan: Hi, can Frank S and I see care homes related stuff too. Good luck for later today!

[27/04/2020, 14:14:32] ~ Nicola Steedman: Can start over 75s now I think if wanted.

[27/04/2020, 14:18:52] ~ Fiona: Gregor- the information Tom summarised on transmission by asymptomatic people should play in - I think to Care Home staff - clinical group are actively considering this I understand

[27/04/2020, 14:34:51] ~ Elinor Mitchell: So - on over 75s. Can we say we start Tomorrow/Thursday? Who is working up comms around that? What is a reasonable timeframe?

[27/04/2020, 14:35:28] ~ Fiona: Over 75s with symptoms?

[27/04/2020, 14:36:13] ~ Elinor Mitchell: Same for hospital admissions - can we say we are starting this this week too

[27/04/2020, 14:38:44] ~ Fiona: Yes- we would need info out and spread - so we could start from tomorrow - with full compliance by Friday at the latest? Letter out to Boards- hospital easier than primary care. Hospital could be by tomorrow. Can we cope capacity wise?

[27/04/2020, 14:40:34] ~ Nicola Steedman: Jim from HPS to confirm but I would say over 75s admissions to hospital start now. Need to see after that how much capacity we are left with. Next step all care home staff if enough capacity but needs view from the rapid clinical group re: how often to test, and whether all homes or only those with suspected or confirmed case(s)

[27/04/2020, 14:48:10] ~ Fiona: So if we are to meet the target we need to take the tests over 75s - will that give us enough tests tomorrow? We may not admit enough over 75s?

[27/04/2020, 17:04:13] ~ Elinor Mitchell: Fm said at lunchtime that we are issuing new guidance on face masks for public tomorrow (or at least that's what Cosla told me). Where is that advice sitting?

[27/04/2020, 17:04:53] ~ Richard Foggo: Daniel Kleinberg

[27/04/2020, 17:05:35] ~ Nicola Steedman: Yes- our guidance is ready pretty much and 4 CMOs discussing tonight.

[27/04/2020, 19:12:53] ~ Elinor Mitchell: Ah ok. Thanks. I'll share what we have so far

[27/04/2020, 19:22:41] ~ Nicola Steedman: [NR] about to send to Cab Sec and FM I think.

[27/04/2020, 19:23:20] ~ Fiona: Was there anything from 4 country CMO meeting in this ?

[27/04/2020, 19:25:48] ~ pckette1960: Do we know if COSLA are engaged with on this today. The advice looks v short but the DFM was keen that a dialogue took place with them on the last guidance on non-health issues. Is he squared/sighted on this?

[28/04/2020, 05:22:12] ~ Elinor Mitchell: I don't think so. [NR] was unaware. I have sent her what I found in my inbox. I can speak to her later but not sure what the wider implications are?

[28/04/2020, 05:24:54] ~ Elinor Mitchell: And who would normally talk to Cosla about this?

[28/04/2020, 07:20:02] ~ pckette1960: I've seen your email. There is no normal yet here other than the

desire to engage after the risk of industrial unrest due to worries about earlier guidance. I can take up with Alison Cumming to jointly put some process around this to formalise and ensure HSC awareness

[29/04/2020, 10:23:48] ~ Donna: I've sent something round on testing. Can you have a look and see what you think- capacity will be the issue.

[29/04/2020, 10:24:54] ~ Donna: Both in terms of testing, getting the bodies to do the testing and speed of it.

[29/04/2020, 10:29:23] ~ Donna: Also not sure what review periods etc would go in.

[29/04/2020, 10:58:25] ~ Nicola Steedman: Yep- I've sent some comments on it.

[29/04/2020, 11:01:22] ~ Donna: Thanks all, really helpful. Gregor and I spoke- he'll talk through the approach with cab sec and fm at 11 today. We will need to give them a paper today that sets this out. I'll have another go at it and recirculate for comments- can you please give me track changes on the document when I send? I'll need help with the clinical bits. Thanks

[29/04/2020, 11:40:06] Gregor Smith: Well received by both FM and Cab Sec - latter keen to talk through at portfolio today with view to paper going to FM at end of day.

[29/04/2020, 11:41:45] Gregor Smith: FM now more circumspect about publishing DFM paper tomorrow - long chat about this and whether too fast (perm sec and I also caught up about this yesterday) may get pushed out to next week.

[29/04/2020, 11:46:38] ~ Donna: Brilliant well done Gregor. I'll get something round shortly. And interesting re the Dfm paper.

[29/04/2020, 12:16:17] Jason Leitch: Well done indeed....on both counts..

[29/04/2020, 14:19:21] ~ Donna: Richard do you want to add the bit about the group. I haven't added anything about it but it makes sense

[29/04/2020, 14:27:21] ~ Richard Foggo: Ok

[29/04/2020, 15:47:05] ~ Richard Foggo: I have sent DFM document round Directors. Deep Dive on it at 16:00

[29/04/2020, 15:49:44] ~ Fiona: Thanks Richard- will it change? Unlikely to offer anything sensible in 10 minutes

[30/04/2020, 14:54:25] ~ Donna: Hi I'm advance of the fm meeting- you'll have seen fm comments. Gregor/ Nicola, can you pick up on the points on clinical advice and scoping pls. Annabel can you pick up on the points on operational delivery and the specific comment on the numbers pls. Elinor are you present or are you leading Gregor?

[30/04/2020, 15:01:33] Gregor Smith: Still with DFM

[30/04/2020, 15:02:49] ~ Nicola Steedman: I'm chairing a meeting

[30/04/2020, 15:15:45] ~ Donna: Gregor are you on this call yet?

[30/04/2020, 15:16:59] ~ Elinor Mitchell: I'm listening in now.

[30/04/2020, 15:19:19] ~ Nicola Steedman: I'm not down to attend this meeting I don't think- I'm chairing DPH until 330 or 4pm...

[30/04/2020, 15:19:34] ~ Donna: It's ok Gregor is on

[30/04/2020, 17:26:20] ~ Elinor Mitchell: Hi Donna - you joining the call?

[30/04/2020, 17:27:57] ~ Donna: I'm on now- sorry didn't know it was happening

[30/04/2020, 17:28:25] Jason Leitch: I thought it was cancelled?

[30/04/2020, 17:28:40] Gregor Smith: It's another testing one.

[30/04/2020, 17:28:53] Jason Leitch: Oh....good...I'm busy....

[30/04/2020, 18:36:46] John Connaghan: Delighted to say we have roped **NR** and her team into being Operational lead at CEO level for Testing as we match capacity to Intended groups.👍

[30/04/2020, 18:37:12] ~ Fiona: Good stuff

[30/04/2020, 18:42:01] ~ Annabel Sutcliffe: Hi Fiona and Gillian. Theres an urgent ask around worker numbers and training requirements (if need new people), how to train staff on care homes. Grateful if you could.pick up!

[30/04/2020, 18:42:37] ~ Fiona: AnnabelA will have a look

[30/04/2020, 18:42:48] ~ Annabel Sutcliffe: Brilliant news John!

[30/04/2020, 18:43:02] ~ Donna: 👍👍 good news John

[30/04/2020, 18:43:41] ~ Annabel Sutcliffe: Thanks fiona!

[30/04/2020, 18:54:38] ~ Gillian Russell: Fiona/ Annabel

There have been a lot of e mail exchanges. Do we have an agreed approach as to who will deploy to train care staff to take samples if that is the approach that is going to be taken?

Is it HB staff and can this be made to work at local level? And from when? Do we know numbers that will be required to do this? Will it be dealt with by a further letter to CEOs?

Fiona- I know PH Directors were concerned about people going into homes so how would this set of issues be dealt with? Is it for your re infection?

There is also the issue of how staff that then have to isolate in homes are replaced. I do not have an answer to this and I know that the whole data set in relation to care homes is undeveloped. I think Frank is leading on this. It must be a risk that testing will accelerate staff absence in a sector which is already fragile.

[30/04/2020, 18:56:26] ~ Fiona: Thanks Gillian - will e-mail response.

Annabel - are the numbers needed so you have a sense of capacity? I'll explain my assumptions and thinking about this along with some emergent thinking that should change practice

[30/04/2020, 18:58:22] ~ Fiona: Has Frank got the numbers of homes yet?

[30/04/2020, 19:14:56] ~ Gillian Russell: Just to add when we spoke to PHS on Monday on TTI they were not sure of their model. I appreciate this is slightly different but have PHS progressed on that operational model?

[30/04/2020, 19:23:51] John Connaghan: image omitted

[30/04/2020, 19:24:12] John Connaghan: Revolt down south

[30/04/2020, 19:25:45] ~ Fiona: Have replied- think we just need a breakdown of how many homes have outbreaks- we should assume this will be a reducing number as time goes on. Happy to help if needed - the numbers Sean sent are comparable with my workings - with additions for homes with outbreaks

[30/04/2020, 19:27:12] ~ Nicola Steedman: Yes, it's current outbreaks we need to know in terms of numbers of homes.

[30/04/2020, 19:36:47] ~ Fiona: Annabel- have given you a couple of options for figures - let me know if you need anything else. Fiona

[30/04/2020, 19:37:39] ~ Gillian Russell: Fiona

I thought Annabel was asking us for a staff delivery model to carry out the tests in care homes or train the staff to carry out the tests? Maybe I have misunderstood that.

[30/04/2020, 19:41:53] ~ Fiona: Ah- in which case care home staff should be able to take tests - sorry for confusing matters Annabel. That may be some additional hours in each care home- however in outbreak homes there should be additional staff anyway- have e-mailed a simpler answer. Again let me know if you need anything else from me F

[30/04/2020, 19:47:07] ~ Gillian Russell: Fiona

The cumulative number of tests is still important as that goes to deliver ability.

Would there need to be training of staff and how might we carry that out?

[30/04/2020, 19:50:27] ~ Gillian Russell: Fiona

David Miller has been doing some work to understand local recruitment. This is now about 8000 across Scotland with quite a few people from portal now sitting on banks. I have asked what more we can do to understand this. On portal. There is not currently demand coming from Boards. NES have people processed.

[30/04/2020, 19:58:50] ~ Elinor Mitchell: Frank sent care homes etc numbers at 19.14

[30/04/2020, 19:59:14] ~ Fiona: Thanks Gillian- I don't think Boards or Care Homes are sighted on additional needs within Care Homes where there are outbreaks- and I am uneasy with people saying we have too many staff. Over next week or so we should see homes need additional staff so hopefully that will come through.

There is a video and instruction on the HPS website so the nurse/senior carer should be able to use that- very short time for familiarisation - so that should be absorbed or an extra hour's training per home- so at the margins. It may need a senior practitioner to oversee- the training in some homes - but again at the margins and should be easy enough to organise

[30/04/2020, 20:00:41] ~ Elinor Mitchell: I was at the rapid action group this morning. There is a lot of activity going on in communities around this which dph are leading. This is about increasing.

Commitment and upping pace and focus I think

[30/04/2020, 20:01:43] ~ Donna: I am doing a table on tests/care home numbers with cases & staff/care

home numbers with cases and staff. I'll comeback with a draft shortly.

[30/04/2020, 20:02:10] ~ Elinor Mitchell: Fab thanks Donna - it's been a tough shift today

[30/04/2020, 20:04:12] ~ Gillian Russell: I would not want to think there are too many staff. I have sent on spreadsheet from David. We can pursue more through this route.

[30/04/2020, 20:04:27] ~ Fiona: Thanks Gillian

[30/04/2020, 20:51:42] ~ Donna: Elinor/John/Annabel/Gregor/nicola have sent something over - can you have a quick look please. Ideally right away.... sorry

[30/04/2020, 20:54:18] ~ Donna: Comments particularly on timescales for catch up- too ambitious??

[30/04/2020, 21:01:11] ~ Fiona: Donna- happy to have a look (or not as case may be 😊😊)

[30/04/2020, 21:16:54] ~ Annabel Sutcliffe: Looking at it now

[30/04/2020, 21:21:25] ~ Donna: Any thoughts? I need to get this away soon.

[30/04/2020, 21:23:03] ~ Fiona: Donna- I don't have it

[30/04/2020, 21:23:24] ~ Donna: Fiona will send

[30/04/2020, 21:23:30] ~ Fiona: 🙌

[30/04/2020, 21:23:48] ~ Elinor Mitchell: Sent

[30/04/2020, 21:23:49] ~ Fiona: To Fiona not CNOD COVID pls

[30/04/2020, 21:24:12] ~ Nicola Steedman: I'm looking at it now...

[30/04/2020, 21:32:30] ~ Elinor Mitchell: So we really think we can do all outbreak testing in 2-3 weeks?

And what about surveillance testing? Think we need to be clear about deliverability before this goes up - conscious we need to see lab capacity tables too

[30/04/2020, 21:33:31] ~ Fiona: The taking of swabs should definitely be delivered - not sure if we have the capacity?

[30/04/2020, 21:39:42] ~ Fiona: Donna- have replied - thanks Fiona

[30/04/2020, 21:42:51] ~ Donna: Thanks Fiona, will add your changes. I don't know Elinor- I made those tables myself, so don't know if a lab capacity one exists.

[30/04/2020, 21:46:10] ~ Fiona: The tests could be scheduled - so probably having an average number of swabs over the week would probably be enough- although we would have to be careful of peaks.

Annabel- when will our capacity increase last 4K?

[30/04/2020, 21:47:09] Gregor Smith: I'll take a look but if Nicola is ok I'm comfortable. She's closer to this.

[30/04/2020, 21:49:16] ~ Elinor Mitchell: Well even on what we know - 10k a day test capacity from 2 weeks and numbers from Frank of 49k for outbreak testing (and testing weekly). Plus all the other test groups - and that's before we start on surveillance. I agree with Nicola this isn't a catch up programme so we are looking at approx 5k tests a day (max) available to do 49k testing on outbreaks on a rolling weekly programme with more being added in weekly. Hard to see this ever finishing! But it's many months of work

[30/04/2020, 21:52:42] ~ Elinor Mitchell: Annabel - do we have lab capability tables? Think that's critical to what goes up

[30/04/2020, 21:53:03] ~ Fiona: And on top of that will be patients with infections and whatever we decide for pre admission to hospital for elective surgery/cancer treatment

[30/04/2020, 22:43:45] ~ Annabel Sutcliffe: Donna, I need to refine numbers in your main doc, give me 5 mins

[30/04/2020, 22:45:09] ~ Donna: Ok- take your time- better you're happy with them. Can wait

[30/04/2020, 22:50:53] ~ Donna: Have redrafted and resent. Nicola has commented (thanks). Any more?

[30/04/2020, 22:51:07] ~ Donna: Thanks Elinor, got yours

[30/04/2020, 22:53:17] ~ Donna: Annabel if you want more time I can take your stuff out and we can submit separately? I think she said tmrw for the numbers was ok?

[30/04/2020, 22:55:41] ~ Nicola Steedman: I've one more comment, hold on... I spoke to Colin Ramsay about the ongoing outbreaks .

[30/04/2020, 22:57:48] ~ Donna: Ok great

[30/04/2020, 23:11:13] ~ Nicola Steedman: Done. Added in a paragraph.

[30/04/2020, 23:11:31] ~ Donna: Awesome thanks

[30/04/2020, 23:12:06] ~ Annabel Sutcliffe: Well done D!

[30/04/2020, 23:38:49] ~ Donna: Right I've sent it.

[30/04/2020, 23:43:01] ~ Nicola Steedman: 🍷

[01/05/2020, 12:02:47] ~ Donna: Anyone got NR number?

[01/05/2020, 12:04:17] ~ Donna: I need to ring her urgently about publishing the modelling as part of her board papers.

[01/05/2020, 12:07:11] ~ Annabel Sutcliffe: I&S

[01/05/2020, 12:07:20] ~ Donna: Magic thanks

[01/05/2020, 12:07:22] Gregor Smith: 🙏

[01/05/2020, 12:18:14] ~ Donna: Marginally better- it's a report by their dph rather than the actual modelling it would appear, but still contains the assumptions. It was then deleted off the fV website. It's the Mail on Sunday so probably won't come up today, but if they've got it others might too. Portraying it as a doom laden "secret report" and us hiding things from the public.

[01/05/2020, 12:27:12] ~ Donna: It does have the modelling assumptions in it, and as far as I know they're not in the public domain. Just in case you're asked Gregor.

[01/05/2020, 17:58:46] John Connaghan: Donna. In case we are asked I have been in touch directly with

NR Letter to follow. J

[01/05/2020, 17:59:49] John Connaghan: Caroline article in Guardian 250 first batch Chinese vents. All failed in England.

[01/05/2020, 18:07:58] ~ Elinor Mitchell: Jason. Where would I find the who report you were talking about earlier. Keen to read over the weekend thanks

[01/05/2020, 18:08:51] Caroline Lamb: Yes. We've provided lines on this. They were ordered through the U.K. procurement. We got sent 29. They were transport vents not full ICU. We held them centrally to test them. That didn't go well. At the same time we got reports of failures from England. We didn't distribute any of them. DoH have now recalled.

[01/05/2020, 18:09:55] Caroline Lamb: Doesn't fill me with confidence about the other Chinese orders (none of which have actually materialised yet). Current strategy is to push Draeger via Gov to Gov approach.

[01/05/2020, 18:12:47] ~ Elinor Mitchell: Hi all - John and I thought we might cancel tomorrow's director call. So if there is an urgent hot topic overnight then let's use this WhatsApp group to decide if we want to speak.

[01/05/2020, 18:14:05] Gregor Smith: 👍

[01/05/2020, 18:14:45] Caroline Lamb: 👍

[01/05/2020, 18:24:55] ~ Fiona: Fabulous - thanks

[01/05/2020, 18:26:46] Gregor Smith: Quick update on deep dive around R, modelling and exit this afternoon - went extremely well, huge credit to Roger H in particular and other SAG members. FM now looking to shape next exit paper around clarity on "what we're not doing, firm no change message for 7/5, but here are some things that we're looking at.." some worries that eng may try to bounce a decision on schools at cobra next week - publish ahead of this to try mitigate risk. Also publish TTI paper ahead of this (?monday).

[01/05/2020, 18:37:04] John Connaghan: Well done. Any views on limited restart of NHS?

[01/05/2020, 18:38:10] ~ Elinor Mitchell: Sounds like a great session Gregor

[01/05/2020, 18:40:02] ~ Nicola Steedman: Phew... sounds like a useful session in terms of getting the risks across which all the modelling is suggesting. Might temper the understandable wish to move too fast otherwise. Wish I'd been there to hear it myself!

[01/05/2020, 18:43:08] ~ Donna: It was really good. The CMO AG said in their advice to ministers earlier this that the nhs should restart (safely) ASAP. Needs consideration through the Sg decision making process ie cabinet though.

[01/05/2020, 18:45:33] ~ Fiona: 👍 well done all

[01/05/2020, 18:48:12] ~ Elinor Mitchell: Wish I'd been there too!

[01/05/2020, 18:51:04] ~ Richard Foggo: I thought the AG members were brilliant. Much needed input that was appreciated by FM/DFM.

[01/05/2020, 18:51:23] ~ Richard Foggo: Will I circulate the slides?

[01/05/2020, 18:53:04] John Connaghan: Folks. Text message from CabSec just in asking to pass on thanks for getting her through a tough week. J

[01/05/2020, 18:53:49] ~ Nicola Steedman: 😊

[01/05/2020, 18:55:16] ~ Annabel Sutcliffe: Yes please Richard, that would be great. Well done for a successful deep dive, they are to be savoured!

[01/05/2020, 19:02:28] ~ Richard Foggo: Sent

[01/05/2020, 20:07:36] Jason Leitch: Yes

[01/05/2020, 20:07:53] Jason Leitch: And restarting NHS crucial.

[01/05/2020, 20:07:57] Jason Leitch: Please

[01/05/2020, 20:08:11] Jason Leitch: Just even to shut down the Chronic pain brigade....

[01/05/2020, 20:20:56] John Connaghan: Heard you on the wireless on that topic You did well. J

[01/05/2020, 20:23:06] Jason Leitch: Thanks. Lol

[01/05/2020, 20:23:15] Jason Leitch: You can see why I want it restarted.

[02/05/2020, 09:38:15] Gregor Smith: Take it there are no hot issues for the call today? Or are we dialling in?

[02/05/2020, 09:43:59] ~ Fiona: I have none

[02/05/2020, 09:49:24] ~ Elinor Mitchell: None from me

[02/05/2020, 09:59:07] Jason Leitch: It feels weird not to speak for the first day in six weeks....but no....

[02/05/2020, 10:19:58] ~ Donna: None from me either. It is weird. But good. For info, the TTI paper is due to be published on Monday- explanation of what it is and what it means for people. 2nd FM paper to be published on Tuesday. Checking what stage it's at now so will let you know how it's looking and what our input needs to be later. I can do most of it but others will of course want to see and comment. Ta

[02/05/2020, 10:24:52] Gregor Smith: Thanks Donna. Happy to feed into it. Just shout.

[02/05/2020, 10:26:37] Jason Leitch: Yep. Send it over Donna when you need it.

[02/05/2020, 10:31:50] ~ Donna: JF wants more on what we will do mitigate harm 2. Jc's paper that went to her on Thursday will form that basis of that, so will work from that just now. Will make sure to mention chronic pain Jason.

[02/05/2020, 10:32:39] ~ Richard Foggo: "chronic pain Jason" almost as good as "Big NR

[02/05/2020, 10:33:00] ~ Richard Foggo: Sorry wrong chat 😊

[02/05/2020, 10:34:38] ~ Donna: 😂 Should have been a comma in there, but either way it works 😂

[02/05/2020, 10:35:01] ~ Fiona: Was more accurate the way you has it Donna 😂😂

[02/05/2020, 11:31:40] Jason Leitch: "Big John"

[02/05/2020, 11:33:11] Jason Leitch: Chronic pain, ophthalmology eg macular degeneration injections, dermatology, diabetic screening, screening programmes - bowel cancer, breast cancer etc. So basically some outpatients. Inpatients later.

[02/05/2020, 11:51:01] Gregor Smith: Can we risk assess dermatology outpatients too? The staff are pretty niche in treatments but psychological / physical benefits huge for patients if treatments been interrupted.

[02/05/2020, 11:52:00] ~ Fiona: Agreed - and many (not all) can be done remotely

[02/05/2020, 11:53:12] ~ Donna: I'll not go into huge detail but will signal A move in those directions.

[02/05/2020, 11:53:34] ~ Donna: Don't even know what level of detail she will want but will prepare accordingly.

[02/05/2020, 11:57:18] Jason Leitch: Yep...B12 injections too. Basically outpatient therapy before outpatient diagnosis.

[02/05/2020, 12:31:55] ~ Donna: Ok, what I've done is used the material from Jc's paper on Thursday to frame this for Tuesday's Fm doc. When we meet JF on Monday we can get her views and add detail to the specifics as you've all described above. Looking at all the stuff we're planning, I think it potentially merits a separate fm paper, possibly later next week or the week after that sets out the detail? It'll need to go through the decision making process, R0 assessment for cabinet agreement but that could hopefully be done quickly. Alternatively fm might want to say stuff on either Tuesday or May 7 at the review point. Will keep you posted.

[02/05/2020, 12:50:25] Gregor Smith: Minor point, but it's R not R0 (The R0 is the reproduction rate in a susceptible population at beginning of an epidemic). I think she'll want to outline in the paper where we're looking - also needs to be able to offer something in the future if England going to offer schools - might not be the same but needs to be a trade-off. The English R is slightly lower than ours is calculated so we don't have same headroom.

[02/05/2020, 12:59:15] ~ Donna: Dominic is sending the latest version to fm at 1, but there will be more chance to edit. Forgive my R0 faux pas. I have not had the chance to look in detail but it seems to cover the main bases on options but with the necessary caveats. And makes the headroom point.

[02/05/2020, 14:49:42] Gregor Smith: Who's the author of the TTI paper cab sec has?

[02/05/2020, 14:56:34] ~ Donna: It's us- NR in covid policy. She has been speaking to the cmo sag in various ways. Mary black as part of the group and is the mastermind behind the whole approach. Sag support it - Steve reicher particularly interested in the support for isolation so have drawn that out in

next draft to make it test, trace, isolate, support as per an exchange with liz Lloyd, but am checking whether they have actually seen the paper. If not we will send today. Have asked [NR] to let me know. Will come back to you.

[02/05/2020, 14:57:37] ~ Donna: Have also sent the latest draft Fm paper on. Gregor you'll likely be asked whether you're happy with it. CMO Ag particularly agitated about bubbles so you might want to make a stand. Thanks

[02/05/2020, 15:02:04] Gregor Smith: I'd not seen the TTI paper before it went.

[02/05/2020, 15:02:34] Jason Leitch: Be just sent you the latest one I had. Your office is copied.

[02/05/2020, 15:02:39] Jason Leitch: I've *

[02/05/2020, 15:04:03] ~ Donna: Sorry all- It's getting redrafted a bit just now. Will send the latest round shortly.

[02/05/2020, 15:05:19] ~ Annabel Sutcliffe: Thx donna, did you get my comments?

[02/05/2020, 15:07:51] ~ Donna: Yes and I see your email. I'm on a call just now but we can speak later. fm comments are ok on the capacity bit but understand the need to pin this down.

[02/05/2020, 15:10:28] ~ Annabel Sutcliffe: Great, let's speak. I know I'm broken record about capacity demand and I also know the challenges of providing it! But, if we cant define it then we can't imply we can deliver. We'll get there, speak when free. John, you'll want to join too I thinj

[02/05/2020, 17:56:59] Gregor Smith: Donna / Annabel - this number of tests for TTI. The 16k came from a paper that AG wrote before last review date (I think). Do we need to test their thinking on this more firmly given passage of time?

[02/05/2020, 18:00:48] ~ Donna: [NR] is following up with David Crossman now.

[02/05/2020, 18:02:07] ~ Annabel Sutcliffe: Support that. The latest I'm working from is up to 13k tests when still in lockdown and up to 20k tests when go out of lockdown

[02/05/2020, 18:05:05] Gregor Smith: Ok - I've just messaged [NR] and Mary B about it.

[02/05/2020, 18:11:23] ~ Donna: I've messaged Andrew to tell him he's going to get the 2 documents shortly- they will have a chance to see both in the round and comment on the specifics. Latest from David crossman is that 15.5k tests required per day In discussion with [NR]. We can express that as a range or a specific number.

[02/05/2020, 18:11:43] ~ Donna: Probably better to have the range.

[02/05/2020, 18:13:57] ~ Donna: The general point is that our current capacity won't support it. Also when other services and diagnostics come back on line we can't have all nhs lab capacity doing covid testing. We will need to seek lab capacity elsewhere. The physical act of administering the tests also needs to be addressed with boards.

[02/05/2020, 18:14:51] Gregor Smith: Agree with all those points

[02/05/2020, 18:24:11] ~ Annabel Sutcliffe: [NR] taking these on, including workforce for administering tests. So, for me the paper as drafted doesn't take into account where our capacity is. Donna, when can we talk?

[02/05/2020, 18:24:35] ~ Donna: I'm finally free now if you are

[02/05/2020, 18:29:06] ~ Annabel Sutcliffe: Great, give me 2 mins

[06/05/2020, 20:35:54] Jason Leitch: Is anyone dealing with the Glenisla Care Home?? Came up at FMQs?

[06/05/2020, 20:55:32] ~ Fiona: I've seen a few briefings on Care Homes- don't remember this one (although could have been). I have yet to see a briefing that gives me confidence that all that needs to be done has been done. I continue to be worried F

[06/05/2020, 20:59:32] Gregor Smith: No - not aware

[06/05/2020, 21:05:53] Jason Leitch: It came up at FMQs and it's [NR] relative.

[06/05/2020, 21:06:02] Jason Leitch: I'm on it. They may wish I wasn't.....

[06/05/2020, 21:07:00] ~ Fiona: What was the problem?

[06/05/2020, 21:07:25] Jason Leitch: Don't know yet

[06/05/2020, 21:07:37] Jason Leitch: Aidan ON IT!!!!

[06/05/2020, 21:08:20] ~ Fiona: Good stuff

[07/05/2020, 09:50:41] ~ Fiona: All- I continue to be worried about Care Homes. I don't want to overly complicate matters - I recognise the policy area sits with Aiden however there are many strands that run across other directorates. I suggested to Frank that an oversight board pulling the strands together might be actually be useful vehicle for this as well as signalling to Cab Sec we have a grip. Frank said he would consider it. F

[07/05/2020, 09:54:20] ~ Nicola Steedman: I'm supportive Fiona. I think Graham counted something like 8 different groups in the care home topic area at the moment! And too many different email streams as you know only too well. Need an absolutely combined and whole system approach...

[07/05/2020, 10:02:29] ~ Elinor Mitchell: I came back on that. I thought the rapid action group would be that place. But we might need a group of implementing the sage advice on throwing the book at cleaning, behaviour, environment and IPC in care homes. We need to have a clear story about how we're doing that.

[07/05/2020, 10:14:51] ~ Fiona: Agreed- happy to chair something pulling everything together- or be in a supportive role giving direction to Nurse Directors around staffing and IPC. Iona Colvin also happy to be involved. F

[07/05/2020, 10:22:38] Jason Leitch: I'm on a COSLA call at 1030 about calming down the calls for PPE. Sorry.

[07/05/2020, 11:20:49] ~ pcackette1960: Thanks Jason. I was in Health Committee on PPE this morning (which all seemed to be ok generally).

Happy to talk later on how the COSLA meeting went, if necessary or helpful

[07/05/2020, 11:24:34] Jason Leitch: It was fine I think. I'm becoming the 'Union' guy. It was all of the unions and COSLA. I think I calmed them down appropriately. Some follow up around comms to members and clearer messaging. I'll do that and copy you in for advice.

[07/05/2020, 11:24:51] Jason Leitch: Bus drivers and early years workers the main concerns.

[07/05/2020, 14:17:01] Jason Leitch: This is the best one page summary of risk knowledge so far....

[07/05/2020, 14:17:05] Jason Leitch: image omitted

[07/05/2020, 16:57:25] John Connaghan: Jason Fiona and Gregor. I need a policy line from you on use of PPE and testing as we open up. Is this for local determination or should we have a national policy(bearing in mind move to TTIS). John

[07/05/2020, 17:01:58] ~ Donna: CMO Ag just talking about this just now- package of ppe/testing/IPC etc. **NR** planning to bring back for an AG deep dive and they'll provide scientific advice. Clinicians will have views now obviously tho. We've been national about most of this so far. What's it for John?

[07/05/2020, 17:05:39] ~ Fiona: The PPE is fairly straightforward- current guidance will be applied. Need to think through supply Paul. **NR** advice and CMO group will be helpful to know what we should do. There may of course be additional demands from a political perspective . Is **NR** testing group where we are developing our approach to testing?

[07/05/2020, 17:08:29] ~ Donna: Think we need to look at testing more broadly and need ministerial decisions on priorities. will write it down and ask for your collective views.

[07/05/2020, 17:09:02] ~ Fiona: Thanks Donna

[07/05/2020, 17:10:55] ~ Nicola Steedman: And Paul, are you asking about testing of staff or patients as we open up? I am taking it that by 'open up' you mean healthcare, not release of lockdown measures? If talking about opening up the NHS more, I think the approach to testing should be informed by the nosocomial group in this case- that's at least a large part of what we are worried about in that setting.

[07/05/2020, 17:12:19] ~ Donna: I am hoping that's Jaqui's group but I wouldn't bet my house on it. I think it is. Fiona is that the one you were at today?

[07/05/2020, 17:12:55] ~ Annabel Sutcliffe: Agree with nicola and strengthens the role of the nosocomial group in eligibility of testing outside of TTIS

[07/05/2020, 17:14:52] ~ Fiona: **NR** group should give us the advice on testing - linking to CMO group and U.K. SAGE sub group should give us best advice (to take or leave 🤖)

[07/05/2020, 17:15:01] Gregor Smith: Nosocomial group has to set the agenda here but the CMO Adv Gp can support this.

[07/05/2020, 17:15:21] Gregor Smith: Jinx ! Great minds....

[07/05/2020, 17:16:51] Jason Leitch: It's for JC's remobilisation letter. I think "we will provide the national guidance you need as quick as we can....". "National groups are looking at PPE and testing"

[07/05/2020, 17:16:56] ~ Donna: And the nosocomial group is **NR** group? We are hopefully all talking about the same thing.....

[07/05/2020, 17:17:10] Gregor Smith: Yes

[07/05/2020, 17:17:16] ~ Donna: 🍌🍌

[07/05/2020, 17:21:00] ~ pcackette1960: Keep me in the email loop on implications for PPE. As Fiona says, the implications should not be direct because the PPE you need in accordance with guidance stays

the same.

Face coverings are not PPE and our PPE supply modelling ought not change. The aim is not to become the universal supplier of face coverings.

But we are concerned about how we maintain that position (given the scale of the alternative) and separately if private individuals start sourcing face masks and so starve health workers from supply. Am working on that with NSS

[07/05/2020, 17:22:47] ~ Fiona: However this will be an increase in activity and it will depend on what activity levels have been modelled. Who has responsibility for the surgical face masks if we don't classify them as PPE?

[07/05/2020, 17:26:51] Jason Leitch: They are Fiona. Paul means the public face coverings.

[07/05/2020, 17:28:00] ~ pcackette1960: Sorry in my brevity I wasn't clear. Surgical face masks *are* PPE - the worry is that cautious types source them instead - but I'm also looking with NSS on the re-start point for assurance they can cope

[07/05/2020, 17:53:07] ~ Fiona: Grand

[07/05/2020, 17:58:26] John Connaghan: Jason. It is indeed for the remobilisation letter (now looking like Monday for completion). John

[08/05/2020, 11:10:09] Jason Leitch: CEO call in number please anyone?? The code in my diary is not working

[08/05/2020, 11:10:52] ~ Richard Foggo: image omitted

[08/05/2020, 11:11:39] Jason Leitch: In

[08/05/2020, 17:17:38] ~ Fiona: Have popped an e-mail on HCW testing into the system. Nosocomial group considered yesterday 🌐. Weekly

[08/05/2020, 17:21:34] ~ Fiona: But needs to be risked assessed and considered

[08/05/2020, 17:22:27] ~ Donna: Thanks will consolidate into the wider paper. Thanks

[08/05/2020, 17:24:37] ~ Fiona: VG- thanks

[08/05/2020, 17:31:24] Gregor Smith: Fiona / Jason - I'm about to send you a paper on revised case definition. Update from the one that was held over from Quint last night. CMOs agreed recommendation 1 (new symptom cluster) but not 2 (HCW and exclusion/ testing) Both recommendations will be taken to Quint on Monday.

[08/05/2020, 17:33:06] ~ Fiona: Thanks Gregor - have sent Nosocomial paper on testing through to CMO box

[08/05/2020, 17:56:35] ~ Nicola Steedman: I've sent back a comment on the nosocomial paper. Are the nosocomial group also looking at expanding testing of admissions btw? That's the next question... oh, and does their weekly testing of HCW advice also applies to social care setting including care homes with and without cases?

[08/05/2020, 18:00:04] ~ Fiona: Think it was health and social care - think the testing people have picked up testing of admissions - but can check

[08/05/2020, 18:17:41] ~ Nicola Steedman: Great- just for clarity of numbers at some point. Nosocomial paper was great by the way!

[08/05/2020, 18:23:45] ~ Fiona: Nice and clear - good group

[09/05/2020, 08:39:19] ~ Nicola Steedman: Is there a directors call this morning all? And is it at 10 if so?

[09/05/2020, 08:50:09] Jason Leitch: No

[09/05/2020, 08:50:18] Jason Leitch: Morning off....

[09/05/2020, 08:50:25] Jason Leitch: Tomorrow...10

[09/05/2020, 08:51:01] ~ Nicola Steedman: 👍

[09/05/2020, 09:09:32] ~ Elinor Mitchell: Thanks Jason - decision made. The only thing I was going to suggest was if some folks wanted to get together around the nosocomial stuff. But that can happen away from the directors call.

[09/05/2020, 09:10:54] ~ Fiona: I also wondered about advice on lockdown and any changes that were being made and recording of advice- maybe it's been done?

[09/05/2020, 09:13:59] Gregor Smith: All done Fiona. I'll get the office to dig out papers from Dominic.

[09/05/2020, 09:14:20] ~ Fiona: Thanks

[09/05/2020, 09:19:48] Jason Leitch: And Daniel is on the physical activity advice for Sunday-Monday.

Draft at 1030

[09/05/2020, 09:23:32] ~ Fiona: VG

[09/05/2020, 09:24:55] ~ Elinor Mitchell: We collectively (I mean at sg level not us) seem to know very little about the PM statement tomorrow but there are a number of meetings today and tomorrow with UKG so I will share whatever I hear too

[09/05/2020, 09:29:06] ~ Donna: On the nosocomial stuff, I am going to include in the testing work. I got responses back on that later yesterday so will get something in circulation later today.

[09/05/2020, 09:29:30] ~ Donna: Obvs more to it than testing but it's where the focus is.

[09/05/2020, 09:29:36] ~ Nicola Steedman: Great, thanks Donna.

[09/05/2020, 09:38:16] ~ Elinor Mitchell: Thanks Donna

[09/05/2020, 09:59:05] Jason Leitch: Gregor at COBR tomorrow. He'll get first clue.

The welsh have announced

- unlimited exercise and out to relax
- garden centres
- golf
- fishing
- recycling/dumps

[09/05/2020, 09:59:31] Jason Leitch: Word is the English version is the same but will also have an ongoing timetable for what's next...

[09/05/2020, 10:01:12] Gregor Smith: Really pleased to be able to tell you that Marion Bain will join my team as a second DCMO. Marion will have a focus on external engagement and recovery and will begin her transition from current role with GGC on Monday. I've also agreed with NR that he can return to his role with Lothian so that he can lead work on DCN transition. NR will stay with us for a couple of sessions /week and if we need to increase this again both he and Lothian have been very helpful in flexibility. Full details of portfolios for my new team will be sorted through and sent around soon.

[09/05/2020, 10:52:41] Gregor Smith: Has anyone seen the advice going to FM yet? I've still not seen final version.

[09/05/2020, 10:53:40] ~ Nicola Steedman: Which one Gregor?

[09/05/2020, 10:53:51] Jason Leitch: It's coming now

[09/05/2020, 10:54:26] Gregor Smith: Advice on approach for tomorrow.

[09/05/2020, 10:59:59] Jason Leitch: Daniel sent his response.

[09/05/2020, 11:02:34] ~ Nicola Steedman: Looking at that version now.

[09/05/2020, 11:06:05] Gregor Smith: I don't appear to have anything. I need to see it please.

[09/05/2020, 11:07:04] ~ Nicola Steedman: Forwarding it

[09/05/2020, 11:07:33] ~ Donna: It's in the cmo box but have forwarded to your personal mailbox

[09/05/2020, 11:07:36] Gregor Smith: I've also sent around advice from CSOs scientific advisory group on testing - very congruent with nosocomial group advice on testing HCW from last night.

[09/05/2020, 11:08:17] ~ Nicola Steedman: 👍

[09/05/2020, 11:09:09] ~ Fiona: Donna- sorry to treat you as admin person- can you send to my personal box as well please?

[09/05/2020, 11:09:50] ~ Fiona: Actually nvm- I have it 😊

[09/05/2020, 11:10:49] ~ Donna: Sent to you Fiona. No bother. And Thanks Gregor I've got that. I am still trying to write the frickn testing paper. Am changing focus and will make recommendations for hospitals/ care settings based on all the info. Will send when I get it done. New info arriving every 5 minutes! Will let you know when I'd like you to look at it. Ta

[09/05/2020, 11:18:41] ~ Nicola Steedman: Gregor- If you are looking at the FM advice, do you want me to respond separately? Issues for me are what SAGE and CMO AG actually looked at- ie not some of these proposals- and also the environmental concerns re: not touching things so playgrounds etc are out I'd say...

[09/05/2020, 11:21:56] ~ Elinor Mitchell: Not sure I have it? Did it just go to the dg box?

[09/05/2020, 11:22:21] ~ Elinor Mitchell: Who is it from?

[09/05/2020, 11:26:19] ~ Donna: I've sent it on to your mailbox Elinor. Not sure what the copy lists are up to.

[09/05/2020, 11:28:52] ~ Donna: Gregor/Nicola I think there is a need for you to comment formally. Not sure why you haven't been directly asked. That's the format surely and we need to stick to it. Will I ask Daniel to draw your points together or do you want to ask your team to do it? It needs to go forward as specific and formal advice to FM from you. Let me know? Thanks

[09/05/2020, 11:35:27] Gregor Smith: I've asked the office to do this as a joint response from Nicola and I but also to make the explicit point that I expect to be asked for my comment on any advice on changing restrictions before it goes to FM.

[09/05/2020, 11:35:50] ~ Elinor Mitchell: There are several email chains on this same topic. It's really confusing. Think FM seems broadly in favour of the sit and relax option (on equalities grounds). If I'm picking up right?

[09/05/2020, 11:36:27] Jason Leitch: You are

[09/05/2020, 11:39:19] ~ Fiona: The exercise, sit and relax seem good - but not travel to sit and relax? so near your home?

I am worried that it appears none of us have seen any working on return of schools - if we have and are satisfied then grand. It may be of course we are saying R needs to be more stable and we need arrangements in place - and in Scotland we do not have the confidence yet for schools to go back?

construction will also be pressing - and they have done a lot of work and England allow construction
[09/05/2020, 11:40:56] ~ Elinor Mitchell: I think on schools we are still working on the basis of Gregor's statement that we need another week of data to understand where we are on R?

Agree I've seen nothing on Construction or golf etc

[09/05/2020, 11:41:14] Gregor Smith: I have said I'm not content in return of schools. But there is tension there and Education appear unhappy with scientific advice they're getting. I am more content with outdoor construction as a signal for future intention (IMO better than garden centre option)

[09/05/2020, 11:43:00] Gregor Smith: The analysis paper published on Thursday afternoon has a lot of this in it.

[09/05/2020, 11:43:25] ~ Fiona: Grand de schools and agree the construction

[09/05/2020, 11:47:40] ~ Nicola Steedman: Re: schools CMO AG sent a paper to the education recovery group yesterday I think. I'm with CMO on that one- Not yet. Unlimited outdoor exercise whilst physically distancing and minimum surface contact I'm okay with. Leisure outside? Depends what you mean... sunbathing and picnics in parks? Physical distancing has to remain and I worry about environmental elements when people are sitting or lying around for longer periods of time- unlike exercising. All outdoor activities should still be done close to home. Outdoor construction fine- but not all getting in the van together to go home (which I have seen!). And I'm okay with garden centres as long as they do it like supermarkets and limit number of people in at a time so they can physically distance.

[09/05/2020, 11:48:57] ~ Elinor Mitchell: Yes the (nice and short) paper from Dominic was really good

[09/05/2020, 11:51:56] Jason Leitch: I think the Welsh have it about right. Outdoors. Physically distanced but basically "stay at home".

Garden centres and recycling centres I'm neutral.

No open play parks.

Golf have produced a five step plan which is excellent. Step one is very conservative and only booked single golfers, staggered car parking, 10 minute appointments etc. I think it's good and no risk.

[09/05/2020, 11:52:29] Jason Leitch: If NRS shows continued fall then outdoor construction.

[09/05/2020, 11:52:57] Jason Leitch: It's a bit niche but we need to say something about elite sport.

England are going to say back to individual training.

[09/05/2020, 11:53:15] ~ Nicola Steedman: Have you seen the Ian Donaldson paper? just resent again. It's good. About outdoor exercise vs leisure. Golf only thing is it's elitist.

[09/05/2020, 11:54:15] Jason Leitch: It's not as elitist as the Daily Mail says actually. Lots of municipal courses in Lanarkshire and Ayrshire played on my working class families. The top end is very elitist.

[09/05/2020, 11:54:40] Jason Leitch: And is increasingly not all men

[09/05/2020, 11:54:49] ~ Nicola Steedman: Clubs etc v expensive!!

[09/05/2020, 11:56:09] Jason Leitch: Some. Again...the high end. It's not all St Andrews and Troon I promise.

[09/05/2020, 11:56:17] Jason Leitch: PS - I don't play

[09/05/2020, 11:56:57] Jason Leitch: My [redacted] I&S does. For free on a course in

[redacted] I&S

[09/05/2020, 11:59:55] ~ Fiona: Could someone send me the education paper please? And agree with comments on golf and what Wales are saying

Refuse I think should open - it's a public health thing (try living with 5 adults and mange your rubbish 🙄)

Construction have good guidance on social distancing

[09/05/2020, 13:21:17] Gregor Smith: Nicola - are you content with the proposed note to FM on seasonal workers arriving today?

[09/05/2020, 13:23:08] ~ Nicola Steedman: I am. Daniel and I discussed earlier on the phone. If you're okay with it too I'll respond for us both.

[09/05/2020, 13:23:41] ~ Elinor Mitchell: Thanks - I just emailed about who was picking up. Sorry for clogging inboxes unnecessarily

[09/05/2020, 13:25:43] Gregor Smith: Ok - only point I've gone back on was whether the lack of physical distancing on the plane had been addressed or fully risk assessed.

[09/05/2020, 14:07:29] ~ Nicola Steedman: Gregor, another urgent submission on advice to FM for COBR tomorrow. I've commented but said you would want to clear. Have forwarded to your personal email box too. Nicola.

[09/05/2020, 14:17:24] Gregor Smith: When's it needed for? I'm out walking.

[09/05/2020, 14:18:07] ~ Nicola Steedman: I've told them you will want to clear it. They can wait.

[09/05/2020, 14:20:46] ~ Elinor Mitchell: Thanks Nicola - sorry but I can't find your advice? Could you send to my Elinor box thanks

[09/05/2020, 14:21:48] ~ Nicola Steedman: Done

[09/05/2020, 14:29:45] ~ Elinor Mitchell: Thanks - got the outdoor exercise one - is there a separate one on testing for migrant workers? I'm relaxed about the physical exercise advice, less so on testing for migrants. I wonder whether we might want to get a mobile testing unit on site. Might prevent a backlash if there ends up being an outbreak related to this group?

[09/05/2020, 14:34:33] ~ Fiona: Are we quarantining migrants?

[09/05/2020, 14:36:12] ~ Nicola Steedman: Elinor, sent on the trail about the migrant workers. Key here is that 14 days self-isolation is what's being recommended and that's actually the most precautionary approach. If no symptoms in any, testing wouldn't change that approach- would still recommend 14 days to be sure. So testing not help there. Test of course if any develop symptoms. Fiona, these are seasonal migrant fruit picking workers coming over.

[09/05/2020, 14:36:42] ~ Fiona: Thanks

[09/05/2020, 14:37:05] ~ Elinor Mitchell: Yes I agree. I'm just more worried about the optics of it.

[09/05/2020, 14:39:12] ~ Nicola Steedman: We have to give the correct public health advice though. Fiona, I've sent it on to you as well but just for your info.

[09/05/2020, 14:42:00] ~ Fiona: Thanks Nicola

[09/05/2020, 14:42:38] ~ Elinor Mitchell: Yes of course you do. And I'm very grateful for care and attention given to all this. Thank you

[09/05/2020, 14:46:43] ~ Nicola Steedman: In the end, FM may decide to pursue a different course of action, and that's her right of course. But that doesn't change the public health advice that we give. And we all get that.

[09/05/2020, 14:49:02] ~ Donna: Thanks Nicola. Elinor we were about to get into a difficult position on the testing of the fruit pickers. We're not testing anyone else coming off flights and no plans to do so, even under new ports and borders plans (it's all self isolation stuff). Could be seen as quite discriminatory if we single them out. As Nicola says fm might decide differently but it might mean testing everyone that gets off a plane. I'm just about to send the stuff on testing which is adding up to over 50k tests per day, so that would just add to the total. Will send shortly and you can all have a look and see what it looks like. Needs more work and not all resolved but you'll get the idea. Thanks

[09/05/2020, 15:04:28] ~ Nicola Steedman: Gregor, advice on 'outside and exercise' that we both signed off earlier now modified after multiple discussions to allow people to sit on the grass when supervising children's active play i.e. emphasising that this is basically 'rest as part of being out for exercise'. Need to check if you are okay with that. Mentioned too to avoid touching hard surfaces hence grass better than bench. See Ian Donaldson redraft submission in email of 1449. Fiona, Elinor, just copied you both in to this as well. Nicola.

[09/05/2020, 15:19:46] ~ Fiona: Thanks Nicola

[09/05/2020, 15:48:17] ~ Aidan: Does that mean adults have to start exercising as soon as the kids sit down....could be fun....

[09/05/2020, 15:49:31] ~ Fiona: We could get Jason to demonstrate- sitting down on floor and standing up quickly 😂😂

[09/05/2020, 16:01:22] John Connaghan: Donna. Does the testing advice cover our first stage of remobilisation? Are we testing inpatients or asking for isolation?

[09/05/2020, 16:01:31] John Connaghan: Or both?

[09/05/2020, 16:05:33] ~ Donna: Yes assumes we're testing everyone on admission. Details to be worked out.

[09/05/2020, 16:07:18] ~ Nicola Steedman: Thanks Donna. And daycase surgery or outpatient procedures? Are these mentioned too? Not "admissions" but need to be factored in or at least decided upon.

[09/05/2020, 16:08:12] ~ Donna: I'll send it over and you can have a go at the detail. I've reached the limits of my knowledge. It looks like a HUGE Endeavour.

[09/05/2020, 16:10:50] John Connaghan: Folks. I am minded to set a small to medium size exec group with CEO representation and national clinical advice to provide oversight for the first phase of mobilisation. John

[09/05/2020, 16:12:01] ~ Fiona: That would be helpful John. I think we are beginning to get a sense of what the preconditions are prior to mobilisation- and testing feels like a big one?

[09/05/2020, 16:16:17] Gregor Smith: John - I think that's both a good idea for governance but critical to keeping it practical and workable.

[09/05/2020, 16:17:16] ~ Nicola Steedman: Agree. Seems eminently sensible John. Nicola.

[09/05/2020, 16:25:04] ~ Nicola Steedman: FM just back on proposals. Looks okay.

[09/05/2020, 16:28:11] ~ Elinor Mitchell: On fm note - I see she is keen to get a sense of phasing now. That might help with what will appear to be quite different messages in different parts of the country

[09/05/2020, 16:29:51] ~ Elinor Mitchell: And on testing Donna. Do you know what England are doing re testing migrant workers? Putting good public health to one side - it would be odd for people to be treated differently depending on whether they landed in Heathrow or Edinburgh. (And perm sec just off the phone to make same point)

[09/05/2020, 16:38:25] ~ Donna: As far as we know they are not taking a different approach. Have you heard otherwise? Everything coming through on ports and borders from ukg suggests isolation for 14 days. No mention of testing. Agricultural workers were going to be completely exempt as per defra preference but that has switched to isolation arrangements being in place.

[09/05/2020, 16:38:57] ~ Elinor Mitchell: No - not at all. Just checking

[09/05/2020, 17:03:06] ~ Donna: Ok at last I've sent a sub over. It's quite a big change and lots needed on capacity. When I spoke to Andy corr about it I suggested JF might want to discuss. I think she probably will- see what you think. Doesn't go into all the governance etc just now, that's the other paper that I refer to in the sub. Thanks

[09/05/2020, 17:04:57] ~ Nicola Steedman: When are you intending/wanting to send it up Donna? Just so we know. Comments permitting of course..

[09/05/2020, 17:08:51] ~ Donna: I think there might be a lot of comments! It's a doozy. 50k+ tests, possibly quite disruptive. In saying that I've said noon tomorrow 😊 Gregor and/or you/Jason will want to have a sense of what we could do and when, when it comes up at the cmo/quint call on Monday so we're not caught unawares. It would be good to get it in front of her before then? You might have a better idea of the timings on that than me.

[09/05/2020, 17:09:49] John Connaghan: Ok folks. I will send round a proposal for Monday on how we put together governance around the various aspects of remobilisation.

[09/05/2020, 17:10:34] ~ Donna: Feel free to rip it apart by the way-these are propositions so if you've got better suggestions they are very welcome. Not precious at all.

[09/05/2020, 17:17:11] Gregor Smith: Nicola - there's a CMO call at 1800 tonight now to discuss the inward travel restrictions. I'll dial in.

[09/05/2020, 17:19:20] Caroline Lamb: Thanks Donna. I've just had a quick scan and trying to get my head round the implications for the Trace bit of TTIS. Will get back to you later or tomorrow am.

[09/05/2020, 17:23:12] Jason Leitch: I don't have the FM response. Can someone send on please.

[09/05/2020, 17:24:56] ~ Elinor Mitchell: Sent it

[09/05/2020, 17:26:25] Jason Leitch: Ok. Got it. And as predicted. So, she's waiting for NRS. If it's down we follow Wales basically.

[09/05/2020, 17:28:28] ~ Nicola Steedman: Noted, thanks. Let me know if you want me on it as well.

[09/05/2020, 17:32:07] Jason Leitch: Gregor - you ok with the seasonal worker thing?

[09/05/2020, 17:32:35] Jason Leitch: And well done everyone, particularly Nicola, in landing the outdoor advice so well.

[09/05/2020, 17:42:30] Gregor Smith: Yeah - HP teams all over it. Testing disproportionate and

potentially cause reduced compliance with isolation.

[09/05/2020, 17:43:41] Jason Leitch: Excellent. Agreed. And they're isolating at the farms. The only thing I did think it will potentially create a strain on local health services. I'm not sure how we usually manage that in NHS Tayside etc. Do we give them GPS?

[09/05/2020, 17:44:06] Jason Leitch: GPs rather than actual GPS

[09/05/2020, 17:45:30] Gregor Smith: Local issue - and there'll be well established routes as it's an annual thing

[09/05/2020, 17:49:46] Jason Leitch: 👍

[10/05/2020, 10:39:27] ~ Richard Foggo: Elinor, sorry tech failure I was trying to get in on couple of occasions with icon showing but muted but failed.

Testing paper will be recirculated at lunchtime.

[10/05/2020, 10:39:44] ~ Richard Foggo: "not muted"

[10/05/2020, 11:53:39] ~ Elinor Mitchell: Thank you

[10/05/2020, 14:49:12] ~ Donna: Not sure who wrote this (probably lots of people) but it's getting a good write up here.

<https://twitter.com/droliverlewis/status/1259122646480031744?s=12>

[10/05/2020, 14:49:32] ~ Donna: Not the tweet the guidance obvs.

[10/05/2020, 14:53:47] ~ Elinor Mitchell: Interesting. Cab sec not happy it went out without her seeing it

[10/05/2020, 15:01:41] Jason Leitch: image omitted

[10/05/2020, 15:01:47] ~ Fiona: It is good guidance and all stakeholders were happy with it. I had assumed a briefing would have gone up and am sorry I didn't check with the integration team prior to issue. I had approved covering letter. We need to get over this hump- not sure Cab Sec would normally 'approve' this kind of guidance. There is so much going on in the Care Home space

[10/05/2020, 15:01:49] Jason Leitch: Well, that's clear.....

[10/05/2020, 15:02:20] ~ Fiona: Couldn't be clearer

[10/05/2020, 15:03:25] ~ Elinor Mitchell: She's asked for it to be taken down for now. I wonder if it would be worth you going back saying it's actually quite good and getting a positive response?

[10/05/2020, 15:03:40] ~ Fiona: And on the guidance front. Not testing all residents prior to admission is extant policy and has been for a while (although we do need to review that)

[10/05/2020, 15:03:50] ~ Fiona: Will do Elinor

[10/05/2020, 15:04:31] ~ Fiona: It's probably too late now- stakeholders may not be happy with it coming down 🙄

[10/05/2020, 19:35:17] ~ Richard Foggo: Further draft of testing paper circulated. Apologies for delay.

[10/05/2020, 20:16:03] ~ Nicola Steedman: Gregor, Fiona, Jason, re: HPS care homes draft guidance. I sent an email to Jim with our concerns, so we have them recorded, then I spoke to him on the phone to explain everything. He understands. He's going to speak to Colin tonight or first thing in the morning (as Colin is supposed to be off) and will speak to me again after. I told him we didn't want the guidance going out as it is and he knows that. N.

[10/05/2020, 20:20:12] Gregor Smith: Thanks Nicola. I'm quite taken aback that HPS would consider it appropriate to publish in current form.

[10/05/2020, 20:21:22] ~ Nicola Steedman: I explained that any workforce problems as a result of the policy/guidance are not really their territory.... in the nicest possible way.

[10/05/2020, 20:24:26] ~ Fiona: Nicola- agreed and happy to support in any way I can

[10/05/2020, 20:26:22] ~ Nicola Steedman: Jim just got back in touch. Says he's spoken to Colin already. Who now apparently understands and will edit to remove option B. We should see a new final draft tomorrow am...

[10/05/2020, 20:26:45] ~ Fiona: Thanks Nicola- that was quick

[10/05/2020, 20:27:27] ~ Nicola Steedman: Indeed...

[10/05/2020, 20:29:32] Jason Leitch: Well done. Everyone is working so fast it's inevitable.

[10/05/2020, 20:29:49] Gregor Smith: 👍

[10/05/2020, 20:30:02] ~ Nicola Steedman: 🙌

[10/05/2020, 20:30:27] ~ Nicola Steedman: I'll believe it when I see it, won't celebrate too soon!!

[11/05/2020, 20:03:11] Jason Leitch: Do we have people watching BBC Disclosure? It will be tomorrow's story....it'll need lines.

[11/05/2020, 20:05:47] ~ Nicola Steedman: Lines are being developed as we speak I imagine.

[11/05/2020, 20:22:03] Jason Leitch: By who?

[11/05/2020, 20:22:39] ~ Nicola Steedman: Emails galore- are you not copied in?

[11/05/2020, 20:22:46] Jason Leitch: Clearly not

[11/05/2020, 20:23:07] ~ Nicola Steedman: I'll send them later.

[11/05/2020, 20:59:24] ~ Elinor Mitchell: I've sent to you Jason

[11/05/2020, 21:06:04] Jason Leitch: I was in the programme!!!! In what world am I not helping wrote the lines????

[11/05/2020, 21:08:09] ~ Elinor Mitchell: I know. We're back to the stereophonics concert!

[11/05/2020, 21:11:48] Jason Leitch: Yep. 11th March.

[12/05/2020, 21:59:21] Gregor Smith: Difficult conversations on the UK SCG call tonight - revealed fundamental difference in English approach to TTIS - PM has chosen only to trace and isolate on confirmation of result. This means difference in purpose for the symptom cluster being used - balancing the sensitivity and specificity may become problematic for the differing needs. No decision tonight but will reconvene tomorrow during CMO quarterly meeting. Their favoured option has 76% sensitivity but high specificity - meaning 1/4 of people using app / questioned won't be identified. They want to keep the specificity high to protect capacity in testing and trace. This sensitivity feels too low for us, though, and I'm worried that it may compromise the effectiveness of the strategy. Nicola and Jason may wish to say more. More discussion tomorrow.

[12/05/2020, 22:15:34] ~ Richard Foggo: Thanks Gregor. Keen to hear more.

[12/05/2020, 22:15:51] Jason Leitch: It wasn't great. We can share the angst tomorrow....

[12/05/2020, 22:19:15] John Connaghan: . I can't readily understand why they should do that. The costs of trace capacity vs the extension of c19 in the community seems a poor trade off.

[12/05/2020, 22:23:36] ~ Nicola Steedman: It provoked a very interesting debate... let's put it that way... more tomorrow.

[12/05/2020, 22:42:39] ~ Donna: Yes not sure I understand why they'd make that choice, given the potential serious negatives. High risk.

[12/05/2020, 22:52:36] ~ Nicola Steedman: I agree with you Donna and that was our stance for now. But it's ever complicated of course! Happy to explain more tomorrow.

[12/05/2020, 23:58:31] Gregor Smith: Their choices appear to be predicated on two main assumptions - low income / trades workers will not isolate multiple times (SPI-B) and wariness of test/trace capacity if lower specificity in symptom cluster.

[13/05/2020, 07:26:13] ~ Donna: Spoke to PO later on yesterday. Can sec wants to discuss remobilisation at portfolio. I said you have got the letter John and would send up before the meeting so she can see it. We'll need to turn it into a submission for FM on the Health plans and assess against transmission so can you all give that some thought? CMO Ag said it was too of the list for the new normal because of non covid harm. We can maybe discuss in the margins of Pag?

[13/05/2020, 07:28:11] ~ Fiona: Would be helpful to understand workforce demands and capacity to ensure social care and TTI has sufficient

[13/05/2020, 07:33:10] ~ Elinor Mitchell: It's on the agenda which we sent up yesterday. Guessing this will be a cabinet decision though

[13/05/2020, 08:23:30] Gregor Smith: Richard / Donna - I'm going to devote our daily directorate call discussion this morning to the symptoms cluster issue I spoke about last night. You'd be welcome to join us at 830 if useful.

[13/05/2020, 08:29:07] Gregor Smith: image omitted

[13/05/2020, 08:29:32] ~ Richard Foggo: I can't make it. Donna might or one of our DDs

[13/05/2020, 08:29:57] Gregor Smith: No worries. We can catch up separately if need be.

[13/05/2020, 08:41:18] ~ Elinor Mitchell: Who knows where I will find prevalence rates and R point number for Scotland?

[13/05/2020, 08:42:33] ~ Elinor Mitchell: ET asking - whose working on it

[13/05/2020, 09:11:38] Gregor Smith: We shouldn't be using a point number for R at this stage - FM was very clear about that yesterday. Would like to work towards that if possible but needs all briefings etc to be a range until modelling teams are content to go public on a point number. And she's also keen to explore how often this number can practically be refreshed. It's Roger Halliday and his team producing this.

[13/05/2020, 09:16:14] ~ Elinor Mitchell: Super thanks. I've emailed. Perm sec said she's keen to move to point number now . I'll pick up with roger

[13/05/2020, 09:29:29] ~ Donna: ET get the modelling - last was 7 May. It is modelling because the cases still have to be estimated. R between .71 and .94 best estimate .83. I see from the ET note that they want an update tmrw. It's worth getting roger h and Mel giarchi to do a session for them like we did for FM to explain the context and limitations of the data- it's not a straightforward calculation And not currently a daily number. Would that be useful?

[13/05/2020, 09:30:58] ~ Donna: Sorry just spotted your reply. At the moment it would be the same range/estimation for a week so worth checking in with roger on what's possible .

[13/05/2020, 09:31:11] Gregor Smith: My understanding is that it takes a couple of days for the fastest computer in Scotland to calculate it.

[13/05/2020, 09:34:48] ~ Donna: I can't get in to pag- will Keep trying.

[13/05/2020, 09:48:08] ~ Nicola Steedman: Just dial in if you need to.

[13/05/2020, 09:48:25] ~ Donna: I'm eventually in

[13/05/2020, 10:25:45] ~ Elinor Mitchell: Thanks Donna - and you'll see I've emailed roger

[13/05/2020, 15:55:04] ~ Donna: Just texted [NR] and [NR] re the testing questions. They're on it and have answers to the questions on whether boards are doing what they are supposed to be doing eg It's only at 45% for >70s. They're sending it over but it probs needs JC to read the riot act. Would be good to be able to say that tmrw morning. She's asked for it by 12, but will likely come up at the tti chat.

[13/05/2020, 15:56:41] Jason Leitch: Yep

[13/05/2020, 18:54:07] John Connaghan: Donna. I have asked for the data by Board on testing so we can see who needs encouragement. We need that before we reply in this. I also believe there are definitional issues about when testing takes place. Some do it in ED. Others do it in wards. And some don't count assessment wards. I have asked [NR] to investigate and phone [NR] tonight

[13/05/2020, 18:58:11] ~ Donna: Thanks John, I've emailed you. you've got a slide that sets it out for over 70s. Everyone apart from borders, Orkney and Shetland have issues. Some really quite low. GGC only started providing data yesterday. [NR] thinks you probably need to apply some pressure as her leverage is limited. See what [NR] comes back with? We probably need a plan for following up on this and care homes. Think [NR] can do it but might need some muscle from you 🍊

[13/05/2020, 19:00:02] ~ Fiona: Alison T and I can pick up for Care Homes

[13/05/2020, 19:12:45] John Connaghan: Ok thanks Donna. [NR] told me she raised it with CEOs at their private meeting on Tuesday. But.....?

[13/05/2020, 19:14:24] ~ Donna: Alison has asked for info Fiona- will see what comes back.

[13/05/2020, 19:16:46] ~ Donna: I think maybe an intervention from you would help John. Not sure how much traction she thinks she got. They might need reminded that she's asking on your behalf not just if they feel like doing it. None of us want to listen to that from cab sec again if we can avoid it....

[13/05/2020, 19:19:17] ~ Elinor Mitchell: Yeah. Not an easy call. All issues that came up at fmqs today. Was thinking how we get back to where we were and a bit in front of the curve in terms of questions being asked. We're all moving at such pace....I've asked my office to do some more diligence around progress checking (who doesn't love an action tracker!?) what else can we do?

[13/05/2020, 19:24:54] John Connaghan: I think we need to consider what we want as performance reporting at the Operational Board for TTIS. As we re establish HSCMB. We should do same for our own NHS operational performance Board. There are wider issues re harm 2 that we are not logging.

[13/05/2020, 19:26:53] ~ Donna: Yes that's a great idea. We're asking them to do different things so reporting should be different to match that. There's a big swathe of testing stuff in there for a start and that would help [NR] I think. As well as the harm 2 issues.

[13/05/2020, 19:29:13] Caroline Lamb: Agree. For TTIS we are going to need a whole data set that covers numbers of tests by group, no +ve, feeding through to those needing contacts traced, nos of contacts, no traced, time from requesting test to contacts traced. etc etc

[13/05/2020, 19:42:25] ~ Fiona: And I'll be looking for data on Care Homes- even in the short term

[13/05/2020, 21:03:31] ~ Elinor Mitchell: I think we should commission someone to help us map out what information we need and then we work out how we get it. We did that in the care home side and it's beginning to bear fruit .

[13/05/2020, 21:33:50] Directors COVID: You left