Message						
Erom	NR		JANICE ADMINIST	DATIVE CROUD		
From:	L	_[[/O=EXCHANGELABS/OU=EXCF SPDLT)/CN=RECIPIENTS/CN=731			NR	
Sent:	30/03/2020 1			i	i	
To:		/o=ExchangeLabs/ou=Exchange				
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Subject:	RE: Guidance	on capacity challenges in critical	l care	'		
Hi NR						
111111111111111111111111111111111111111						
This is now r	paused indefini	tely, possibly never to be pick	ked up again, no	w that there is less/no	need for it given	earlv
-		stay below capacity.				,
- 00	,	,				
I'll let you kr	now if that char	nges at any point.				
-						
Best						
NR						
1 -4						
200		NR	anuty Haad of th	o Office to the Chief N	Indical Officer D	rofossor
Departme	ent	Private Secretary and De Christopher Whitty	eputy nead of the	ie Office to the Chief M	iedicai Officei – P	10165501
of Health			hsc.gov.uk Tel:	I&S		
Social Ca	re	Mobile: Personal Dat		711- (1 20 \ //-t CI	CWALL OF L	
		Department of Health an	id Social Care, 7	rth floor, 39 victoria St	reet, SWIH DEU	
DH recipients p	lease note: this em	ail will not be saved in IWS by CMO	Private Office. If yo	ou need this for audit purpose	es, please keep a copy	in IWS for
your records		,	•	, ,		
		······································				
From	NR	@dhsc.gov.uk>				
,	rch 2020 12:54	@dhsc.gov.uk>;	ND	الحال وحالوا	ND	-1
To: NR	NR Odbsc.go	wansc.gov.uk>;	INIX	@dhsc.gov.uk>;[INIX)
Cc:	@dhsc.go NR	@dhsc.gov.uk>				
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Subject. NE.	Saladilee on e	spacity chancinges in critical c	our c			
NR ads	on this					
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From:	NR	@dhsc.gov.uk>				
L	rch 2020 12:51					
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Subject: RE:	Guidance on ca	apacity challenges in critical o	care			
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Copyin NR	n CMOs offic	ce				
1 / 1	!					
NR						

From: NR @dhsc.gov.uk>						
Sent: 30 March 2020 12:26						
To: NR @dhsc.gov.uk>; NR @dhsc.gov.uk>						
Subject: FW: Guidance on capacity challenges in critical care						
Hi both						
Just checking in on the capacity in critical care guidance. NR, are you the best person to speak to about this today?						
From: NR @dhsc.gov.uk>						
Sent: 28 March 2020 20:29						
To: Blain, Max < Max.Blain@dhsc.gov.uk>; NR @dhsc.gov.uk>; NR						
To: Blain, Max < Max.Blain@dhsc.gov.uk>;NR@dhsc.gov.uk>;NRNR@dhsc.gov.uk>;NR						
NR @dhsc.gov.uk>						
Cc: Thomas, Kate < kate.thomas@dhsc.gov.uk >						
Subject: Re: Guidance on capacity challenges in critical care						
I've just heard from CMOs office that this isn't going to ministers tomorrow and has been paused for now.						
I'll make sure the duty team have the current version of the tool and guidance in case this comes up again tomorrow,						
but seeing as it's likely to change following further discussions I'll leave the Q&A for now.						
NR said:						
-SoS and Simon Stevens have spoken and have cancelled the Ministers implementation group tomorrow (was due to be 11am and specifically to discuss the clinical prioritisation tool) -This is because both are unhappy with issuing this tool as it stands (noting how potentially controversial it is/difficult landing)						
-Therefore things are on hold for now and DCMO Jenny Harries has updated the clinicians who wrote the tool and the						
UK CMOs						
-The tool might get redrafted into something SoS happy with but this will all be discussed over next few days						
-Everyone clear that this needs to be right and not rushed out, CMO view that not urgent need for it right now.						
From: Blain, Max < Max.Blain@dhsc.gov.uk >						
Sent: Saturday, March 28, 2020 7:36 pm						
To: NR						
Cc: Thomas, Kate						
Subject: RE: Guidance on capacity challenges in critical care						
Adding NR						
I've made a few changes below NR – hopefully we'll get more of a steer from Helen Stokes Lampard and NR in CMO's so more detail on stakeholders can be added in. If there's anything you can put in without that info please can you add.						
NR can you get in touch with NR in the morning and check how the guidance is going to ministers so our comms proposals can go in parallel.						

The duty team also needs to work up a Q&A on this for close tomorrow in case it does need to go out Monday.

Thanks,

Guidance on capacity challenges in critical care

Issue

The four UK CMOs commissioned experts to develop guidance for clinicians on clinical prioritisation for Covid19. It has been led by:

- Prof. Sir Jonathan Montgomery (UCL Prof. of Healthcare Law),
- Prof. Helen Stokes-Lampard (former RCGP President)
- Dr Ganesh Suntharalingam (President of the Intensive Care Society)

The guidance has been developed with engagement and input from a number of stakeholders including the BMA, GMC, National Voices, Royal Colleges, and a Moral and Ethical Advisory Group.

It is intended to provide clinicians with a decision-making protocol for use during the COVID-19 outbreak when ICU beds are in unprecedented demand.

Although clinicians ordinarily make ethical judgements as part of their work, this tool would bypasses usual processes and is intended for use when judgements must be made quickly and possibly by more junior clinicians.

The protocol is based on a scorecard system which takes into account age, co-morbidities and frailty to determine the most appropriate clinical pathway for an individual in the event that there are not ICU beds.

It is intended to provide a fair, consistent, ethical and compassionate framework for clinicians to make decisions about critical care pathways.

Strategy:

This is a sensitive document – although it is intended for clinical use it is almost certain it will end up in the public domain.

We do not recommend any proactive announcements to promote the guidance.

However, in order to ensure sensible, accurate and responsible coverage from media we recommend working with them closely to guide coverage.

Risks and mitigations

- We expect this document to be leaked to journalists as soon as it is circulated to the medical community. We are also aware that following engagement with the lead authors, some patient groups have expressed significant concerns about the nature of this work and there is a possibility they could go to media. Authors continue to engage with them to allay any concerns and address misperceptions but this remains a risk.
- Lead authors have advised that most clinicians in acute settings will be receptive to this guidance as it provides a standardised approach on which to base difficult decisions in unprecedented times. However, it is likely that it could be sensationalised by media and cause unnecessary panic and concern among the general public.
- Journalists could frame the protocol as the NHS withholding care from older or sicker patients because it cannot cope with demand. This is especially likely given media scrutiny on the situation in Italy where medics were reported as having to ration care.
- The format of the tool (a scorecard) is also likely to draw criticism that the decision-making process will be overly simplistic and uncompassionate.
- We will work closely to ensure that journalists understand the context in which this tool would be used, in what setting, how this fit in with our wider plan, and that it may not be needed.

Best wishes,					
NR					
Department of Health & Social Care	Head of External Affairs Strategy & External Affairs Department of Health and Social Care. 39 Victoria Street. London, SW1H 0EU E! PD @dhsc.gov.uk I&S JI: Personal Data To reach the External Affairs Team: DHSCExternalAffairs@dhsc.gov.uk				
From: NR	@dhsc.gov.uk>				
Sent: 27 March 2020 19:45	ND				
To: Blain, Max < Max.Blain@d	hsc.gov.uk> NR @dhsc.gov.uk>				
Cc: NR Subject: RE: Guidance on can	<u>@dhsc.gov.uk</u> >; Thomas, Kate < <u>kate.thomas@dhsc.gov.uk</u> > acity challenges in critical care				
Subject: NE. Guidance on cap	acity challenges in critical care				
Hi both					
	who had just come out of a meeting with the 4 CMOs and the guidance team. They want graphics to Ministers for clearance on Sunday afternoon ideally. So we agreed it would be				
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important to have the comms handling sent up at the same time, as Ministers/CMO are likely to have strong views on how this is communicated.					
So this will need progressing over the weekend – copying NR /Kate in here for ease so they can pick up on stakeholders and reattaching the guidance/graphics.					
NR is happy to chat through and is going to email NR separately about it.					
Thonks					
Thanks,					
<u>[Mix j</u>					
From: Blain, Max < Max.Blain	@dhsc.gov.uk>				
Sent: 27 March 2020 18:38					
To NR	@dhsc.gov.uk> NR @dhsc.gov.uk>				
Subject: RE: Guidance on cap	acity challenges in critical care				
	e approach looks right to me, both in terms of the briefing and top lines. What we need is will engage the key stakeholders to land this so we need to make sure NR and NHSE's h BMA etc.				
Can you share with them and	get views etc.				
The graphic is pretty grim, we should find another term other than 'points' for referring to how individuals are rated.					

In terms of timing, can you go to **NR** and check what the latest is. I don't think we need it cleared over the weekend.



Max Blain Head of News, Department of Health and Social Care 39 Victoria Street, London, SW1H 0EU

E: max.blain@dhsc.gov.uk T: I&S M: Personal Data

Follow us on Twitter @DHSCgovuk

From	NR	@dhsc.gov.uk>
Sent: 27 M	arch 2020 18:10	
To:	NR	@dhsc.gov.uk>; Blain, Max < Max.Blain@dhsc.gov.uk>
Subject: G	uidance on capacity	challenges in critical care
Hi both,		
sure how u	-L .	NR anded over to me earlier. I haven't had a chance to progress yet — I'm not entirely bught it would be worth you taking a look at the below. Can you let me know if you think the weekend?
		vas a call with the 4 CMOs and the guidance team this afternoon, so hopefully we will get a ld shed some more light.
Thanks,		

Guidance on capacity challenges in critical care

Issue:

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Strategy: