

[27/02/2020, 19:26:02] Matt Hancock: 1. Let's get as much as we can in the Budget
2. Then let's work out how we hit the target.

Irrelevant & Sensitive

[27/02/2020, 19:56:55] Helen Whately: **Irrelevant & Sensitive**

Irrelevant & Sensitive bring them on board willingly - which I
think is more likely if there's some £ **Irrelevant & Sensitive**

Irrelevant & Sensitive

[03/03/2020, 15:57:47] Helen Whately: **I&S**

I&S more directly with nhs & care workforce re coronavirus. I'm asking **NR**
Comms team to update me on the comms approach to the workforce tmr, but just
wanted to flag / sense check. H

[03/03/2020, 16:15:12] Matt Hancock: Good point. We are sending more info today but I
should do a missive to the front line at the right point

[03/03/2020, 16:27:57] Helen Whately: Exactly! A communication directly from you
would be a v good thing. If possible quite soon as there is growing nervousness about
system capacity to cope.

[03/03/2020, 18:23:21] Matt Hancock: Lots of questions about how social care will cope
with covid19.

[03/03/2020, 18:23:27] Matt Hancock: Are you on it?

[03/03/2020, 18:29:40] Helen Whately: I am chasing it. Have got hold of what I'm told
are two LA plans (Herts & Essex). My opinion is that they are inadequate. Have asked for
someone to brief me tomorrow on a plan for getting these and other plans into shape.

[03/03/2020, 18:32:28] Helen Whately: Was literally about to message you to flag my
concern. In parallel, I bumped into rob jenrick last night...he has similar concerns. He
said he's working on setting up an assurance process similar to one used for LA Brexit
no deal plans.

[03/03/2020, 18:39:20] Helen Whately: The Essex doc says providers are required by
CQC to have plans in place to provide safe care in the event of a pandemic. And, during
a flu pandemic, Directors of Adult Social Services need to know the effectiveness of
providers plans, emerging risks and capacity to meet demand. That's basically it. Their
plan.

[03/03/2020, 19:02:20] Matt Hancock: Can you possibly put some serious drive into getting them to a credible position? CMO tells me there's guidance to social care being developed to publish. Seems to me that we need to do a lot of work here

[03/03/2020, 19:37:56] Helen Whately: Yes, absolutely. It has taken a week to even get these 2 example plans and to get meeting in diary with Chief Social Worker (tmr). You are right, it needs a rocket under it.

[03/03/2020, 19:56:59] Matt Hancock: 🚀

[04/03/2020, 19:37:59] Helen Whately: Just to catch you up, I had a good check-in with Social Care today re Covid-19 prep. Ros & team have a process set up for reviewing LA plans over the next week, working together with MHCLG and involving ex Directors of Adult Social Care. I will meet with them again early next week to get feedback on the quality of plans. We also agreed once we have one or two in good shape, those can be used as models to help others.

[08/03/2020, 22:56:27] Helen Whately: Meant to say...v good job on QT on Thursday.

[09/03/2020, 06:43:18] Matt Hancock: 👍

[09/03/2020, 23:01:03] Helen Whately: I heard back from Robert Jenrick. He's asked for the LRF plan review to report back on Monday. I've asked if you or I could attend the discussion. He's also open to suggestions on how we 'proceed together'. My thinking is that there should be a fully joint team - but I will ask Ros her thoughts too.

[10/03/2020, 06:42:45] Matt Hancock: Brilliant. Sounds good.

[10/03/2020, 06:43:03] Matt Hancock: I'd prefer you to attend this one pls

[10/03/2020, 09:23:06] Helen Whately: I thought it might be one for me...But didn't want to assume.

[10/03/2020, 09:24:31] Helen Whately: Also, CQC are developing an App to get care providers to report how they are coping with Coronavirus. This sounds incredibly helpful (especially as they are the only organisation with a complete list). Thought you should know.

[10/03/2020, 22:03:24] Helen Whately: Reading my budget briefing on pension changes ready for BMA meet tmr AM...threshold is going up as discussed, I&S

I&S	
I&S	Flagging as I don't think this was made clear before, at least it wasn't clear to me.

Irrelevant & Sensitive

[05/04/2020, 17:01:45] Helen Whately: Sorry missed this somehow yesterday. Yes...I am meeting end of life team this week to make sure we have palliative care capacity. Can pick that up with them as well. Mindful MHCLG are active on 'death management' too

[05/04/2020, 17:04:45] Helen Whately: Please can I have someone in the supplies team dedicated to overseeing PPE to social care. It is still all over the place, they have sent me contradictory info in recent days and cannot answer Qs about flow. I'm also told clipper system looks NHS focused (and again no one can tell me whether it will cope with 20k social care providers ordering stock day 1). There's only so long I can keep saying to the social care sector we're working on it, without losing all credibility. H

[05/04/2020, 17:07:34] Matt Hancock: I had the impression Jonathan Marron was fixing it. If not then absolutely let's do that - can you talk to him?

[05/04/2020, 17:07:47] Matt Hancock: Yes - v important we work with MHCLG on this

[05/04/2020, 17:09:36] Helen Whately: I will talk to him again. It's not fixed. What we need is someone in the supplies team to have oversight, not a social care/DHSC person if that makes sense. But will go back to JM.

[05/04/2020, 21:03:45] Matt Hancock: Yes agree

[06/04/2020, 14:16:09] Helen Whately: Thank you for pushing Emily to identify an individual to oversee Social Care PPE. She was clearly reluctant & wants to keep the operation across H&SC - will see where we get to in next few days.

[06/04/2020, 20:38:05] Helen Whately: V worried about the PM. Hope you're ok. X

[08/04/2020, 11:26:25] Helen Whately: So no surprises (1) investigating reported serious covid breakout in a I&S believes 11 dead and staff refusing to work).

[08/04/2020, 11:28:33] Helen Whately: (2) lessons learned internationally suggest we should be testing all care home residents and staff who have had covid contact irrespective of symptoms. Have asked for guidance on action we should take based on this research (by LSE)

[08/04/2020, 12:46:24] Matt Hancock: I'm up for this and the capacity to do this is growing fast

[08/04/2020, 12:46:37] Helen Whately: Great

[09/04/2020, 20:53:58] Helen Whately: The team has made a start on the social care strategy. There will be a first cut with intro/objectives and structure (headings, main content points) for our call tmr.

[09/04/2020, 21:09:23] Matt Hancock: Brilliant. Key thing is the getting the policy right too

[12/04/2020, 18:15:30] Helen Whately: My PO tell me you're discussing the social care strategy with Dominic Raab tmr. Do let me know if there's anything else you need from me. Discharge process, testing & PPE still top priorities, then workforce (with parity vs what we do for NHS workforce as a guiding principle) and getting funding to providers (do we need a way of clawing back...). Still lacking transparency on what £ is actually reaching them. And want to see more focus on social care in govt comms. Hope you've had a little bit of family time...and just say any way I can help. H

[12/04/2020, 18:17:37] Matt Hancock: Yes. You should join the meeting

[12/04/2020, 18:17:51] Matt Hancock: Have you managed to progress the key policy decisions?

[12/04/2020, 18:23:11] Helen Whately: Thank you. Would like to.

[12/04/2020, 18:25:13] Helen Whately: I have given my view on them (& also asked for further work on a some) - but not sure I've quite understood the Q, have you got a couple of minutes to speak?

[12/04/2020, 18:28:53] Matt Hancock: I've asked for you to be invited

[13/04/2020, 09:12:18] Matt Hancock: Just in case you didn't get them: 9.45: Meeting

I&S

[13/04/2020, 09:17:00] Helen Whately: Thank you!

[13/04/2020, 09:27:02] Matt Hancock: It's starting early - now I think

[13/04/2020, 09:37:44] Helen Whately: I am waiting to be let in.

[13/04/2020, 10:03:58] Matt Hancock: you happy with where this has got to?

[13/04/2020, 10:16:07] Helen Whately: The discharge policy my biggest concern

[13/04/2020, 10:16:18] Helen Whately: That's an argument with Simon clearly

[13/04/2020, 10:18:01] Helen Whately: Dom's asks for more detail on testing and PPE are the same as mine have been for the last few days

[13/04/2020, 10:18:13] Helen Whately: No one seems able to give it!

[13/04/2020, 11:22:00] Helen Whately: Have you got a minute for a debrief re SC strat?

[13/04/2020, 11:23:42] Matt Hancock: will call

[13/04/2020, 14:59:20] Matt Hancock: How's the doc going? In particular, have we got an agreement with the PPE delivery team and with MHCLG on LRF drops between now and when Clipper comes online?

[13/04/2020, 15:48:08] Helen Whately: It is progressing. I am trying to get an answer on your Q above and on how Clipper will work for social care (Because will it...?)

[13/04/2020, 17:57:46] Helen Whately: Jonathan Marron has a sensible plan for PPE drops to LRFs this coming week.

[13/04/2020, 17:58:38] Helen Whately: Involves likely drops to 18 (based on the data they have supplied and demand). Those who have not provided data / do not need more will not get more.

[13/04/2020, 18:01:03] Helen Whately: And further drops the following week. Clearly there is some risk that providers who need it but have a rubbish LRF (which hasn't provided data) won't get access to more via their LRF. They will still need to be able to draw on the wholesalers/NSDC

[13/04/2020, 21:46:54] Matt Hancock: Have you agreed a discharge policy with NHSE?

[13/04/2020, 21:56:44] Helen Whately: Nhs won't keep them in an Nhs setting if fit for discharge. We can't force care homes to take them if covid infection risk - however, some may have isolation / covid positive zone so can...and if not, we advise local authorities to secure appropriate 'alternative care arrangements' eg an LA-commissioned isolation facility.

[13/04/2020, 21:59:01] Matt Hancock: That sounds messy

[13/04/2020, 21:59:23] Matt Hancock: Why won't the NHS keep them if the alternative to having a system in place is them staying in hospital?

[13/04/2020, 22:00:25] Helen Whately: I feels like a matter of principle. They are determined not to budge on discharging If patients are fit to discharge.

[13/04/2020, 22:00:44] Matt Hancock: Who is speaking for NHSE here?

[13/04/2020, 22:01:09] Helen Whately: Ros says the numbers will likely be really small - because anyone being discharged to care will likely have been in hospital 2 weeks anyway. Ian Dodge.

[13/04/2020, 22:02:19] Matt Hancock: Can you pls write your preferred language into the doc - taking into account genuine NHS concerns - and we will take that forward

[13/04/2020, 22:03:06] Helen Whately: Yes

[13/04/2020, 23:28:52] Helen Whately: I have been working on the text...and I can see the NHS point - at last they have managed to win the battle of getting patients who are fit for discharge actually out of their hospitals. I'm asking them to go backwards on that. I think - so long as it IS feasible for LAs to source provision for small numbers of covid patients being discharged, which it seems to be for some at least - I can live with that. The important thing is that we don't force care homes to take them.

[14/04/2020, 07:39:34] Matt Hancock: Ok. COVID our suspected Covid

[14/04/2020, 10:02:34] Helen Whately: Sorry I missed this message earlier

[14/04/2020, 10:02:56] Matt Hancock: We've agreed to publish tomorrow not today - so we have 24 hours to sort it

[14/04/2020, 10:04:17] Helen Whately: Yes....helpful given shifts on testing.

[14/04/2020, 10:04:31] Matt Hancock: yes - which is itself very helpful

[14/04/2020, 10:06:21] Helen Whately: Indeed. Have discussed with Paul

Johnston. He's working out whether you need to isolate people even if test is negative (given they have insisted tests are unreliable for asymptomatic people.)

[14/04/2020, 10:10:07] Helen Whately: For discharges - I concluded last night that it does make sense for LAs to have responsibility for people who don't need to be in hospital but do need to be quarantined. My understanding is LGA/ADASS agree (& NHS clearly). Can be funded out of the £1.3bn that went to nhs for discharges. The question is one of how they do it eg by commissioning a specific care home for the area, or hotel accommodation etc. Some are already doing this.

[14/04/2020, 10:10:33] Helen Whately: I realise you may disagree and want to revert to nhs!

[14/04/2020, 11:27:04] Matt Hancock: I'm very happy for it to be via LAs

[14/04/2020, 11:34:29] Matt Hancock: Best to include in the wording on discharge: "as agreed locally between the NHS and local authorities" - as there needs to be local flexibility

[14/04/2020, 11:49:31] Helen Whately: Ok. Will do

[15/04/2020, 18:34:49] Helen Whately: Great job at the press conf

[15/04/2020, 19:36:23] Matt Hancock: Thank you. Great job on the Plan and this morning !

[15/04/2020, 20:31:07] Helen Whately: Thank you. Really good to get it done and out the door.

[15/04/2020, 20:40:43] Matt Hancock: Amazing work by Ros. Landed really well

[15/04/2020, 21:42:31] Helen Whately: Yes - she's put in a lot of hours, and is hugely respected which helps both with content and sector reaction. We've sent her flowers as a thank you.

[15/04/2020, 21:43:05] Matt Hancock: Well done. Have you seen that ADASS have leaked their letter to Jonathan Marron?!