

OFFICIAL-SENSITIVE

HMIG (20) 07
Minutes

Minutes of a Meeting of the
COVID-19 - Health Ministerial Implementation Group
held via Zoom on

TUESDAY 7th April 2020
At 1200 PM

P R E S E N T

The Rt Hon Matt Hancock MP
Secretary of State for Health and Social Care

The Rt Hon Robert Jenrick, MP
Secretary of State for Housing,
Communities and Local Government

The Rt Hon George Eustice MP
Secretary of State for Environment, Food
and Rural Affairs

The Rt Hon Dr Thérèse Coffey MP
Secretary of State for Work and Pensions

The Rt Hon Michael Gove MP
Chancellor of the Duchy of Lancaster and
Minister for the Cabinet Office

The Rt Hon Stephen Barclay MP
Chief Secretary to the Treasury

The Rt Hon Penny Mordaunt MP
Paymaster General

The Rt Hon Mark Drakeford AM
First Minister of Wales

The Rt Hon Michael Ellis QC MP Solicitor
General

The Rt Hon Simon Hart MP
Secretary of State for Wales

The Rt Hon Alister Jack MP
Secretary of State for Scotland

The Rt Hon Christopher Pincher MP
Minister of State for Housing and Planning

Joe FitzPatrick MSP
Minister for Public Health, Sport and
Wellbeing

Helen Whately MP
Minister of State (Minister for Care)

Robin Swann MLA
Minister of Health

Vicky Ford MP
Parliamentary Under Secretary of State for
Children and Families

James Heap MP
Parliamentary Under Secretary of State
(Minister for the Armed Forces)

Edward Argar MP
Minister of State (Minister for Health)

Baroness Williams of Trafford
Lords Minister at the Home Office

Caroline Dinenage MP

Robin Walker MP

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Introduction	<p>THE SECRETARY OF STATE FOR HEALTH AND SOCIAL CARE said that the Group would review the current situation in Adult Social Care, which was a mission-critical element of keeping capacity in the NHS. The Group would also cover delivery of the shielding programme for clinically vulnerable people as well as an update on the health impacts of social distancing. Personal Protective Equipment (PPE) would be discussed in further detail at the next Healthcare Ministerial Implementation Group.</p>
Adult Social Care System Readiness	<p>THE MINISTER OF STATE FOR CARE said that there had been a lot of cross-government work to support Adult Social Care although the system was under pressure due to COVID-19. 9.7% of care homes in England had reported outbreaks of COVID-19, although this figure was higher in London. Data was being collected from the NHS England Capacity Tracker to give a picture of the system and covered over 70% of care homes at present. From the data available, occupancy was at 90% meaning there was some available care home capacity. RAG ratings across admission status, workforce and PPE were being collected from care homes and could potentially be shared with Local Authorities and MHCLG to compile into a LRF dashboard. An app was being developed by the Care Quality Commission (CQC) to allow domiciliary providers to input data and to allow providers to flag issues to receive further support.</p> <p>Continuing, THE MINISTER OF STATE FOR CARE said that discharges from hospital into the community to increase NHS capacity had been hugely successful. Non-COVID bed occupancy had reduced by nearly 40,000 patients since 2nd March, against the target of 30,000. Clear guidance on discharge processes and care home acceptances had been published. DHSC were aware of some concerns in the sector and guidance on infection control was under review. Further work was ongoing to model future discharge volumes and likely acuity of patients to ensure Adult Social Care capacity was sufficient in the coming weeks and months.</p> <p>Continuing, THE MINISTER OF STATE FOR CARE said that ensuring parity in the approach between the NHS and social care for PPE and testing was important. PPE was being delivered to social care providers from national stocks and they could contact the National Supply Disruption Response hotline in emergencies. A new channel through Clipper Logistics was also being established to deliver PPE to social care providers. Social care workers were also to be tested alongside NHS staff where capacity permits in order to reduce staff absences. There has also been a growth in interest around jobs in the care sector. Online training capacity has been scaled up and the DBS process shortened to create a pool of potential workers that providers can tap into.</p>