COVID-19: Latest developments | 2 April 2020

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Daily press briefing

Matt Hancock was joined by Professor John Newton, director of health improvement at Public Health England and Professor Stephen Powis, national medical director at NHS England and NHS Improvement.

Key points include:
- NHS Nightingale offers the equivalent bed capacity of ten district hospitals. Others will follow in Birmingham, Cardiff and Glasgow. The health service’s capacity is “significantly above demand” and more intensive care beds are being added.
- 163,194 people have now been tested for the virus: 33,718 have tested positive and the rate of infection has been doubling every three to four days. The number of people admitted to hospital is 12,949 and 2,921 have passed away out of those who have contracted the virus.
- The government has already bought 17.5 million antibody tests that will allow people to see if they have had the virus.
- The health and social care secretary paid tribute to clinicians who have lost their lives in the outbreak.
- 45 million pieces of personal protective equipment were delivered yesterday, including 5 million aprons and 6 million surgical masks.
- The UK is looking into “immunity passports” for those who have developed antibodies to the virus.
- £300 million of funding available for community pharmacies.
- £13.4 billion of historic NHS debt to be written off, a landmark step “placing the NHS in a stronger position to respond to the pandemic by providing stronger foundations for the future”.
- Testing priority: rolling out to patients who need it; then NHS staff and families; then critical key workers; and over time testing will be expanded to the community.
- 5,000 NHS workers have been tested so far.
- Insight on the challenges faced on testing: the UK went into the outbreak without a significant diagnostics industry; there has been a shortage of swabs and reagents (confirmed the former had been sorted and the later issue was being tackled); prioritisation, explaining the initial priority was for patient testing for lifesaving treatment but recognised NHS staff needed testing as well; several tests failed in evaluation.
Hancock detailed a **five-pillar plan**:

- Swab testing Public Health England labs and within the NHS in hospitals. Committed to reach 25,000 tests by the end of April at the latest.
- The creation of new swab testing capacity delivered by commercial partners (universities, research and companies like Amazon and Boots “to build from scratch a network of new labs and testing sites across the country. This service has just launched and ramping up significantly from this weekend. To begin with this testing facility will be used solely for NHS staff and their families”.
- Blood tests designed to tell whether people have had the virus and are now immune. The government is currently working with nine companies to evaluate effectiveness of tests.
- Surveillance is being conducted to confirm which proportion of the population, through an antibody test, with capacity for 3,500 tests a week “enough for population sampling to begin with”.
- The pharmaceutical sector is to build significant testing diagnostic capacity. GSK and AstraZeneca UK are now working with the UK’s “small but world-leading diagnostics companies” to build a “British diagnostics industry at scale”.

The five-pillar plan marks a goal of 100,000 tests per day by the end of April. Prof John Newton (PHE) will be coordinating the national testing effort.

“I will ensure over the coming weeks that every frontline NHS member of staff who needs a test will get one and their families,” Matt Hancock said, adding it “will be absolutely before the end of the month”

The initial priority on testing will be swab tests as this allows for the management of critically ill patients and allows NHS staff to come back to work.

The antibody tests are ideally done 28 days afterwards so the need for the antibody tests are not as urgent.

Prof Stephen Powis presented data on social distancing, showing that the use of public transport had fallen while motor vehicle use had not increased beyond a small spike two days ago (but noted it does need to come down further).

Urged people to look at the trend of COVID-19 cases over time rather than isolated, daily results and noted that all areas of the country were seeing a pressure on hospital admissions from the virus.

The number of deaths would likely continue to increase for a few more weeks until the full impact of social distancing were felt.

NHS staff isolating at home due to symptoms or family members will be tested first.

**£13.4 billion of NHS debt to be written off**

- More than a hundred NHS hospitals to be rid of historic debt.
- 107 trusts have an average of £100 million revenue debt each, with the two trusts with the highest debts reaching a combined total of over £1 billion.
- Launched in combination with an internal payment system to help NHS trusts in dealing with the coronavirus (COVID-19) response, which was agreed with NHS England and NHS Improvement last week.
• Under the new rules set out in a letter to all NHS trusts, should hospitals need extra cash this will be given with equity, rather than needing to borrow from the government and repay a loan.
• The letters also include details on every local area’s capital budget for 2020/21.
• These budgets come on top of the capital facility the government launched in February to assist the NHS respond to the COVID-19 outbreak.
• The debt to be written off at 31 March 2020 consists of a combination of interim revenue debt, which includes working capital loans and interim capital debt. The final principal is subject to validation by providers and audit but stands at £13.4 billion.
• These loans will be frozen from April 1 when interest will cease, and loan principal and outstanding interest extinguished from balance sheets following a transaction during 20/21.
• The debt will be effectively written off by converting the loans to equity (Public Dividend Capital). Adjustments will be made to ensure providers’ surplus/deficit positions are not negatively affected by debt write-off. The previous system saw Trusts owe the value of the loan plus interest.
• The loans that have been historically been issued as “Normal Course of Business” will be retained. These loans were entered into at the option of the provider, confirmed as affordable and continue to operate effectively.
• The debt being effectively written off is a transaction within the Department of Health and Social Care (DHSC) group. This will not create additional borrowing or fiscal cost for the Exchequer.

£300 million announcement for community pharmacies

The £300 million package of support is designed to allow community pharmacies to carry out essential services, including supplying medicines and providing medical advice to patients.

Key points include:
• £200 million was paid on 1 April to pharmacy contractors, alongside their normal monthly payments from the NHS Business Services Authority, and a further £100 million will be allocated on 1 May 2020.
• The Department of Health and Social Care has reduced the number of services that community pharmacy are required to deliver to allow them to prioritise the most important tasks, but they will continue to receive their full NHS funding.
• During this period, pharmacies will not be required to pilot new services or carry out non-critical administrative tasks, such as updating practice leaflets.
• Pharmacy contractors should note that this uplift will not show on their schedule of payment but the NHSBSA will be sending a letter to each contractor outlining their uplift.
• This uplift is not an additional funding over and above what was agreed for 2020/21 under the Community Pharmacy Contractual Framework five-year deal. The uplift will be reconciled in 2020/21. However, the mechanism and the time period over which reconciliation will take place has not yet been agreed with the Pharmaceutical Services Negotiating Committee.
Public Health England releases revised PPE guidance

Public Health England has published revised PPE guidance, which has the support of the World Health Organization and has been produced with input from medical royal colleges, trade unions and professional organisations. As the chief executive of the NHS Confederation, Niall Dickson, noted, the guidance is badly needed and an important step in rebuilding trust following a loss of confidence among frontline staff on the issue. The guidance can be applied to a variety of clinical scenarios and identifies the protective equipment required.

GMC asked to register further groups of doctors

The General Medical Council has been asked to register further groups of doctors. Temporary registration had already been given to nearly 15,500 doctors who left the register or gave up their licence to practise in the last three years (2017-2020). Under these new plans, the GMC will be restoring:

- around 12,000 doctors with a UK address who are registered, but don’t currently hold a licence to practise
- nearly 6,800 doctors with a UK address who gave up their registration between three and six years ago (2014-2017).

The GMC will be contacting them to confirm that they’ve been given temporary registration or had their licence returned.

Guidance published by DHSC on admission to care homes

The Department of Health and Social Care published guidance on the admission and care of people in care homes during the COVID-19 outbreak. The guidance is for care homes, local health protection teams, local authorities, clinical commissioning groups (CCGs) and registered providers of accommodation for people who need personal or nursing care. It sets out how to admit and care for residents safely and protect care home staff.

Call for a forum for MPs during recess to quiz ministers

Sir Lindsay Hoyle, the Speaker of the House of Commons, has called on the government to set up a forum for MPs during recess to quiz ministers. The Speaker stated “MPs are being swamped right now with questions and case work from distressed constituents who need answers” and after recess “if we are still in the grip of the crisis where the physical presence of members, or too many members, in the Palace is not appropriate, I am keen that they should be able to participate in key parliamentary proceedings virtually, for example, oral questions, urgent questions, statements”.

Home Office writes to the Advisory Council on the Misuse of Drugs

The Home Secretary has written to highlight planned emergency measures, which will include:

- enabling the supply of certain alternative products where prescribed items are unavailable
- legislate to allow registered pharmacies to supply certain substances without a prescription
- enable pharmacists without prescribing rights to change the frequency of instalments on instalment prescriptions without the immediate need for a new prescription from a prescriber.

The ACMD has been asked to respond by 3 April. The government will then lay regulations enabling emergency supply as soon as possible.

**Treasury Committee publishes evidence on economic impact of COVID-19**

A summary document has been published by the Treasury Committee today to detail the impact of COVID-19 on the economy.

Key points include:
- Calls for emergency funding for frontline charities, voluntary organisations and social enterprises who are supporting the response, especially where these are alleviating pressure on the health service or providing support to people suffering from the economic and social impact of COVID-19. Calls to establish a Stabilisation Fund to enable charities to stay afloat and continue operating during the course of the pandemic. Charities should be eligible to benefit from the measures announced by the Chancellor for businesses. Renters; consideration of a payment holiday.
- Guidance for self-employed; with calls for greater support for freelancers and a call for an extension of wage protections to self-employed workers on the same basis as other workers; perhaps via a temporary Income Protection Fund to provide all self-employed with a monthly income.
- Further clarification on eligibility of support, by simplifying the application process and clearer guidance.
- Establish a moratorium on debt payments and mortgage payments.
- Relaxation of compliance activity and tax rules.
- Demanding clarity from insurers and brokers regarding Business Interruption Insurance.
- Payment of bills for individuals; with several calling for the suspension of payment of utility and council tax bills.