Health and Social Care Committee

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From Rt Hon. Jeremy Hunt MP

12 November 2020

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

Sir Simon Stevens
Chief Executive, NHS England and Improvement

By email

Dear Matt and Sir Simon,

The Health and Social Care Committee published its report on *Delivering core NHS and care services during the pandemic and beyond* on 1 October 2020.[1] The Report made urgent and evidence-based recommendations to ensure that patients, NHS and care staff and the NHS are properly supported in the face of the significant disruption which has been caused by the pandemic.

I am grateful that, following a further exchange of letters between me, on behalf of the Committee, and Professor Chris Whitty and Professor Stephen Powis[2], the Committee's recommendation that the testing of patient-facing asymptomatic NHS staff has been agreed to.

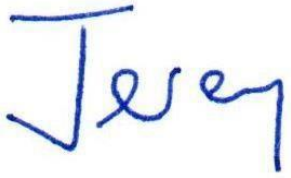
Beyond this, however, the Committee has not received a response to the recommendations in its *Delivering core NHS and care services* report which had deadlines of the end of October 2020 or earlier. These recommendations relate to five critical policy areas that require urgent attention: **communication issues with patients; waiting times and managing the backlog of appointments; routine testing of all NHS and care staff; NHS and care workforce wellbeing during the pandemic; and future arrangements with the independent sector.** These recommendations are set out in full at the end of this letter.

As we now approach mid-November, I am deeply concerned that responses to those recommendations have not been provided to the Committee, nor has the Committee received any indication, from either the Department or NHS England & Improvement, that there would be such a delay in response. The Committee recognises the significant pressures on both the Government and NHS England & Improvement but the responses to our recommendations are key to understanding what work is currently underway to support the healthcare system during this critical time, and in supporting our on-going inquiries into *Coronavirus: lessons learnt*[3] and *Workforce burnout and resilience in the NHS and social care*.[4]

I would therefore be grateful if you could ensure that substantive responses to the recommendations, which had a deadline of the end of October 2020 or earlier, are provided to the Committee by Monday 16 November 2020.

I am happy for the responses to the remaining recommendations in the *Delivering core NHS and care services* report to be sent to the Committee by the deadlines stated in the report or, if no deadline is provided, by the normal two-month timeframe.

Yours sincerely,



Rt Hon Jeremy Hunt MP
Chair, Health and Social Care Committee

Annex 1: Recommendations with a deadline of October 2020 or earlier; Delivering Core Services During the Pandemic and Beyond Report[5]

Communication issues with patients

Notwithstanding the actions taken to date, we recommend that NHS England & Improvement review, as a matter of priority, the directions given to NHS Trusts about how to communicate with patients about the progress of their treatment and important medical guidance in any future spike or second wave. As part of this review, NHSE/I must ensure that patients are always treated with dignity and compassion. We ask that as part of that review, NHSE/I makes an assessment of its and hospitals' communication with patients—and provide us with an update by the end of October 2020. We also ask, as part of this review, that NHSE/I address how they will communicate to the general population to ensure that the public gets the message that the NHS is open, and that those who have fears of catching COVID-19 in medical settings are not discouraged from accessing medical treatment. (Paragraph 22)

Waiting times and managing the backlog of appointments

We recommend that the Department of Health & Social Care and NHSE/I provide an update on what steps they have, individually and collectively, taken and are planning to take to quantify and address the overall impact of the pandemic on waiting times, the backlog of appointments and pent-up, and as yet unknown and unmet patient demand for all health services, specifically across cancer treatments, mental health services, dentistry services, GP services and elective surgery. We also ask the Department and NHSE/I to provide a comprehensive update on what steps are being taken and what steps will be taken in the future to manage the overall level of demand across health services. We request this information by the end of October 2020. (Paragraph 65)

We also recommend that NHSE/I provides us with a more broader update on what positive innovations or changes have taken place in the NHS during the pandemic, and how it seeks to ensure all the positive changes that have occurred are captured and potentially implemented across the entire NHS. We expect this information by the end of 2020. (Paragraph 66)

Issues facing NHS and care staff: PPE and testing

Routine testing of all NHS and care staff

We accept the advice we have received from many eminent scientists that there is a significant risk that not testing NHS staff routinely could lead to higher levels of nosocomial infections in any second spike. We therefore urge the Government to set out clearly why it is yet to implement weekly testing of all NHS staff. (Paragraph 121)

We recommend that, by the end of October 2020, the Government and NHSE/I set out: i) what current capacity there is for testing all NHS staff, ii) what further capacity (if any) will be required and iii) how long it is likely to take to secure sufficient capacity to offer routine tests to all NHS staff. (Paragraph 125)

Issues facing NHS and care staff: fatigue and "burnout"

NHS and care workforce wellbeing during the pandemic

We recommend that NHSE/I set out in detail what further specific steps it would like to take over the coming years to support the mental and physical wellbeing of all staff and a plan to deal with the specific issue of sustained workplace pressure due to the current pandemic and backlog associated with the coronavirus. This information should be made available to us in advance of any forthcoming Government spending announcements or by the end of October 2020 (whichever is earlier) in order for us to clarify what NHSE/I's priorities for NHS staff are, and to judge how far the Government's eventual spending commitments enable their implementation. (Paragraph 139)

We further recommend that NHSE/I should develop a full and comprehensive definition of "workforce burnout", and set out how the wellbeing of all NHS staff is being monitored and assessed. This information should be made available to us by the middle of October 2020, to enable us to scrutinise it in the course of our inquiry into Workforce Burnout and Resilience in the NHS and social care. (Paragraph 140)

The NHS: Lessons learnt and building for the future

The independent sector

We recommend, in addition to our recommendations in Chapter 2, that the Government and NHSE/I clarify what plans there are to continue to use independent bed capacity and other independent resources as the winter period approaches. We further recommend that the Government and NHSE/I set out i) what the current level of capacity is across all NHS services, ii) what assessment it has made of what additional capacity will be required, in the medium and long term, to ensure the restoration of non-COVID NHS services and iii) what level of capacity it is expecting and planning to retain from the independent sector in the medium and long term. We expect this information by the end of October 2020. (Paragraph 194)