



Department
of Health &
Social Care

*From the Lord Bethell
Parliamentary Under Secretary of State for Innovation*

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The Rt Hon Sir George Howarth MP
By email to: george.howarth.mp@parliament.uk

29 March 2021

Dear George,

Thank you for your correspondence of 7 September to Matt Hancock on behalf of a number of your constituents about preparedness for the second wave of COVID-19. I apologise for the delay in replying to what I recognise was a time-sensitive query. This delay has been caused by an unprecedented volume of correspondence throughout the pandemic.

To prepare for the winter, the Prime Minister announced £3billion of additional funding in July to support the NHS. This included ensuring that Nightingale hospital surge capacity was available, that the NHS had ongoing access to additional independent sector capacity, and funding to support the safe discharge of patients from NHS hospitals.

An additional £2.9billion of funding was made available from 1 October to support the NHS for winter and the rest of the financial year. This was new funding that had been calculated to provide systems with the resources to manage ongoing COVID-19 pressures alongside recovering activity levels. The majority of this funding (£2.7billion) went directly to local NHS systems to provide additional support for NHS organisations to manage ongoing COVID-19 pressures and resume routine activity.

The Spending Review included £1billion to address backlogs and tackle long waiting lists, by facilitating up to one million extra checks, scans and additional operations. We also provided an additional £450million of capital funding to expand and upgrade A&Es, in order to reduce overcrowding and improve infection control ahead of winter. This funding was to expand waiting areas and increase the number of treatment cubicles, helping boost A&E capacity by providing additional space.

A new offer to patients was piloted in NHS trusts across England, with NHS 111 being the first point of contact for accessing urgent medical care. To ensure patients get the right care in the right place and avoid unnecessary visits to A&E, NHS 111 will build on its role during the pandemic to direct patients to the most clinically appropriate service, such as an urgent treatment centre, GP or mental health professional. NHS 111 also booked appointments for patients to cut out unnecessary queueing and ensure they get the right care first time.

We focused on maximising local systems' use of 'Hear and Treat' and 'See and Treat' pathways for 999 demand, to support a sustained reduction in the number of patients conveyed to Type 1 or 2 emergency departments.

Additionally, we continued to make full use of the NHS Volunteer Responders scheme in conjunction with the Royal Voluntary Society, and the partnership with the British Red Cross, Age UK and St John Ambulance.

On 15 December, £80million of funding was also announced to support winter workforce pressures.

This winter the Government ran an expanded flu programme in light of the risk of flu and COVID-19 co-circulating. We made available 30 million vaccines to drive uptake in those most at risk to the effects of flu, and frontline health and adult social care workers. This ensured that anyone who wanted a flu vaccine this year, was able to access it.

With regard to NHS Test and Trace, the Government's COVID-19 Winter Plan was backed by an additional £7billion to increase testing and to improve contact tracing, taking the overall funding provided for NHS Test and Trace this financial year to £22billion. This includes £14million for the NHS COVID-19 App, as well as a wide range of associated work that is vital to our aim of protecting the public.

Launched on 24 September, the NHS COVID-19 App has benefitted from, and built on, the foundations of the work carried out on the earlier version of the app.

I hope this reply is helpful.

A handwritten signature in black ink, appearing to read "Bethell", is centered on the page. The signature is written in a cursive, slightly slanted style.

LORD BETHELL