



Coronavirus Bill

This briefing has been prepared by the Royal College of Physicians (RCP) ahead of the Commons stages on Monday 23 March. This briefing was produced on Friday 20 March and updated on Saturday 21 March.

Summary

As a leading health organisation aimed at improving patient care and preventing disease in the UK and globally, the RCP broadly welcomes the emergency bill to strengthen response plans to coronavirus (COVID-19). The new laws must protect life and the nation's public health and ensure NHS and social care staff are supported to deal with significant extra pressure on the health system. If we do not protect our health and care staff, we will put patients and the country as a whole at greater risk.

Key recommendations

Supporting the workforce:

We appreciate that the government is working very fast to create the capacity to roll-out **testing for all NHS front-line, social care staff and their households**. To provide reassurance it is crucial that the government makes provisions to protect NHS and social care staff by providing **priority access to tests**. This is vital to avoid exacerbating workforce shortages by forcing many clinicians to stay off work, potentially unnecessarily.

Personal Protective Equipment (PPE) is important in reducing the transmission of infection to patients and protecting healthcare workers from healthcare-associated infection. The government must, therefore, ensure a sufficient supply of all necessary PPE to keep clinicians and front-line staff in both health and social care protected at all times. Without it, [clinicians may be unable to start](#) CPR for people with confirmed or suspected COVID-19.

It is crucial that the government safeguard the health and wellbeing of clinicians and NHS and social care staff during this epidemic. Measures to support this should include investment into designated staff-only rest areas, adequate points of access for drinking water and access to nutritious food and drink. Now more than ever we must ensure that we look after our NHS and social care workforce.

To further **reduce non-essential contact**, the government must explore measures which help **facilitate more video conferences style appointments/consults** and for more work to be done to improve de-briefs for staff. As outlined in the [RCP's report](#), outpatient care represents the largest proportion of NHS contact with the public in the hospital setting.

We welcome the proposed flexibilities around NHS pensions in the bill which will allow staff to return to practice currently. We also welcome the indemnity aspects of the bill and ask the government to confirm that indemnity will cover volunteers brought in to help the system.

Social Care and Community Services:

The Bill makes several amendments to duties on local authorities as laid out in the Care Act 2014. COVID-19 will place additional pressure on an already fragile social care system. However, it is crucial that these new duties don't result in people who would have had access to care under the old duties no longer receiving care due to a lack of resources. If individuals' access to care is limited because of the impacts of COVID-19 this will

likely result in increased pressures on the NHS as care for these individuals may no longer be delivered in the community.

The government must ensure that the level of contingency planning in the NHS is matched in the social care system. The NHS and social care are inextricably linked, and planning must not happen in isolation.

Health Inequalities:

As highlighted in the '[Health Equity in England: the Marmot review 10 years on](#)' report, health is affected by the environment in which we live and the more deprived the area, the shorter the life expectancy and the poorer the health within these shorter lives. Therefore, in order to protect vulnerable individuals on lower-incomes, the emergency bill must include provisions to provide **adequate financial support during this epidemic**.

We must also recognise that many of those not on the lowest incomes are also dependent on their monthly wage to pay their mortgage or rent, pay their bills and feed their families. Statutory sick pay (SSP) will not be adequate for many people and [Citizens Advice has proposed that SSP be set at £180 a week](#). The steps the government has taken so far are welcome, particularly those announced on Friday which secures a level in income protection for employees. However, we still remain concerned about those who would access SPP and those who are self-employed it is vital that the Chancellor considers what more the government can do for these groups in the coming days.

Such moves are necessary to avoid further pressure on the health and care system. If we do not make sure everyone is provided for, we run the risk of increased physical and mental illness due to stress.

Media quote on 19/03/20

RCP president, Professor Andrew Goddard said:

'In exceptional times, exceptional measures are necessary. Reducing paperwork, allowing staff to move outside of their normal duties and encouraging nearly qualified staff and those who may have recently retired to into the workforce is welcome. It is key that the NHS uses the skills and experiences of these people appropriately to provide additional capacity in across the NHS and Social Care.

'But these are hugely stressful, worrying and exhausting times for all healthcare staff and these measures won't change that. More than ever, doctors and their colleagues are putting their own health and wellbeing on the line and we must keep looking for ways in which to support and protect them in the coming weeks and months. The quicker that priority testing for NHS and social care staff, and their families can be rolled out, the quicker that staff will be able to return to the front line.

'Society as a whole is worried, people don't know if they will still have jobs and an income at the end of this crisis. We welcome the government's action to introduce stability for business, but now they must turn their attention to supporting individuals and protecting and boosting peoples incomes. Without this people are going to be placed in the impossible position of having to choose between bringing in an income and their health. '

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