



This report shows written answers and statements provided on 5 June 2020 and the information is correct at the time of publication (03:43 P.M., 05 June 2020). For the latest information on written questions and answers, ministerial corrections, and written statements, please visit: <http://www.parliament.uk/writtenanswers/>

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Notes:

Questions marked thus **[R]** indicate that a relevant interest has been declared.

Questions with identification numbers of **900000 or greater** indicate that the question was originally tabled as an oral question and has since been unstarred.

ANSWERS

BUSINESS, ENERGY AND INDUSTRIAL STRATEGY

■ Car Washes: Coronavirus

Stella Creasy:

[\[51928\]](#)

To ask the Secretary of State for Business, Energy and Industrial Strategy, whether car washes are permitted to operate during the covid-19 outbreak.

Paul Scully:

[Holding answer 4 June 2020]: The guidance on working safely during COVID-19 is aimed at working environments, not whether a specific business can reopen.

The guidance is designed to help employers, workers and the self-employed understand how to work safely, including what employers need to think about to adapt a workplace to manage risk in the context of the coronavirus pandemic.

We know that every organisation is different. Whether hand or automatic car washes, employers can use the guidance to create specific plans for their business in consultation with those who are affected by their operations, including workers and contractors. Plans will depend on the nature of your business, such as the sector, and the details of your workforce and operations.

Whether a business must remain closed varies according to which part of the UK you are operating in. For England the rules are set out on the gov.uk website. The website also includes links to information for Scotland, Wales and Northern Ireland.

CABINET OFFICE

■ Business: Coronavirus

Emma Hardy:

[\[52387\]](#)

To ask the Minister for the Cabinet Office, what plans he has to publish a list of businesses that will be able to open under stage three of the Government's covid-19 recovery strategy.

Penny Mordaunt:

The move to Step Three of the COVID-19 Recovery Strategy will take place when the assessment of risk warrants further adjustments to the remaining measures.

Further details will be published in due course as appropriate.

■ Coronavirus: Disease Control

Shabana Mahmood: [51802]

To ask the Minister for the Cabinet Office, what steps the Government is taking to ensure that cross-government strategies to ease covid-19 public health restrictions do not put people living in multi-generational households at an increased risk of infection.

Penny Mordaunt:

As set out in [Our Plan to Rebuild](#), the Government is introducing a range of adjustments to social distancing measures, timing these carefully according to both the current transmission rate of the virus and the Government's ability to ensure safety. The steps for modifying social distancing measures are set out in the plan, with strict conditions to safely move from each step to the next.

The government has committed to keeping social distancing measures under close review. As part of this work, we have been considering the impact of these measures on different groups in society or those from particular backgrounds.

We have published guidance for people with grandparents, parents and children living together which is available at the following link:

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/guidance-for-households-with-grandparents-parents-and-children-living-together-where-someone-is-at-increased-risk-or-has-symptoms-of-coronavirus-cov>

■ Marriage: Coronavirus

Barbara Keeley: [51785]

To ask the Minister for the Cabinet Office, what the Government's timeframe is for weddings of different sizes to be able to resume.

Penny Mordaunt:

[Our Plan To Rebuild](#), the Government's COVID-19 Recovery Strategy, is published on gov.uk and includes details on plans for weddings. We understand the frustration couples planning a wedding must be feeling at this time. We are keeping these restrictions under review and will ease them as soon as it is safe to do so. We will continue to work closely with faith leaders and local government over the coming weeks to go through the practicalities of doing so.

Marriages and civil partnerships under the special procedure for those who are seriously ill and not expected to recover, are taking place in some cases where it is safe to do so in line with PHE guidance.

■ UK Trade with EU: Northern Ireland

Louise Haigh: [52189]

To ask the Minister for the Cabinet Office, with reference to page 13 of his Department's publication, The UK's Approach to the Northern Ireland Protocol, whether each animal

and agri-food product moving from Great Britain to Northern Ireland will require an Export Health Certificate.

Louise Haigh: [\[52192\]](#)

To ask the Minister for the Cabinet Office, what recent estimate his Department has made of the proportion of goods consignments from Great Britain to Northern Ireland that contain agri-food products.

Louise Haigh: [\[52194\]](#)

To ask the Minister for the Cabinet Office, with reference to the UK's approach to the Northern Ireland Protocol, published on 20 May 2020, whether the proposals set out in paragraph 19, page 10 require a derogation from the Union Customs Code; and whether the Government will seek such an agreement.

Louise Haigh: [\[52195\]](#)

To ask the Minister for the Cabinet Office, with reference to p11 (25) of the UK's Approach to the Northern Ireland Protocol, if he will outline what constitutes a genuine and substantial risk; and what estimate he has made of the proportion of goods will be charged under that definition.

Louise Haigh: [\[52196\]](#)

To ask the Minister for the Cabinet Office, when the Government plans to publish guidance for businesses and third parties on the UK's Approach to the Protocol.

Louise Haigh: [\[52197\]](#)

To ask the Minister for the Cabinet Office, whether (a) entry summary (safety and security) declaration, (b) customs checks, (c) regulatory checks, (d) export or exit summary declarations for goods and (e) Rules of Origin requirements and checks will be required for relevant parties or goods trading between Great Britain and Northern Ireland.

Louise Haigh: [\[52198\]](#)

To ask the Minister for the Cabinet Office, what estimate the Government has made of the volume of the proportion of consignments that will be checked between Great Britain and Northern Ireland.

Louise Haigh: [\[52199\]](#)

To ask the Minister for the Cabinet Office, whether the new electronic important declaration requirement referenced in the UK's Approach to the Northern Ireland Protocol already exists; and whether development work has begun on that declaration requirement.

Louise Haigh: [\[52200\]](#)

To ask the Minister for the Cabinet Office, with reference to paragraph 57, p19 of the UK's Approach to the Northern Ireland Protocol, what estimate of the proportion of goods on which duties will be levied was the assumption that tariffs will be relatively small made.

Penny Mordaunt:

I refer the Hon Member to the [oral statement](#) - accompanying the publication of the Government Command Paper, the [UK's Approach to the Northern Ireland Protocol](#) - which was made by my Rt Hon Friend the Chancellor of the Duchy of Lancaster on 20 May. I also refer to the commitment in the Command Paper, to publishing further detailed information and guidance. These will be published in due course.

As the Command Paper, The UK's Approach to the Northern Ireland Protocol, sets out explicitly, we are clear that there should be no tariffs on internal goods movements because the UK - as the Protocol acknowledges - is a single customs territory. The paper outlines several examples of movements that pose no risk of movement into the EU Single Market - such as a supermarket delivering to its stores in NI. This is a principle to be formalised in the Joint Committee, but as the Command Paper makes clear we consider there to be various ways of making it work in practice. We will work closely with the Northern Ireland Executive and businesses to develop these proposals, and produce full guidance to business and third parties before the end of the transition period.

On unfettered access, the Protocol is clear that nothing in it prevents Northern Ireland business enjoying unfettered access to the rest of the UK internal market, and we will legislate to guarantee this by the end of the year.

On agri-food, the Government's approach builds on the long-standing status of the island of Ireland as a single epidemiological zone. As has long been acknowledged, some checks on agri-food will be required to help protect supply chains and the disease-free status of the island of Ireland. These will build on the existing precedents of agri-food checks for live animals arriving in Northern Ireland, from the rest of the UK. Further details are to be discussed with the EU in the Withdrawal Agreement Joint Committee.

DEFENCE**■ Commonwealth: Veterans****Mrs Sharon Hodgson:****[51722]**

To ask the Secretary of State for Defence, how many British Commonwealth personnel are in receipt of (a) a War Disablement Pension or (b) the Armed Forces Compensation Scheme.

Johnny Mercer:

Information on the nationality of War Pension recipients is not recorded centrally.

As of 31 March 2019, approximately 209 British Commonwealth personnel, as defined by the British Nationality Act 1981, were in receipt of an ongoing payment under the Armed Forces Compensation Scheme.

Figures covering the period 1 April 2019 to 31 March 2020 will be published on the Gov.UK website within the next four weeks, at the link below:

<https://www.gov.uk/government/collections/armed-forces-compensation-scheme-statistics-index>

DIGITAL, CULTURE, MEDIA AND SPORT

■ Commonwealth Games 2022: Coronavirus

Stuart Anderson:

[53620]

To ask the Secretary of State for Digital, Culture, Media and Sport, what assessment his Department has made of the effect of the covid-19 outbreak on preparations for the 2022 Commonwealth Games.

Nigel Huddleston:

Birmingham 2022 will be at the heart of a memorable summer of sport and a year of national celebration in 2022. We will continue to work with our partners to closely monitor the situation over the next two years and ensure we can deliver a fantastic Games in 2022.

■ Football Association Premier League: Intellectual Property

Mr Alistair Carmichael:

[51664]

To ask the Secretary of State for Digital, Culture, Media and Sport, what representations he has made to the Government of Saudi Arabia on the blocking of law suits attempted by the Premier League to protect its intellectual property in that country; and if he can make a statement.

Nigel Huddleston:

My officials are working closely with their counterparts in the Foreign and Commonwealth Office and the Department for International Trade to ensure the international interests of the Premier League and other UK sports bodies are protected and promoted around the world. We know that the Premier League is a great soft power asset for the UK, and we will continue to encourage relevant national governments to ensure it receives parity of treatment in all international markets.

HEALTH AND SOCIAL CARE

■ Ambulance Services: Standards

Dr Rosena Allin-Khan:

[47403]

To ask the Secretary of State for Health and Social Care, what assessment he has made of the performance of ambulance response times during the covid-19 outbreak.

Edward Argar:

Ambulance Quality Indicators, including national response time performance are published monthly by NHS England. This can be found at the following link:

<https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/>

In April, four of the six national response time standards were met for life threatening, emergency, urgent, and non-urgent calls. In March, one standard was met for life threatening calls. Ambulance services received a record number of calls per day to 999, alongside a reduction in patients conveyed to accident and emergency, in order to reduce the increased pressures hospitals are facing due to the COVID-19 pandemic.

■ Cancer: EU Countries

Grahame Morris: [\[46034\]](#)

To ask the Secretary of State for Health and Social Care, if he will make a comparative assessment of level of cancer services provided in each EU member state during covid-19 pandemic.

Jo Churchill:

[Holding answer 18 May 2020]: No assessment has been made.

■ Cancer: Hospitals

Jim Shannon: [\[45196\]](#)

To ask the Secretary of State for Health and Social Care, what plans he has to create covid-19 free hospital sites for the treatment of cancer patients.

Jo Churchill:

NHS England and NHS Improvement have published guidance and supported the development of 'hubs' for cancer surgery. Hubs are being developed in all 21 Alliance areas across England and are already fully or partially operational in at least 18 areas. NHS England and NHS Improvement are working now with all Cancer Alliances on plans for the next phases of service delivery.

■ Cancer: Screening

Dame Diana Johnson: [\[48323\]](#)

To ask the Secretary of State for Health and Social Care, what the planned timescale is for resuming all NHS cancer screening programmes that have been paused due to the covid-19 outbreak.

Jo Churchill:

The National Health Service is working to step up non-COVID-19 urgent services as part of the second phase of the NHS response to COVID-19. This includes delivering as much routine and preventative work as possible, including screening.

On 29 April, NHS England and NHS Improvement wrote to NHS leaders setting out the second phase of the NHS response to COVID-19. A copy of this letter can be found at the following link:

<https://www.england.nhs.uk/coronavirus/publication/second-phase-of-nhs-response-to-covid-19-letter-from-simon-stevens-and-amanda-pritchard/>

■ Care Homes: Coronavirus

Mr Clive Betts:

[46543]

To ask the Secretary of State for Health and Social Care, which organisations are responsible for the carrying out of covid-19 tests in care homes of residents and staff; and what changes have been made to the testing processes of those organisations in the last month.

Helen Whately:

[Holding answer 18 May 2020]: Public Health England (PHE) and the Department are working closely together to respond to outbreaks of COVID-19 in care homes.

PHE's health protection teams (HPTs) play a vital role locally in responding to any outbreak in care homes, providing tailored infection control advice to allow staff to protect themselves and their residents. From the outset, HPTs have been arranging testing for residents when an outbreak is reported at a particular care home.

The Department is offering a test to every staff member and resident in every care home in England, whether symptomatic or not. By 6 June, every care home for the over 65s will have been offered testing for residents and staff.

■ Coronavirus: Asthma

Vicky Foxcroft:

[43704]

To ask the Secretary of State for Health and Social Care, what proportion of people in receipt of a shielding letter sent by the Government in response to the covid-19 outbreak have severe asthma.

Jo Churchill:

This information is not held in the format requested.

■ Coronavirus: Chickenpox

Chris Green:

[43052]

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to help ensure that Public Health England recommendations are being implemented for (a) people working in close contact with people who are at high-risk of chickenpox and (b) NHS staff without a confirmed history of chickenpox during the covid-19 outbreak.

Jo Churchill:

In most cases chickenpox (varicella-zoster) is a self-limiting condition which can be safely managed at home. Post-exposure management using varicella-zoster immunoglobulin is used to protect individuals at high risk of suffering from severe chickenpox.

The 'Green Book' ¹ guidance is based on advice from Public Health England, the Joint Committee on Vaccination and Immunisation and the standards expected of health and care professionals by their regulatory bodies. It is the responsibility of all health and care professionals to keep themselves informed of any developments which may have a bearing on their area of practice. Current personal protective equipment and social distancing COVID-19 guidance also applies.

Note:

[1] <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book>

■ Coronavirus: Cumbria

Simon Fell: [\[48635\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made of the reasons for the reportedly high number of cases of covid-19 in Barrow-in-Furness and South Lakes.

Jo Churchill:

Variation in the number of COVID-19 cases is caused by a number of factors including demography, behaviour and rate of testing. The rate of testing in the area has been high due to an early and proactive approach to testing taken by the University Hospitals of Morecambe Bay (UHMB) NHS Foundation Trust, which manages Furness General Hospital, the Royal Lancaster Infirmary and the Westmorland General in Kendal in South Lakeland.

The Trust commenced swabbing of employees and household members who were symptomatic of coronavirus at the end of February 2020. Testing has included UHMB NHS Foundation Trust employees and household members, hospital inpatients, care home residents and staff, and key workers from other organisations and their households.

■ Coronavirus: Death

Dan Jarvis: [\[47290\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made on the effect of socio-economic deprivation on registered deaths involving covid-19.

Chloe Smith:

[Holding answer 20 May 2020]: The government is considering the impacts of all of its policies in response to COVID-19 on different socio-economic groups.

The information requested falls under the remit of the UK Statistics Authority. I have therefore asked the Authority to respond.

Attachments:

1. UK Statistics Authority response [PQ47290.pdf]

■ Coronavirus: Disability

Marsha De Cordova:

[\[47452\]](#)

To ask the Secretary of State for Health and Social Care, what proportion of people who have tested positive for covid-19 are disabled.

Helen Whately:

[Holding answer 20 May 2020]: At this stage, the data that we hold is not available in the format requested. We will continue to review the data we publish.

■ Coronavirus: Disease Control

Ian Murray:

[\[49655\]](#)

To ask the Secretary of State for Health and Social Care, what his Department's criteria are for deciding when to inform the public of the outbreak of an infections disease in a specific (a) local and (b) regional location.

Jo Churchill:

[Holding answer 2 June 2020]: Local outbreaks are usually managed by a multi-agency Outbreak Control Team (OCT). Member organisations will be appropriate to each situation but an OCT will usually be chaired by either a Public Health Consultant from Public Health England (PHE) or the Local Authority Director of Public Health and will include experts from PHE, the local authority, the local National Health Service, the setting concerned and other wider partners. Each OCT considers the response required to each outbreak on its own merits. Informing the public about the outbreak is a key decision which is discussed and agreed by all the members of an OCT when an outbreak is considered to pose an ongoing risk to the wider public who need to be alerted to measures they need to take in order to protect their health.

Use of communication through the media may be a valuable part of the control strategy of an outbreak and the OCT will consider the risks and benefits of proactive versus reactive media engagement in any outbreak.

Further information is available in the PHE Communicable Disease Outbreak Operational Guidance at the following link:

<https://www.gov.uk/government/publications/communicable-disease-outbreak-management-operational-guidance>

■ Coronavirus: East of England

Daniel Zeichner:

[\[47323\]](#)

To ask the Secretary of State for Health and Social Care, what the official calculation is of the covid-19 R rate in the East of England region as of 19 May 2020.

Jo Churchill:

We do not currently publish the R rate in each region. The Government Office for Science currently publishes the latest estimate of the United Kingdom-wide range for

R on a weekly basis. The current range is estimated to be 0.7-1.0 and is based on latest data available to determine infection and transmission rates.

The Government is committed to publishing the scientific evidence that has informed the Scientific Advisory Group for Emergencies advice. These papers are being published in batches. The latest batches were released on 20 March 2020 and 5 May 2020 and the next batch will be published in the coming weeks. The full list of papers released to date is available at the following link. This list will be updated to reflect papers considered at recent and future meetings.

<https://www.gov.uk/government/groups/scientific-advisory-group-for-emergencies-sage-coronavirus-covid-19-response>

■ Coronavirus: Hospitals

Mrs Emma Lewell-Buck:

[52035]

To ask the Secretary of State for Health and Social Care, pursuant to the Answer of 29 May 2020 to Question 43030 on Coronavirus: Hospitals, what information his Department holds on the number of (a) admissions and (b) deaths in (i) all and (ii) each Nightingale hospital.

Edward Argar:

[Holding answer 4 June 2020]: NHS England collects and publishes information on the deaths of patients who have died in hospitals in England and had tested positive for COVID-19 or where COVID-19 was mentioned on the death certificate. This data is currently available for two of the Nightingale hospitals (NHS Nightingale Hospital London and NHS Nightingale Hospital North West).

Data is available at the following link:

<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-daily-deaths/>

■ Coronavirus: Nike

Ian Murray:

[49653]

To ask the Secretary of State for Health and Social Care, when Public Health England were informed of a covid-19 outbreak at a Nike conference in Scotland; what advice was provided as result; and if he will make a statement.

Ian Murray:

[49654]

To ask the Secretary of State for Health and Social Care, what information his Department holds on whether Public Health England was informed by Nike that it was (a) closing and (b) disinfecting its stores in Edinburgh as a result of a suspected outbreak of covid-19 at the Nike international conference on 26 and 27 February 2020.

Jo Churchill:

[Holding answer 2 June 2020]: Public Health England (PHE) was alerted to a case associated with the Nike Conference in Edinburgh on 2 March 2020. Around 50

individuals who attended this conference lived in England and were identified. PHE followed up these individuals. They were sent text messages informing them of the exposure and asking them to self-isolate for 14 days and contact 111 if they develop symptoms.

PHE did not have direct contact with conference organisers in Edinburgh or Nike in Edinburgh. Health Protection Scotland had direct contact with the conference organisers as the lead organisation in the incident response.

■ **Coronavirus: North West**

Ms Angela Eagle: **[42906]**

To ask the Secretary of State for Health and Social Care, what recent discussions he has had with Local Resilience Forums in the North West about the reasons for the North West having the highest reported incidences of cases of covid-19.

Ms Angela Eagle: **[42907]**

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of trends in the level of covid-19 cases in (a) Liverpool, (b) Wirral and (c) Manchester.

Ms Angela Eagle: **[42908]**

To ask the Secretary of State for Health and Social Care, whether his Department has issued guidance to NHS trusts in the North West as a result of the increase of cases of covid-19 in that region.

Jo Churchill:

[Holding answer 11 May 2020]: The Public Health England (PHE) COVID-19 data dashboard includes data by upper tier local authority. As at 13 May, the COVID-19 incidence rate was 306.2 cases per 100,000 resident population for Liverpool, 353.9 per 100,000 for Wirral, and 248.7 per 100,000 for Manchester. Data from 31 January to 13 May 2020 show the COVID-19 cumulative incidence rate for the North West was 313.4 cases per 100,000 resident population. This is lower than the North East, although higher than other regions. The PHE COVID-19 Dashboard is available at the following link:

<https://coronavirus.data.gov.uk/>

■ **Coronavirus: Protective Clothing**

Dr Andrew Murrison: **[R] [49611]**

To ask the Secretary of State for Health and Social Care, for what reasons Public Health England has not incorporated in its advice to (a) care homes and (b) general practices (i) Resuscitation Council and (ii) WHO guidance on provision of Level 3 personal protective equipment in settings where cardiac arrest is likely.

Dr Andrew Murrison: [R] [49612]

To ask the Secretary of State for Health and Social Care, if he will publish the (a) evidence base used (b) authorities consulted by Public Health England in formulating its guidance on the use of PPE in care settings in which cardiac arrest is likely.

Dr Andrew Murrison: [R] [49613]

To ask the Secretary of State for Health and Social Care, whether care home staff are permitted without Level 3 PPE to undertake cardiopulmonary resuscitation on (a) residents who have tested positive for covid-19 (b) and residents whose covid-19 status is undetermined .

Jo Churchill:

[Holding answer 2 June 2020]: The United Kingdom's Infection Prevention and Control (IPC) guidance continues to recommend the use of personal protective equipment (PPE) for health and social care teams treating COVID-19 patients. It is crucial that everyone that needs it has access to the right protective equipment.

The Department's, New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) recently reviewed the evidence and has maintained this position, stating that they do "not consider that the evidence supports chest compressions or defibrillation being procedures that are associated with a significantly increased risk of transmission of acute respiratory infections". Further information is available at the following link:

<https://app.box.com/s/3lkcbxepqixkg4mv640dpvvg978ixjtf/file/657486851975>

■ Coronavirus: Rehabilitation

Justin Madders: [48491]

To ask the Secretary of State for Health and Social Care, what steps are being taken to ensure that additional capacity for rehabilitation care is created for patients discharged from hospital after contracting covid-19.

Edward Argar:

[Holding answer 2 June 2020]: On 19 March 2020, we published the 'COVID-19 hospital discharge service requirements.' This sets out guidance on supporting the safe and rapid discharge of patients who no longer need acute care. It follows the 'Discharge to Assess' model; wherever possible, people who are clinically ready will be supported to return to their place of residence, where assessment of longer-term needs will take place.

This guidance provides information to support health and care organisations to ensure we have the capacity to meet the needs of people affected by COVID-19. The Government has also made £1.3 billion funding available to the National Health Service to help patients who no longer need urgent treatment to get home from hospital safely and quickly.

Justin Madders:

[48492]

To ask the Secretary of State for Health and Social Care, what steps are being taken to ensure that a national patient pathway is created for patients discharged after being hospitalised with covid-19.

Edward Argar:

[Holding answer 2 June 2020]: On 19 March 2020, we published the 'COVID-19 hospital discharge service requirements.' This sets out guidance on supporting the safe and rapid discharge of patients who no longer need acute care. It follows the 'Discharge to Assess' model; wherever possible, people who are clinically ready will be supported to return to their place of residence, where assessment of longer-term needs will take place. This guidance provides information to support health and care organisations to ensure we have the capacity to meet the needs of people affected by COVID-19. The Government has also made £1.3 billion funding available to the National Health Service to help patients who no longer need urgent treatment to get home from hospital safely and quickly.

■ **Coronavirus: Sick Leave**

James Murray:

[49133]

To ask the Secretary of State for Health and Social Care, whether his Department holds data on (a) occupation and (b) gender of people who have requested a sick note from NHS 111 for self-isolation due to covid-19 symptoms.

Helen Whately:

The Department does not hold the data requested.

■ **Coronavirus: Supermarkets**

Mr Clive Betts:

[48948]

To ask the Secretary of State for Health and Social Care, what assessment has been made of the risk of transfer of covid-19 in supermarkets.

Jo Churchill:

[Holding answer 2 June 2020]: The Government has published evidence on environmental transmission, including indoor and outdoor risks. The two relevant papers are available at the following links:

<https://www.gov.uk/government/publications/evidence-of-environmental-dispersion-of-covid-19-for-different-mechanisms-14-april-2020>

<https://www.gov.uk/government/publications/environmental-influence-on-transmission-of-covid-19-28-april-2020>

■ Dental Services

Saqib Bhatti:

[49875]

To ask the Secretary of State for Health and Social Care, what (a) support and (b) guidance is available to patients needing treatment for (i) toothache, (ii) abscesses and (iii) other urgent dental conditions.

Jo Churchill:

To meet the Government social distancing measures and to contain the spread of COVID-19 all routine dentistry has currently been suspended.

We expect all National Health Service dental practices to provide urgent telephone advice and triage. Dentists are giving urgent advice remotely and, if needed, prescriptions for painkillers or antibiotics. All urgent face to face treatment that is clinically necessary is available for patients who are triaged by their dentist or NHS 111 into one of the 550 urgent dental care centres set up by NHS England and NHS Improvement.

The urgent dental centres are expected to provide, where urgently needed, the full range of dental treatment normally available on the NHS.

NHS England and NHS Improvement announced on 28 May that NHS dentistry outside urgent care centres will begin to restart from 8 June with the aim of increasing levels of service as fast as is compatible with maximising safety.

A copy of the letter that was published can be found at the following link:

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/Urgent-dental-care-letter-28-May.pdf>

■ Dental Services: Coronavirus

Sarah Olney:

[46118]

To ask the Secretary of State for Health and Social Care, if he will make it his policy to permit dentists to reopen.

Jo Churchill:

[Holding answer 18 May 2020]: NHS England and NHS Improvement are working to ensure appropriate services are in place for all who need them.

National Health Service dentistry was reorganised in late March along with other NHS primary care services to minimise face to face care to contain the spread of COVID-19 during the peak of the pandemic. Dentists were asked to suspend all routine treatment and instead to offer urgent advice and, where required, prescriptions for antibiotics by telephone. Urgent treatment was made available through urgent dental centres (UDCs) set up in each NHS region.

As of 25 May there are currently over 550 UDCs open across England. Patients are triaged into UDCs by their own dentistry or through NHS 111. The UDCs are expected to provide, where urgently needed, the full range of dental treatment normally available on the NHS.

NHS England and NHS Improvement announced on 28 May that NHS dentistry outside UDCs will begin to restart from 8 June with the aim of increasing levels of service as fast as is compatible with maximising safety.

A copy of the letter that was published can be found at the following link:

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/Urgent-dental-care-letter-28-May.pdf>

Sir Christopher Chope:

[49581]

To ask the Secretary of State for Health and Social Care, for what reason it is his policy that routine dentistry is not permitted under covid-19 outbreak restrictions; what assessment he has made of the potential merits of permitting private dentists to resume routine dentistry services provided they do not use high intensity aerosols; what his most recent assessment is of the (a) quality and (b) availability of dentistry services available since the start of the covid-19 outbreak; and if he will make a statement.

Jo Churchill:

[Holding answer 2 June 2020]: National Health Service dentistry was reorganised in late March along with other NHS primary care services to minimise face to face care to contain the spread of COVID-19 during the peak of the pandemic. Dentists were asked to suspend all routine treatment and instead to offer urgent advice and, where required, prescriptions for antibiotics by telephone. Urgent treatment was made available through urgent dental centres (UDCs) set up in each NHS region.

As of 25 May there are currently over 550 UDCs open. Patients are triaged into UDCs by their own dentistry or through NHS 111. The UDCs are expected to provide, where urgently needed, the full range of dental treatment normally available on the NHS.

NHS England and NHS Improvement announced on 28 May that NHS dentistry outside urgent care centres will begin to restart from 8 June with the aim of increasing levels of service as fast as is compatible with maximising safety. The letter to dentists setting this out is available at the following link:

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Saqib Bhatti:

[49876]

To ask the Secretary of State for Health and Social Care, what assessment he has made of when it will be safe for dentists and dental practitioners to re-open.

Jo Churchill:

National Health Service dentistry was reorganised in late March along with other NHS primary care services to minimise face to face care to contain the spread of COVID-19 during the peak of the pandemic. Dentists were asked to suspend all routine treatment and instead to offer urgent advice and, where required, prescriptions for antibiotics by telephone. Urgent treatment was made available through urgent dental centres (UDCs) set up in each NHS region.

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<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/Urgent-dental-care-letter-28-May.pdf>

■ Dental Services: South Yorkshire

Alexander Stafford:

[41621]

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure that the opening of urgent dental care centres in South Yorkshire closed as a result of the covid-19 outbreak is expedited.

Jo Churchill:

NHS England and NHS Improvement are working to ensure appropriate services are in place for all who need them.

National Health Service dentistry was reorganised in late March along with other NHS primary care services to minimise face to face care to contain the spread of COVID-19 during the peak of the pandemic. Dentists were asked to suspend all routine treatment and instead to offer urgent advice and, where required, prescriptions for antibiotics by telephone. Urgent treatment was made available through urgent dental centres (UDCs) set up in each NHS region.

As of 25 May there are currently over 550 UDCs open across England. Patients are triaged into UDCs by their own dentistry or through NHS 111. The UDCs are expected to provide, where urgently needed, the full range of dental treatment normally available on the NHS.

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■ Department of Health and Social Care: Correspondence

Ms Angela Eagle:

[\[51609\]](#)

To ask the Secretary of State for Health and Social Care, for what reason his Department has send replies to letters from Honorable Members from civil servants; and whether those letters were been seen by a Minister in his department before they are issued.

Edward Argar:

[Holding answer 4 June 2020]: The Department is currently dealing with unprecedented volumes of correspondence due to the COVID-19 pandemic, with approximately 22,000 cases received since the beginning of March, a threefold increase in cases compared to the same period last year.

The Department ensures that urgent cases raised by Members are prioritised and has taken steps to provide substantive responses in as short a time as possible.

All lines used to respond to correspondence are provided by the Department's policy teams and the Ministerial Correspondence and Public Enquiry unit has daily contact with Ministers' private offices. As a temporary measure, officials are sending replies with commonly used lines in line with Cabinet Office guidance.

■ Drugs: Palliative Care

Clive Lewis:

[\[48549\]](#)

To ask the Secretary of State for Health and Social Care, what steps his Department plans to take to ensure stocks of medicines for end of life do not run short.

Jo Churchill:

As part of our concerted national efforts to respond to the COVID-19 outbreak, we are doing everything we can to ensure patients continue to access safe and effective medicines, including those used in end of life care. The Department is working closely with the pharmaceutical industry, the National Health Service and others in the supply chain to help ensure patients can access the medicines they need, and precautions are in place to reduce the likelihood of future shortages.

NHS England and NHS Improvement have advised clinical commissioning groups to establish local hubs to ensure rapid access to anticipatory medicines. These hubs could be a community pharmacy, primary care network (general practitioner practice), community hospital, acute or other setting where palliative medicines (including controlled drugs) can be safely and legally stored and rapidly released when needed.

The Department and NHS England and NHS Improvement have published a standard operating procedure (SOP) for the use of medicines labelled for one patient, who no longer needs them, to be used by another person, in hospices and care homes. This will protect the medicine supply chain and ensure that patients can access critical medicines at end of life. The SOP can be found at the following link:

<https://www.gov.uk/government/publications/coronavirus-covid-19-reuse-of-medicines-in-a-care-home-or-hospice>

■ Health Services: Immigrants**Catherine West:** [\[52301\]](#)

To ask the Secretary of State for Health and Social Care, whether the waiver of the Immigration Health Surcharge for NHS and care workers announced by the Government on 21 May 2020 will also apply to the families of those workers.

Edward Argar:

Department of Health and Social Care and Home Office officials are working to implement the Prime Minister's announcement of 21 May and further details will be published shortly.

■ Heart Diseases: Coronavirus**Emma Hardy:** [\[45402\]](#)

To ask the Secretary of State for Health and Social Care, if he will publish the medical advice that informed the decision to exclude heart failure patients from the extremely vulnerable category for covid-19.

Jo Churchill:

[Holding answer 18 May 2020]: Expert doctors in England identified specific medical conditions that, based on what we knew about the virus so far, placed someone at greatest risk of severe illness from COVID-19. These were signed off by the UK Senior Clinicians Group (including the four United Kingdom Chief Medical Officers and clinical leadership at NHS England and NHS Improvement, NHS Digital and Public Health England).

Some conditions are not suitable for blanket inclusion in the shielded list, particularly where there is a spectrum of severity of disease. No condition automatically excludes a patient from the list.

General practitioners and clinicians can, on a case-by-case basis, assess a patient's suitability for shielding and, after consultation with the patient, add them to the centrally held list of patients who receive advice on shielding.

■ Hospitals: Coronavirus**Dame Diana Johnson:** [\[46578\]](#)

To ask the Secretary of State for Health and Social Care, what estimate he has made of the number of patients who have contracted covid-19 as a hospital-acquired infection.

Jo Churchill:

Data on the number of patients who contracted COVID-19 as a hospital-acquired infection are not available.

However, estimates from the Department-funded COVID-19 Clinical Information Network (CO-CIN), suggest that between 10-20% of COVID-19 infections treated in hospitals had symptom onset after seven days in hospital between March and April

2020. The most recent available CO-CIN report is available to view at the following link:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/886442/s0355-co-cin-report-130520-sage36.pdf

■ Hospitals: Health Services

Kate Osborne:

[52549]

To ask the Secretary of State for Health and Social Care, when routine services and treatments will recommence in NHS hospitals.

Edward Argar:

[Holding answer 4 June 2020]: With evidence suggesting that we are through the peak of the first wave of COVID-19, and with the National Health Service well-placed to provide world-leading care for those who do still have the virus, we are bringing back routine services that had been temporarily paused. We are working on the principle that the most urgent treatments should be brought back first and this will be driven by local demands on the system. The approach will be flexed at local level according to capacity and demand in different parts of the country, and will be gradual, over weeks.

We have continued to deliver the most urgent treatments, such as emergency and urgent cancer care, throughout the COVID-19 outbreak.

■ Movianto UK: Contracts

Rosie Cooper:

[51734]

To ask the Secretary of State for Health and Social Care, whether the Movianto NHS contract to maintain the UK pandemic supplies stockpile required the NHS to pay for the fixed costs such as rent and utilities that Movianto incurred.

Jo Churchill:

[Holding answer 4 June 2020]: The contract with Movianto regarding the maintenance of the United Kingdom pandemic supplies has costs associated with an appropriate portion of building service charges.

Rosie Cooper:

[51735]

To ask the Secretary of State for Health and Social Care, whether Movianto has claimed and received payment from the NHS for the cost of the rent for the new Haydock Green premises.

Edward Argar:

The contract with Movianto regarding the maintenance of the United Kingdom pandemic supplies has costs associated with an appropriate portion of building service charges, and these currently relate to the Haydock Green premises.

■ NHS: Emergencies**Clive Lewis:****[48548]**

To ask the Secretary of State for Health and Social Care, what long-term plans he has to ensure that the NHS is (a) a resilient and (b) a strategic protective service in order to tackle future health emergencies.

Jo Churchill:

[Holding answer 2 June 2020]: NHS England and NHS Improvement have a statutory requirement to formally assure their own and the National Health Service in England's readiness to respond to emergencies on an annual basis. To do this, NHS England and NHS Improvement ask commissioners and providers of NHS-funded care to complete an Emergency Preparedness, Resilience and Response annual assurance process. Further information is available at the following link:

<https://www.england.nhs.uk/wp-content/uploads/2019/07/epr-annual-assurance-guidance-v2.0.pdf>

NHS England also produces an Incident Response Plan (National). This is the overarching generic plan that details how NHS England reviews and responds to any health-related incident or emergency at the national level, there are plans which describe the regional response and each NHS organisation will have its own Incident Response Plan. Further information is available at the following link:

<https://www.england.nhs.uk/wp-content/uploads/2017/07/NHS-england-incident-response-plan-v3-0.pdf>

■ Ophthalmic Services: Coronavirus**Rosie Cooper:****[51738]**

To ask the Secretary of State for Health and Social Care, what steps he is taking to reduce the backlog of ophthalmology appointments that were cancelled due to the covid-19 outbreak.

Edward Argar:

We continue to work closely with the National Health Service and partners and guidance has already been issued to the NHS on the process of starting to restore urgent non-covid services in a safe way.

This will be done on the principle that the most urgent treatments should be brought back first and this will be driven by local demands on the system. The approach will be flexed at local level according to capacity and demand in different parts of the country. The restoration of services will be gradual, over weeks.

■ Protective Clothing and Screening: Procurement

Matt Western:

[\[49101\]](#)

To ask the Secretary of State for Health and Social Care, what criteria his Department used to select (a) Deloitte to lead work on the procurement of personal protective equipment and (b) Sodexo to lead work on the establishment of covid-19 testing centres.

Jo Churchill:

Deloitte is providing operational support for the procurement process of personal protective equipment (PPE) from existing and new manufacturers who can assist in scaling-up regulatory-approved PPE resources within the United Kingdom. As an existing professional services provider to the public sector, Deloitte's expertise is being used to supplement in-house resource to deliver significant programmes of work, which currently includes the national response to COVID-19.

Sodexo are one of a number of facility management companies who are supporting the establishment and running of testing centres across the UK. Officials have worked with various industry providers to understand who has the footprint and ability to establish and run services in all geographical areas within short timescales.

Guidance on how contracting authorities should respond to COVID-19 was published on 18 March. Authorities are allowed to procure goods, services and works with extreme urgency in exceptional circumstances using regulation 32(2)(c) under the Public Contract Regulations 2015. We have also made it clear that authorities must continue to achieve value for money for taxpayers, use good commercial judgement and publish the details of any awards made, in line with regulations and Government transparency guidelines.

■ Radiotherapy: Coronavirus

Rosie Cooper:

[\[45060\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to tackle the under-use of radiotherapy capacity during the covid-19 outbreak.

Grahame Morris:

[\[45138\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to reduce the level of unused radiotherapy machine capacity during the covid-19 outbreak.

Jo Churchill:

[Holding answer 18 May 2020]: As set out in a letter from NHS England and NHS Improvement to trusts on 29 April, cancer treatment must be brought back to pre-pandemic levels at the earliest opportunity to minimise potential harm, and to reduce the scale of the post-pandemic surge in demand.

■ Splenectomy: Disease Control

Stella Creasy: [\[46047\]](#)

To ask the Secretary of State for Health and Social Care, what advice his Department has provided for splenectomy patients on shielding in response to the covid-19 outbreak.

Jo Churchill:

[Holding answer 18 May 2020]: Splenectomy patients are considered clinically extremely vulnerable and have been included on the shielded patient list. Guidance for patients on shielding can be found at the following link:

www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19

■ Surgery

Layla Moran: [\[52416\]](#)

To ask the Secretary of State for Health and Social Care, how many (a) operations and (b) types of operation have been cancelled in each NHS trust in England since the covid-19 lockdown measures were implemented in March 2020.

Edward Argar:

[Holding answer 4 June 2020]: This data is not available in the format requested.

■ Tonbridge Hospital

Tom Tugendhat: [\[52160\]](#)

To ask the Secretary of State for Health and Social Care, what recent discussions his Department has had with NHS Property Services on the return of Tonbridge Cottage Hospital to Kent Community Health NHS Foundation Trust.

Edward Argar:

Tonbridge Cottage Hospital transferred from West Kent Primary Care Trust upon its abolition in 2013 to NHS Property Services. Since May 2019 National Health Service trusts and foundation trusts can request a transfer of estate in the ownership of the NHS Property Companies, which includes NHS Property Services.

Applicant trusts are required to submit a business cases to the Department explaining how a transfer of ownership will benefit the local health system and confirming that the transfer would be on the terms set out in guidance. The Department will then decide whether the transfer should take place.

Kent Community Health NHS Foundation Trust submitted a business case for the transfer of Tonbridge Cottage Hospital in March 2020. We are currently assessing this and are in discussions with the trust and NHS Property Services as part of the process.

■ Vaccination: Children

Alex Norris:

[\[49811\]](#)

To ask the Secretary of State for Health and Social Care, what assessment he has made of the effect of the covid-19 outbreak on the delivery of child vaccination programmes.

Jo Churchill:

[Holding answer 2 June 2020]: Public Health England (PHE) has recently published a study on the early impact of the COVID-19 pandemic and physical distancing measures on routine childhood vaccinations in England. General practice data indicates there has not been a significant reduction in the number of primary immunisation doses administered compared to the previous year, though there is some indication of a decrease in the first dose of measles, mumps and rubella vaccinations, although this appears to be recovering. PHE continues to monitor the situation closely. Further information can be found at the following link:

<https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.25.19.2000848>

Programmes delivered through schools are currently on hold and will be rescheduled when schools reopen.

Alex Norris:

[\[49812\]](#)

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure children receive all due vaccinations during the covid-19 outbreak.

Jo Churchill:

[Holding answer 2 June 2020]: Public Health England (PHE) and NHS England and NHS Improvement are working with regional commissioners to ensure routine childhood immunisations continue to be delivered in primary care settings. Programmes delivered through schools are currently on hold and will be rescheduled as schools open.

PHE recently worked with NHS England and NHS Improvement to generate national news coverage to make people aware that National Health Service immunisations are still available, and the importance of keeping up to date with routine childhood immunisations during the pandemic. They have also produced resources for hospitals, general practices, pharmacies and other NHS settings. These have been shared across the health system, including local authorities and local NHS trusts to help them disseminate this messaging and are available at the following link:

<https://coronavirusresources.phe.gov.uk/nhs-resources-facilities/resources/>

PHE has also produced new immunisation social media cards to help to promote these messages which are available at the following link:

<https://www.healthpublications.gov.uk/ViewArticle.html?sp=Scovid19promotingimmunisationsocialmediacards>

The Government's Coronavirus Action Plan has stated that everyone should ensure that they and their family's vaccinations are up-to-date. Further information is available at the following link:

<https://www.gov.uk/government/publications/coronavirus-action-plan/coronavirus-action-plan-a-guide-to-what-you-can-expect-across-the-uk>

■ Vitamin C: Coronavirus

Wera Hobhouse: [49802]

To ask the Secretary of State for Health and Social Care, whether his Department has made an assessment of the efficacy of Vitamin C in boosting immunity to covid-19.

Jo Churchill:

The Government has not undertaken a specific assessment of vitamin C in relation to COVID-19. However, Public Health England (PHE) is not aware of any robust evidence that vitamin C can "boost" the immune system to prevent us from catching COVID-19 or mitigate its effects.

PHE is monitoring emerging evidence on nutrition and COVID-19 and assessing its quality, involving the Government's Scientific Advisory Committee on Nutrition as appropriate.

HOUSE OF COMMONS COMMISSION

■ House of Commons: Coronavirus

Martyn Day: [52221]

To ask the hon. Member for Perth and North Perthshire, representing the House of Commons Commission, whether the Commission has made an assessment of the potential merits of hon. Members wearing face masks or face coverings upon return to physical Parliamentary proceedings; and if he will make a statement.

Pete Wishart:

The Commission is led by the current Government advice on the use of face masks and coverings.

Advice from Public Health England has been considered which states that face coverings may be beneficial in places where it is hard to follow and maintain social distancing measures e.g. on public transport. Face coverings are not a replacement for social distancing and regular handwashing which remain the most important actions. As hon. Members can maintain social distancing and have easy access to handwashing facilities or hand sanitiser, it was concluded that face coverings were not necessary.

A review of this decision was carried out on 3 June and concluded that the advice did not need to be updated in line with current government guidance.

Although not considered necessary it is an MP's choice if they do want to wear a face covering on the Parliamentary estate.

■ **Members: Travel**

Marion Fellows:

[\[52154\]](#)

To ask the hon. Member for Perth and North Perthshire, representing the House of Commons Commission, whether the Commission has made an assessment of the effect of the travel restrictions in relation to covid-19 on trends in the level of the cost of MP's travel to Westminster.

Pete Wishart:

Issues relating to the costs of MPs' travel to Westminster are a matter for the Independent Parliamentary Standards Authority.

The Commission has ensured the Travel Office remains available to all members to facilitate their travel to and from Westminster and have made specific arrangements to ensure that accommodation is available where required.

TREASURY

■ **Dental Services: Coronavirus**

Andrew Rosindell:

[\[51672\]](#)

To ask the Chancellor of the Exchequer, what fiscal steps he is taking to support dentists that were required to close during the covid-19 pandemic.

Steve Barclay:

The Government recognises the important role all medical businesses play to protect and improve the health of the population and is taking many steps to support them during the COVID-19 outbreak. Dentists will be fully remunerated for the NHS work they would have otherwise undertaken, subject to some basic requirements.

Medical practices may also benefit from the range of economic support measures the Government has announced, including:

- A Discretionary Grant Fund for Local Authorities in England
- The Coronavirus Job Retention Scheme (CJRS)
- The Coronavirus Business Interruption Loan Scheme (CBILS)
- The Bounce Back Loan Scheme (BBL) for small and micro enterprises
- VAT deferral for up to 12 months
- The Time To Pay scheme, through which businesses in financial distress, and with outstanding tax liabilities, can receive support with their tax affairs
- Protection for commercial leaseholders against automatic forfeiture for non-payment until June 30, 2020

The Business Support website provides further information about how businesses can access the support that has been made available, who is eligible, and how to apply - <https://www.gov.uk/business-coronavirus-support-finder>.

■ Ministers: Codes of Practice

Ian Murray:

[49658]

To ask the Chancellor of the Exchequer, how many written instructions as described in section 5.5 of the Ministerial Code have been issued by Ministers in each year since 2010; for what reason each instruction was issued; and in which Department they were issued.

Steve Barclay:

Ministerial Directions are published on gov.uk. As set out in paragraph 3.4.5. of “Managing Public Money”, [1] it is the responsibility of the relevant accounting officer to arrange for the existence of the direction to be published, no later than in the next report and accounts, unless the matter must be kept confidential.

There have been 27 Ministerial Directions published since April 2011, set out in the table attached. Prior to this date, publication was not required.

DATE	DEPARTMENT	DIRECTION	REASON(S)	LINKS
JANUARY 2015	DEPARTMENT FOR BUSINESS, INNOVATION AND SKILLS	HATFIELD COLLIERY PARTNERSHIP LTD	VALUE FOR MONEY	AO REQUESTMIN DIRECTION
February 2015	Department for Transport	Northern and TransPennine Express franchises 2015: invitations to tender	Value for money	AO requestMin direction
March 2015	Department for Transport	Manston Airport: procuring consultants for independent review	Value for Money	AO requestMin direction
June 2015	Department for Business, Innovation and Skills	Royal Mail Employee Shares (1)	Value for money	AO requestMin direction

DATE	DEPARTMENT	DIRECTION	REASON(S)	LINKS
JANUARY 2015	DEPARTMENT FOR BUSINESS, INNOVATION AND SKILLS	HATFIELD COLLIERY PARTNERSHIP LTD	VALUE FOR MONEY	AO requestMin direction
June 2015	Cabinet Office and Duchy of Lancaster	Kids Company	Value for money	AO requestMin direction
June 2015	Department for Environment, Food and Rural Affairs	Flood reinsurance scheme	Value for money	AO requestMin direction
October 2015	Department for Business, Innovation and Skills	Royal Mail Employee Shares (2)	Value for money	AO requestMin direction
October 2015	Department for Business, Innovation and Skills	Redcar Steelworks	Value for money	AO requestMin direction
May 2016	Department for Transport	London Garden Bridge	Value for money	AO requestMin direction
July 2016	Cabinet Office	Special Advisers' Pay	Value for money	AO requestMin direction
January 2018	Department for Environment, Food and Rural Affairs	European Union exit costs	Propriety	AO requestMin direction
February 2018	Department for Transport	European Union exit preparations	Propriety	AO requestMin direction
March 2018	Ministry of Housing, Communities and Local Government	Local government overpayment	Propriety	AO requestMin direction
March 2018	Department for Business, Energy	European Union exit preparations	Propriety	AO requestMin direction

DATE	DEPARTMENT	DIRECTION	REASON(S)	LINKS
JANUARY 2015	DEPARTMENT FOR BUSINESS, INNOVATION AND SKILLS	HATFIELD COLLIERY PARTNERSHIP LTD	VALUE FOR MONEY	AO REQUEST MIN DIRECTION
March 2018	& Industrial Strategy Department for International Trade	– market surveillance Spend before Royal Assent on EU Exit costs	Propriety	AO request Min direction
May 2018	Department for Education	T Levels delivery time-table	Feasibility	AO request Min direction
June 2018	UK Export Finance	Support for export of Typhoon aircraft to Qatar	Value for money	AO request Min direction
April 2019	UK Export Finance	Increased cover for Iraq	Regularity and value for money	AO request Min direction
May 2019	Ministry of Justice	Financial assistance for subcontractors affected by the collapse of Working Links	Value for money	AO request Min direction
May 2019	Ministry of Housing, Communities & Local Government	Remediation of private sector residential buildings with unsafe ACM cladding	Value for money	AO request Min Direction
July 2019	Home Office	Windrush Compensation Scheme	Regularity and Propriety	AO request Min Direction
November 2019	Department for Business, Energy and Industrial Strategy	Continuation of Official Receiver's Indemnity	Value for money	AO request Min direction

DATE	DEPARTMENT	DIRECTION	REASON(S)	LINKS
JANUARY 2015	DEPARTMENT FOR BUSINESS, INNOVATION AND SKILLS	HATFIELD COLLIERY PARTNERSHIP LTD	VALUE FOR MONEY	AO REQUEST MIN DIRECTION
November 2019	National Health Service	NHS Pension tax charges	Regularity and Priority	AO request Min direction
March 2020	Department for Business, Energy and Industrial Strategy	(Coronavirus (COVID-19) Support Fund for Retail, hospitality and Leisure Business	Value for Money Feasibility	AO request Ministerial Direction
March 2020	Department for Business, Energy and Industrial Strategy	Coronavirus COVID-19 the Small Grants Fund	Value for Money Feasibility	AO request Ministerial Direction
March 2020	Department for Health and Social Care	Coronavirus (Covid-19): Ministerial direction on spend.	Regularity	AO request Ministerial Direction
May 2020	Ministry of Communities and Local Government	Grant for unsafe cladding	Value for Money	AO request Ministerial Direction

[1] <https://www.gov.uk/government/publications/managing-public-money>

■ NHS and Social Care Coronavirus Life Assurance Scheme 2020

Clive Lewis:

[52269]

To ask the Chancellor of the Exchequer, whether he plans to extend the NHS and Social Care Coronavirus Life Assurance Scheme 2020 to the families of all key workers who die from covid-19.

Steve Barclay:

On 27 April, the Secretary of State for Health and Social Care announced a new Life Assurance scheme for frontline NHS and social care workers who die from coronavirus. This recognises the increased risks faced by these staff during the course of their essential and lifesaving work during the crisis, and the need to

encourage retired doctors and nurses to fill staff shortages and boost service capacity.

It pays a £60,000 tax-free lump sum where staff die as a result of coronavirus and had been recently working in frontline roles and locations where personal care is provided to individuals who have contracted coronavirus.

The government will continue to review the support provided to key workers on the front-line.

WOMEN AND EQUALITIES

■ Equality: Coronavirus

Stella Creasy:

[51931]

To ask the Minister for Women and Equalities, what process has been undertaken to consult civil society, including women and equality rights organisations in relation to the effect of covid-19 outbreak on the operation of the Equality Act.

Kemi Badenoch:

All the legislative protections against discrimination provided by the Equality Act 2010, including those relating to sex and to pregnancy and maternity as protected characteristics, continue to apply during the covid-19 outbreak period, and the scope of the Act remains unchanged.

The Equality Advisory and Support Service (EASS), the helpline for anyone who believes that they have been discriminated against in the provision of goods, services and public functions, remains open and can provide free bespoke advice and in-depth support, as can Acas (0800 464 0979) in relation to employment discrimination issues.

The EASS can be contacted via its website - www.equalityadvisoryservice.com, by telephone on 0808 800 0082, or by text phone on 0808 800 0084. The EASS may contact a service provider on a customer's behalf to discuss the scope for meeting the customer's concern; it also liaises with the Equality and Human Rights Commission, which has powers to enforce the provisions of the Act.

■ Gay Conversion Therapy

Preet Kaur Gill:

[52328]

To ask the Minister for Women and Equalities, with reference to the letter from the Government Equalities Office to the hon Member for Birmingham, Edgbaston in December 2019, ref COGEO-001047, when the timetable for ending conversion therapy will be released.

Kemi Badenoch:

The Government takes this issue very seriously and fundamentally disagrees with attempts to forcibly change someone's sexuality.

My officials are working at pace on the matter, and we will outline plans to end its practice in due course.

We have commissioned research that looks at the scope of practices and experiences of those subjected to conversion therapy. Once the findings have been reviewed, we will continue engaging other key stakeholders, and ensure we quickly progress an effective approach.

Preet Kaur Gill:

[\[52329\]](#)

To ask the Minister for Women and Equalities, what recent assessment she has made of the adequacy of the existing legislative framework to end conversion therapy.

Kemi Badenoch:

The Government Equalities Office are reviewing the current legislative framework to see where and how the harmful and unacceptable practices referred to as conversion therapy may already be captured by existing laws and offences.

As my honourable friend will know, there are certain abhorrent and violent practices which may be classed as conversion therapy such as 'corrective' rape, or other forms of physical abuse, which are already covered by existing criminal offences. Where such practices are already unlawful, we will ensure the law is clear, well understood and enforced.

Where dangerous conversion therapy practices are not already unlawful, we are examining the best ways to prevent them being conducted, without sending such practices underground.

We will outline plans to end Conversion Therapy practice in due course.

WORK AND PENSIONS

■ Bereavement Support Payment: Coronavirus

Stella Creasy:

[\[51930\]](#)

To ask the Secretary of State for Work and Pensions, how many people that are not eligible for bereavement support payment as a result of not being married contacted Tell Us Once service during the covid-19 outbreak.

Mims Davies:

[Holding answer 4 June 2020]: Tell Us Once (TUO) does not collect this information. TUO is purely a notification service and asks a citizen if they wish to notify a range of partner organisations including the Department for Work and Pensions. There is no distinct correlation between the notification issued and Bereavement Support Payment. In addition, Tell Us Once does not form any part of any claim to benefits.

■ Department for Work and Pensions: Statistics**Seema Malhotra:****[52006]**

To ask the Secretary of State for Work and Pensions, when she plans to publish her Department's response to the DWP Statistics Publication Frequency Review, published in December 2019.

Mims Davies:

[Holding answer 4 June 2020]: Our response to DWP statistics publication frequency: statistical notice was published on 19 December and can be found at the top of the page here:

<https://www.gov.uk/government/consultations/dwp-statistics-publication-frequency-statistical-notice>

■ Independent Case Examiner**Rushanara Ali:****[51974]**

To ask the Secretary of State for Work and Pensions, pursuant to the Answer of 15 May 2020 to Question 43913 on the Independent Case Examiner, how many new Independent Case Examiners were recruited between 1 February 2020 and 31 March 2020 to help reduce the time complaints wait to be brought into investigation.

Mims Davies:

[Holding answer 4 June 2020]: Funding has been made available in the 2020/21 financial year to allow the Independent Case Examiner's (ICE) Office to help reduce the time complaints wait to be brought into investigation. Its headcount will increase from 89 to 112. The recruitment of additional Investigation Case Managers commenced in February 2020, but was paused following the introduction of the Coronavirus lockdown measures. That pause has now been lifted and the Office is currently concluding the recruitment exercise.

■ Post Office Card Account: Wales**Mr David Jones:****[51712]**

To ask the Secretary of State for Work and Pensions, when she plans to extend the Post Office card account customer cash delivery service to Wales.

Guy Opperman:

The responsibility for any card account customer cash delivery service poca for customers living in Wales is a matter for Welsh Government.

The alternative method of payment service, including cash by exception, run during the COVID-19 Pandemic has been offered to DWP customers in England who are not paid by the Department's standard payment methods and have been required to follow the Shielding guidance provided by NHS England.

■ Unemployment: Immigrants

Mrs Emma Lewell-Buck:

[\[52025\]](#)

To ask the Secretary of State for Work and Pensions, what support her Department is providing to people who have been made unemployed as a result of the covid-19 outbreak and who do not have recourse to public funds following their indefinite leave to remain settlement.

Justin Tomlinson:

Access to DWP income-related benefits such as Universal Credit flows from an individual's immigration status. The Home Office determine whether persons granted leave to enter or remain in the UK are eligible to access public funds.

Those unable to access DWP income-related benefits, such as Universal Credit, may be eligible to access DWP contributions-based benefits, providing they meet eligibility criteria.

Government measures to support workers and their families through Covid-19 are also available for those who meet the eligibility criteria. These include the Coronavirus Job Retention Scheme, the Self-employed Income Support Scheme and Statutory Sick Pay.

■ Universal Credit

Rushanara Ali:

[\[43917\]](#)

To ask the Secretary of State for Work and Pensions, how many families who have made a claim for universal credit since 23 March 2020 have three or more children.

Will Quince:

[Holding answer 12 May 2020]:

From 23rd March 2020 to 5th May 2020, 57,000, applications made by claimants with children to Universal Credit had three or more children in their family.

■ Universal Credit: Coronavirus

Daniel Zeichner:

[\[42075\]](#)

To ask the Secretary of State for Work and Pensions, what assessment her Department made prior to implementing the £20 a week uplift to universal credit due to the covid-19 outbreak of the effect of that policy on (a) economically vulnerable people, (b) household food security and (c) the duties of public bodies under the Equalities Act 2010.

Will Quince:

[Holding answer 12 May 2020]: We have announced measures that can be quickly and effectively operationalised. This allowed, for example, for the swift introduction of the £20 a week uplift to the Universal Credit standard allowance to respond to the effects of the current pandemic for those experiencing the most financial disruption.

The changes we have made to the benefit system in response to the pandemic provide a balanced package of support.

Ministers have fully complied with their statutory duties when making decisions on the existing package of support. There is insufficient data to estimate the precise economic impact on different groups. We continue to monitor data sources including tax and benefit data to understand the effect of COVID-19 on household incomes and debt.

Paul Blomfield: [\[46632\]](#)

To ask the Secretary of State for Work and Pensions, what assessment she has made of the effect of the decision not to extend the covid-19 emergency £20 funding for universal credit claimants to those on legacy benefits.

Will Quince:

[Holding answer 18 May 2020]: As part of the Government's strategy to support people affected by COVID 19, DWP has made a number of changes to make sure people can self-isolate, and to ensure people who need financial help have access to the benefit system. We have announced measures that benefit those experiencing the most financial disruption and which can be quickly and effectively operationalised, these include:

- Increasing the Local Housing Allowance rates so that they cover 30% of local market rents – which is on average an additional £600 per year in people's pockets.
- Amendments to Housing Benefit so that increases in Working Tax Credits can be disregarded rather than reducing the Housing Benefit award.
- Treating all ESA claimants who satisfy the conditions of entitlement and are suffering from COVID-19, or who are required to self-isolate in line with government guidance, as having limited capability for work, without the requirement to provide a fit note or to undergo a Work Capability Assessment.
- Removing waiting days for ESA for those claimants affected by Covid-19, so it will be payable from day one of the claim, subject to the claimant satisfying the normal conditions of entitlement.

■ Universal Credit: Young People

Jessica Morden: [\[43853\]](#)

To ask the Secretary of State for Work and Pensions, what plans she has to increase universal credit rates for people aged under 25.

Will Quince:

[Holding answer 15 May 2020]: We have increased the Universal Credit standard allowance by around £20 per week for the next 12 months – equivalent to up to £1,040 a year.

This is in addition to the 1.7% inflation increase (announced Nov 2019) as part of the Government's decision to end the benefits freeze and means more financial support for millions of people across the UK.

Helen Hayes:

[52274]

To ask the Secretary of State for Work and Pensions, what recent assessment she has made of the adequacy of the universal credit standard allowance for people aged under 25 who are living independently.

[Holding answer 4 June 2020]: We have increased the Universal Credit standard allowance by around £20 per week for the next 12 months – equivalent to up to £1,040 a year.

This is in addition to the 1.7% inflation increase (announced Nov 2019) as part of the Government's decision to end the benefits freeze and means more financial support for millions of people across the UK.