### **Dear Constituent**

The good news is the NHS has coped with the surge in Covid 19 cases in late March and early April. National capacity is Well above the current number of Covid 19 patients, with numbers of new hospital admissions falling. Short of a massive unexpected surge in cases to levels much higher than early April we can conclude the NHS has the beds and staff to handle this virus. The Royal Berks has plenty of spare Intensive care beds thanks to the efforts to expand facilities. The large emergency Nightingale hospitals mercifully have no new cases to look after.

There is still much to do to cut the death rates further, to limit the spread of the virus and to safeguard those most vulnerable to the severe version of this disease. Thames Valley MPs have a weekly meeting with the Local resilience Forum and with the local police by conference calls to see what needs doing and to tackle Ministers where Central government needs to take action. This week's meetings reported no problems with the supply of protective clothing and equipment, and demonstrated good progress on expanding the number of tests and test centres, including mobile and home testing. I am in regular and varied contact with Ministers as and when an issue arises that needs UK government involvement.

Government did respond when I passed on — as others doubtless did — the danger of letting elderly patients out of hospital and back to care homes without checking they no longer had the virus. This I am assured has now been sorted out. Those Care Homes that do have cases of the virus now need good infection control to stop it spreading throughout their vulnerable residents. Care Homes are often privately owned and run, but are now being offered national , regional and local government assistance with protective clothing and training to limit the continued spread in homes that have cases.

I have also raised the issue of the need for the NHS to resume more of its regular work, which government confirms they are ready to do. The NHS assures us it has very good infection control in general hospitals which undertake a range of work in addition to handling Covid 19 patients. It is important that everyone with a serious condition that could benefit from hospital treatment feels confident to go to hospital to receive it.

I have been critical of the poor quality of the statistics Ministers and the public receive daily to monitor progress and to make decisions about future policy. The estimates of the Transmission rate are very wide — 0.5 to 1.0. This looks at how many people an infected person infects, and needs to be as far below 1 as possible for the disease to wane quickly. The national numbers were not based on testing of a proper sample of the whole population which should give the best figures over time. I am told this is now being remedied. The figures for deaths have been changed several times, with different definitions and standards for registering a death as a Covid 19 death. This means we do not see an accurate plot of true trends in deaths over the last couple of months. The international comparisons are not comparisons as they do not even adjust for size of populations.

I have put this to Ministers and spoken about it in the Commons this week. It matters, because government needs to make decisions to get more people back to work safely, and needs accurate and consistent figures on deaths, transmission rates and hospital use to do so. I have also been working hard on the economic issues of jobs, small business and livelihoods which I will write to you about next week.

## **VE** day

Let us salute all those who brought about a great victory in 1945. The best way we can remember and honour them is to ensure we cherise and use the freedoms they fought so hard to maintain.

## **Delivering PPE**

I have tabled a couple of questions to try to work out what happened with the much discussed Turkish order of protective clothing for health workers.

It seemed to me that Ministers were desperate to get more protective clothing, hearing of low stocks and possible shortages. They were clearly wanting more to be supplied and happy to provide the cash to pay. They also wanted to make some announcement that illustrated the massive amount of work that was going on to increase the flows into the NHS and care homes.

Presumably the senior managers for procurement volunteered that they had just placed a large extra order with Turkey. I doubt Ministers had arranged it themselves or would have known about it without briefing.

Whatever the involvement of Ministers in actually buying the goods, we do need to know whether they paid in advance, what was said about the specification required, and what if any checks and tests were made before taking delivery of the product.

Of course working at speed with a need for a big increase in supply mistakes can be made, but presumably the usual procurement rules applied. It is normal to issue a specification, and inspect or test samples before taking delivery.

It is also interesting that the UK agreed to go and pick up the consignment. What checks were made before loading the planes?

Let us hope this all has a happy ending. If we do not pay for the goods that

did not meet specification no great harm is done. It still leaves me wondering why this particular contract was selected to highlight in the media, and why there were so many problems with it. It seems many other contracts work and the UK is buying a lot more PPE one way or another. Why did officials single this one out for a mention and why did it go wrong?

# The German Constitutional Court tries to assert German power over the ECB and the European Court.

In a sweeping judgement the German Court dismissed the judgement of the European Court as a "view", and gave its own instead.

At issue is the right of the European central Bank to print billions of Euros, buy up the bonds of member states, and keep interest rates around zero. Many Germans think this is a very damaging policy, hitting savers and dragging German taxpayers towards responsibility for the debts of other countries with less prudent financial management. Various German interests brought this court case to demand Germany is insulated from the debts of Italy and Greece, and from any inflationary threats were the ECB to overdo the money printing.

At issue is also the powers of the EU Institutions themselves. Elsewhere in the EU — including the UK when we were a member — domestic courts accepted the superiority of the European Court of Justice, and accepted all EU policies and laws emanating from the Commission, Court and Parliament. The German Court has always tried to maintain a different doctrine, limiting the EU's powers to the massive range and depth of powers bestowed by Treaty but keeping open the possibility that there is some power they claim that goes beyond their Treaty entitlements.

The German Court has up to this point found very little and has not been that willing to pursue German powers instead of EU powers, as the German Court generally supports the EU federal scheme. That is what makes this judgement so much more revolutionary, claiming as it does that the ECB and EU has acted ultra vires in such a dismissive judgement.

It is one thing to say this, and another to turn it into any kind of reality. The detail of the judgement gives the ECB a three month period to show it has used its powers proportionately. Only if the ECB fails to satisfy the German Court and government on that matter will the judgement become a declaration of some independence, and only then will the ECB have to change its bond buying policy to avoid schism.

Maybe this German judgement will turn out to be just another "view" in a

bitter row about how much money the ECB can print and how much of a free ride it gives to financially weaker countries. It is likely to mean more Euro austerity and smaller increases in bond buying, as the EU moves to head off a more radical declaration of German independence in these economic areas.

#### Three tests to relax lockdown?

Each day we can witness some graphs of the progress of the virus in the UK. Two of the series of numbers that are produced are likely to be an important part of the decision this week about whether and to what extent the current strict controls on our work and lives are lifted.

The aim of saving the NHS is embodied in the graph of use of NHS Intensive Care beds and patient numbers. This graph has been coming down for some time, and is now well below NHS enhanced capacity to cope. So much so, we are told the emergency large hospitals built to handle more Covid 19 cases will be put on hold with no patients. The government should state that short of a major upsurge in cases way beyond the first surge, the NHS can now cope.

The aim to save lives is charted by the death rate. The graph of this is also now coming down, despite the changes to the numbers that boosted them. Given the decline in patients admitted with the disease to hospitals you would expect a fall in hospital deaths.

This leaves the third uncharted number that Ministers place great stress on — R or the rate of transmission. The absence of a regularly updated graph of R is disappointing, as we need to see how it changes over time. The verbal indications from the advisers is that it has fallen a lot and is now under 1, as it needs to be to slow the spread of the infection. Ministers should ask for more information on how R is calculated and how it has been trending, and tell the rest of us. It seems that much rests on the particular calculation and estimation of R and its trends.

I was pleased to read that they are now going to sample test the population for the presence of the virus, which should give a more reliable figure for R when you have several sampled tests over time. I trust this will help guide future changes to the controls on us but not delay getting more people back to work safely as soon as possible. Our prosperity and liberty requires us to relax these controls and there is now the opportunity to do so.