

From: [REDACTED]@bpas.org>
Sent: 25 March 2020 15:36
To: WHATELY, Helen <[REDACTED]@parliament.uk>; 'Andrea Duncan'
<[REDACTED]@dhsc.gov.uk>
Subject: URGENT Notes on the current abortion clinic crisis

Dear Minister (and Andrea)

please contact me on [REDACTED] to discuss. A separate note follows on safe-guarding

Please forgive these rough notes that stand as evidence of why there is a critical need for The Approval of Class of Place, originally sent to me on 23rd March, but later rescinded to be reinstated.

There are three providers of abortion services that provide NHS services, under contract:

- Across **BPAS**, over a quarter of clinics (23/73) have closed as of 25th March due to staff shortages. We have 85 members of staff either diagnosed with actual or suspected COVID infection - or self-isolating.
- **Nupas anticipates 60-70% of its services will close down within days at current rates of sickness and isolation.**
- **MSI – around 12% (54) of staff have been self-isolating. Women who have booked but been unable to attend appointments has doubled.**
- **NHS – many services have staff self-isolating or services reduced withdrawn because spare capacity is needed.** Hospitals are seeing a contraction in their services because of the need to take anaesthetic machines out of theatre to use as ventilators OR take over clinical spaces for early surgical for mgmt. of COVID+ patients or staffing issues – they need to ramp up EMA but can't because of miso upper gestation restrictions and delivery remotely but can't because of home mife restriction
- **Independent providers** not been able to access some of the locations where we normally provide EMAs (like GP surgeries) – this and number 1 mean there are fewer actual places for people to go.
- Access to surgical abortion is reducing due to
 - Hospitals taking back their theatres to use the ventilators
 - Surgeons self-isolating
 - Anaesthetists and surgeons being called into the NHS to care for COVID patients
- We are getting increasing numbers of messages via social media from women who **cannot leave their homes or will be pushed over the limit for EMA during isolation.** Without the ability to provide EMA at home some will be forced to continue their pregnancies.
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- Forced pregnancy is bad enough at the best of times but infinitely worse in the midst of a healthcare crisis. Some will be pushed into gestations where they need surgical – see above.

Comments below are from clients

I am unable to get appointment with GP because of Coronavirus. I am trying to get appointment second week. I can't go to hospital because they are not accepting anyone except people with Coronavirus
can't access my clinic due to being in isolation as 2 of my 3 children have a cough.

"I'm a high risk individual due to my previous medical history and asthma. This has left me in a dire situation and when the temporary measures came about [to enable telemedicine] I definitely saw light at the end of the tunnel. Without provision of measures like this, I will either risk myself to COVID-19 while attempting to make my way to an appointment, have to resort to illegal practices outside of the healthcare system or keep the pregnancy for longer which is harmful both to me and the child as it grows and develops."

“My daughter is at risk of life-threatening complications from this virus... We have been advised for some time to practise social distancing to minimise risk, it is unfair to be put in this type of position... Given the severity of the situation and the current health advice there must be some type of provision for accessing the treatment without the need to physically attend the clinic.”

From a call-centre staff member “I have just spoken to a 19 year old who doesn’t want her parents to know and the family is self-isolating. She has to travel 90 minutes across Cornwall, or turn to illegal internet sources”

“ I have just seen a 19 year old woman pregnant outside marriage to a man of a different cultural group. She is scared of violence if her parents find she is pregnant. She is symptomatic of COVID19 and so can’t come to a clinic for 2 weeks,

“The situation for later-stage clients is already worse as they are unable to get public transport/hotel accommodation in London easily. Hotels have closed.

“Me and my 5 year old are self isolating as we both suffer bad asthma and I am really worried we won’t survive the virus. With that said. I am pregnant and cannot afford to bring another child into this world. I cannot get to hospital due to self-isolating for 12 weeks. What can I do? Help me.

Reading is the clinic I need to go to but it is fully booked due to only having two nurses”

“I can’t get an abortion due to all the clinics being closed near me”
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