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Cite this as: *BMJ* 2021;374:n1662 http://dx.doi.org/10.1136/bmj.n1662 Published: 1 July 2021

Dear Sajid Javid: open letter to a new minister of health

Fiona Godlee editor in chief

Dear secretary of state,

You arrive at a crucial time in the pandemic and have the chance to shake off past mistakes and do things differently (doi:10.1136/bmj.n1649). We suggest 10 urgent actions.

- Abandon mass asymptomatic testing. The UK's testing strategy adopted a poorly performing test and has used it badly, squandering precious funds, failing to contain the virus, and damaging public trust (doi:10.1136/bmj.n1636).² Instead we should move to targeted testing of people most at risk (doi:10.1136/bmj.n1638).³
- Establish proper financial support for those who need to isolate. Testing works only if people are willing to be tested and can act on the results. The government's unwillingness to help people isolate is a fatal flaw (https://blogs.bmj.com/bmj/2021/06/29/after-restriction-why-the-public-can-only-fulfill-its-responsibilities-if-the-government-fulfills-theirs).⁴
- Provide messaging that is up to date and based on evidence. The public are understandably confused about testing, especially in light of the delta variant's different set of symptoms (doi:10.1136/bmj.n1654).⁵
- Invest in ventilation. The virus is airborne and good ventilation is key, especially in schools, healthcare settings, workplaces, restaurants, and bars (doi:10.1136/bmj.n913).⁶ Other countries have invested in upgrading buildings or installing CO2 monitors and air purifiers
 (https://blogs.bmj.com/bmj/2021/06/28/use-of-airborne-precautions-for-covid-19-in-healthcare-

settings).7

- Make FFP3 masks mandatory for all staff treating patients with suspected or confirmed covid. Staff should not be put at risk by their work. Shortages of personal protective equipment (PPE) and erroneous guidance led to avoidable illness and death and continue to contribute to staff absence and burnout. New information confirms the protective effect of proper PPE (doi:10.1136/bmj.n1663).8
- Share vaccines with the world. The World Health Organization has said that vaccinating under 18s is not a priority (https://www.who.int/director-general/speeches/detail/director-general-s-opening-remarks-at-the-media-briefing-on-covid-19-14-may-2021). Instead, to help end the pandemic and prevent new variants emerging we should ensure that vaccines are available and affordable to poorer countries and vulnerable populations (doi:10.1136/bmj.n1444; doi:10.1136/bmj.n1608). 10 11

- Establish an urgent review of workforce planning, with funding for recruitment, training, and retention of staff. Staff were at full stretch before the pandemic. They are now in large part exhausted and demoralised (doi:10.1136/bmj.n1603).¹²
- Ensure a long term settlement for health and social care (doi:10.1136/bmj.n1555).

 The current plan was agreed before the pandemic and won't be enough to tackle waiting lists (doi:10.1136/bmj.n1497; doi:10.1136/bmj.n1616), long term symptoms of covid (doi:10.1136/bmj.n1626), winter pressures, or preparing for the next pandemic.

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- Act on the social determinants of health. Social inequalities and poor underlying health were a major cause of the UK's high rates of death and illness during the pandemic (doi:10.1136/bmj.n1677; https://blogs.bmj.com/bmj/2021/06/30/michaelmarmot-and-jessica-allen-building-back-fairer-ingreater-manchester).
- Appoint the next head of NHS England through a transparent and competitive process. Simon Stevens will be a hard act to follow.
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EDITOR'S CHOICE

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