

From: [REDACTED]
Subject: The right to care at Covid
Date: 17 May 2020 13:40:50 CEST
To: Ministry of Social Affairs.registrator@regeringskansliet.se

Hello,
based on Lena Hallengren's answer regarding hospital care with oxygen (Answer to written question 2019/20: 1304 answered by Minister of Social Affairs Lena Hallengren (S) and Answer to written question 2019/20: 1257 answered by Minister of Social Affairs Lena Hallengren (S)) I get the impression of that you want well and prioritize the equal value of all people and the right to the best care.

When reading the newspapers, unfortunately, my impression is that several regions and the National Board of Health and Welfare live their own lives and defy the Ministry of Social Affairs' good intentions. You can read about nursing homes that are denied hospital care, patients who are denied oxygen even though they have barely passed 50. Firstly, selection criteria are applied that were developed IN CASE the care would not be able to meet the need for care fully even though the care had spare capacity. You can also read how users are refused oxygen treatment and instead receive morphine which can end their lives. This is because nursing homes have not provided resources for oxygen treatment and refuse to get the patient under hospital treatment.

I strongly hope that this is due to a number of misunderstandings! Therefore, I would like to ask the Ministry of Social Affairs and Lena Hallengren to take the necessary measures as soon as possible to steer the care of covid disease so that we can all feel confident that we and our relatives will have access to good care and oxygen if the need arises. What I turn to first and foremost is that for many it will be: No hospital care at all! I fully understand that it is not appropriate for all patients to be placed on a respirator, however, those who can have the help of oxygen must receive this treatment.

Covid is a disease that creates a lot of anxiety; first the fear of being infected, then the fear of becoming seriously ill and now finally the fear of being de-prioritized from all hospital care according to routines that are clearly not to be used as long as there is care capacity.

We cannot double our weaknesses; at first we failed to protect them and now too many are being denied adequate care.

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With kind regards
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