










PPE: Guideline comparison

31/03/2020

PPE: current vs. proposed guidelines

Product	General Acute (Oxygen)			Intensive Care (Oxygen-Plus, Ventilated)		
	Current	Proposed	Change	Current	Proposed	Change
 FFP3 respirators	-	-	-	1 per patient interaction	1 per 2 hours	↓
 Type IIR face masks	1 per hour	1 per 2 hours	↓	-	-	-
 Safety glasses/ visors	1 per 4 hours	1 per 2 hours	↑	1 per 4 hours	1 per 2 hours <i>(re-used once then discarded)</i>	↑
 Gloves	1 per hour	1 per hour	-	1 per patient interaction	1 per 2 hours	↓
 Surgical theatre gowns	-	-	-	1 per patient interaction	1 per 4 hours	↓
 Apron	1 per hour	1 per hour	-	1 per hour	1 per hour	-
 Hand Hygiene	n/a	n/a	-	n/a	n/a	-

PPE: current vs. proposed guidelines – weeks until potential stock-out

Product	Weeks until stock-out (current guidelines)	Weeks until stock-out (proposed guidelines)
 FFP3 respirators	 <ul style="list-style-type: none"> Demand will burn down existing stock Forecast supply inconsequential vs demand 	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic
 Type IIR face masks	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage 	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage
 Safety glasses/visors	 <ul style="list-style-type: none"> Demand will burn down existing stock Forecast supply inconsequential 	 <ul style="list-style-type: none"> Demand will burn down existing stock Forecast supply inconsequential
 Gloves	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic 	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic
 Surgical theatre gowns	 <ul style="list-style-type: none"> Very low current stock relative to demand No immediate inbound orders 	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic
 Apron	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage 	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage
 Hand Hygiene	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic <p><i>NB inbound stock assumed to be similar bottle size to current stocks</i></p>	 <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic <p><i>NB inbound stock assumed to be similar bottle size to current stocks</i></p>

Others to be included: FFP2 respirators, clinical waste bags, body bags, general purpose detergent, paper towels, fit test solution

Work in progress document - confidential - all workings based on NHS assumptions - not yet validated

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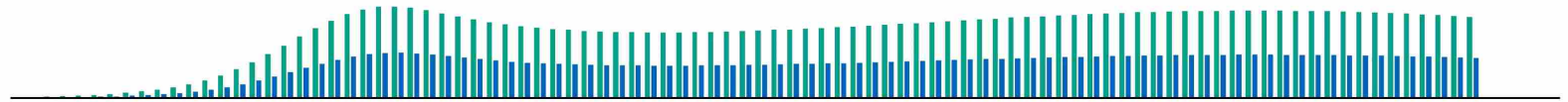
PHE guideline comparison: Current vs. proposed

Product

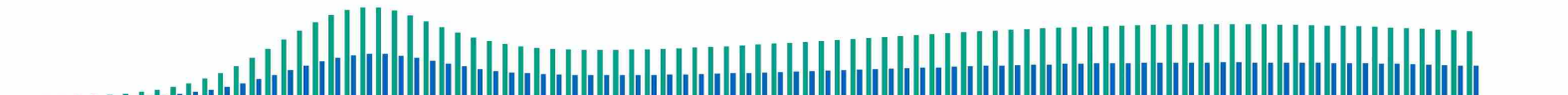
■ Current guidelines ■ Proposed guidelines



**FFP3
respirators**



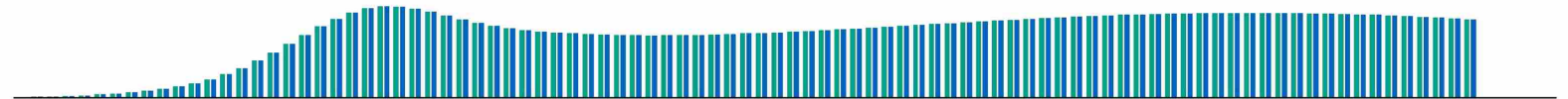
**Type IIR face
masks**



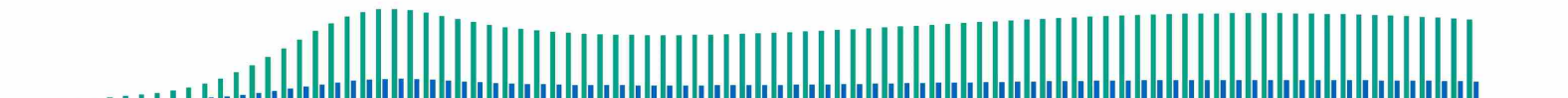
**Safety glasses/
visors**



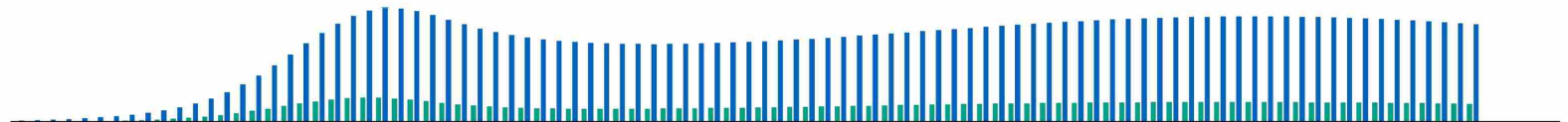
Gloves



**Surgical
theatre gowns**

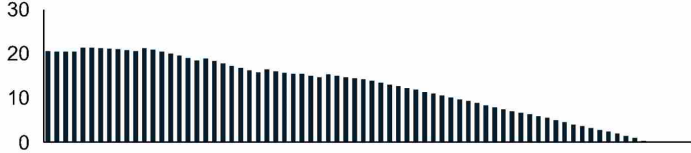






Apron



Summary of PPE Stocks (given current guidelines)

DRAFT - AS AT 31 MARCH

Product	Weeks until stock-out	Indicative Inventory Forecast (Items, m)	Actions
 FFP3 respirators	10 wks <ul style="list-style-type: none"> Demand will burn down existing stock Forecast supply inconsequential vs demand 		<ul style="list-style-type: none"> Increase acquisition Reduce demand with policy Approve FFP2 masks as substitute
 Type IIR face masks	>12 wks <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage 		<ul style="list-style-type: none"> Distribute, ensure plenty of stock on site
 Safety glasses/visors	12 wks <ul style="list-style-type: none"> Demand will burn down existing stock Forecast supply inconsequential 		<ul style="list-style-type: none"> Distribute usage guidelines Reduce demand with policy
 Gloves	>13 wks <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic 		<ul style="list-style-type: none"> Distribute, ensure plenty of stock on site
 Surgical theatre gowns	<2 wks <ul style="list-style-type: none"> Very low current stock relative to demand No immediate inbound orders 		<ul style="list-style-type: none"> Increase requisition rates of stock Reduce demand with policy Call to arms for manufacturers
 Apron	>13 wks <ul style="list-style-type: none"> Current stocks are sufficient to sustain through forecast usage 		<ul style="list-style-type: none"> Distribute, ensure plenty of stock on site
 Hand Hygiene	>13 wks <ul style="list-style-type: none"> Current stocks are sufficient to sustain through pandemic NB inbound stock assumed to be similar bottle size to current stocks 		<ul style="list-style-type: none"> Distribute, ensure plenty of stock on site

Others to be included: FFP2 respirators, clinical waste bags, body bags, general purpose detergent, paper towels, fit test solution

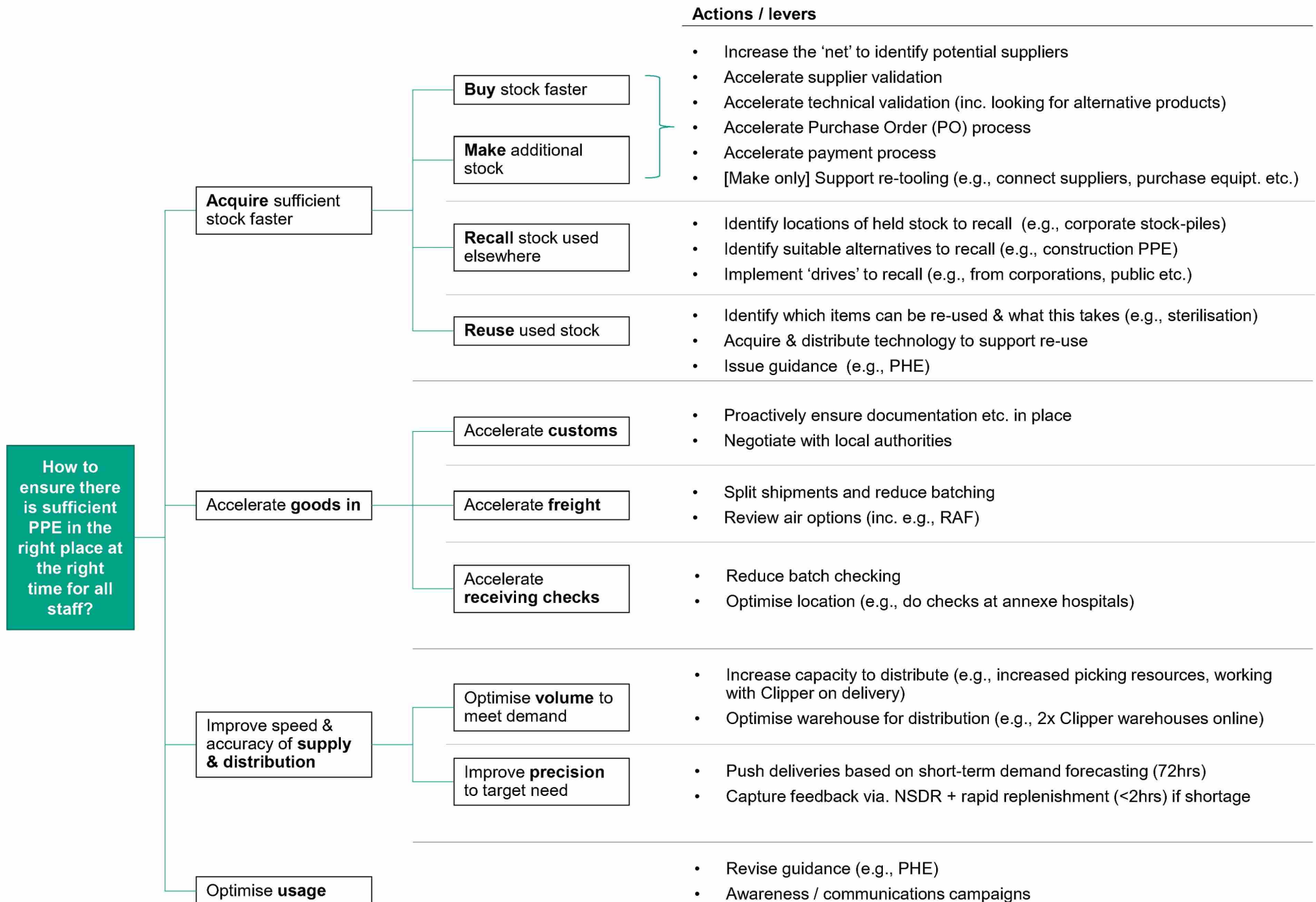
Work in progress document - confidential - all workings based on NHS assumptions - not yet validated

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Appendix



We have a comprehensive approach to optimising PPE distribution



What we have achieved so far

Acquisition

- **Stood up dedicated sourcing & procurement teams to review the 977 offers to buy stock** received via gcfccovid19enquiries@cabinetoffice.gov.uk of which 349 suppliers have been contacted (as at 08:30 on 29 March)
- **Additionally received ~60 offers from companies who can re-tool to make equipment**, of which 47 have been contacted (as at 08:30 29 March) – e.g., Burberry to make Gowns, Bolle to make Visors etc.
- **Established rapid supplier & technical validation process** including call scripts for contacting suppliers
- **Established fast-track finance process via DH**
- **Established necessary governance and legal systems** to support rapid procurement
- **Developed detailed long-term supply-demand forecasting** at the PPE item level to prioritise where buying & making teams should focus

Supply & distribution

- **Supplemented existing SCCL workforce at Haydock with military personnel** to de-bottleneck picking
- **Moved from a 'pull' to a 'push' system**, sending out high priority items (e.g., FFP3 masks) to ensure Trusts don't stock-out
- **Developed a model to make the 'push' more intelligent** and linked more closely to demand, expected to shift toward that this week (w/c 30 March)
- **Clipper Logistics now in loading stock as part of a new contract to reinforce Unipart Distribution**. This will include B2C distribution to primary and social care.

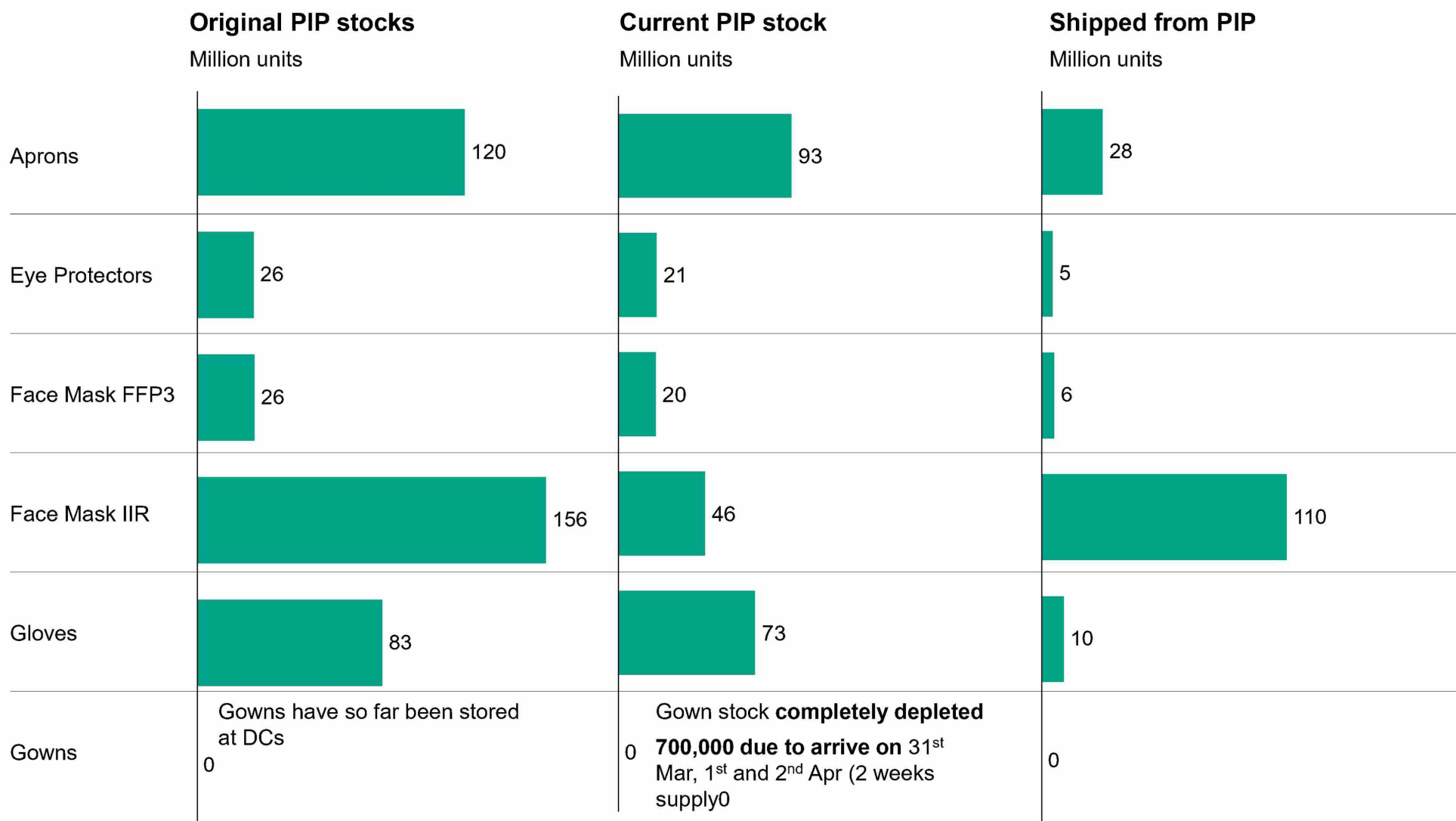
Demand

- **70-strong NSDR hotline** receiving c.1200 calls per weekday (c.400 in weekend) and 1000-1400 e-mails per day
- **Linked into existing BAU call centre processes** to provide support for PPE specific queries from provider organisations to include commercial and procurement expertise – Tuesday 17th March;
- **Escalated call centre processes** to include 24/7 call centre with 20 staff plus admin (safely stepping down their BAU), which has now handled over 2k queries;
- **Developing (and continuing to develop) processes between NHSSC, NSDR & CPC** and building a CRM system to manage queries (launched Wednesday 25th March)
- **c.200 deliveries through freight desk** in support of the supply chain, including a large delivery to Greater Manchester of >1.66m pieces of PPE

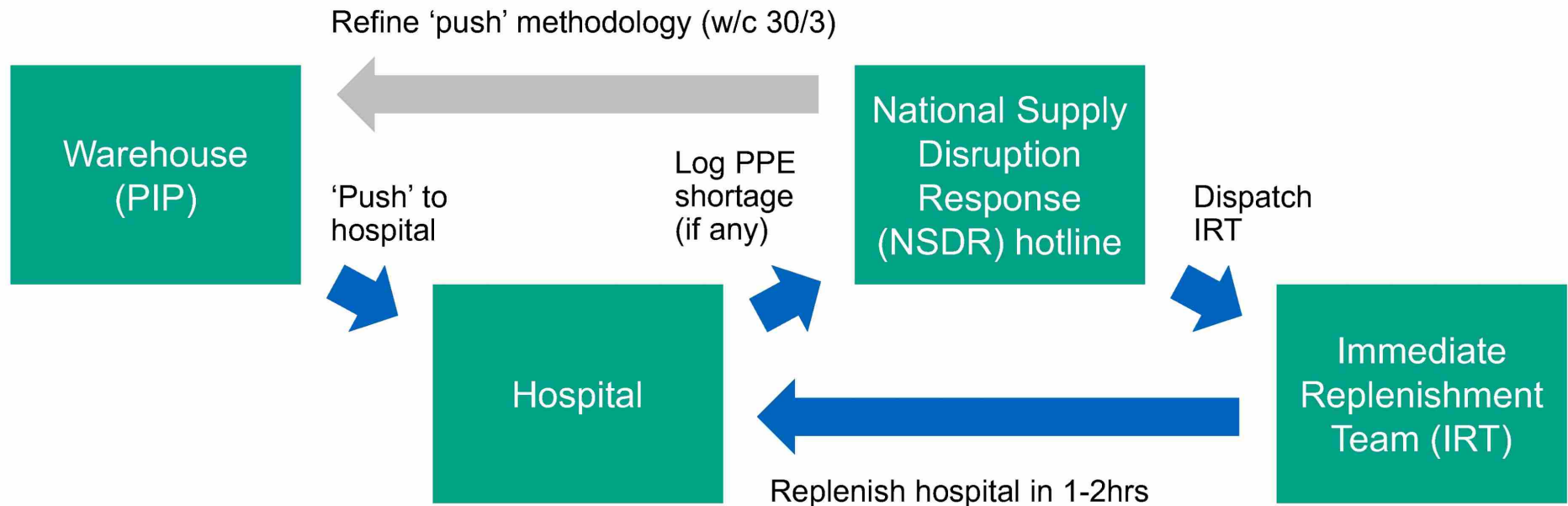
Communications

- **Regular comms now happening** explaining guidelines and reassuring on supplies and delivery updates for NHS and stakeholders – three formal letters, webinars (including daily one to NHS procurement leads), regular updates in primary care bulletin, frequent informal conversations through national stakeholders.
- **NHSE, DHSC, and NHS Supply Chain publishing daily delivery numbers on social media and briefing media** wherever possible – achieving thousands of retweets.
- **There is still more work to do but an increasing number of NHS bodies and stakeholders are publicly acknowledging PPE delivery efforts** – e.g. NHS Providers, Academy of Medical Royal Colleges, some individual healthcare organisations such as Greater Manchester Health & Social Care Partnership.

PIP stock movement – as of 27th March 2020



We have initiated a process via the NSDR to identify and rapidly resolve stock-outs



- On w/c 16/3 SCCL switched from a 'pull' (ordering) approach to a 'push' approach
- Initially this involved sending 1 pallet of PPE to each Trust each day, with the contents of the pallet rotating each day (starting with higher demand items, e.g., FFP3 masks)
- This 'flooded' the system to rapidly restore the trust on the frontline that there was enough PPE.
- In addition the NSDR hotline was established to enable hospitals to log any shortages and an IRT set-up to rapidly replenish the hospital (targeting within 1-2 hours)
- From this week the push methodology will be refined by:
 - **Splitting pallets** (once Clipper warehouses online) to enable more tailored orders to be sent to hospitals (e.g., larger hospitals with higher Covid demand get more than smaller)
 - **Using the data from the NSDR** to also inform the push to hospitals / regions as a feedback loop
- Additionally we are exploring **modifying the daily sit-rep** to capture PPE needs to further refine the 'push'

We are working with Cabinet Office and MHCLG to understand and meet demand across all sectors and the Devolved Administrations

We are working to identify and verify appropriate demand for PPE beyond health and for the DAs.

- **At national level** we are working with Cabinet Office to analyse OGD/wider public sector demand. We have commissioned departments for further data on projected demand and the clinical need for PPE across departments, arms length bodies and the public and private sector.
- **At local level** MHCLG have instructed Local Resilience Forums and military planners to assess local supply and demand issues over the next 48 hours.
- **DAs.** Following a call with DAs on 29 March we are working with them to bring together a UK-wide picture. We have agreed to pool demand data, to develop UK-wide procurement and to bring DAs into PPE governance. DA health services are likely to have the highest requirement for FFP3 masks and gowns outside NHSE

We expect to have this data within the next 24-48 hours. DHSC and Cabinet Office will use the information gathered to draw together requests, develop a complete national picture of demand, assess reported need against clinical criteria and allocate and distribute stock.

Meeting immediate demand

In the interim we continue to meet urgent demand for PPE, drawing on our stockpile. To support the wider public sector, we have released PPE stock to MOD, HMPS and Crown Dependencies. Over the past week alone we have distributed:

- **To MOD:** 300000 FRSM IIR face masks; 250000 Aprons; 1000 Eye protectors; 6000 Visors; 11500 general purpose detergent; 800000 gloves
- **To prisons:** 16000 Eye protectors; 125000 FRSM IIR face masks; 105000 gloves
- **To Crown Dependencies:** 10100 Eye protectors; 30000 FRSM IIR face masks; 440000 gloves; 3000 hand hygiene; 245 detergent

Current guidance on use of PPE

PPE for high-risk procedures

Recommended PPE to be used by healthcare workers delivering or assisting with an aerosol generating procedure on patients with possible or confirmed COVID-19 including in ICU or the hot zone of an ED:

- FFP3 respirator
- Long sleeved disposable gown
- Gloves
- Eye protection (disposable goggles or full-face visor)

PPE for other settings

Recommended PPE to be used by healthcare workers within one metre of a patient with possible or confirmed COVID-19 including staff working in hospitals, primary care, ambulance trust, community care settings, care homes:

- Fluid repellent facemask (Type IIR)
- Apron
- Gloves
- Eye protection if there is a risk of splashing

Guidance is being reviewed with Royal Colleges to ensure risk levels and requirements are clear across a range of different settings and procedures