

Witness Name: Gordon Beattie

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UK COVID-19 INQUIRY

WITNESS STATEMENT OF GORDON BEATTIE, DIRECTOR OF NATIONAL PROCUREMENT, NHS NATIONAL SERVICES SCOTLAND (NHS NSS)

I, Gordon Beattie, Director of National Procurement, NHS National Services Scotland (NHS NSS) will say as follows: -

BACKGROUND, QUALIFICATIONS AND ROLE

1. I am the current Director of National Procurement (NP) at NHS National Services Scotland (NHS NSS), a position which I have held since 9th December 2019. During the relevant time period National Procurement was part of the Procurement, Commissioning and Facilities (PCF) Strategic Business Unit (SBU) at NHS NSS, led by the Director of PCF, Jim Miller who held the post from 2015 to 2021. My role brought together what were previously the roles of two directors, with Sourcing and Logistics having had a director each. My principal responsibilities include creating a sustainable National Procurement vision for NHS Scotland applying Scottish Government policy, EU regulations and other legal procedures and guidelines, leading on external procurement service provision, strategic sourcing and contract management. I have worked in NHS Scotland since 2001 in various procurement leadership roles. Several weeks after joining NHS NSS in December 2019, the World Health Organization (WHO) declared COVID-19 to be a Public Health Emergency of International Concern. Prior to joining NHS NSS, I was the Head of Procurement at NHS Greater Glasgow and Clyde Health Board. I am a Chartered member of the Institute of Procurement and Supply and have a BA degree in Business Studies. I have provided a copy of my CV to the Inquiry **GB/001 – INQ000320365**.

2. NHS NSS is a Non-Departmental Public Body (NDPB), accountable to Scottish Ministers. NHS NSS was established as the Common Services Agency in 1974 under The National Health Service (Functions of the Common Services Agency) (Scotland) Order 1974, with a mandate to provide national strategic support services and expert advice to Scotland's health sector whilst maximising health impacts and cost savings.
3. National Procurement was established in 2006 following the release of a report by John McLelland, [Review of Public Procurement in Scotland: Report and Recommendations](#) **GB/002 – INQ000320366**. One of the key recommendations was the establishment of a 'once for Scotland' national procurement service. The purpose of this centralised model was to achieve cost savings, improve the quality and consistency of supplies, and promote best practices in procurement.
4. National Procurement in Scotland is responsible for sourcing and supplying a wide range of goods and services to the country's healthcare system. During the COVID-19 pandemic, National Procurement played a critical role in ensuring that the healthcare system had access to the Personal Protective Equipment (PPE) and other critical supplies needed to respond to the crisis.
5. Prior to the pandemic, National Procurement provided resilience services for medicines and stock management for the UK Pandemic Influenza Preparedness (PIPP) stockpile and in supplying goods to hospitals in Scotland through a Service Level Agreement (SLA) 2009 between Scottish Government and NHS NSS **M1/MM/01 - INQ000108647**. The SLA set out the relationship where Scottish Government was/is the purchaser and National Procurement, NHS NSS was/is the provider. National Procurement worked with Scottish Government Emergency Preparedness Resilience Response (EPRR) Division to plan for pandemic stock and held the Scottish Government share of the UK stock in its warehouse.
6. One of the services Scottish Government commissioned National Procurement to provide was a Pandemic Stock Management Service. This was established via the SLA in 2009. National Procurement provided services to manage the Scottish share of the UK pandemic resilience stock pile as outlined in the SLA (2009). The scope of services, section 1.7 of the SLA, states:

“[The] Department of Health have contracted for a range of consumables to be issued to the NHS in the event of a Pandemic Flu outbreak. Scotland is party to this purchase and has agreed to take delivery of the share of product, based in Barnett Formula to a single point in Scotland. The Provider shall undertake the management, storage and distribution of these consumables on behalf of the Purchaser.” (Service Level Agreement between Scottish Government Pandemic Flu Team and NHS National Service Scotland 2009). The specific roles and responsibilities of both Purchaser and Provider are outlined in Section 2 of the SLA.

7. National Procurement’s key service provision was to provide a Once for Scotland Procurement Service, offering National Frameworks and National Distribution (Logistics) Services (NDC). Due to their distributed location logistics services were not provided to NHS Scottish Ambulance Service (SAS). National Procurement provided stock services predominantly to acute NHS Scotland Territorial Health Boards. It did not provide any stocks to social care. Prior to the pandemic social care purchased stock from commercial distributors. Local Authority facilities and services, procured goods using Local Authority procurement services, including Scotland Excel.
8. Scotland Excel supplied to local authorities but not primary care, dental, and care homes. During the COVID-19 pandemic, National Procurement was tasked with extending its services and responsibilities, including direct provision of PPE to primary care and social care including care homes **GB/003 – INQ000320367**. Regular meetings were established with social care partners during the pandemic, to enable the setting up and successful operation of the social care hubs.
9. National Procurement was also responsible for ensuring that the products and services procured met the required quality standards, in terms of safety, efficacy, and compliance with relevant regulations. This involved working closely with suppliers and healthcare organisations to address any quality-related concerns and ensure that everything purchased is compliant and meets specification.
10. Between January 2020 to 18th April 2022 my role was to provide leadership to NHS NSS National Procurement’s core services, in addition to providing operational leadership to the delivery of National Procurement services

commissioned by Scottish Government in support of the Covid-19 pandemic response. In this regard, my primary focus was the effective delivery of goods and services required to enable the health and social care services response to the pandemic including the provision of supply chain management data to Scottish Government. During the early stages of the pandemic response this information and data provision was focused on PPE supply and latterly on the Covid-19- vaccination roll-out.

11. Prior to the pandemic, information on PIPP stock expiry dates was available on the National Procurement stock management system and stock status reports were provided to Scottish Government on a quarterly basis, including levels of expired stock **GB/004 – INQ000320476 and GB/005 – INQ000320477**. Decisions relating to which products were stocked, the quantities held and stock write-off/ replenishment/ revalidation were the responsibility of Scottish Government and Department of Health and Social Care. National Procurement’s role at this time, prior to March 2020, was to provide storage and distribution services. National Procurement did not have a role in purchasing, revalidation or disposal decisions.

DECISION MAKING COMMITTEES

12. NHS NSS worked with Scottish Government to procure PPE through a number of groups which I attended in my National Procurement leadership role for PPE including:
 - PPE Strategy and Governance Board (Scottish Government) **GB/006 – INQ000320368 to GB/010 – INQ000320372 and GB/011 - INQ000320374 to GB/023 - INQ000320386**
 - PPE Supply Resilience Group (Scottish Government) **GB/024 – INQ000320387**
 - Single Point of Contact (SPOC) PPE Oversight Group (chaired by myself on behalf of NHS NSS with attendance from Scottish Government policy and Scottish Government Ministers) **GB/025 – INQ000320388**
 - COVID-19 National PPE Clinical Short Life Working Group (NCPG) chaired by Alex McMahon, Director of Nursing NHS Lothian and sponsored by Scottish Association of Medical Directors (SAMD) and

Scottish Executive Nurse Director Group (SEND). This group reported into PPE Expert Clinical Oversight Group (ECOG) **GB/026 – INQ000320389 and GB/027 - INQ000320390**

- COVID-19 National PPE Clinical Advisory Panel (CAP). This group reported into the NCPG **GB/028 – INQ000320391**
- National PPE Expert Clinical Oversight Group (ECOG) (chaired by Anna Lamont, Medical Director National Services Division, NHS NSS). This group reported into the PPE Strategy and Governance Board. **GB/029 – INQ000320392 to GB/032 – INQ000320395**
- Daily PPE Supply Chain Oversight Group (chaired by Scottish Government Minister Ivan McKee)
- COVID-19 National PPE Primary Care Contractors Short Life Working Group chaired by PHS (formerly HPS)- Charlotte Leggatt, Practice Manager Lead and NSS Paul Cushley, Director of Dentistry **GB/033 – INQ000320396**

13. I also set up and managed a number of operational meetings to co-ordinate NHS Scotland (NHSS) procurement services response:

- NHSS Procurement Services Senior Management Team – Covid 19 (weekly meeting chaired by myself and attended by Health Board procurement leaders)
- National Procurement Covid 19 Governance Group Meeting (NP meeting chaired by NP's Head of Governance)
- NHSS PPE Operational Supplies Group (jointly chaired by NP Supply Chain Manager and Health Board Head of Procurement) **GB/034 – INQ000320397 to GB/080 – INQ000320443 and GB/081 - INQ000320446 to GB/105 - INQ000320471**

14. There was also the following committee which I did not attend regularly:

- Social Care PPE Steering Group (Scottish Government)

15. In respect of UK wide groups, I attended a UK PPE Four Nations Strategic Meeting (chaired by Department Health and Social Care [DHSC]) **GB/106 –**

INQ000320472. My role at these meetings was to provide information when requested on the situation within Scotland and to assist Scottish Government in answering questions they were asked or may be asked. I also attended a 6.00 pm daily call on stock deliveries (chaired by NHS England [NHSE]) which I attended for a short period early in the pandemic response. This meeting was primarily established to allocate PPE stocks across NHSE and where availability allowed to support any requests for urgent mutual aid requested by Devolved Authorities (DAs).

16. DHSC led a 4 Nations Group WN-COV Supply Chain Cell which ran from 31st January 2020 to 26th March 2020, I did not attend these however colleagues from PCF and Scottish Government attended. There was also a UK led National PPE Oversight Group (chaired by DHSC) which I did not attend. As well as the above UK committees I also participated in more informal joint working between the procurement service leadership group of NHS Wales and NHS Northern Ireland on aspects related to PPE supply.
17. Due to the scale of the involvement of NHS NSS services, NHS NSS delegated responsibilities for elements of the Covid-19 response to senior members of the leadership group. As previously mentioned, at the time National Procurement was a division of the PCF SBU. Within these delegated responsibilities I was mainly focused on maintaining our PPE national stock levels and supply service levels to NHS Scotland Health Boards and primary care services with other colleagues leading on engagement and service levels to Local Authorities, Social Care and Unpaid Carers.
18. As part of the response to preparedness for future pandemics National Procurement has been providing subject matter expert input to the establishment of a national pandemic stock pile service available to NHS Scotland, Scottish Local Authorities and other Scottish public bodies wishing to participate. This service was approved by Scottish Government in March 2023 and currently the project is preparing for the on-boarding of participating authorities.

INITIAL UNDERSTANDING AND RESPONSE TO CV19 (JAN TO MAR 2020)

19. After taking up the Director of National Procurement role in December 2019, I established an operational management group meeting. This meeting covered a

broad range of agenda items. My notes of the operational management meeting of the 27th January 2020 record the first reference I can find to a meeting between one of my direct reports with Scottish Governments Resilience Unit who had met to update on pandemic stock-co-ordination **GB/107 – INQ000320473**. Later that week on 31st January my weekly logistics operations meeting also discussed pandemic stock and a first review of FFP3 stock volumes held by National Procurement on behalf of Scottish Government.

20. I was personally involved in regular meetings, the key points are summarised as follows:

20.1 There was little activity during January 2020 other than an initial push for Fluid Resistant Surgical masks from the national stock pile to GP practices over week commencing 20th January and week commencing 26th January as requested by the Resilience Unit document **INQ000291607** and **GB/108 – INQ000320474** (EPRR Division, Scottish Government) from the national pandemic stock pile **GB/107 – INQ000320473**. Activity then increased during the first half of February 2020. During the initial few weeks of February, the focus quickly turned to the status of the UK stock held on behalf of the Scottish Government by National Procurement **GB/109 – INQ000335844** and **INQ000291635**. Although there were good volumes of some items many had reached the end of their manufacturers' validated shelf-life period or were close to exceeding that **GB/004 – INQ000320476** and **GB/005 – INQ000320477**.

21. Guidance from the UK was that stocks were being revalidated by the manufacturers' and additional supply would be delivered based on the UK Pandemic Stock strategy of 'Just in Time'. Just in Time allowed for an 8-week stock pandemic holding across the UK based on demand modelling by DHSC with replenishment orders triggered in the event of a pandemic. The nature of the world-wide pandemic, the collapse of international supply chains and the restrictions on cross border international trade meant the UK strategy ultimately failed.

22. By mid-February 2020 there was increasing concern over the lack of information being provided to the Scottish Government from UK agencies. Scottish

Government focus started to turn to potential direct supply options procured by National Procurement in conjunction with EPRR Division at Scottish Government. During the second half of the month, the PPE requirement to provide infection prevention control was being revised and a broader range of products than those held in the national stock pile were being identified, including full face visors and long sleeved gowns.

23. By the last week in February, the DHSC flagged that the UK national FFP3 stocks revalidation was going to take longer, and liability issues may undermine use. The EPRR Division, Scottish Government were still expecting 600k to 800k from a new UK order under the Just in Time replenishment arrangements.
24. In early March NHSE commenced a push of PPE stocks to wider health and social care, followed by a similar instruction from Scottish Government via National Procurement week commencing 9th March 2020. Included in the PPE stocks were aprons, exam gloves and Type IIR surgical masks. By the second week in March 2020, the first reports of countries implementing export controls were reported to National Procurement. Meanwhile we worked closely with NHS Scotland Health Board procurement teams to manage stock demand and to distribute stocks as approved by Scottish Government through coordinating committees and forums starting up.
25. As the pandemic developed, the market availability of stock was becoming more and more constrained and buying decisions had to be made quickly to secure available good quality stock. As we moved from an initial reactive push of stock into a large scale logistics operation, the responsibility for the regular buying for stock replenishment and daily issuing of stock had to move to the logistics management service (NHS NSS). By mid-March 2020 Scottish Government confirmed that the national pandemic stocks should now be made available to social care organisations as a stock of last resort **GB/110 – INQ000320478**. Working with colleagues from across PCF, in one week we set-up a triage call-centre solution and distribution capacity to deliver essential products to social care. This was followed by the creation of the Social Care Distribution Hub Network which remained in place until March 2023 **GB/003 – INQ000320367**. National Procurement set up 48 regional hubs across Scotland to manage PPE distribution and stock replenishment to all Scotland's Local Authorities and social

care settings **GB/111 – INQ000320479**. The hubs received PPE from National Procurement and Scottish Government, which was then distributed to care homes and other social care providers by the Local Authorities.

26. Scottish Government approved the release of PPE stocks to social care in early March **GB/112 – INQ000320480** and the 'stock of last resort' emergency back-up service was put in place week commencing 17th March 2020 followed by the establishment of a social care stock supply service in April 2020. This continued until 31st March 2023 **GB/113 – INQ000320481**.

27. In March 2020, a revised SLA was established with Scottish Government to update the authority delegated to National Procurement to purchase and issue stock supplies **GB/114 – INQ000320482**. It was agreed that National Procurement would now manage the overall stock in accordance with the following detailed actions:

1. **Healthcare Sector:** A notional split of the stockpile between Acute / Independent Contractor GPs/ Scottish Ambulance Service (SAS)/ and Social Care has been agreed by SGHRU on a Pandemic Stock line by line basis. National Procurement will manage the overall release of Pandemic Stocks within these sector allocations and in accordance with the paragraphs below.
2. **Acute Hospital Sector:** National Procurement will have delegated authority to release up to 10% of pandemic stock allocated to the acute sector per week prior to reference back to SGHRU.
3. **Independent Sector GPs:** National Procurement will maintain a stock issue quantity list based on the 1st GP stock release. SGHRU will instruct NP on subsequent releases to GPs.
4. **SAS:** National Procurement will have delegated authority to issue up to 2000 PPE kits per day comprising 90% non-aerosoling procedure kit (Type IIR mask) and 10% aerosoling procedure kit (FFP3 mask) together with gloves and goggles in-line with HPS guidance.
5. **Social Care Sector:** National Procurement will release the identified items of Pandemic Stock on an essential risk based need basis. The essential needs will be managed via the Social Care triage service provided by National Procurement up to a maximum weekly release of 10% of total allocated stock.

6. **National Distribution Centre (NDC) BAU Stock:** NDC core business as usual stock (BAU stock) is maintained primarily for the use of the acute hospital sector. Access to this stock by other sectors will be managed by National Procurement and only if the demand can be accommodated within the overall stock profile for Acute hospitals. Variation to this general rule will be required to be instructed by the Cabinet Secretary for Health.
28. Large replenishment orders were subject to the NHS NSS scheme of delegation and approved by Scottish Government if over delegation levels **GB/114 – INQ000320482**. During the pandemic 'forward-buy' papers were submitted to Scottish Government to approve large value replenishment stock orders.
29. In the second half of March 2020, we began to focus more attention on direct supply options, and through joint working with Scottish Enterprise proceeded to engage with a number of direct purchase options. One of the main suppliers of the existing UK pandemic stocks stood back from revalidation of their out-of-date product creating increased concern over continuity of supply and the expected large UK FFP3 order was cancelled by the French supplier. At this stage the PPE procurement approach effectively moved from a UK led pandemic stock service to a Scottish direct supply service led by National Procurement. Although there were some requests for cross border mutual aid, **GB/115 – INQ000335850** the majority of PPE products supplied into health and social care in Scotland from this point onwards were now via National Procurement. These arrangements were ultimately formalised in a four nation's protocol covering PPE procurement between Scottish Government, UK and the other devolved authorities in February 2021 to confirm devolved authority responsibilities and maintain collaborative working **GB/116 – INQ000320484, GB/117 – INQ000320485 and GB/106 – INQ000320472**.
30. On the 19th April 2020, the Cabinet Secretary for Health and Sport confirmed that Scotland's adult care homes would each receive a direct delivery of the main PPE items, these included masks, gloves and aprons. The deliveries started Sunday 19th April 2020, and were intended to provide at least one week's PPE supply. National Procurement worked closely with our contracted distribution supplier, Menzies Distribution Limited, to put in place the stock delivery service. This arrangement was then expanded and supported a series of social care 'stock'

hubs providing stock based on need within a local authority area. This was available to private and local authority run care homes and to unpaid carers where pre-existing supply chains could not provide product. By the end of June 2020, 35 million items of PPE had been issued to the social care sector from the national stockpile **GB/118 – INQ000320486 to GB/120 – INQ000320488**.

31. I was less involved in the detail of this operation. NSS's role in the supply of PPE to social care and unpaid carers was stood down on 31st March 2023. By that time National Procurement had issued circa 475 million items of PPE to social care and unpaid carers **GB/121 – INQ000320489 and GB/122 – INQ000320490**.
32. With regards to availability of PPE for care homes as described earlier in my statement, the key challenges relating to PPE supply arose from the collapse of international supply chains and the implementation of border controls between supplier and buyer countries on the UK's Pandemic 'Just In Time' stock strategy. This strategy provided an initial stock holding for approximately 8 weeks demand based on UK DHSC modelling to allow sufficient lead-time to allow replenishment orders to be delivered. In reality these orders did not arrive via the UK procurement routes. Additionally adding to this fundamental challenge was the PPE requirement for Covid-19 which included additional products not held in the national stockpiles and a significant quantity of the items held in the national stock pile were beyond the manufacturers approved shelf life period and not immediately available for use. Together these elements meant the stocks were insufficient to meet the expected demand forecast and new arrangements had to be put in place quickly by National Procurement to fill the gap in the UK strategy.
33. National Procurement was able to work closely with trusted supply partners to source additional products, secure production capacity going forward and to introduce some new suppliers and supply routes in conjunction with Scottish Enterprise and Scottish Government. These measures ensured that we never ran out of stock, as confirmed in the Audit Scotland Covid-19 Personal Protective Equipment Report document **M1/MM/01 - INQ000108697**.
34. During the early stages of the Covid-19 pandemic, it became evident that stock management and distribution of PPE needed to be scaled up to meet the rising demand. To address this challenge, an approach equivalent to a Material

Requirements Planning (MRP) system was designed to provide better demand modelling.

35. The accurate data from the new MRP approach enabled the effective daily distribution of PPE to NHS Scotland Health Boards. Supply chain teams had to adapt their operations to align quantities required with specific delivery dates based on the high-quality data provided by the MRP approach.
36. To address concerns over the availability of PPE against a backdrop of significant national media stories causing anxiety and concern, National Procurement created a daily stock bulletin which was circulated to a broad range of stakeholders for local use and to cascade. The first bulletin was issued on 21st March 2020 providing information on stock and inbound orders. By end of March 2020, the bulletin (issue 8) included information on stock supplied to Acute, Primary Care and Social Care from the national pandemic stockpile, together with the stock and inbound supply updates **GB/123 – INQ000320491**. Towards the end of March 2020, I joined the Scottish Government leadership group established to provide oversight for the developing Scottish Supply Chain and attended daily calls with Scottish Enterprise, Scottish Government and National Procurement representatives.
37. Separately, others across National Procurement continued to work closely with colleagues from DHSC on critical care equipment and medicine supplies and overall those initiatives worked well documents **INQ000291653** and **INQ000291554**.
38. The scale of the challenge facing NHSE over these initial weeks appeared to consume all available resources and there was limited support for the Devolved Authorities (DAs). This was exacerbated by the failure of international supply chains and the impact on the 'Just In Time' UK pandemic stock strategy. As a result, the DAs developed their local supply chains. The experience of securing high quality, fit for purpose product for Scotland has been well documented and was subject to Audit Scotland scrutiny document **M1/MM/01 - INQ000108697** and **GB/107 – INQ000320473**.
39. There was no doubt in my mind that the risks of a pandemic and its potential impact on health and social care services was clearly understood by all those I

engaged with. Most of those I engaged with were long standing employees within NHSS or Scottish Government Resilience Unit and were highly motivated to support our health and social care services and respond to the emerging national emergency. Everyone involved committed an extraordinary effort working 7 days a week, long days and accepted new tasks and duties without complaint. I reflect with great pride the work of National Procurement and the response we were able to deliver to the emerging challenges from the Covid 19 national emergency.

ROLE IN RELATION TO NON-PHARMACEUTICAL INTERVENTIONS (NPIS) – ROLE AS DIRECTOR OF NATIONAL PROCUREMENT

40. I had no role in the adoption of a national lockdown strategy. During the pandemic we provided regular updates on the status of PPE stock levels as previously referred to. These were provided daily during the initial phases and as stock stabilised and our Scottish national stockpile increased the daily updates changed to weekly. These reports provided commentary on key issues and planned inbound supply. Daily PPE stock reporting was also provided into the DHSC group during the second quarter of 2020. **GB/118 – INQ000320486 and GB/121 – INQ000320489 to GB/124 - INQ000320492.**
41. My team also supported the establishment of NHSS diagnostic laboratory testing capacity through the purchase of equipment and testing consumables which was led by the National Laboratories Programme Group (NLP) and the Scottish Microbiology and Virology Network (SMVN) coordinated by Scottish Government led Testing Oversight Delivery Group (TODG)
42. National Procurement worked closely with Scottish Government through the Testing Oversight Delivery Group (TODG) and the Department of Health and Social Care (DHSC) to support increasing Laboratory based capacity as well as with the supply and distribution of Lateral Flow Device (LFD) self-testing kits and Polymerase Chain Reaction (PCR) testing kits which were returned to Laboratories for testing.
43. Laboratory testing capacity was increased by expanding the scale of NHS Scotland hospital laboratories and establishing new NHS Scotland regional laboratories as well as contracting capacity available from non-NHS Scotland organisations.

44. National Procurement provided procurement expertise to support the expansion of the NHS Scotland laboratory capacity through securing new equipment, reagents and testing consumables. Non-NHS Scotland capacity was arranged via a UK led programme with Scotland getting a fair share allocation of capacity secured. Community testing 'hub' capacity was provided through a UK led initiative which National Procurement was not directly involved with. Home testing focused on the supply of LFDs and PCR test kits. LFDs were supplied based on a UK allocation basis through a UK led programme managed through the Scottish Government testing team.
45. In the early stages of the Pandemic the key procurement challenges for National Procurement were around securing supply of testing consumables, new testing equipment and the associated reagents (chemicals used to carry out the test). National Procurement did not have a laboratory support service team so had to stand down non-urgent activity and reallocate senior experienced staff to create this capacity. Our small team worked tirelessly in conjunction with the National Laboratories Programme Group, Scottish Microbiology and Virology Network (SMVN) and Public Health Scotland to secure available equipment. Equipment was typically delivered direct to laboratories although some consumables were held in our National Distribution Service warehouses. The capacity available via NHS Scotland laboratories increased rapidly, made up from NHS Scotland Health Board Laboratories, Partner nodes (other local capacity made available by Academia and third party suppliers) and UK Government contracted "Lighthouse Laboratories". Regular reporting provided capacity coverage analysis, and on the whole capacity exceeded the required daily capacity throughout the pandemic **GB/125 – INQ000335860 – GB/131 – INQ000335942.**
46. Scottish Government led modelling of the swab test kit demand based on different scenarios. National Procurement created a material requirement plan modelling available stock, in-bound supply and demand forecasts. National Procurement engaged with distributors to gain a secure supply of swabs at the start of the pandemic, with DHSC managing weekly allocations from the only UK Manufacturer of PCR Testing Kits – Medical Wire Equipment.

47. Scotland's allocated share from DHSC was insufficient to match PCR testing forecasting requirements from the TODG. Through the work of The Testing Supply Chain Oversight Group, chaired by Mr Kee (Scottish Minister for Trade) a Chinese manufacturer was identified - Hutchison Technologies based in Dundee and had offices in China, with direct links into a volume PCR manufacturer, whom could meet UK specifications and Scotland's capacity requirements. PCR Samples were validated for use by the National Laboratories Programme and Scottish Microbiology and Virology Network group with volume shipments commencing into Scotland from early May 2020 through to September 2020, matching testing demand forecasts.
48. From April 2020 to September 2020 NP attended regular meetings (generally Mon, Tue and Fri) with the Minister for Trade Industry and Innovations – Testing Supply Chain Oversight Group where details of daily testing requirements and demand forecasts were discussed.
49. The NHS Scotland policy was to utilise the regional hubs for PCR testing and this produced a requirement for bespoke PCR test kit to be produced that would inactivate the virus before return to the lab for testing. The UK supplied products did not cater for this requirement and therefore Scotland were required to produce their own for use with care home staff and this expanded to prison staff too. As home and community based testing developed, a critical supply risk emerged around January 2021 relating to PCR test kits. National Procurement worked closely with Scottish Enterprise to develop a new PCR test kit assembly and distribution supply solution with a company based in the Scottish Borders who responded to the challenge of building the required testing 'kits'. Kit components were sourced from another company based in Scotland and a kitting service created the complete kits to be used by Care home staff and prison staff.
50. A key challenge was establishing the manufacturers licencing under the Medical Devices Regulations (MDR) which the kitting supplier was not able to achieve. To overcome this NHS NSS became the manufacturer under the MDR regulations to ensure this supply capacity was enabled.

51. Between November 2020 and January 2021 National Procurement assisted with a project to consider the creation of a 'Mega Lab' capacity in Scotland for Covid-19 testing. NSS were in the process of leasing a large warehouse in central Scotland to provide logistics capacity for PPE and the UK led 'Megalab' project considered the use of part of this capacity to enable the project in Scotland. Ultimately the project did not proceed and NSS leased the full warehouse capacity in line with plans in February 2021.

DIVERGENCE

52. As described earlier in my statement the divergence from a UK led PPE pandemic stock strategy began around mid-February 2020 as Scottish Government started to highlight concerns in relation to data and information coming from the UK PPE pandemic team and the increasing concern over access to UK procured PPE supplies. This initiated a review of direct supply options in Scotland and National Procurement commenced to establish these arrangements. The scale of the response required to support NHSE appeared to be all consuming and the DAs voiced concerns that they were having to establish their own stock solutions. By mid-March 2020 the PPE procurement approach effectively moved from a UK led pandemic stock service to a Scottish direct supply service led by National Procurement. These arrangements were ultimately formalised in a four nations protocol covering PPE procurement between Scottish Government, UK and the other devolved authorities in early 2021 **GB/116 – INQ000320484 and GB/117 – INQ000320485**.
53. Early in April 2020 a meeting was convened by an NHS Wales procurement service lead with myself and a counterpart in NHS Northern Ireland procurement service. This group met to share PPE sourcing information and provide mutual aid where needed. NHS Scotland were able to help NHS Northern Ireland and NHS Wales on a number of occasions **GB/132 – INQ000320493**. This included a share for NHS Wales of Type IIR masks National Procurement had secured via the joint working with Scottish Enterprise which I will refer to below.
54. In mid-April 2020 I was invited to join a daily 6pm teleconference with NHSE covering the daily supply challenges for NHSE. Although DAs were on the

agenda as the situation in England was clearly very challenging there was little opportunity to request additional stock. By early May 2020 I stood down from the call.

55. Ensuring that products supplied met the required quality and performance requirements was a further critical challenge. Early in the pandemic it came to light that rogue companies were selling unlicensed and inferior products within the world market. Examples of countries being caught out were covered in national media. Our teams were being inundated with emails and phone calls from individuals offering to secure PPE supplies from their friends, colleagues, relatives, business partners they purported to know in developing countries and the Far East.
56. As the risk of being overwhelmed with suppliers offering PPE became apparent, an online portal using ServiceNow was created to automate and streamline the process of identifying suppliers' capabilities, such as the products they could supply, the quantities available, the compliance standards met, and the prices offered. Although grateful for the offers of help, National Procurement required to establish a more formalised method to triage and assess such offers. NHS NSS Digital and Security (DaS) service helped develop a web portal solution which allowed all enquires to be routed to a web page which required essential details and supporting evidence to be submitted to National Procurement. We set up a small team to triage the submission, review the supporting evidence and decide where to progress further. Given the efforts already in place with our trusted supply base the majority of approved sources were passed to Scottish Government colleagues to be forwarded to other public bodies in greater need.
57. By placing the responsibility on suppliers, it allowed National Procurement to identify the best-suited suppliers to provide PPE. Approximately 2,500 offers from suppliers were received.
58. National Procurement worked with the Scottish Government and Scottish Enterprise to conduct due diligence checks in China and other key countries that could supply PPE in the required quantities, ensuring a diversified and reliable

supply chain. The majority of PPE products supplied into health and social care in Scotland from this point forward were now through National Procurement.

59. During this time and due to the adverse publicity being generated by rogue suppliers, the Chinese government introduced new export licensing requirements. This effectively stopped the flow of PPE from China until local licenses had been issued. Scottish Enterprise worked closely with in-country officials to ensure that the essential supplies purchased by National Procurement could be released for export. This was successful and 10 jumbo jet freight flights were booked to bring these essential supplies directly into Prestwick Airport, the first arriving on 19th April 2020. The receipt of these goods ensured Scotland's pandemic stock levels began to stabilise and grow. Products delivered on these flights were also provided to NHS Wales in line with a mutual aid agreement.
60. In parallel with these import activities National Procurement, working with Scottish Government and Scottish Enterprise, established a number of locally based suppliers who had the capability to manufacture products in Scotland. This was considered essential to overcome the ongoing international supply-chain failure and to reduce the risk of export restrictions in the unclear future situation that Covid-19 may create. Key products included face visors, Type IIR surgical masks, FFP3 respirator masks, non-sterile gowns, poly aprons and hand hygiene products. These accounted for 80% of the requirements for PPE in Scotland (excluding non-sterile examination gloves which could not be manufactured in Scotland).
61. Following the initial set-up period the inbound supply of these products produced in Scotland allowed National Procurement to maintain strong stock levels and build a substantial buffer stock. The ability to size orders against forward demand profiles reduced the risk of over ordering in the event that circumstances changed that reduced the need for the significant quantities of PPE required. For example, prior to the pandemic the National Procurement logistics service provided circa 3 million Type IIR surgical masks each year to the NHS in Scotland, shortly into the pandemic National Procurement issued over 4 million per week across health and social care. During this time National Procurement worked very closely with Scottish Government. A dedicated PPE team was established by Scottish

Government and this team provided the funding required to support the purchase, storage and distribution of PPE to health and social care.

62. The issues in regard to the response across England have been well documented and on reflection I consider it was necessary for Scotland to establish its own approach to PPE supply to protect our front-line workers across health and social care and our patients. The scale of demand in Scotland and the structures of our NHS meant close, collaborative working was able to be achieved quickly. Communications with key stakeholder groups were frequent and constructive and most of those involved had long standing prior working relationships to build trust and confidence.
63. For other Covid-19 requirements the joint working with DHSC continued, particularly in respect of medicines and critical care equipment (ventilators) and consumables. For medicines, Scotland took a different approach in managing the national stockpile. This involved recycling stockpiled medicines through the business as usual demand from hospital pharmacies. In this way stock was well managed and waste was minimised and there was no requirement for additional funding to replenish stock write-offs.
64. Through the work of National Procurement, Scotland's pandemic response was awarded more than £37million from the European Regional Development Fund. The funding boost for NHS NSS helped secure tens of millions of items of PPE in the face of continued high global demand. The vital supplies purchased with the award were used to protect NHS colleagues. (NSS gets £37m Covid boost from European Regional Development Fund | National Services Scotland (nhs.scot)_**GB/133 – INQ000320494**).
65. In relation to medical and scientific expertise, data and modelling, Public Health communications and public health and coronavirus legislation and regulations, I confirm that I had no role to play within these areas of the Covid-19 response.

KEY CHALLENGES AND LESSONS LEARNED

66. NSS' response to the Covid-19 pandemic was scrutinised by a Scottish Government Section 22 Audit Committee review document **M1/MM/01 - INQ000149093**.
67. Additionally, NSS' response to the Covid-19 was subject to scrutiny by external and internal audit reports:
- NHS in Scotland 2020 (Audit Scotland Report : Feb 2021) **GB/134 – INQ000320495**
 - Covid-19 Personal Protective Equipment (Audit Scotland: June 2021) document **M1/MM/01 INQ000108697**.
 - Financial controls – Procurement controls COVID-19 (KPMG Internal Audit 2020-21: May 2021) **GB/135 – INQ000320496**
68. National Procurement also carried out its own Lessons Learned review and the attached power point documents contains the key findings **GB/136 – INQ000320497**.
69. My statements above have I hope set-out the key challenges I have reflected on in regard to National Procurement's role in provision of PPE during the pandemic.

STATEMENT OF TRUTH

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed:

PD

Dated: 15 November 2023

Supplementary Documentation

The table below outlines additional documentation held by NSS that has not been directly referenced in the statement and therefore not submitted as supporting documentation, but that may be of interest to the Inquiry.

Group Name	Description
National PPE Clinical Advisory Panel (CAP)	Meeting agendas, papers and minutes, highlight reports, technical evaluations, demand modelling
COVID-19 National PPE Clinical Short Life Working Group (NCPG)	Meeting agendas, papers, minutes, highlight reports, action trackers
National PPE Expert Clinical Oversight Group (ECOG)	Meeting agendas, papers, minutes, highlight reports, action trackers
WN-COV Supply Chain Cell	DHSC Medicines and PPE demand and supply chains overview, meeting minutes and actions

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