Witness Name: Paul Barnaby Webster

Module 5 Statement No: 2

Exhibits: PBW 14

**PBW 15** 

Dated: 6 January 2025

In relation to the issues raised by the Rule 9 Request dated 24 September 2024 in connection with Module 5, I, PAUL BARNABY WEBSTER, will say as follows:

## 1 Introduction

1.1 I am the Executive Director of Governance and Legal as well as the Company Secretary of Supply Chain Coordination Limited ("SCCL"). I am part of the team responsible for the management of SCCL and the wider NHS Supply Chain.

1.2 This is my second witness statement in relation to Module 5 of the Public Inquiry into Covid-19. I refer to my first witness statement dated 19 August 2024 for details in relation to my role and SCCL's involvement with the response to Covid-19.

1.3 The purpose of this witness statement is to respond to a further Rule 9 request dated 24 September 2024.

# 2 Publication of Contract Notices

2.1 The Inquiry has asked whether SCCL has now published every contract document and contract award notice for PPE and other key healthcare equipment that it was required to publish under the Public Contract Regulations 2015 ("PCR") relating to orders placed during the pandemic.

2.2 I can confirm that SCCL has agreed an approach with DHSC to ensure that there is transparency in relation to orders it has placed. It is important that the Inquiry properly understands what has been done in order to avoid any confusion.

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- 2.3 As explained in my first witness statement at the time of the pandemic SCCL itself was not directly procuring PPE or other healthcare equipment. The procurement activity was carried out by the relevant Category Tower Service Provider ("CTSP").
- 2.4 My understanding is that there is no publication outstanding from the CTSPs in relation to contracts awarded during the pandemic. However, once a framework is established and suppliers identified orders will be placed by way of a purchase order. SCCL places in the order of 250,000 purchase orders a month amounting to between two to three million a year. We have taken the view that it is impractical to publish details of these orders as they are placed.
- 2.5 However, we are fully mindful of the need for transparency so we have discussed with DHSC how to meet the publication requirements in light of the sheer volume of orders.
- 2.6 In June 2021 I agreed with Rick Webb, Head of Procurement and Commercial Policy at DHSC that we would deal with this volume of orders by publishing a quarterly summary of spend by supplier against each of our frameworks for all purchase orders initially in excess of £10,000 (but subsequently increased with the agreement of DHSC to £25,000). I understand that prior to agreeing this approach with us Rick Webb had spoken to Cabinet Office although I do not know the details of that conversation.
- 2.7 The agreement with DHSC was verbal, albeit based on a number of conversations and the only record I have of it is my email of 16 June 2021 to Melinda Johnson (Commercial Director at DHSC and the shareholder's appointed director to SCCL's Board) and to whom Rick Webb reported. I have attached the email of 16 June 2021 at exhibit PBW14 (INQ000516844).
- 2.8 Accordingly, there are no contract documents missing from publication. SCCL has met its transparency requirements by publishing information on a quarterly basis and making that information available on its website. This enables the level of expenditure with individual suppliers to be tracked. For information, I attach at PBW 15 (INQ000516845) an example of this publication (in this case, the first one we made) from which you can see, for example, that in Quarter 2 2021 SCCL placed 1 Purchase Order worth £26,355 to Advanced Medical Solutions (Plymouth) Ltd for Advanced Wound Care).

## 3 Cardinal Health

- 3.1 Neither SCCL nor its sub-contractors purchased FFP3 respirators from Cardinal Health prior to or during the pandemic. I understand that the purchase of these respirators for the PIPP stockpile significantly preceded the establishment of SCCL in 2018.
- 3.2 SCCL did not, therefore have any contract with Cardinal Health and cannot comment on the value of that contract (or if any attempt was made to recoup the value of the contract) nor what tests may or may not have been undertaken prior to any orders being placed for the stockpile.
- 3.3 SCCL was not aware of Cardinal Health FFP3 masks 'failing' fit testing nor of any advice by DHSC in relation to those masks.

### 4 Decisions to Extend Shelf-Life

- 4.1 Although SCCL were not responsible for carrying out the testing or inspection of goods in order to extend shelf-life I understand that testing does include an analysis of ties or and loops and the nose protection components.
- 4.2 As I explained in paragraphs 17.29 and 17.30 of my first statement, shelf life of a product would only be extended after rigorous and approved testing usually undertaken by the original manufacturer or an independent tester. Once the tests had been completed the product could be re-labelled with a new expiry date.
- 4.3 I cannot comment on instances of failure of some IIR masks from the stockpile save to say that inevitably, despite rigorous re-testing, it is always likely that some masks in a batch may not be usable on deployment. SCCL is not aware of any widespread reports of failure.

4.4 SCCL is only aware of 7 batches (a batch is typically 1 or 2 pallets) of FFP3 masks being recalled. This was because they were incorrectly delivered instead of being quarantined. Other than these SCCL is not aware of any items of PPE distributed from the stockpile which were subsequently recalled.

# 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 in its truth.



Dated: 6 January 2025