

2. What exactly is this 'less specific approach'? And what are the reasonable assurance that the i) product exists; ii) fabric is suitable for end-use? (CST is really probing into this at the moment)
3. Will all stock still be medically inspected as fit for purpose before distribution to NHS trusts and use? And can you explain this process to us?
4. Finally, what are the outcomes of the medical tests done on the PPE products coming from China so far?

My sense is that the risk the CST will be more worried about is improper equipment being used by health workers, rather than losing money on bad stock. So 3. being critical.

**NR** and **NR** might have other questions, just wanted to kick this off asap.

Thanks

**Name Redacted**

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**From:** Young, Christopher <[christopher.young@dhsc.gov.uk](mailto:christopher.young@dhsc.gov.uk)>

**Sent:** 15 April 2020 22:21

[See recipients listed above]

Williams, David

<[David.Williams@dhsc.gov.uk](mailto:David.Williams@dhsc.gov.uk)>

**Subject:** SENSITIVE: FOR URGENT ATTENTION - PPE PROCESS STREAMLINING

**Name Redacted**

Sorry for the lateness of this email – I have just come off the phone to Emily Lawson on PPE issues and need to urgently bring something to your attention [I had flagged to Philippa in the call earlier, but as ever things ramp up pretty swiftly].

We now have a new PPE demand model (which I will ask **NR** to share asap) that demonstrates the extent of some of the supply problems we face e.g. we expect to 'stock out' of gowns by the end of this week. This model should demonstrate there will be a market for everything we order, thus whilst we risk paying prices that ordinarily we wouldn't entertain, this is increasingly necessary to increase chances of securing supply.

However, whilst the approach to PPE due diligence to date has been successful in reducing risk of stock purchased/delivered being unfit for purpose, the time it is taking to undertake this process means we have triggered a much greater risk on securing supply itself i.e. we are losing deals (2-3 deals lost today as an example) – the impact of which is most acute in 3 items of extreme scarcity (gowns, aprons, type 2R masks).

I discussed with Emily how we **rebalance the risk** i.e. take slightly more risk on due diligence to help reduce the risk of losing deals and 'stocking out' on international procurement (mainly China) – this would be complimentary to pulling