

are routinely required, and factored into their planning process a method for accessing sufficient additional resources to at least double the normal maximum number of Level 3 beds.

### Preparing for children being admitted to adult ICUs

6. One potentially challenging aspect of local surge plans may be the necessity to provide care for significant numbers of children in general ICUs, with appropriate support from colleagues with paediatric expertise. As general ICUs may not routinely stock the range of different items required for the care of children then, without appropriate advanced planning, supplies' availability could add to staffing and clinical issues in such circumstances. Accordingly, this document addresses the implications for supplies that must be considered to prepare for the care of ventilated children in general ICUs during the peak of a pandemic.

### Reference lists

7. This document has three appendices:

Appendix A provides a list of general consumables and drugs used in critical care on a daily basis.

Appendix B provides a list of additional items identified as essential requirements for managing ventilated children in general ICUs

Appendix C provides a list of resuscitation equipment requirements

### Supply chain resilience

8. A priority for individual and network critical care services should be close liaison with the local SHA to explore the reliability of essential supply chains. This will need to address the robustness of these arrangements in extreme circumstances, for example, where significant numbers of staff may be compromised by flu-related problems or increased international demands. It will be important to reduce uncertainty or relevant concerns about aspects of supply chains. In order to maximise efficiency and minimise the potential financial implications these issues should ideally be addressed on a network basis in accordance with agreed regional policies for providing core intensive care requirements,
9. Responsibility for the provision of resources or supplies to meet a requirement to surge critical care capacity, if needed, rests with local organizations working through critical care networks and with leadership from Strategic Health Authorities. To ensure resilience of supplies it is important that local plans are discussed with NHS Supply Chain or local supplier networks to identify whether or not they are sustainable in terms of pharmaceuticals, consumables and other products required to deliver the totality of critical care. It is important that suppliers have information on which to base an increase in their stock holdings to meet the anticipated surge and that these estimates reflect local needs for the supplies that would be consumed when critical care capacity is doubled. A need exists to identify regional and local supplier networks and to share your plans with them so that suppliers can work with you in delivering the escalated level of support you require. By the same token, you will need to work with the same supplier network to manage the process of de-escalating effort and thus maintain positive working relationships.

### Equipment issues

10. Where plans include the following issues then it is important that they have been tested and local actions identified:

**Using reserve ventilators** Where ICUs are planning to use ventilators that have been kept in storage after being replaced then there should be attention to ensuring that