



From the chief executive

12 August 2020

Dear Emily,

Following the reduction in availability of the National Supply Disruption Response, I am writing to seek reassurance that PPE stock and supply routes will remain robust and retain the ability to immediately revert back to 24/7 distribution to meet a surge in cases or activity.


We recognise that significant progress has been made in recent months to move away from a “hand-to-mouth” PPE supply chain but are concerned that this latest change, if not accompanied with adequate mitigating measures, leaves our membership open to shortages in the event of local, regional and national surges in cases. With elective activity to ramp up over the coming months before we head into winter pressures, you will also be aware that room to maneuver around these challenging circumstances will be significantly constrained. Revision to a full 24/7 distribution service would therefore need to be tested and fully operational with immediate effect to allay our concerns.

Furthermore, we would welcome clarification on the impact, if any, the loss of fifty million face masks via the £252m Ayanda Capital contract will have on the NHS. The incident highlights why ensuring the PPE distribution network needs to remain robust and distribution immediately escalated if required. Confirmation that any impact from this incident on supply chains has been resolved and steps that have been taken to prevent future incidents of this scale would be most welcome.

Our members in primary care would also welcome clarity on PPE reimbursement arrangements from 1 August, as set out in NHSEI’s letter of 4 August to GP practices and their commissioners. We believe there should be a presumption within this new guidance that all reasonable PPE costs should be covered. A limited reading of “unavoidably required clinical and non-clinical capacity as a result of COVID-19” would simply fail to account for anxiety that has arisen around primary care PPE due to delayed communication in the early stages of the pandemic, which could understandably be exacerbated should we be hit by a further surge as we approach winter. We recognise the need to encourage adherence of national guidelines but a flexible rather than strict interpretation of “unavoidable” is required to ensure members continue to feel safe in what remain challenging circumstances.

Finally, our primary care members are concerned that the scale and ambition of this year’s flu vaccination programme, whilst welcome, will significantly drive up both the cost and usage of PPE, with PPE needing to be changed for every patient. This underlines our twin concerns that contingencies are put in place for increased demand and accessibility of PPE

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