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L	I&S						
HQ SJC (UK) Dut	y Officer (24/7)						
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HQ SJC(UK) CO	<u>OP</u>						
From: HURLEY,	Sara (NHS ENGLAND & NH	S IMPROVE	MENT - X24) < <u>s</u>	ara.hurley@	nhs.net>		
Sent: 19 March	2020 14:59						
To:	NR		@mod.g	<u>ov.uk</u> >; LAV	VSON, Emily (N	HS ENGLAND & NHS	
IMPROVEMENT	- X24) < <u>emily.lawson3@nl</u>	ns.net>;	NR	(FdAr	my-Generate-D	ACOS)	
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	ld@dhsc.gov.uk; GROVES,	101					
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ionaio littlaiolen			ND	<u> s@</u>	nhs.net>;		
	s@mckinsey.com;		NR			@mod.gov.uk>	
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Regards							
Sara Hurley							
	icer England (<mark>England.OC</mark>						
Supporting NHS England, the Department of Health and Health Education England							
	FGDP(UK), MSc (UCL), M)			
Honorary Professor Dentistry (University of Manchester) Honorary Doctorate of Health (University of Plymouth)							
	ton House 80 London F			-			
	1		SUPPORTING ENGLAND'S				
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ENGLAND							
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From:		NR		@mod.go	ov.uk>		

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To: HURLEY, Sara (NHS ENGLAND & NHS IMPROVEMENT - X24) < <u>sara.hurley@nh</u>	s.net>; LAWSON, Emily (NHS				
ENGLAND & NHS IMPROVEMENT - X24) < emily.lawson3@nhs.	<u>net</u> >;	R FdArmy-Generate-				
DACOS) NR @mod.gov.uki NR	SPO CTandl	JK-Mil-AH)				
NR mod.gov.uk>;		@mod.gov.uk>				
Cc: Steve.Oldfield@dhsc.gov.uk; GROVES, Stephen (NHS ENGL	AND & NHS IMPRO	VEMENT - X24)				
<stephengroves@nhs.net>; WILLETT, Keith (NHS ENGLAND &</stephengroves@nhs.net>	NHS IMPROVEMEN	IT - X24)				
< <u>keith.willett@nhs.net</u> >; NR NR SINGLAND & N	HS IMPROVEMENT	Г - X24)				
NR jamie littlejohns@mckinsey.com;	NR	(3UKXX-CGP-COS)				
NR mod.gov.uk>						
Subject: RE: 20200319-NHS-MACA Request -						
Sara,						
Got it. Will turn into a formal MACA request.						
All below understood; it's the planning capacity you are a	fter, not the phys	cal distribution (which will be				
done by commercial contractor).		· ·				
Planning team of 3 en route to you now. I&S	NR who	has just arrived from PJHQ				
J5 along with a generalist planner/traine NR	and I&S	(CI&S				
QARANC) who has associated NHS Ops/Plans KSE.	\					
The team will be RTM NLT 1430hrs; should be with you	$1 \frac{1}{2}$ to 2 hrs later.	Its not like there's much				
traffic at the moment ③						
Contact details are:						
NR	@mod.gov.uk	I&S				
NR @mod.gov.ul	I&S					
NR	@mod.gov					
They have your details and will touch base when near to						
NR	•					
Please cut a very simple FRAGO for this as a MAT.						
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Will speak! MINSUB for a MAT?						
Best regards,						
NR DACOS HQ SJC (UK) Montgomery Ho	use Oueens Aven	UA ALDERSHOT GUI11 2 IN L				
E I&S	dase, Queens Aver]				
7		<u>.</u>				
HQ SJC (UK) Duty Officer (24/7)						
(
HQ SJC(UK) COP						
From: HURLEY, Sara (NHS ENGLAND & NHS IMPROVEMENT - X24) < sara.hurley@nhs.net>						
Sent: 19 March 2020 13:47						
To: I&S @mod.gov.uk>; LAWSON, Emily (NHS ENGLAND &						
NHS IMPROVEMENT - X24) <emily.lawson3@nhs.net></emily.lawson3@nhs.net>						
Cc: Steve.Oldfield@dhsc.gov.uk; GROVES, Stephen (NHS ENGLAND & NHS IMPROVEMENT - X24)						
<stephengroves@nhs.net>; WILLETT, Keith (NHS ENGLAND & NHS IMPROVEMENT - X24)</stephengroves@nhs.net>						

Need to act with clear task – the requirement:

Urgent distribution of Personnel Protective Equipment (PPE) from NHS Supply Chain Depots (and some commercial sites) to NHS England primary and secondary care facilities across England (and the Devolved Administrations - tbc).

Discounted other alternatives – there are no viable alternatives available to NHS E to meet demand/timeframe at this scale:

- NHS E lacks the necessary planning and logistic task at this scale in the time frame available
- Extant supply chain is under significant pressure, evidence of failure (due to COVID-19) demands and manpower shortfalls
 - o Current estimate is that NHS Supply Chain unable to recover sufficiently in next 24-72 hours to meet the key priorities and maintain essential services for safe healthcare

Background:

Exponential demand for COVID-19 required PPE in:

- Established NHS hospitals
- Additional (new) demand in primary and community care settings (not previously served by Supply Chain, no regular resourced distribution network for these sites)

Deficiencies to current structure:

- No national planning capability to meet unprecedented national demand
- No NHS Supply Chain capability to meet unprecedented national demand

Proposal- Request:

Logistic expertise and support (for the immediate and interim distribution of PPE across the NHS Estate) in order to undertake and complete the following:

Joint NHS/MOD Planning Tasks:

Co-production with NHS E and Department of Health and Social Care (including Supply Chain)

- Establish joint planning team in Skipton House (80 London Road)
- An assessment of and quantify current NHS PPE demand across the national estate (including Wales tbc)
 - Primary Care (e.g. GP surgeries)
 - Secondary care (e.g. Hospitals)
 - o Community care (care homes, palliative hospital residential care sites, including secure sites mental health institutions)
- Identify and test feasibility of options for consolidation of current stock, depot management in order to secure rapid supply chain and distribution to prioritised locations across NHS estate and community care estate
- Quantify storage capability at proposed depot and receiving sites consider and factor in expansion of storage and security of PPE
- Produce logistic solution for PPE distribution to meet immediate priorities (next 24-36hrs) across the NHS estate
- Produce logistic solution for PPE to meet interim priorities (72hrs) across the NHS estate
- Undertake Lessons Identified with a view to developing a sustainable surge capability for national PPE requirements in order to maintain safe and essential healthcare provision across the NHS Estate and into community care settings

Implied Tasks:

Given critical time constraints assume request for MOD Logistic support

- MoD operational command and control to undertake delivery on plan as agreed with NHS and DHS&C:
 - Likely tasks:
 - C2
 - R2
 - ◆ IM/IX
 - Establish and manage temporary depots
 - Security
 - Stock control
 - Vehicles and drivers