

**DHSC PPE Clearance Board Minutes Wednesday 1<sup>st</sup> July 2020**

5pm – 6pm

Attendees:

Melinda Johnson, [REDACTED], [REDACTED], [REDACTED],  
[REDACTED], Procurement Operations ([REDACTED]),

**Summary**

Two orders approved:

1. **Pharmaceuticals Direct Limited - FFP3** - [REDACTED] units reduced to [REDACTED], with option to increase [REDACTED] at a later date. [REDACTED] per unit, total value £74,900,000.00.
2. **Full Support Healthcare – Respirator Hoods** – [REDACTED] units, [REDACTED] per unit, total value £575,000.000

**Pharmaceuticals Direct Limited – FFP3 Order – Variation**

Requester: [REDACTED]

- Original deal taken to board yesterday
- Approved for purchase [REDACTED] of FFP3 [REDACTED] per unit, total value £103,000,000.00
- Since looking at demand signal, incoming orders the decision was made to reduce no. units to [REDACTED]
- Reduction causes [REDACTED] increase per unit to [REDACTED], but cuts spend by £28.1m.
- Some uncertainty about overall demand and other orders arriving from China. So need to retain an option to purchase [REDACTED] masks at a later date.
  - o Option valid until contract end i.e. late October/ start of November.
  - o Need 6 weeks noticed to activate this option so factory can ramp up production.
  - o Unit price would be [REDACTED] per unit (total £34.4million), but the Authority may attempt to negotiate this down.
  - o This option has been agreed verbally with the Supplier.
  - o Always the option to buy from other sources rather than to action this option.
- Same deal and structure but the price changes by [REDACTED] increase per mask.

*Melinda Johnson*

- We know the supplier and already have a contract worth them.
- Just a question of VFM and whether the variation is acceptable.
- Concludes the above was satisfied and is content to approve.

[REDACTED]

- The price increase is slightly higher than other orders.
- Supplier have lowered price from the original offer but this is still slightly high.
  - o Demand for these masks is huge and growing, especially in China as new domestic outbreaks are emerging.

[REDACTED]

- Wants confirmation of certainty to obtain extra [REDACTED] if required.
- Cautions around wording of the contract regarding inspection of/ defective stock
  - o Ensure there is enough time to claim a refund during period of inspection
  - o Even if it takes several months for the items to arrive in the UK and get quality checked
- Goods are coming by air – existing clause is 30 days for inspection from the supplier from point of delivery in China if this is by boat or train it will not be adequate.
  - o Would be much better if the clause stated that the 30 days of inspection began from delivery to Daventry.
  - o [REDACTED] and [REDACTED] agreed to action.

[REDACTED]

- Content to approve.
- Need to be clear on contract volumes, regarding the option to add the extra [REDACTED] units.

[REDACTED]

- Has cautioned the option of [REDACTED] extra units must to be drafted and worded carefully in the contract to work for the Authority.

**Actions:**

- Order approved but assurance the contract will include clear terms on the option 6million unit increase and a sufficient period from inspection upon delivery at Daventry is required.

**Full Support Healthcare** – Respirator Hoods, [REDACTED] per unit, total value £575,000.00

Requestor: [REDACTED]

Speaker: [REDACTED]

- Proposal [REDACTED] respirator hoods to be bought for NEY by South Tees for £575k.
- Amendment needed to make clear this is a purchase [REDACTED] *reusable* hoods rather than single use masks

Demand:

- North East Region have had issues with FFP3 fit testing:
  - o Clinical staff unable to work due to lack of fitting masks (30-40% fit rate in some regions)
  - o Issue trying to get BAME staff back to work
  - o Had calls with regional directors of procurement and all having the same issue
  - o Suggestion these hoods are needed as back up for the region
- Nationally there has not been a link into a provider that can deliver these hoods in larger quantities, this needs to be addressed
  - o Approx. 16k units soon to leave the production line – so question of whether we can capitalise on this
- Sheffield need another 140 hoods for their staff (no contingency included)
  - o Sheffield use approx. 6,000 FFP3 masks per days for their clinical staff
- Order for 220 units was not enough based on 30 odd providers requirements
- Leeds have bought 120 units due to significant need
- Waiting for information – if other regions are looking at this individually then makes sense to look at national larger scale
- Need clear face masks for other uses:
  - o Mental health, services for deaf people; clear visors enable lip reading.
  - o If not rectified this could become a long term issue, as many services currently cannot be provided.

Usability:

- This is an alternative to wearing an FFP3 mask – single a hood is issue to a staff member (cutting down need for single use masks)
  - Investment equivalent to the cost of 600 single use masks, but they will not always be the appropriate PPE to wear
  - Issue: hoods requires removing and cleaning after a certain number of wears
  - Filters last quite some time (maybe months) but could not give specifics
  - One batter supply = 4-6 hours, approx. half a shift
  - We know these are already in use and providers have experience of them
- 
- FFP3 stock levels are good
  - This order is not included in the modelling for the FFP3 demand
  - Would be helpful to know how many FFP3 masks this is equivalent to
  - Environmental case – need to push agenda for reusable and more innovative PPE solutions.

- Previous discussion that the full hood looks OTT or intimidating, but if this becomes the norm patients should accept it.
- Happy to pull a paper together on this if required

- ██████████
- Single mask use can range from 1-5 per day = cost of £12 per day per staff member
  - Need to add to business case to see if this is actually VFM.
    - Masks to be worn for 50 days to ensure VFM compared to the single use FFP3, and there has been a suggestion this lasts for a year, this would confirm VFM.

*Melinda Johnson*

- Raised question of why this order has been brought to £5million governance board
- ██████████ –this was chosen because there was no other approval route, as rather unique request.

- ██████████
- If these are to replace FFP3 then we need a business case comparison to see if this is VFM. However, if this is to service a requirement for lip reading and fit services then content to approve.
  - Once higher volume orders for respirators hoods are received, further VFM scrutiny will be required.
  - We do not know long term demand and reliance on single use FFP3 may not be feasible, so it would be good to have stock of reusable masks.

All broadly in agreement this order is beneficial.

- ██████████ suggests pull a piece together on the benefits of this and share with staff, to learn from and improve on going forward.

**Actions:**

- ██████████ and team to write a BC on benefits realisation and cost analysis.
- Have had approval from the board to progress the order.