

Response ID ANON-YH4U-3WVD-E

Submitted to Future pandemic Personal Protective Equipment (PPE) supplies in Scotland
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Part 1: Lessons learned

1.0 Effective mechanisms of collaboration and communication between the Scottish Government and stakeholders are an integral part of facilitating the supply of PPE in pandemic circumstances, and must be implemented into any future strategy.

Agree

1.1 A reformed stockpiling and buying approach for pandemic PPE is required.

Agree

1.2 Primary Care and adult Social Care require a long term and sustainable PPE supply strategy.

Agree

1.3 Cross public sector collaboration with the NHS on PPE supply issues should be considered as part of a future strategy

Agree

1.4 A surge capacity should be incorporated into the future pandemic PPE supply and stockpiling arrangements to guarantee that PPE demand is met during the volatile early stages of any future pandemic

Agree

1.5 A future strategy also needs to consider how private businesses and third sector organisations can be as prepared as possible for future pandemics to ensure that they continue to deliver essential public services.

Agree

1.6 We must build upon the progress made during the Covid-19 pandemic in terms of supporting new, domestic supply chains and the development of data modelling.

Agree

2.0 Are there any other lessons learned that you think should be considered?

Yes

If 'yes', please describe (preferably no more than 300 words):.

The experience of the independent social care sector through the pandemic has shown that whilst a number of positive examples of collaboration and support have emerged, there was also a lack of true understanding of the sector by partner organisations and a sense of it being 'forgotten' in various planning processes, particularly at early stages, as reinforced by the findings of the Exercise Cygnus report. This also proved to be true in relation to PPE acquisition, use and guidance.

Instances that highlighted this include companies who seemed to be profiteering through their PPE price increases when regular supply chains failed, compromising the sustainability of essential care services. Whilst there emerged instances of partnership with local communities to create and donate PPE items, the need for social care services to rely on homemade PPE at early stages of the pandemic which at best created uncertainty and fear and at worst compromised the safety of staff and those supported is unacceptable. Consideration needs to be given to how this could be managed in the future if there is significant additional demand for PPE supplies, which hopefully the proposals contained in this consultation would mitigate against.

Additionally, the social care sector has often experienced significant delays in accessing supplies and support due to bureaucratic processes and the requirement to jump through various, often inconsistent hoops not least in reporting and data collection. The existence of the hubs to support PPE provision has been welcomed but at various points there was a level of confusion in how this could be accessed and for what purposes. It has also highlighted a significant data collection gap in relation to the social care sector, which is made up of many different sizes and operating models, and has resulted in huge administrative burdens in data reporting at this later stage of the pandemic. Whilst this extends beyond solely PPE information, future planning for PPE must consider how to streamline and facilitate effective and responsive data collection and feedback from diverse organisations, often with small teams who are operating through a time of crisis such as a pandemic.

Finally, a clear point of learning from the COVID-19 pandemic has been the need for those involved in planning for and supporting social care services as well as the wider public to better understand the realities, complexities and value of social care delivery as distinctive from health care. Whilst this learning extends beyond the scope of this consultation, there is also directly relevant learning to be borne in mind when planning for future pandemic PPE supply and usage. At various stages of the pandemic, there was a lack of clear guidance and contradictions in advice and guidance on what and how PPE should be used in different settings, for instance when PPE should be changed in the delivery of homecare across different residences. This has direct

implications for access to PPE and how much is required by an organisation. It points to a need for those stockpiling and distributing PPE, alongside those producing guidance, to have suitable expertise across social care settings in order to plan, advise and message effectively. When this fails, including in public messaging, our members reported significant disruption and distress to staff and service delivery, including instances where staff were verbally abused in the street for not wearing certain elements of PPE even when this was not appropriate or required.

Part 2: Preparing our PPE Stocks for Future Pandemics

3.0 Do you think that Scotland should have its own pandemic PPE stockpile?

Yes

Please expand your answer if you wish (preferably no more than 300 words):.

It makes sense for Scotland to have its own stockpile that is more easily accessible to Scottish organisations and which is planned appropriately for a Scottish context, for instance mindful of the make-up of the social care sector in Scotland.

3.1 Do you have a preference as to which organisations or sectors should be able to access the PPE pandemic stockpile?

Yes

If yes, please expand on your answer (preferably no more than 300 words):.

It is essential that social care organisations in Scotland can access the PPE pandemic stockpile. It is important to recognise that the social care sector in Scotland is extremely diverse, ranging from a majority of SMEs and family-run organisations through to charities and larger corporate organisations and supporting the widest range of ages and conditions. The needs - and PPE needs - of this range of organisations will therefore vary but all should have access to the stockpile in order to maintain consistency, quality and safety of care delivery regardless of setting or sector.

The proposals don't sufficiently consider the supply of and access to PPE from the perspective of an individual who requires care and support services. They have an equal right to feel safe and protected and therefore require access to quality PPE in the same way as care staff do.

3.2 Do you have a view on how much the organisations or sectors that share the PPE stockpile should contribute to its costs?

Yes

If yes, please expand on your answer (preferably no more than 300 words):.

We would be unable to suggest an appropriate figure at this stage but as a key partner in supporting health and wellbeing of Scotland's citizens in the event of a pandemic, it is right that social care organisations can both access the PPE supply and that they also contribute to the cost in some way. For social care services which deliver care on behalf of the public purse, PPE stockpile costs should be factored in to public funding mechanisms on an ongoing basis. The collaborative purchasing details and resulting costs should be fair for all, transparent and evidence best value.

4.0 Do you think that public sector organisations working together with the NHS to buy PPE together would help support the Scottish PPE manufacturing base?

Not Answered

4.1 Do you think that public sector organisations working together with the NHS to buy PPE together would help Scotland to be more resilient in the event of a future pandemic?

Not Answered

4.2 For public sector respondents: Would your organisation be willing to participate in a collaborative buying approach for pandemic PPE with the NHS?

Not Answered

4.3 Please detail any other views that you have on the proposed cross public sector collaboration with the NHS on pandemic PPE supply

Please give us your views (preferably no more than 300 words):.

5.0 Should the Scottish Government have a role in supporting the private businesses providing an essential public service and the third sector with their PPE supply in the event of a future pandemic?

Yes

If 'yes', please describe what role that should be (preferably no more than 300 words):.

The question answers itself, in that private organisations in the third and independent social care sector are providing an essential public service through the delivery of care and support. It is therefore equally essential that they are given full support and their staff given full protection in the carrying out of this role in the event of a future pandemic. These organisations must be recognised and treated as key and equal partners in the maintenance of critical services at all times, but especially in a time of crisis such as a pandemic. For too long and including through the COVID-19 pandemic, recognition and

value through tangible action such as PPE supply has come too late and its delay has jeopardised social care staff wellbeing and that of those who rely on this support. The role of Scottish Government must include but is not limited to:

- taking meaningful steps to engage with the sector in order to facilitate a comprehensive understanding of social care realities, complexities and PPE requirements. This needs to begin immediately, not just in the event of a future pandemic
- the development of clear, timely and accessible guidance around the supply and distribution of PPE in order to inform who needs what PPE, when and in what circumstances
- contribution to the sustainable funding of PPE supply to these organisations through Scottish Government's involvement in existing social care funding mechanisms
- facilitation of effective data collection, management and feedback to all stakeholders in order to provide a responsive approach to PPE demands, in a way that avoids duplication, over-reporting or knowledge gaps.

5.1 If you answered 'yes' to Question 5, do you have an opinion on how this should be funded?

Yes

If 'yes', please expand on your answer (preferably no more than 300 words):

The vast majority of care home and homecare services across Scotland deliver this care on behalf of public bodies and are an essential part of the backbone of health and social care services. 90% of care home residents live in services operated by the independent and third sector, and 67% of these individuals are fully or mainly publicly funded. In homecare, the independent sector is involved in the support of nearly 49% of all individuals who receive these services. As stated above, the Scottish Government as well as local government bodies (local authorities, health & social care partnerships, COSLA, etc) must consider how to build in the cost of managing PPE supply to existing social care funding routes. For a long time, Scottish Care and its members have highlighted the inadequacies and unsustainability of national and local social care funding. The need for the creation of a sustainability fund to support social care organisations through the pandemic further evidences this. Scottish Care has regularly called for the development and sharing of transparent cost models which break down the many and various components. Given that the need for PPE to manage the current pandemic will not cease any time soon and, as highlighted by this consultation, the need for future pandemic planning needs to begin immediately, it is clear that associated PPE costs are not a short-term or emergency-only factor in the funding of social care services in to the future. These costs must therefore be built into cost modelling in a consistent and sustainable way.

As highlighted previously, this also needs to be seen through the lens of the individual in receipt of care and support. In relation to the Scottish Government's role in supporting and funding access, provision built in as part of free personal care arrangements would be logical.

The Scottish Government has a role in paying for care, therefore it should expect to have an ongoing role in paying for PPE. The proposals present an opportunity through NSS to manage this element in a more cost effective way in the longer term.

6.0 Do you agree with the proposed pandemic PPE supply arrangements for your organisation or sector?

Yes

If no, please describe what you believe should change (preferably no more than 300 words):

We welcome the proposals and believe PPE supply via NSS represents a positive opportunity to offer best value and consistent quality. However we would seek more clarity as planning progresses around how social care providers would opt-in to the collaborative purchasing arrangement. For instance, we would be keen to further explore if this would be built in to the conditions and funding of the National Care Home Contract or would be at individual organisations' discretion. It is important that representative bodies such as Scottish Care and social care organisations themselves are linked in to these ongoing discussions around the practicalities and conditions of the proposed arrangements for the social care sector.

7.0 Do you agree that a mechanism (or mechanisms) should be found by which the cost of pandemic PPE is appropriately split between the organisations that are using that PPE?

No preference

7.1 What payment mechanism or mechanisms would be most appropriate in your view?

Please give us your views (preferably no more than 300 words):

About you

Are you responding as an individual or an organisation?

Organisation

What is your name?

Name:
Becca Young

What is your organisation?

Organisation:
Scottish Care

What is your email address?

Email:
becca.young@scottishcare.org

Which category best represents the sector you work for? If you are responding as an organisation, which category best represents your organisation?

Private and third sector run adult social care settings

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

Publish response with name

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Yes

I confirm that I have read the privacy policy and consent to the data I provide being used as set out in the policy.

I consent

Evaluation

Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)

Matrix 1 - How satisfied were you with this consultation?:

Very satisfied

Please enter comments here.:

Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:

Please enter comments here.: