

Health and Social Care Select Committee evidence session: Preparations for Coronavirus

Tuesday 24 March 2020

NHS Providers is the membership organisation for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS trusts and foundation trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

NHS Providers has all trusts in voluntary membership, collectively accounting for £84bn of annual expenditure and employing more than one million staff.

Overview

Coronavirus will present the NHS with its biggest ever challenge, putting the service under an unprecedented strain at a time when demand for health and care services was already at an all time high. While the NHS is well placed to respond, the scale of the challenge posed by the pandemic cannot be underestimated. Despite the NHS' well-rehearsed emergency and business continuity plans, well developed systems for prioritising how and where patients are treated during exceptional periods of demand, and a workforce of highly skilled staff, two early challenges have emerged, which need to be resolved quickly.

First, Personal Protective Equipment (PPE) for frontline staff and the need to ensure PPE remains readily available throughout the pandemic. Second, testing for Covid-19 and how, in an environment where testing capacity for Covid-19 is constrained, trust leaders reconcile increasingly vocal calls for block testing significant numbers of NHS staff with the equally important need for widespread patient testing. Trust leaders are clear that supporting their clinical staff must be paramount and they report that these are the two biggest current frontline concerns.

Personal Protective Equipment

There has understandably been considerable concern in recent days around access to Personal Protection Equipment (PPE) for frontline staff and ensuring they have access to the right equipment they need at the right time. Trust leaders have been clear that nothing is more important to them than ensuring the safety and wellbeing of their staff at this critical time.

Trust CEOs have been assured by national NHS leaders that there are currently sufficient stocks of PPE, with the NHS currently accessing both Brexit and national emergency stockpiles. Issues of inconsistent access to PPE have reportedly arisen from a lack of consistent and timely distribution and in particular, the shift from

a distribution system configured to delivering smaller, stable, amounts of PPE in a predictable pattern, to the new, current position where every trust needs unprecedented volumes of PPE with immediate delivery. In our conversations with NHS England, we have been assured that the national PPE logistics infrastructure has been restructured with help of national logistics companies & the Ministry of Defence.

While this new infrastructure will take time to properly bed in and distribution continues to take longer than is ideal in some places, we are encouraged by reports from many trust leaders that in the last 24 hours, the equipment and deliveries they need are now arriving. We also welcome reports from trust leaders that the new emergency number for dealing with PPE supply problems is now functioning in a timelier manner. We are encouraged by the lower volume of concern from trust leaders in the mental health, community and ambulance sectors who had previously felt that, in the rush to prioritise acute hospitals, their trusts got left behind.

Trusts leaders tell us that they need this improvement in delivery volume and reliability to be sustained. However, there are a number of further outstanding issues regarding the supply of PPE which also need to be resolved as a matter of urgency. These include trusts:

- Receiving deliveries of different brands of masks to those provided normally, requiring each relevant clinician to do a time consuming new mask fit test.
- Potential pressure on access to mask fit testing liquid which has been in increasingly short supply
- Stock being re-labelled with a later use by or expiration date. While we have been reassured by national leaders that this stock has been robustly tested and is fit for use, we understand why, without this explanation, frontline users of PPE equipment may have concerns and these need to be allayed.
- Being reassured that there will be sufficient stocks of PPE in the medium term.
- Ensuring that PPE reaches all sectors: acute, community, mental health and ambulance services - alongside those that need it in primary care and social care

Public Health England guidance

Trust leaders are also reporting concerns from frontline staff regarding the current guidance from Public Health England on what PPE should be worn and when, the reasoning behind the recent change in guidance over PPE, and how this relates to guidance published by the World Health Organisation and other countries. As NHS staff are understandably anxious, and there is considerable scepticism about these changes, it is vital that trust CEOs and their staff are able to understand the reasoning behind this change in guidance.

To maintain staff confidence, we are calling on national leaders to:

- Issue a clear statement on why the guidance has changed
- Why they believe the current guidance to be adequate
- To explain reasons for any differences to other guidance.

It would also help if there were clearer communications about the comparative risks and benefits of a blanket “all staff to wear the highest degree of protection at all times for all clinical tasks” approach as some are suggesting.

Testing

Alongside ongoing concerns regarding the availability of PPE, trust chief executives are calling for widespread staff testing for Covid-19 as quickly as possible as a means of tackling the significant workforce challenges they are increasingly facing.

Over the last week, trusts across England have reported significant numbers of staff leaving the workforce because of Covid-19, either because they fall into a vulnerable category (e.g. pregnant, over 70), have Covid-19 themselves, or because they are self-isolating because they live in a household in which another member either has, or is suspected of having, Covid-19. Given existing vacancies and workforce pressures in the NHS prior to the pandemic, trusts are understandably doing all they can to maximise staff numbers, including accommodating staff who haven't been in contact with family members with Covid-19 in hotels, as well as reassigning staff members in vulnerable groups to other work.

While these actions are helpful in bringing some highly skilled staff back into the workforce, it is clearly not enough at a time of unprecedented strain on the NHS. Trust leaders are telling us that rolling out widespread staff testing (to identify both those who have had the virus or who currently do/ do not have it) would have a number of advantages including:

- Allowing trusts to identify those who are able to return to work before the end of their designated isolation period
- Enabling trusts to test key staff (for example, a lead ICU nurse) who may have potential symptoms
- Meeting frontline staff's wish to return to the frontline as quickly as possible to help hard pressed colleagues
- Alleviating staff anxiety over whether or not they have Covid-19.

Trust leaders, however, also tell us that they recognise that patient testing:

- Is key to saving lives as it is important to identify Covid-19 patients as quickly as possible so they can receive the care they need
- Is important for maintaining the flow of patients out of hospital – patients awaiting test results have to stay in hospital waiting for results and the greater the delay in test results, the more congested the hospital becomes
- Drives key national and regional data about the spread of the virus upon which key decisions such as speeding up or tightening social distancing measures and the allocation of extra ventilator capacity are made.

There are two types of Covid-19 test – a “have you got it?” test and a “have you had it?” test with the latter measuring the presence of antibodies. The NHS is developing capacity for both tests as fast as possible.

Daily “have you got Covid-19?” testing is likely to have increased from 1,500 tests a day a few weeks ago to 10,000 a day this week. We are told that development of the “have you had Covid-19?” testing is progressing as fast as possible. However, we know that capacity will be constrained for some considerable time yet and will not be sufficient to test both patients and a significant number of the NHS’s 1.2 million staff.

The NHS therefore faces a difficult prioritisation dilemma of a type it is increasingly likely to face as it meets this unprecedented challenge.

We believe national leaders need to be clearer about this dilemma and the constraints within which the NHS is operating if we are to have a transparent discussion over the choices available on testing. We are therefore asking national leaders to:

1. Give a regularly updated assessment of the speed at which capacity for both tests will grow so that trusts and others are clearer on how many tests of which type will be available, and when
2. Be clear about the relative priority that should be given to patient and staff testing and the reasons for this prioritisation, including how priorities should be adjusted as testing capacity grows. We believe the views of trust leaders need to be a key part of this prioritisation as they are responsible for leading and supporting front line staff on whom the NHS will depend over the coming months.
3. Be clear about what prioritisation decisions mean for the availability of staff testing, which will be essential for clarifying when serious staff testing is expected to start.

Trust leaders tell us that they believe starting staff testing as soon as possible must be a major priority.

NHS Providers view

It is clear that we are still at the beginning of the NHS response to the Covid-19 pandemic. We note that, for understandable reasons, much of the public debate has focussed on the problems, failures and gaps that preparing for, and starting to meet this unprecedented challenge, has uncovered.

NHS Providers believes it is important that this should be balanced by recognition of how much work is going on at the trust frontline, and at NHS national level, to prepare for the explosion of demand the NHS will face. Trusts have been working at unprecedented speed to free up staff, beds and space for the coming pressures. They are postponing routine operations, speeding up patient discharges, boosting equipment supplies, buying in ventilators, training staff in new skills, scaling up testing and bringing in the private sector to support this huge effort. By focussing on the gaps – of which PPE and staff testing are two - we must not lose sight of what has been achieved so far.

NHS Providers
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