

# Planning for PPE in social care

## Angus Health and Social Care Partnership

An example of how Angus Health and Social Care Partnership has developed new collaborative relationships with social care providers to ensure personal protection equipment (PPE) supply.

*"We needed to ensure there was a system in place which would ensure that providers and carers received a quick and responsive service. Thanks to the processes put in place by the administration officers and their approachability, we managed to ensure that providers and carers received, and continue to receive, the additional stocks of PPE which they were unable to source."*

Pauline Reid, Senior Planning Officer, Angus HSCP



### Challenge

A key challenge within the COVID-19 pandemic has been the supply of PPE for staff. Angus Health and Social Care Partnership (HSCP) needed to ensure the provision of adequate PPE to providers of social care services contracted by the partnership.

Previous arrangements were that the providers were responsible for sourcing and purchasing PPE. However, the scale of the issue meant that a new approach was required. Furthermore, with increased global demand for PPE there was a challenge in sourcing it at affordable prices.

There was a need for better coordinating of supply chains, a more accurate and dynamic picture of demand for PPE and a new infrastructure for the HSCP to procure, in bulk, PPE for social care providers.

access to PPE for all  
social care providers and  
unpaid carers



### What was done differently?

Angus HSCP took a completely new approach to sourcing PPE. The responsibility for providing PPE was previously with the social care provider, the HSCP is now taking a central role. The benefits of centralising PPE provision include the rationalisation of supply chains, getting competitive prices and improving national reporting.

**Supply chains:** Whilst providers are still expected to source their own PPE, if they are facing difficulties in sourcing supplies, Angus HSCP deals directly with suppliers and distributes PPE across providers depending on need.

**Prices:** Bulk buying PPE can reduce costs. Similarly, there is more negotiating power with larger orders. Angus HSCP have been using the Scotland Excel PPE framework as a benchmark to ensure that prices being offered are fair.

**National reporting:** By centralising the purchase and distribution of PPE, Angus HSCP have an accurate picture of current stocks that can be fed into National Shared Services (NSS) who have a responsibility for planning for and distributing PPE.

An example of how Health and Social Care Partnerships are responding to planning and commissioning challenges in the context of COVID-19



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## Key insights

Establishing a new approach to buying and distributing PPE was enabled by a number of key things.

**New partnerships:** A single point of contact with the HSCP was established, through this, providers could communicate their needs. This was a brand new way of working, as it would not be a matter for the HSCP previously.

**Bottom up decision-making:** The responsibility for establishing levels of need was placed with administration officers rather than with HSCP planners. This changed the frame of decision-making and moved away from a command and control culture. This new approach is based on the needs of providers and the trust that they are acting in the best interest of the people of Angus. As a result, the administration officers, along with a team of drivers/attendants from Angus HSCP, delivered over approximately 90% of the stock to providers across Angus.

**Updated national guidance:** Changes in COSLA Commissioning Guidance has supported better relationships with providers by encouraging 'a single point of contact for providers'. New Scottish Government procurement regulations gave permission for the HSCP to be more flexible in what they could offer providers outside contract requirements.

## Experience of change

*"This support is nothing short of brilliant and it makes us at Scotia feel part of a big team and not remotely isolated. I will be for ever thankful of the support we have received. This collaborative partnership working has enabled us to feel confident to support swift hospital discharges so people can be at home and the acute hospital beds are there for those that need them."*

Lorraine Linton, Scotia Care

*"I really can't thank everyone enough as I know I would not have got through this without them. Lynda and Lynsey continue to support us and I know I can always rely on them."*

Jane Swan, My Care Tayside

## Good Practice Framework for Strategic Planning

The Strategic Planning support team at the ihub have developed a [Good Practice Framework for Strategic Planning](#) to enable practical and constructive local conversations on strategic planning.



This insight demonstrates the following good practice:

**Breadth of data:** Good strategic planning includes a mix of qualitative and quantitative data from a variety of sources and forecasts demand based on current trends and known changes.

**Supply:** Good strategic planning reviews and compares the cost effectiveness of current provision.

## Reflections

*Q: While facing limitations of supply, as well as the visibility of supply, how can we ensure that essential partner providers can easily report, request and receive the materials they urgently need?*

*How can they also be freed up to focus on what really matters - supporting the people who use their services?*

If you are interested in exploring something similar in your area or to find out more, please get in touch.

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