

On 23rd July we wrote to Simon Stevens, Chief Executive, NHS England in relation to the Calea PN supply issue (<https://bit.ly/33NHall>)

Following our letter, PINNT was invited to meet with Dr Aidan Fowler, Dr Bruce Warner and others on 13th August (<https://bit.ly/2Z7Pg9u>)

In response to our letter and the meeting, we received a written response from Dr Bruce Warner, Deputy Chief Pharmaceutical Officer on 19th August.

Dr Warner said “I appreciate your ongoing support in this matter and the time you took to meet with me and discuss the ongoing shortage of HPN. I want to reassure you again how seriously we are taking this issue and set out our response to the issues you helpfully raised.

You will be aware that the NHS has declared this as a national major incident. By doing this we not only recognise the urgency of finding a solution but also have access to specialist knowledge and expertise from across the NHS, the Department of Health and Social Care and other related bodies.

As a result of our meeting, we have committed to:

- Regular updates sent from NHSE/I to patients, so they understand the latest position. In addition to distributing these via trusts, we will put them on our website and ask you to share via your own social media channels for patients to access as quickly as possible.
- The Incident Management Team working closely with Calea to help them ensure patients are properly notified of the timeslot for their deliveries.
- The production of FAQs to answer the most common queries where possible, and work with Calea’s communications team and trusts to answer operational queries. If you are getting a lot of feedback on what the main queries are, please let us know so we can get answers to them, whether that is directly from NHSE/I, or from Calea or trusts, depending on the queries.
- As per the first point, work to get patient communications out in a variety of ways to reach patients as quickly as possible, including through social media”.

Dr Warner continued, “In addition to improving communications, we are committed to providing short-term, practical action that will enable a steady, reliable source of nutritional feed while Calea undertake the activity required to rebuild their capacity in a safe manner. These include:

- Working with other providers to find out if there is additional compounding capacity and working to make this available as fast as possible.
- Monitoring the number of patients affected over time and making sure the allocation of available nutrition bags is done in the most effective way, working with nutrition teams to identify and prioritise patients appropriately.
- Working with suppliers of standard multi chamber bags (MCBs) to make sure there are enough in the system (including access to stock from other international factories where needed which might be more suitable for some patients)

- Working with the MHRA to speed up regulatory processes required including those required to import stock from abroad.
- Identifying facilities and nurses to allow the delivery of extra infusions that may be required by patients on MCBs.
- Developing a standard process for the safe preparation and administration of any extra infusions required.
- Identifying training opportunities for patients on MCBs to allow them to administer their own extra infusions if they need to.
- Working to keep everyone, including clinical teams and patients, informed of everything above and any additional actions decided by the Incident Management Team”.

Dr Warner thanked PINNT for their support. He closed by saying “By working with us and supporting our work, you are helping to ensure that affected patients are supported and that the limited bespoke compounding slots available are best used. I will ensure that further updates and developments will continue to be communicated to PINNT and patients in a timely manner”.

We welcome comments from people affected by this ongoing PN shortage, if you have any specific question(s) please do let us know: comms@pinnt.com

PINNT will collate any feedback we receive, relay this and seek responses.

We believe all the current focus and activity must be in ensuring that patients are supported and receive their PN or intravenous solutions. In addition to this they must have timely, reliable and accurate information.

Already overwhelmed and busy healthcare professionals are working above and beyond their usual workload to manage this situation, we need their time to be used wisely during this situation which is likely to last until the end of the year.

**PINNT
22.08.19**