

UK government spent billions on substandard PPE, as private sector made a killing

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Britain's Conservative government wasted billions of pounds buying Personal Protective Equipment (PPE) that was not fit for purpose.

The amount wasted—almost £9 billion—could easily have provided over one million National Health Service (NHS) workers a 25 percent pay rise, instead of the well below inflation 3 percent increase imposed by the government. Even building 14 new hospitals would not have cost this amount of money.

Buried in page 199 of the 346-page Department of Health and Social Care (DHSC) annual report is a damning admission: “The Department estimates that there has been a loss in value of £8.7 billion of the £12.1 billion of PPE purchased in 2020-21. Of this £8.7 billion impairment, £4.7 billion relates to reductions in market prices since the goods were purchased.”

The other key features of this massive “impairment” include:

- £0.67 billion of PPE which cannot be used, for instance because it is defective.
- £2.6 billion of PPE which is not suitable for use within the health and social care sector but which the Department considers might be suitable for other (as yet uncertain) uses.
- £0.75 billion of PPE which will expire before it can be used.

Citing a Freedom of Information response, the Good Law Project revealed that “between April 2020 and August 2021, the Government spent £677.6 million storing excess equipment. And it continues to spend £500,000 a day on this.”

Of every £13 spent on PPE, £10 was wasted.

The DHSC cynically claimed in response that its “absolute priority throughout this unprecedented global pandemic has always been saving lives.” It peddles this lie even after the preventable deaths of thousands of health and other key workers. At every stage of the

pandemic, the government put the profits of a few before lives.

When the virus began to rip through the population in 2020, there was a severe shortage of necessary PPE—the result of years of underfunding of the NHS and social care. Between 2013 and 2016, the national stockpile of PPE was slashed by 40 percent as a part of £20 billion in NHS “efficiency savings.” In March 2020, the government had the opportunity to join the European Union's joint procurement scheme but refused to do so.

Leaving frontline NHS staff and social care workers with no or inadequate PPE as infections soared, the government and Public Health England—along with the Health and Safety Executive—changed the safety guidelines. COVID-19 was criminally downgraded to a non-High Consequence Infectious Disease (HCID) from March 19, 2020—reducing the standard of what constitutes safe PPE for staff.

As a result, many health workers were forced to look after patients with highly contagious coronavirus without satisfactory protection. Only flimsy aprons, simple surgical masks, visors and gloves were provided when carrying out tasks such as personal care, turning patients, feeding, oxygen therapy, nebulisations and physiotherapy. Highly effective FFP3 masks and gowns, along with higher quality gloves and visors, were available only to those who conducted aerosol generating procedures, i.e., in intensive care and theatres.

The first priority of the Tories was to seize on the PPE shortage to enrich their cronies. A “VIP lane” was established to offer lucrative contracts, bypassing the usual tendering processes. Some 68 companies were able to profiteer at public expense, several even without any prior experience supplying PPE. The Good Law Project revealed that these “68 VIPs were awarded a total of £4.9 billion in PPE contracts—all without competition.”

An analysis of the DHSC figures by Open Democracy

found that almost 60 percent of PPE procured from firms with links to the Tory government was unusable. A company owned by David Meller, who has donated over £63,000 to the Tory party since 2009, supplied over half a million items at a cost of £8.5 million that went unused. MedPro, referred to the VIP lane by Conservative peer Baroness Mone, supplied 25.5 million items worth £124.6 million that were not used.

Following a legal challenge mounted by the Good Law Project, Justice O’Farrell found that two companies, PestFix and Ayanda, had been unlawfully awarded contracts to supply PPE through the VIP process. PPE valued at £225 million supplied by the two companies went unused.

Last year, the parliamentary Public Accounts Committee revealed yet another multi-billion-pound scandal in relation to the NHS Test and Trace Service (NHST&T). The committee found that despite the unimaginable amounts of public money thrown at it, NHST&T failed to have a “measurable difference to the progress of the pandemic.” Private companies involved in the delivery of test and trace services reaped huge financial benefit from these contracts.

The government ensured its friends in the private health sector did not miss out on the feeding frenzy, spending an estimated £2-5 billion purchasing treatment services from private hospitals during the pandemic. With 8,000 beds, these hospitals only contributed to the delivery of 0.08 percent of COVID care for patients but provided rich rewards for their shareholders.

Describing the character of this government, the *World Socialist Web Site* wrote last year: “There has been much talk of ‘cronism’ in response to such revelations. The more appropriate term is kleptocracy—the form of government associated with dictatorships and military juntas whose political leaders steal public funds to enrich themselves and their corporate backers.”

Having robbed the public purse to enrich the oligarchy, the government now demands that workers pay an extra 10 percent in National Insurance Contributions to fund a collapsing NHS and social care services. More cuts in public spending, wage freezes and the slashing of welfare benefits and pensions are on the agenda.

Corporate looting of public funds over PPE occurred while key workers, including health and social care staff, transport workers and teachers, were being compelled to work without adequate protection, with catastrophic consequences. Thousands succumbed to COVID-19, while tens of thousands are still suffering the debilitating

effects of Long COVID. By January 2021, nearly 50,000 health care workers had contracted the virus. With the emergence of the Omicron variant, an order of magnitude more have contracted the disease.

This suffering is the direct result of the government’s inadequate PPE guidelines. Studies among nurses and other health workers have shown that significant numbers were working without PPE. A survey conducted by the Royal College of Nursing several months after the beginning of the pandemic found that more than a third of nursing staff (34 percent) “say they’re still under pressure to care for patients with possible or confirmed COVID-19 without adequate personal protective equipment (PPE).” The British Medical Association found that “a significant proportion of doctors still report struggling to access basics: masks, gowns, and protective glasses”.

In January 2021, hundreds of health professionals, including doctors, nurses and consultants, issued an open letter demanding higher-grade PPE. They pointed out that healthcare workers on general wards were about twice as likely to contract COVID-19 as intensive care unit staff, who could access the best equipment. These demands fell on deaf ears despite the airborne transmission of the virus having been conclusively demonstrated by scientists.

Grotesquely, the government will now dump useless or expired items deemed unfit for NHS settings on schools—where over 115 million face coverings have been supplied, but where masks are no longer mandated and in fact actively discouraged—or in poorer countries still desperate for any sort of PPE at all.



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