

# New strategy for Canada's National Emergency Stockpile System

June 25 2020

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To manage Canada's emergency stockpile of medical supplies and personal protective equipment (PPE), the government could consider several approaches, including a "prime-vendor" model selling directly to health care organizations to minimize financial and equipment waste, according to an article in *CMAJ (Canadian Medical Association Journal)*

"Stock expiration is an important challenge with national stockpiles. Accordingly, a new long-term PPE supply-chain solution is urgently needed," write Dr. Scott Laing, Department of Family Medicine, University of Ottawa, with Ellen Westervelt, Queensway Carleton Hospital, Ottawa, Ontario.

The National Emergency Stockpile System (NESS), established in 1952 as a result of the Cold War, had an estimated \$300 million in assets in 2010, with an operating budget of \$4 million and \$7.7 million in warehouse leases. Many supplies have expired, leaving inadequate supplies during the current pandemic, and the NESS lacks an electronic inventory management system, which hampers its effectiveness.

"The Government of Canada is currently struggling to coordinate timely procurement of new PPE owing to long wait times for order fulfillment, which was also identified in the 2010 audit," write the authors. "The resulting PPE shortages have hindered provision of some health services, particularly in the community, where many family doctors have had limited access to essential PPE."

The United States and Australia face similar challenges with [high costs](#) due to equipment expiration and disposal expenses.

A long-term strategy for stockpiling critical supplies could include integrating the NESS with the commercial supply as a "prime vendor," perhaps modelled after shared services organizations.

The authors note that there are logistical challenges with a prime-vendor approach and, if pursued, the prime vendor should start on a small scale and expand only when ready.

**More information:** *Canadian Medical Association Journal* (2020).  
[www.cmaj.ca/lookup/doi/10.1503/cmaj.200946](http://www.cmaj.ca/lookup/doi/10.1503/cmaj.200946)

Provided by Canadian Medical Association Journal

Citation: New strategy for Canada's National Emergency Stockpile System (2020, June 25)  
retrieved 23 June 2024 from <https://medicalxpress.com/news/2020-06-strategy-canada-national-emergency-stockpile.html>

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