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Clinical
Procurement
Specialist
Network

Recognising the Value of Clinical Procurement in Action

**HCSA Conference
25th November 2021**



Introduction to Session



Liam Horkan
Head of Clinical Procurement
East Suffolk & North Essex NHS Foundation Trust

RGN for 29 years
Clinical Background in Dialysis & Transplantation
Clinical Service Design & Transformation



Marcelle Tauber-Gilmore
Clinical Procurement Lead Nurse
Imperial College Healthcare NHS Trust

RGN for 21 years.
Clinical background in acute respiratory and
high dependency nursing, Critical Care
Outreach and Resuscitation and acute general
medicine admissions.
Special interest in tracheostomy and airway
management



Clare Nash, RN, MSc
Head of Clinical Products Management
Black Country Alliance (BCA)

Gynaecology Surgical Ward
17 years ITU caring for Liver, Cardiac and
General patients
Colorectal Surgical Ward Sister
Productive Ward Regional Lead
RCN Sustainability Lead

Nurse helps hospital save thousands on procurement

05 NOVEMBER, 2015 | BY STEVE FORD



A NEW CLINICAL LEG ULCER



READER SUI TELL US WH

Nurse procurement experts hope to save NHS millions

17 MAY, 2016 | BY JO STEPHENSON



Action needed to 'promote and value' role of nurses in procurement

01 NOVEMBER, 2021 | BY MEGAN FORD



A NEW CLINICAL MOUTHCARE

Incisors
Canine
Premolars
Molars (including wisdom teeth)

nhe
NATIONAL HEALTH EXECUTIVE

home news blog comment interviews health service focus

comment



26.01.18

Bridging the gap between procurement and clinicians

Source: NHE Jan/Feb 18

In an interview with NHS Supply Chain, Emma Nuttall, the organisation's clinical nurse advisor (CNA), speaks about the role she has in helping trusts meet Lord Carter's efficiency challenge and why it needs to be done.

The value-based public procurement nurse in Europe

August 20, 2018



Clinical Practice
Discussion
Procurement

Keywords NHS Supply Chain/
Equipment/Products/Procurement

This article has been
double-blind peer reviewed

In this article...

- How procurement works in the NHS and recent changes to processes
- Different ways in which nurses and other clinicians are involved in procurement
- The opportunities presented by the coronavirus pandemic and how teams responded



Making the case for nurses' increased involvement in NHS procurement

Key points

NHS Supply Chain carries out procurement, with limited and inconsistent clinical involvement

Nurses are uniquely placed to advise on procurement due to their wide-ranging role

Clinical involvement in procurement has shown financial

Authors Dr Naomi Chapman is clinical director, Towers 1 and 3, Karen Hudson is clinical programme lead, Tower 1, both at NHS Supply Chain.

Abstract The nursing profession is inconsistently involved in the NHS procurement process, despite the proven benefits of their greater clinical involvement. This article explores what procurement is, how it is undertaken in the NHS, and how nurses can support and improve this process. It examines reports into NHS Supply Chain as well as case studies, to discuss the impact of clinical involvement in procurement, particularly during the coronavirus pandemic, and concludes that patient outcomes can be improved by greater collaboration between clinicians and procurement teams.

Citation Chapman N, Hudson K (2021) Making the case for nurses' increased involvement in NHS procurement. *Nursing Times* [online]; 117, 2, 25-27.

atient pathways are diverse, with the NHS supply chain, explores how NHS procurement works in England - including

Journal of Perioperative Practice
● PROCUREMENT GUIDE
May 2012
Volume 01 Issue 02
www.afpp.org.uk

04

Procurement

Clinical procurement specialist: a personal perspective

What exactly is a clinical procurement specialist?

A Clinical Procurement Specialist is deemed as a Registered Nurse or Allied Health Professional. We work within the procurement structure of our organisation to assist in the procurement of clinical products and services. Our role is to provide clinical support, technical and professional advice

to the procurement function and to maximise engagement between procurement and clinical teams within the trusts. We drive change and support innovative procurement practices to achieve compliance and product standardisation which seeks to optimise best value and improved patient care. Our main duties include developing, co-ordinating and facilitating the evaluation and utilisation of

medical and surgical products and to engage with relevant stakeholders to ensure projects are supported clinically. We manage the introduction of new products in relation to clinical medical and surgical products ensuring that objective rationale is applied to clinical governance and value for money issues when making clinical product selection decisions. Our role helps ensure that any subsequent purchasing decisions are backed by credible clinical evidence and detailed evaluation criteria.

All this significantly increases demonstrable financial savings that can be made through the end users being as engaged as possible in the procurement process. These savings can then be re-targeted back to patient care/ experience and improving outcomes.

There are study days/courses to facilitate improving knowledge on all the required subjects which are organised by The Chartered Institute of Purchasing and Supplies (CIPS). To assist with understanding the logistics process there are opportunities to spend time with the 'on site' logistic team as well as at one of the national logistic centres. 'On the job' training provides valuable working alongside experienced sourcing and contract specialists/commercial managers who can guide a novice CPS through the procurement process. We have The National Network of Clinical Procurement Specialists (NNCPS) that advises on national, regional and local purchasing initiatives and processes that affect patient outcomes.

Our role helps ensure that any subsequent purchasing decisions are backed by credible clinical evidence and detailed evaluation criteria.



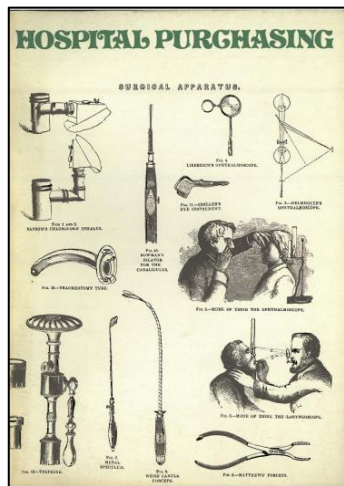
'Every one of us has a role to play in getting to net zero'

03 NOVEMBER, 2021

Clare Nash, head of clinical products management at the Black Country Alliance, spoke to Nursing Times about her role and her ambitions for implementing the Greener NHS agenda How would you describe your role to someone you've just met? "I am a clinical procurement nurse...



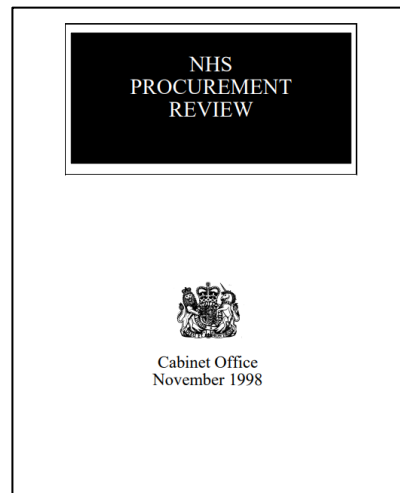
The Clinical Procurement Journey



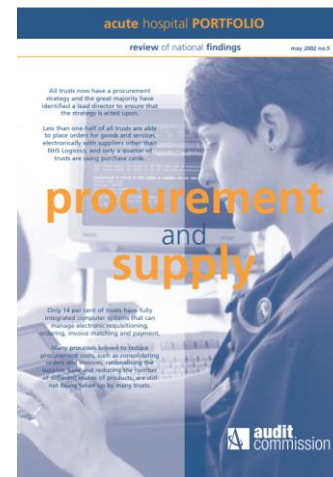
Office of Health Economics 1972



Goods for your Health 1996



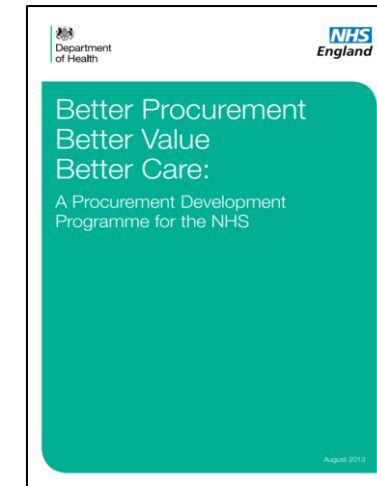
Cabinet Office 1998



Audit Commission 2002



DHSC 2012



DHSC 2013

‘The commercial success or failure of innovations which involve any changes in nursing habits and routine seems to be largely dependent on the innovators’ understanding of the essential needs of users of goods and the implications of changes in their patterns of behaviour’

Standardisation will be successful only if clinicians are involved in all the key decisions. With their support, trusts find that standardisation leads to savings of around 25 per cent in areas of significant expenditure

‘We have been highly impressed by the progress achieved in those Trusts which have involved nursing and clinical staff in the procurement chain. In future, this might be developed further into a more routine secondment posting so that nursing staff acquire better knowledge of the whole supply chain, and broaden their Trust management experience’

Most trusts have a system that ensures medical and clinical staff are involved in deciding what medical and diagnostic equipment is purchased. About a third of all trusts in England routinely involve a Clinical Supplies Adviser in selecting medical and diagnostic equipment and consumable products.

Better performing trusts have ‘clinical product selection committees’ in place to help them with these issues and some have appointed ‘clinical procurement specialists’ tasked with rationalising commodity selections.

‘We need to ensure clinicians and budget holders are fully equipped with the information to help them make the right choices, both in terms of outcomes and value for money’

Clinical Procurement Specialist Network



NHS Business Services Authority

Working in partnership

Royal College of Nursing

NHS Supply Chain

CPSN Clinical Procurement Specialist Network

NHS Clinical Evaluation Team

Operating Manual

small changes, big differences

Design Bugs Out: Improving patient safety on hospital wards

NHS Clinical Evaluation Team by the NHS, for the NHS

NHS Centre for Procurement Efficiency

NHS

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Clinical Procurement Specialist Network

Discussion Forum

Clinical Procurement Specialist Network Meetings

Clinical Procurement Specialist Network

Resource Library

CAPA

National Clinical Product Evaluation - Dates & Information (DRAFT IN DEVELOPMENT)

National Supply Resilience Project

News

About us

Contact us

Clinical Procurement Specialist Network

Welcome to the Clinical Procurement Specialist Network

The aim of the Clinical Procurement Specialist Network Area is to facilitate networking and collaboration between Clinical Procurement Specialists, clinicians and procurement staff. With your support, we wish to embed a modern and effective NHS Clinical Procurement Specialist community which delivers efficiencies and protects high quality front-line services. This Area is available to all NHS Clinical Procurement Specialists and relevant others by invitation only and through submission of a completed application form.

Further information is available from jim.kennett@nhs.net who is the Networks current Chair

An application form can be sourced from paoline.totten@supplychain.nhs.uk

For assistance, please visit the [Help and Support](#) page in the All Members Area

To provide a professional community that encourages shared learning and promotes the relationship between Clinical, Commercial and Procurement staff within the Healthcare Environment



OF NURSES SAID
PATIENT SAFETY
COULD BE
IMPROVED

IF NURSES HAD GREATER
INVOLVEMENT IN THE
PURCHASING PROCESS
AND WORKED MORE
CLOSELY
WITH CLINICAL
SUPPLIES TEAMS





A Day in the life of a Clinical Procurement Specialist.

Marcelle Tauber-Gilmore, RGN, BSc, MSc
@MarcelleTauber



Historically



What does a Clinical Procurement Nurse* offer?



What does a Clinical Procurement Nurse offer?



Influencing the Local, Regional and National Sustainability Agendas From Within

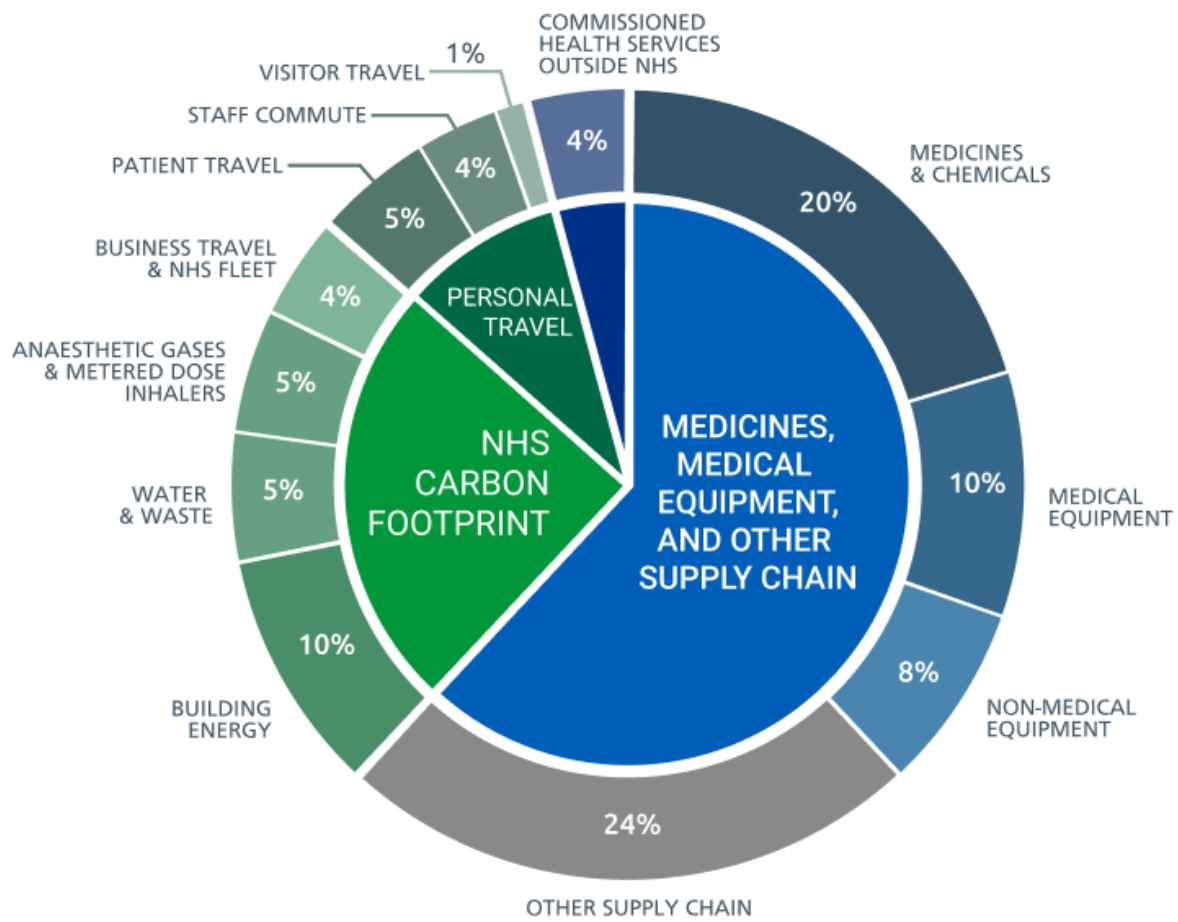
Clare Nash

RN, BSc, MSc
Head of Clinical Products Management

Black Country Alliance



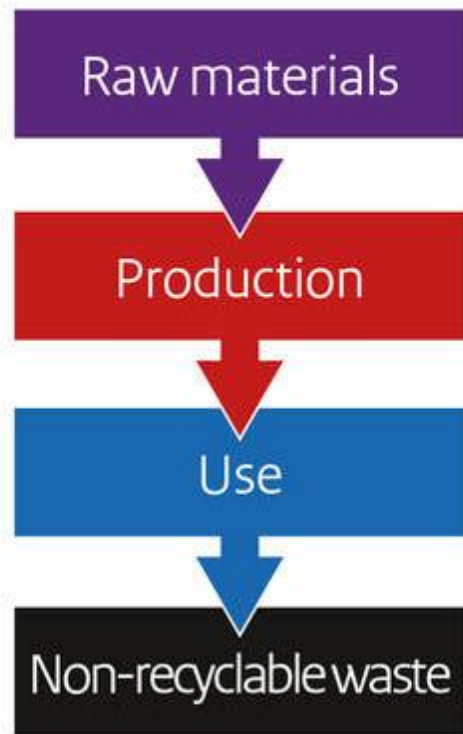
NHSEI Net Zero Green Plan



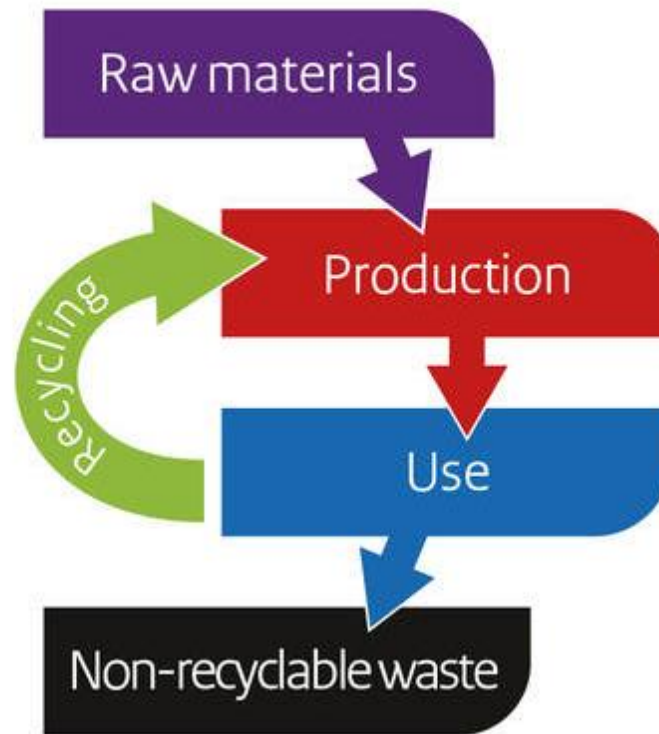
<https://www.england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2020/10/delivering-a-net-zero-national-health-service.pdf>

Reminder of the Circular Economy

Linear economy



Reuse economy



Circular economy



Reducing Use of High Greenhouse Gas Intensity Procured Items

SDU, 2017



Reuse Reduce Repurpose Recycle

Blood sample tubes
Bandages, dressings & gauzes
Catheters, tubing and drains
Clinical waste containers
Clothes, caps, masks & overshoes
CO monitors and spirometers
Crutches, walking sticks
Disposable incontinence
Disposable medical holloware
Drapes

Electrode gel
Examination gloves
Hearing aids
Medical packs
Medical pulp products
Needle free connection systems
Pt assessment electronic devices
Polythene aprons
Single use surgical instruments
Syringes & needles

Trials & Tribulations of Tourniquets, Type II Rs and Caps



Just do its

- CPEG/ ICS group
- Other Trust experiences
- Tweets
- Good products
- Reduce waste
- Reduce MTCO2e



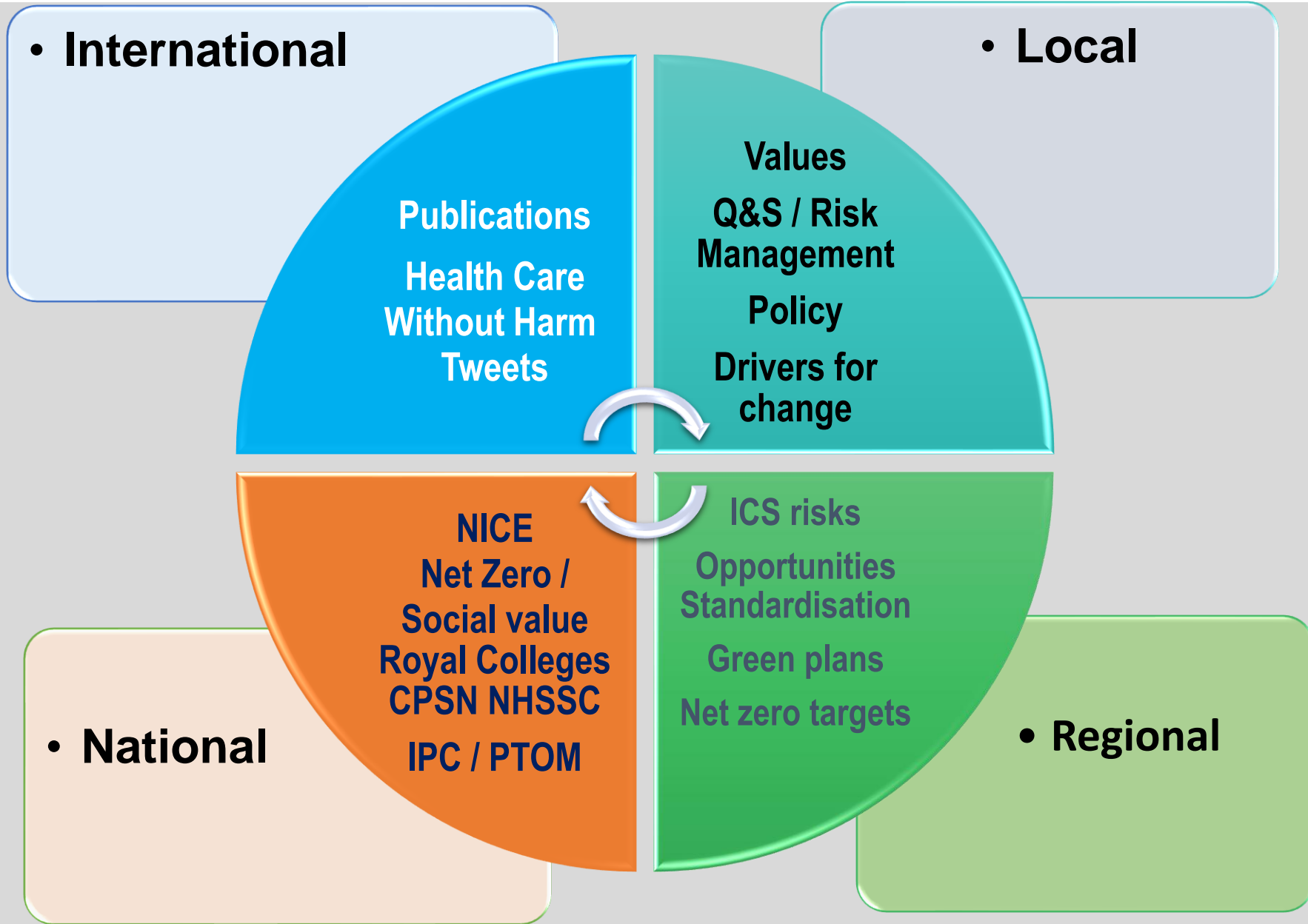
Blockers

- Infection Prevention and control concerns
- Lack of NHSSC framework for reusables
- Initial costs
- Free PPE till March 2022





Getting to yes, influencing change



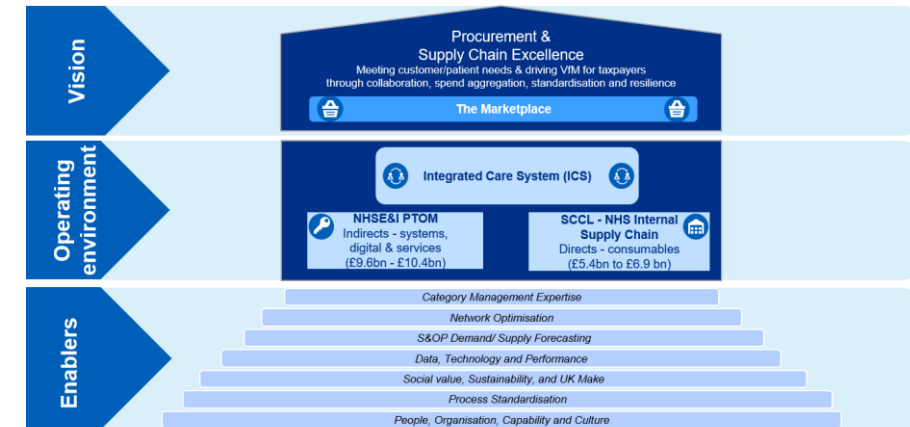
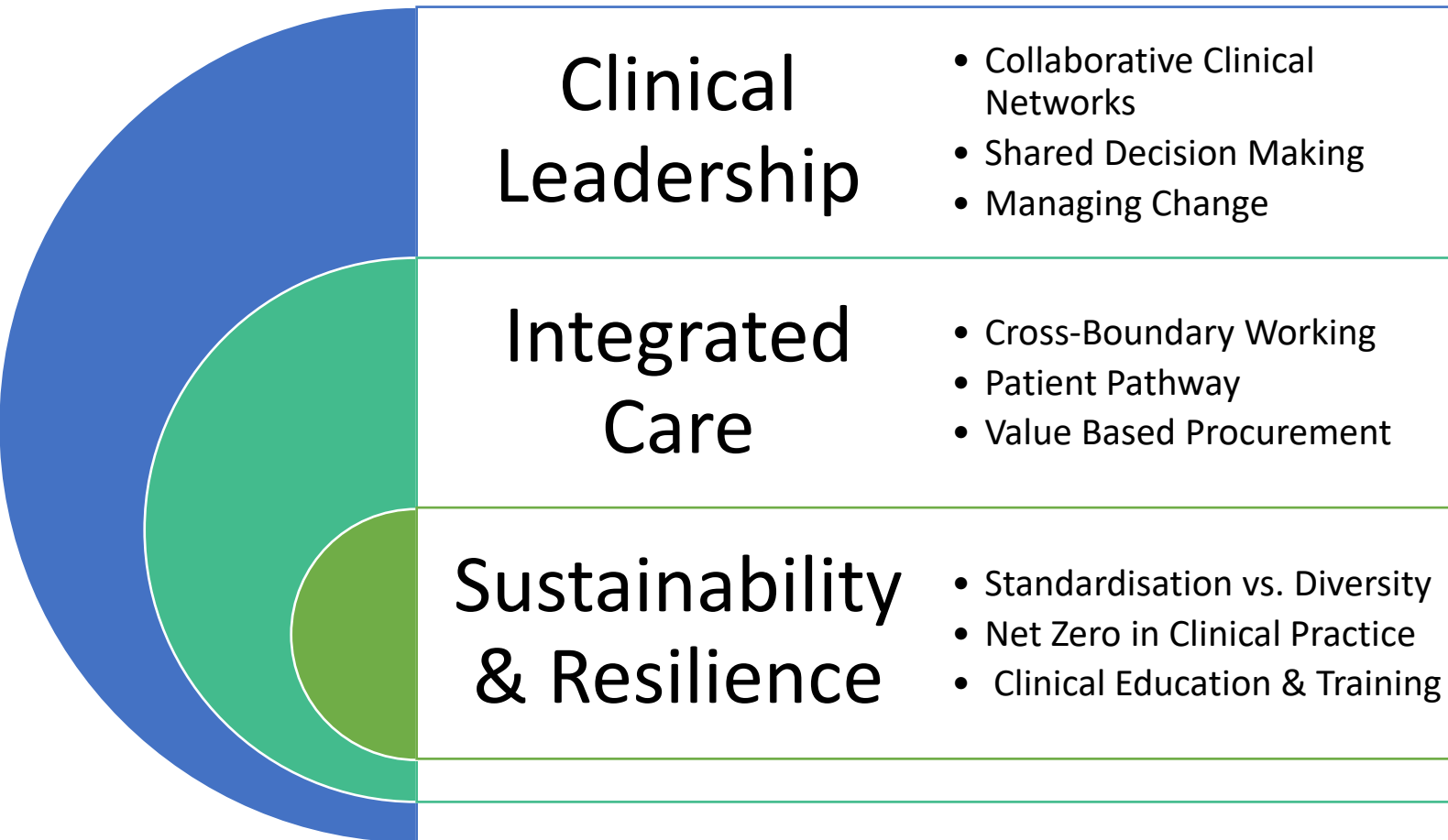


Clinical Procurement Specialists **create a more efficient approach to the procurement of products, goods and services** to enhance and sustain the provision of high quality, safe, sustainable and cost-effective care.



‘Making ICS the new Local’

Role of Clinical Procurement in PTOM





Clinical
Procurement
Specialist
Network

Recognising the Value of Clinical Procurement in Action



Agenda

- Background
- Update and discussion
- Key issues
- Key action points
- Other business

NHS

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The Future of NHS Procurement

Preeya Bailie : Director of Procurement Transformation and Commercial Delivery
NHS England and NHS Improvement

Purpose: To develop and harness the commercial capabilities of the NHS to deliver value for money infrastructure, products and services, which supports effective patient care.

Our role is to build commercial capacity and capability in the NHS and provide commercial best practice, guidance and governance.

Priorities: In support of the NHS Long Term Plan, we are focused on driving greater value from all NHS spend, which supports front line staff to deliver world-class healthcare to the nation. This includes focusing on:

- Patient outcomes
- Price and efficiency
- Environmental impact and sustainability
- Resilience

Recent Procurement Policy Notes

PPN 04/21

Applying Exclusions in Public Procurement, Managing Conflicts of Interest and Whistleblowing

Supplementary and additional guidance which outlines a framework to be adopted, to prevent, identify, record and remedy conflicts of interest

The framework includes the relevant processes, procedures, and appropriate checks and balances to effectively manage COI in a commercial context the whistleblowing process

PPN 05/21

National Procurement Policy Statement

Contracting authorities with an annual spend of £200m or more are required from **April 2022** to publish procurement pipelines and to benchmark their procurement capability.

Contracting authorities with an annual spend of £100m or more are required from **April 2023** to publish procurement pipelines and to benchmark their procurement capability.

PPN 06/21

Taking account of Carbon Reduction Plans in the procurement of major government contracts

As a selection criterion, suppliers to provide a Carbon Reduction Plan confirming the supplier's commitment to achieving Net Zero by 2050 in the UK,

Goods/services & works with an anticipated contract value above £5 million per annum (excl. VAT).

Applies; 30 Sept 21 onwards

PPN 07/21

Update to Legal and Policy requirements to publish procurement information on Contracts Finder

The "reasonable time" to publish on Contracts Finder is now fixed at 30 days for central government

"reasonable time" remains at 90 days for sub-central authorities

NHS Trusts

FTS – Award notice over £122,976 30 days

CF – 90 days over £25k

PPN 08/21

Taking account of a bidder's approach to payment in the procurement of major government contracts

Applies for goods and/or services and/or works with an anticipated contract value above £5 million per annum

Requirement to assess bidder's payment systems to demonstrate it has a reliable supply chain and when it would be appropriate to exclude those bidders that cannot demonstrate they have effective systems in place

Applies; from 1 April 2022

NHS Trusts

Does not apply to NHS Trusts

Other Procurement Policy Reminders



PPN 06/20 Jan 21

Taking Account of Social Value in the Award of Central Government Contracts

A minimum weighting of 10% of the total score for social value should be applied in the procurement.



Thresholds

Currently £122,976 (ex VAT)

From 1 Jan 2022
will be £138,760 (inc VAT)



Legal

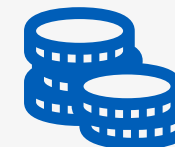
Transforming Public Sector Procurement – Green Paper

Changes not due until 2023



PCR Change in NHS Status

In August 21, the NHS was reclassified from sub central contracting authority to Central Government Authority under the Public Contracting Regulations 2015



PPN 04/20 Covid Recovery

Review contracts and work with suppliers to ensure that contracts remain relevant, sustainable and deliver value for money

Procurement Target Operating Model (PTOM)

Operating Environment

The system is busy and operating under a complex macro environment, resulting in increased expectations of Procurement



Clinical Focus



- Supporting elective health care
- Shift to out of hospital care
- Using digital technology to improve patient care
- Focus on mental health
- Working towards a net zero



A Complex Macro Environment

Covid - 19

Legislative changes

Supply chain resilience

Climate Change & Race to “Net Zero”

Increased Expectation of Procurement

Improved understanding of Procurement’s role and importance in providing the goods and services that are needed to support patient care

Increased expectation for Procurement to deliver value as a strategic business partner

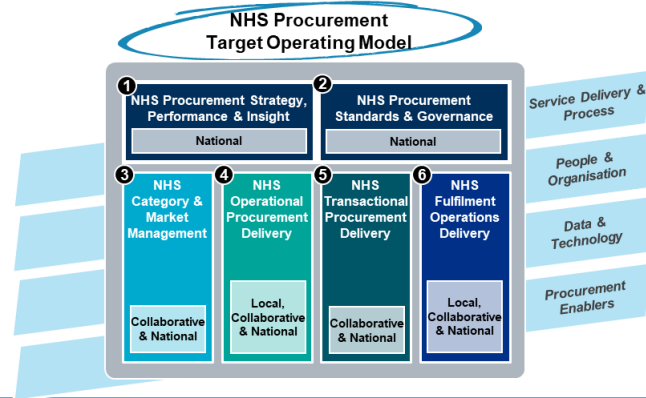
Increased demand for the ‘*right skills*’ in Procurement teams

Procurement Target Operating Model Blueprint (2021)



ICS based procurement was added as a key workstream, building on the 2019 version of the blueprint, to reflect the expected changes to healthcare delivery and foster collaboration at ICS level as a minimum

2019: Pre-ICS

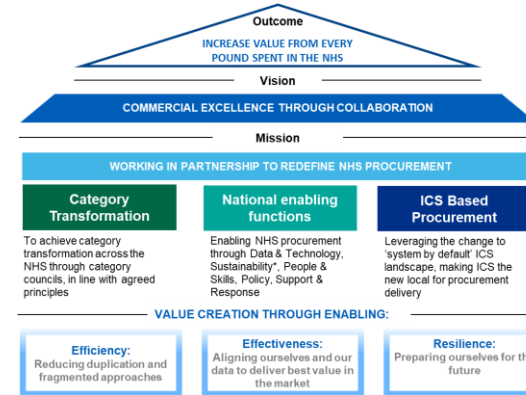


PTOM had identified the key transformation objectives for procurement to be:

- Category-led
- Market shaping
- Standardised & Consistent
- Underpinned by Data, Tech, People and other enabling processes

Planned Delivery and Engagement at the Trust/Provider Level

2021: ICS

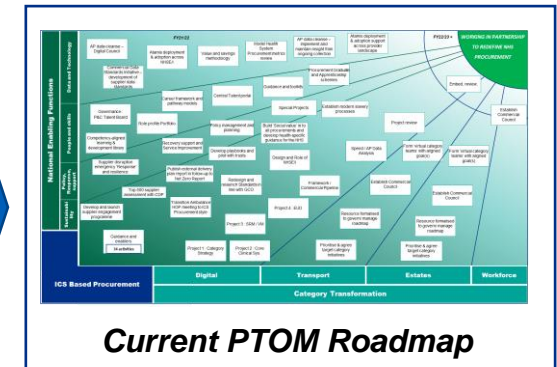


PTOM pivots to ICS based procurement while retaining key pillars:

- Category Transformation & Market Shaping
- National Enabling Functions (Data & Tech, People & Skills, Sustainability and Standards)
- Local Delivery (ICS based procurement)

Planned Delivery and Engagement at the ICS Level

PTOM adopting a centre-led approach, providing guidance to ensure standardisation and consistency in approach for the 42 ICSs



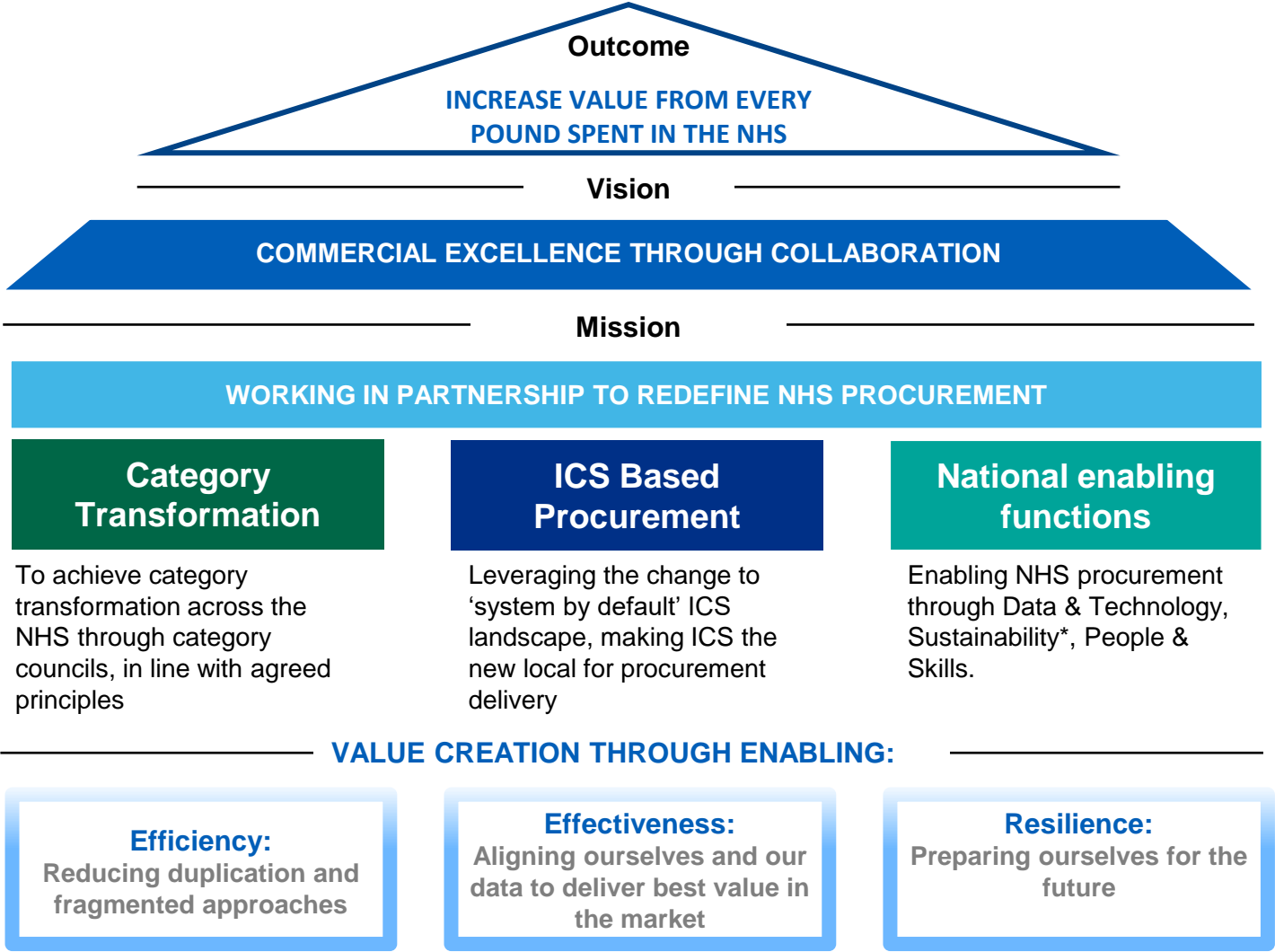
Current PTOM Roadmap

Reflects all the key workstreams that deliver on the original procurement transformation; ICS acts as the local delivery channel for this transformation

PTOM – focus and delivery workstreams



An overview of the PTOM vision and priority focus areas is outlined below. The “ICS Based Procurement” journey acts a critical channel to effective delivery of PTOM principles



Collaboration, enablement, setting the foundations

Category Transformation - Digital



- Developing our first National Category Council model, which brings Stakeholders together in one decision making forum
- Building an overarching support model for the Digital category that can define and govern the standard
- Providing a platform for National Procurement initiatives and value delivery
- A similar model to be rolled out on Transport, Estates and Workforce

ICS Procurement



- Supporting the system wide journey to an ICS landscape
- Develop and sharing guidance, co-designing 34 deliverables to get there – and a series of enabling tools to support
- An ICS Procurement tracker which tracks progress by ICS, by activity - promoting sharing of best practice
- A redefined set of Commercial Standards

Data, technology and performance



- Improving Commercial insight across the NHS, with the ability to benchmark performance
- Building system wide PO and AP data flows. Playing them back in the form of insight
- Building a consistent value and savings methodology, which will support both financial and social value measurement
- Creating forward visibility into a Commercial pipeline, using a single platform to manage our individual and collaborative workplans

People & Skills



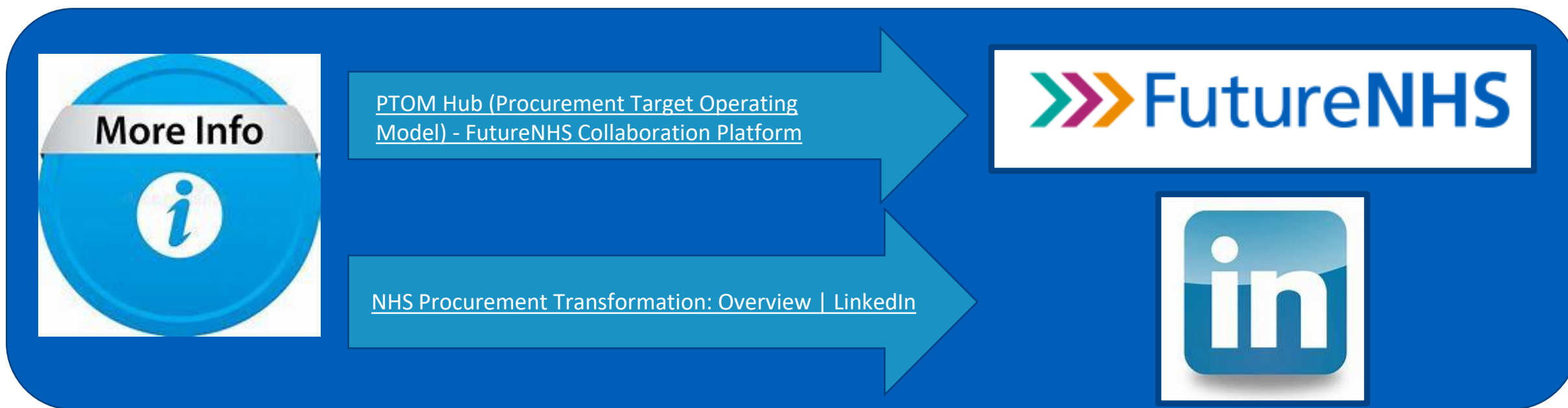
- Providing support and guidance to procurement and commercial professionals within the NHS
- A clear and consistent approach across the NHS to support transition to Integrated Care Systems (ICSs)
- A new Competency Framework, sample role profiles and supporting learning & Development library
- National Graduate programme, and development of an apprenticeship programme

PTOM 22/23 and beyond

Scale aggregation, Market shaping, value creation

One NHSE/I message on all Procurement operating models (non clinical and medical devices)

Engagement and feedback



**Heads of
Procurement
Newsletter**

**ICS Lead
Newsletter**



nhsi.proctom@nhs.net

Collaborating to Achieve Shared Goals



NHS first

- Think like a patient, act like a tax payer



CHANGE



COLLABORATION

Creating the right change

- We will create clarity of the vision and end goal
- Yet be mindful and flexible that NHS organisations are at different stages of change and will choose different paths to get to the end goal
- We will endeavour to find the balance between driving consistent system wide change, while ensuring that there is considered flexibility to ensure ICS procurement leaders can deliver this change

The PTOM team will continue to collaborate.

- We are listening to feedback, developing plans with and on behalf of the whole Procurement community
- Ensuring we work collaboratively to offer a joined-up centre

- **NHS Net Zero Supplier Roadmap to 2030**

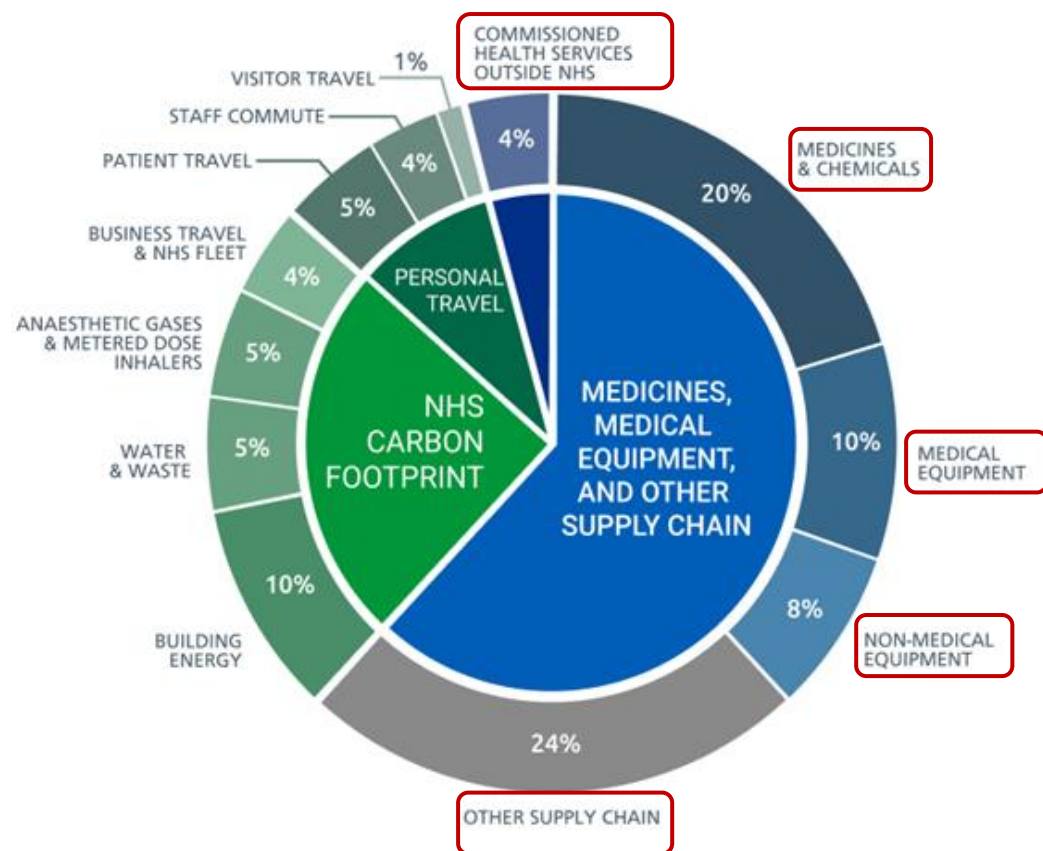
- Autumn 2021

NHS England and NHS Improvement

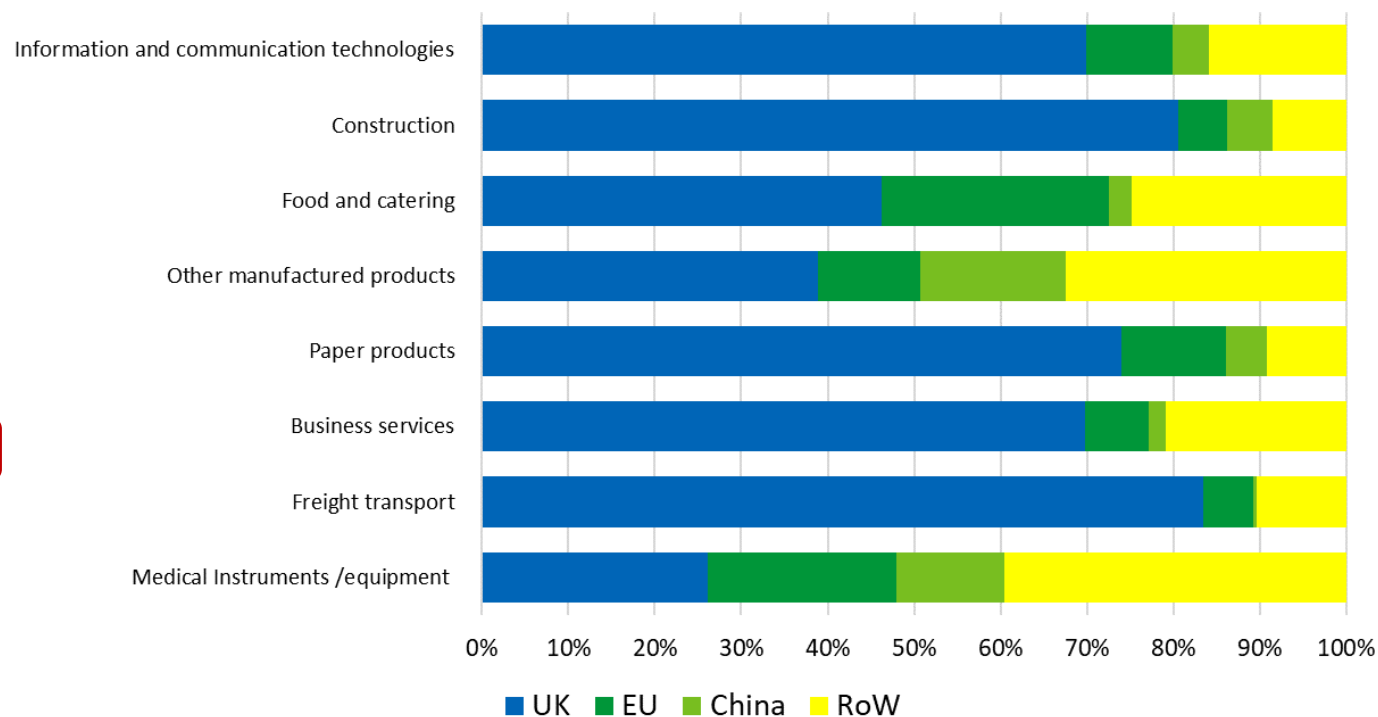


Background: the NHS supply chain

- 62% of NHS carbon emissions occur in the supply chain, with many of these emissions occurring in the UK.



The NHS supply chain (outlined in red) accounts for 62% of the NHS Carbon Footprint, known as the Carbon Footprint Plus. (Source: Net Zero report)



Location of suppliers by category: the NHS supply chain emissions are global, but a large proportion occur in the UK. (Source: 2016 UK-MRIO model)

Net Zero Procurement and Supply Chain: Accelerating carbon reduction

Supplier Engagement: A partnership-based approach

Our Sustainability Asks



Set net zero targets and cascade action



Be transparent on carbon emissions



Demonstrate progress towards net zero and circular economy

Supporting our suppliers



Supplier sustainability Framework



Learning from our suppliers' progress and scaling the approach



Product innovation and supplier recognition

“The effects of poor air quality and climate change are already being seen in our GP practices, and in our hospitals, and it is absolutely right that we are part of the solution.

*But we can’t do this alone,
which is why it is so important that we throw down the gauntlet today to our suppliers too.”*



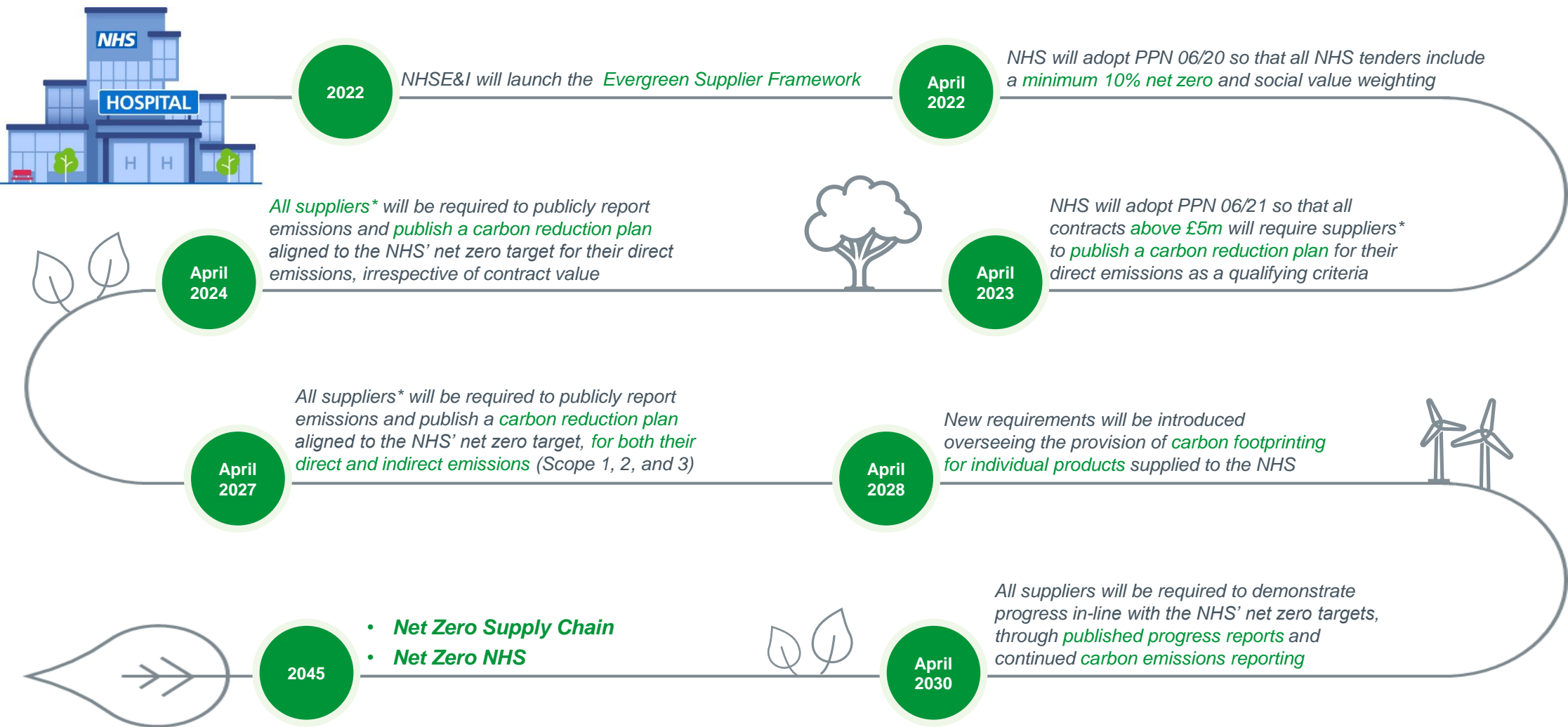
Amanda Pritchard

*Chief Executive of NHS England and NHS Improvement
30 September 2021, NHS Public Board*

Net Zero Report – The challenge one year on!

Further work over the next 12 months is required to determine the precise dates, timelines and mechanisms to deliver these initiatives. However, the long-term target is clear: before the end of the decade, the NHS will no longer purchase from suppliers that do not meet or exceed our commitment to net zero. This will be an essential component of any net zero strategy, delivering reductions of 9,446 ktCO₂e per year when fully realised.

Building net zero into NHS procurement – the Supplier Roadmap



**To account for the specific barriers that Small & Medium Enterprises and Voluntary, Community & Social Enterprises encounter, a two-year grace period on the requirements leading up to the 2030 deadline, by which point we expect all suppliers to have matched or exceeded our ambition for net zero.*

Evergreen

The NHS Sustainable Supplier Framework

Evergreen creates a single centralised source of information recording how suppliers are aligning with our net zero trajectory. Suppliers will be able to self-certify their achievement of our requirements, initially voluntarily.

Level 3: Influencer Leaders in sustainability	<i>All of level 2, plus:</i> <ul style="list-style-type: none">• Recognised high performer via global sustainability reporting platform• Publicly set targets <i>that are independently verified</i>• Demonstrates collaborative participation with fellow suppliers <i>And at least one of the following:</i> <ul style="list-style-type: none">• Embeds circular economy principles in and measures the carbon footprint of products and services and shares that with the NHS• Shows leadership across the UN Sustainable Development Goals (SDGs)
Level 2: Mature Comprehensive targets, plans, and action	<i>All of level 1, plus:</i> <ul style="list-style-type: none">• Publicly demonstrates emissions reductions• Publicly committed to targets in line with NHS Scope 3 targets• Publicly published carbon reduction plan with carbon emissions reporting• Conducts modern slavery audits in hotspot areas of their supply chain
Level 1: Early Adopter Operational emissions targets and plan	<i>Meets the minimum expectation of all suppliers, plus:</i> <ul style="list-style-type: none">• Publicly committed to emissions targets for scope 1 and 2 in line with NHS commitments• Public ethical sourcing policy, supply chain risk assessment
Minimum expectation of suppliers	<ul style="list-style-type: none">• Comply with the expectations of the Supplier Roadmap• Demonstrate social value through contract delivery

Please note, details of qualifying criteria will be confirmed and updated during the Evergreen pilot in 2022.

Net Zero Procurement and Supply Chain: Delivering Social Value

Adopting PPN 06/20: Net Zero is a key deliverable of the Social Value Model

- The adoption by the whole NHS of [PPN 06/20](#) will ensure Net Zero is embedded in all procurement decisions



Image source: <https://esgclarity.com/will-cop26-be-postponed-again/>

[PPN 06/20](#) came into effect from January 2021. It mandates that a **minimum weighting of 10%** of the total score for the tender evaluation should apply to social value across five themes:

- **Fighting climate Change**
- Tackling Economic Inequality
- COVID-19 recovery
- Wellbeing
- Equal Opportunity

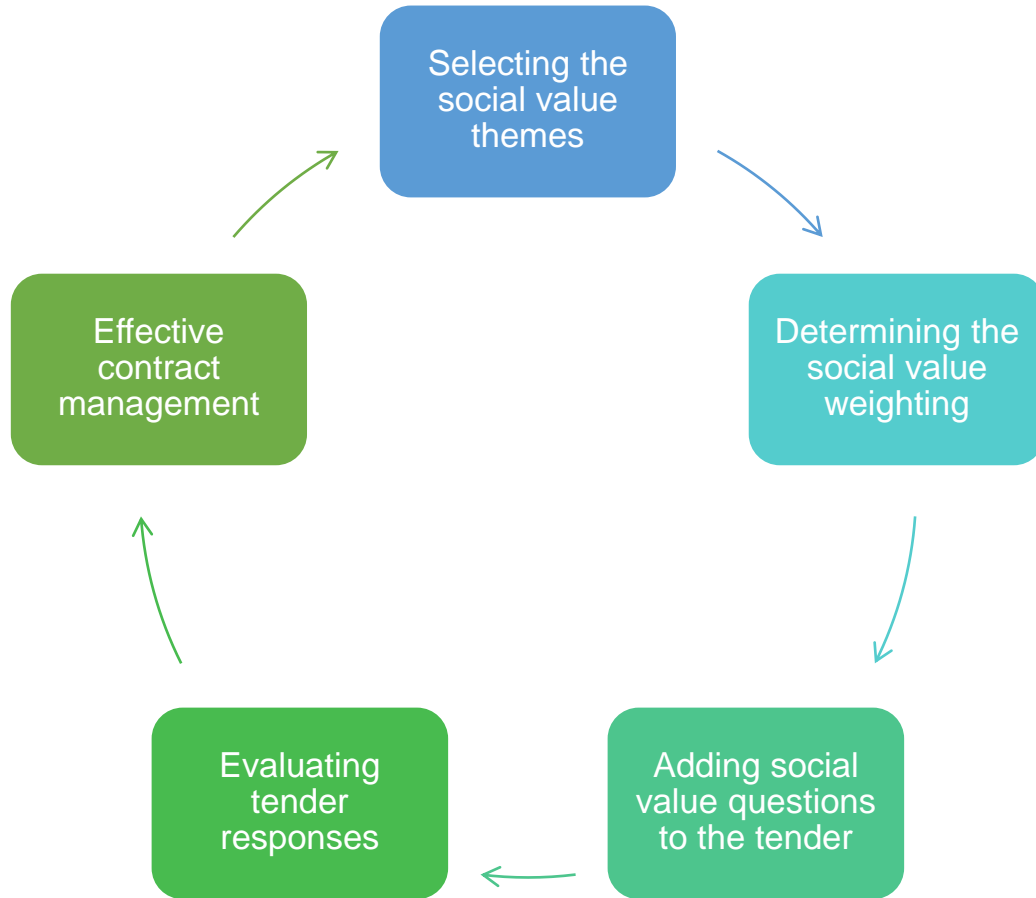
From April 2022, **all NHS tenders** will require the inclusion of a minimum 10% net zero and social value weighting – net zero will be required in all procurements.

Healthcare specific guidance will soon be available on the NHS Futures Hub or upon request by emailing england.ptomsustainability@nhs.net

NHSE&I has adopted the PPN 06/20 for **non-medicines** contracts from April 2021.

Key Components of the Healthcare Social Value Guidance

- The Net Zero and Social Value Guidance is key to unlocking healthcare related social and environmental benefit within NHS tendering. The guidance is a furthering of the central government's Social Value Model PPN 06/20 to unlock healthcare related outcomes, it seeks to provide assistance by guiding the user on:



Selecting themes:

- What social value themes are relevant to the contracting authorities local / regional / national priorities?
- Include a question on “Fighting Climate Change”
- Other example opportunity areas to unlock NHS priorities through tendering
- Ensuring the tender is accessible for SMEs / VCSEs

Determining the weighting

- 10% minimum / more can be used as a differentiator
- What considerations could be made for a higher weighting?

Adding the question to the tender

- Example questions mapped against NHS priorities, with suggestions on how to contract manage

Evaluating tender responses

- Ensuring that suppliers commit to additionality
- Link to the Model Scoring Criteria in the Social Value Model

Effective Contract Management

- Reference to the NHS Contract Management Framework (CMF)

Accessing the Guidance

- The Net Zero and Social Value Guidance will be available to download on the PTOM Sustainable Procurement Hub

Embedding social value in procurement



Building net zero with our suppliers



Roadmap letter to our suppliers



Greener NHS Twitter

Greener NHS Retweeted
Dr Courtney Howard
@courtghoward
The world is now one green hydrogen fuel cell electric ambulance cooler 🌱👏
Designed with paramedic input, it has improved ergonomics to 📱 workplace injuries.
A treat to get a tour by @watts_nick of @GreenerNHS with @BMJ editor @fgodlee.#HealthyClimate #COP26



Greener NHS discussion forum and resources

You can join the [Greener NHS Community member space](#)

The [discussion forum on the Greener NHS Knowledge Hub](#) is a place to seek advice from colleagues, and share information and knowledge.

Each trust and integrated care system should have a Green Plan. [Greener NHS guidance here](#)

Anyone can sign up to receive the [Greener NHS Bulletin](#)

Please direct queries about the Greener NHS Programme to greener.nhs@nhs.net

Innovation - SBRI competition

The Greener NHS team and NHSEI Accelerated Access offered NHS suppliers or potential suppliers the chance to secure funding for innovative sustainable products via the Small Business Research Initiative (SBRI Healthcare). The SBRI Phase 1 research and innovation competition is worth up to £1 million. [More about SBRI here](#)

[Read more](#)

Our social value guidance will be available on the [Sustainable Procurement – PTOM Hub page](#) – please email nhsi.proctom@nhs.net to request access to the Sustainable Procurement page if you don't have access already.

The workspace also contains:

- Road map to net zero for NHS suppliers
- Profiles of the Sustainable Procurement Team
- Details on supplier engagement
- How to Guides, including walking aids and remanufactured medical devices
- The Greener NHS discussion forum

Developing capacity – Net Zero and Social Value

- Tools in development to provide decision-makers with the skills needed to drive meaningful social value in procurement

Leading Social Value Training “Train the Trainer”

A full-day course covering net zero carbon and social value in the context of the NHS. Those who undergo this training will be equipped to train colleagues and supply chain partners.

Available early 2022. Please contact england.ptomsustainability@nhs.net for more information.

Social Value in Procurement Essential training

E-training on delivering social value in procurement and the key considerations to address.

60 minute online training free and accessible to all via the Government Commercial College.

Healthcare Social Value Calculator Quantifying value and impact

This tool provides metrics and measurement tools for those embedding social value into procurement decision making. It allows decision-makers to assign financial values to social value activities and will support evaluation and measurement of delivery.

Update available early 2022.



Thank you!

Follow us on | NHS Procurement Transformation



NHS England and NHS Improvement



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Redefining Relationships – Delivering Redesigned Services in Practice

Ann Cole, Evolving Health Manager, Baxter
Healthcare Ltd

Redefining Partnerships – Delivering Redesigned Services in Practice

Presented by:
*Ann Cole, Evolving Health Lead,
Baxter Healthcare Limited*



The time to rebuild and remodel is now

Even prior to the pandemic, multiple changes were introduced to address key areas included in the NHS long-term plan:¹



New ways of working are now needed to RECOVER and REBUILD post COVID-19 to:

1. Cope with the initial backlog
2. Sustainably transform and future-proof systems



The NHS's ability to create and implement transformation is now greater than ever, but who can help the NHS to enact such change?

Collaborating with the right external partners is key

Throughout the pandemic, the NHS has rapidly adapted to work closely with **external partners** in an **integrated, transparent and strategic** way to facilitate change for the better.

To build **lasting** and **effective partnerships** that can **transform NHS systems post COVID-19**, you need partners with:



Baxter — an established and trusted NHS partner



Baxter products and services reach **every corner of almost every UK hospital** to help **improve patient outcomes** across the NHS by:

- Providing home care services
- Offering service support in key therapeutic areas
- Delivering solutions that support clinicians to be **more efficient and effective** in treating patients in multiple settings

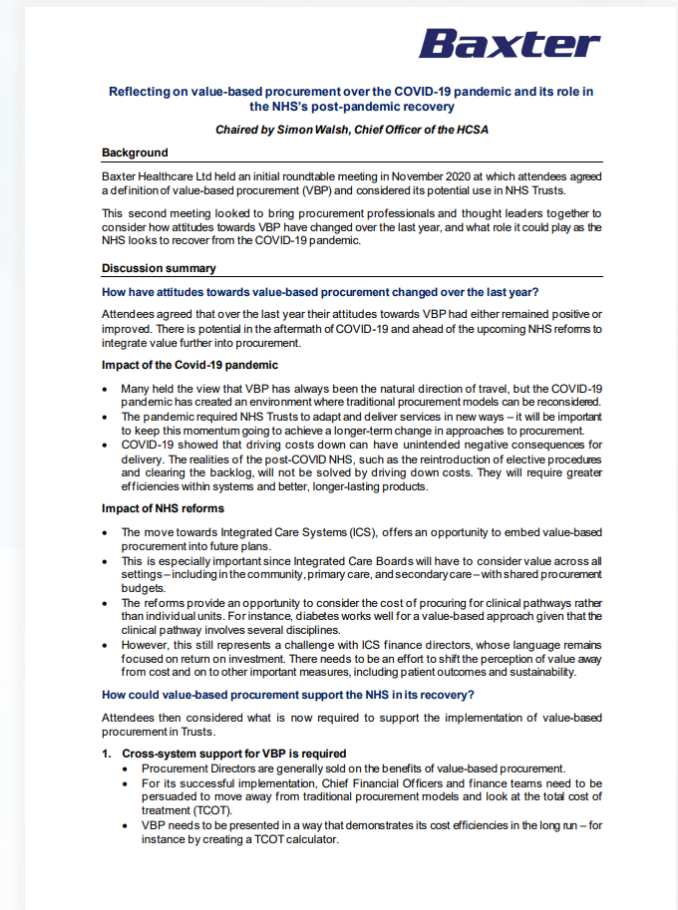


We can help you to implement the outcomes and changes you need through:

- A unique focus on innovation that utilises our **tried and tested services** and strategies to **maximise value across the whole care pathway**
- Evaluating **real data** and developing insights into practical solutions that are focused on meeting your unique needs

But how can we help you with your immediate needs?

Embedding Value Based Procurement (VBP) 2,3,4



VBP ANIMATION

Questions?



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Trust Update

Emma James, Director of Procurement & Supply Chain at
Nottingham University Hospitals NHS Trust, HCSA National
Council East Midlands Joint Regional Lead, Nottingham
University Hospitals

Nottingham University Hospital's NHS Trust

Presentation by Emma James
Director of Procurement & Supply Chain

A Trust Update



NOTTINGHAM UNIVERSITY HOSPITAL'S NHS TRUST

Trust overview

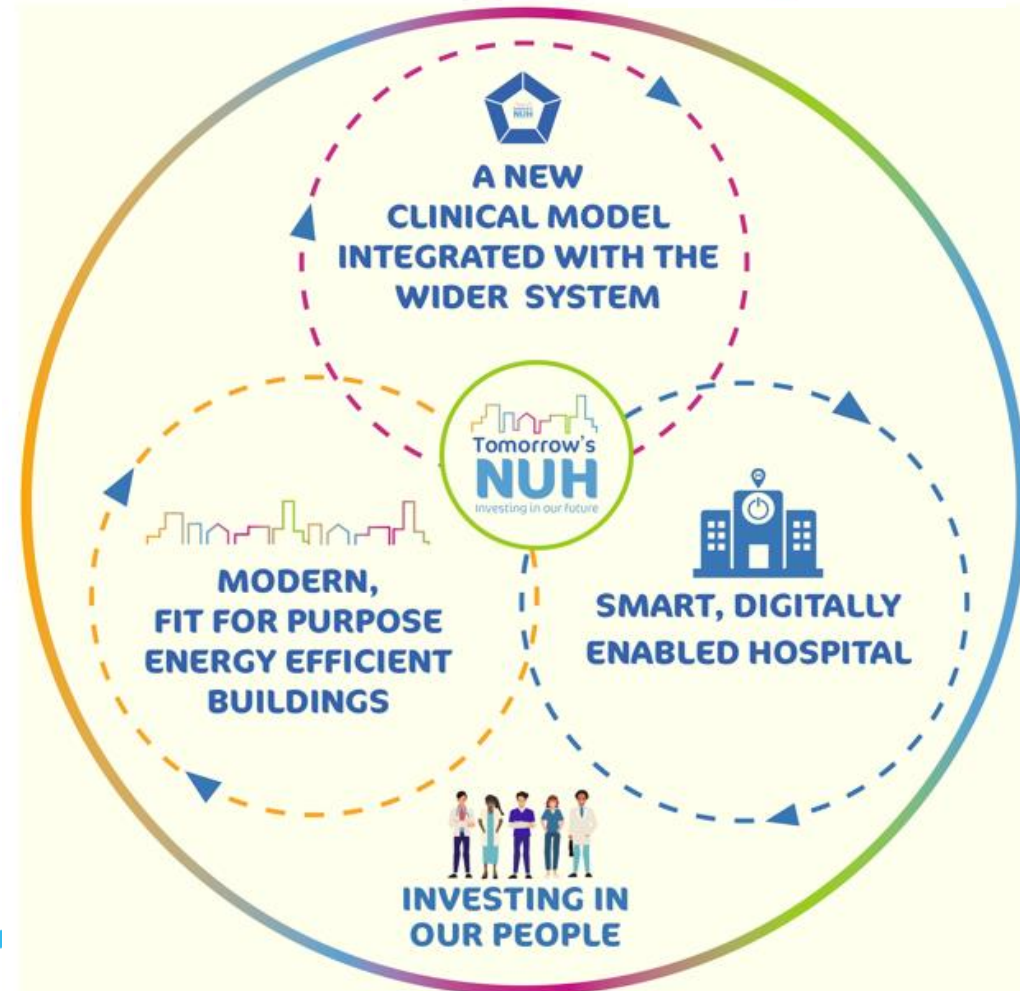
- Nottingham University Hospitals NHS Trust is one of the biggest and busiest acute hospitals in England, employing more than 17,500 staff. We provide care to over 2.5million residents of Nottingham and its surrounding communities and specialist services to a further 3-4million people from neighbouring counties.
- The Trust has three main sites:
 - Queen’s Medical Centre (QMC) – where our Emergency Department (A&E) major trauma centre and Nottingham Children’s Hospital are located. The QMC is also home to The University of Nottingham’s School of Nursing and Medical School. In July 2019, NUH took over the running of the Nottingham Treatment Centre, which is based on the QMC site.
 - Nottingham City Hospital – where our cancer centre, heart centre and stroke services are based, and where we focus on planned care and the care of patients with long-term conditions. This site also supports our urgent and emergency care pathway
 - Ropewalk House – where we provide a range of outpatient services, including hearing services

NUH overview cont...

- We have national and international reputations for specialist services such as stroke, renal, spinal, breast, neurosciences, cancer services and trauma.
- We have approximately 1,700 beds (90 wards).
- In partnership with The University of Nottingham we host the NIHR Nottingham Biomedical Research Centre carrying out vital research into hearing, digestive, respiratory and musculoskeletal diseases, mental health & technology and imaging.
- As a teaching trust we have a strong relationship with The University of Nottingham and other universities across the East Midlands, playing an important role in the education and training of doctors, nurses other healthcare professionals.
- We are part of the London 2012 Olympic legacy and offer services at the National Centre for Sport and Exercise Medicine - East Midlands, based at Loughborough University.

Tomorrow's NUH

- A programme of transformation, new builds and redevelopment to be delivered between 2025-2030.
- A vision to provide outstanding care and patient/staff experience by developing digitally advanced, innovative and greener hospitals fully integrated with the wider system.



The National Rehabilitation Centre

- 70-bed facility that will widen access to rehabilitation for NHS patients
- To be built on the Stanford Hall Rehabilitation Estate, close to Defence Medical Rehabilitation Centre. Set to open in 2024.
- Research & Innovation and Education & Training to be fully integrated with clinical practice thanks to academic partnership led by the universities of Loughborough and Nottingham

NRC
TURNING
ADVERSITY
INTO OPPORTUNITY



Some procurement and supply chain stats

- The Trust's annual turnover is just over £1.358b and our non-pay spend is around £479m
- 67,132 Purchase Orders across 744 contracts, with a total value of £253,606,737
- NUH capital spend last year was approximately £90m
- We currently have 754 contracts on Atamis with a total contract value of £530,753,928.
- We currently have a work plan of 483 projects 197 of which are complete.
- We have had 7 FTE new staff start
- Total PPE Items received to date: Gloves – 60,073,835 Aprons – 11,110,220 FFP3 – 854,538 IIR – 11,988,890
- Total PPE items received (excluding Chloeclean, waste bags and Clinell wipes) 87,072,361

The journey

- Open door policy, learning phase but I started in March 2020 and within 2 -3 weeks we had our first Covid patients.
- My earliest reflections:
 - Lack of investment in to the function for a number of years
 - Covid-19 planning was not there and BCP were not enough.
 - Supply Chain Team
 - Theatre Teams
 - Vacancies & Resource
 - SMT
 - Systems
 - Policies & Procedures
 - Training and Development plans were inconsistent with the rest of finance ie.MCIPS
 - CIP Delivery

Ultimately, a great team but they were under resourced and because of this they were very reactive and had little influence within the organisation.



COVID-19 RESPONSE AND IMPACT

Team Response

- Deputies
- Procurement team
- Supply Chain team

PPE Response

- Dedicated PPE sourcing team created.
- Creation of PPE stores across both major sites.
- Response required manned 7 day per week PPE stores, created through agency and fixed term additional staff in R&D, materials management and logistics.
- PPE stores to be accessed 24 hours per day.
- R&D on-site presence 7 days per week.
- CPS took lead on supporting Trust with PPE guidance overseeing both PPE stores onsite.
- Vehicle and driver dedicated PPE response.

Covid Impact - Warehouse

- Boots D1 building opened to NUH in Jan '21
- Initial space 9,149 ft²
- Storage for approx. 200 pallets
- March '21 an additional 9,418 ft² has been sourced
- Currently holds 420 pallets of PPE related items and also equipment and furniture for PACU and Virtual Ward.
- Business case submitted to extend for a further 12 months.



Covid Impact - Vaccine Hubs

- Responsible for two NUH hubs and two external hubs (Kings Meadow & Forrest Rec).
- Setup material and inventory areas and supply lines for each location.
- Managed regular deliveries at each location.
- Became point of contact for any P&SC matters relating to vaccine hub.
- Developed process of 'top up' in line with increased phasing of vaccine take up.

How we worked then and now

Pre-Covid

- Office based.
- Desk tops.
- Little or no flexibility to work remotely as part of policy or lack of enabling technology.
- Informal and formal catch ups with supervisors managers and workplan catch ups.

Covid to now

- Predominantly home based unless team required onsite.
- Additional technology / systems to support working remotely and multisite.
- Regular 121s and team meetings with manager / supervisor and team.
- Dept briefings.



SYSTEMS

E-procurement system **atamis**

- NUH have implemented the Atamis system as a procurement, tendering and contract management system and from the system we are able to create bespoke reports and dashboards.
- During Q2 we loaded our Access contracts database into the Atamis contract management tool. 474 contract records were initially loaded into Atamis. Throughout Q2 team the Procurement Team have been cleansing these records and ensuring they are accurate as well as identifying any gaps and finding any contracts that need to be added. We now have 754 contracts within Atamis with a total value of £530,753,928.
- All contracts are now signed using DocuSign via Atamis which ensures that all new contracts have to be added to Atamis.
- Over the next 6 months we will look to use the evaluation tool and the pipeline management module.

Buyers helpdesk



- Procurement has been implementing Fresh Desk throughout 2021 which is now fully live.
- Fresh Desk is a help desk software solution and replaces the buying team e-mail inbox.
- People within the Trust will e-mail the inbox as usual, but this then goes into the help desk software so that the query can be managed.
- The end user gets a notification of a ticket number to refer to in any future correspondence and they are notified who the query has been allocated to.
- This will give full visibility of queries coming into the department and the timeframe in which they are answered so we can improve response time and ensure no queries go unanswered.
- It will also allow a more even distribution of the queries to the team.
- Through the use of this software we will also be able to start running reports to identify coming queries or common departments that struggle so we can ensure the correct training is provided and try to avoid queries where possible.

Inventory management system



DELIVERING TRACEABILITY,
VISIBILITY, EFFICIENCY
& PATIENT SAFETY

- Recognised the urgent need across the organisation for the purchase and roll out of an inventory management system.
- Significant due diligence and research undertaken in a short period of time to enable purchase.
- Initial proof of concept, buy in from stakeholders and potential value opportunity identified in Elective Orthopaedics.
- Dedicated Project Management process and resource
- Expected January roll-out within Elective Orthopaedics
- Interest from other areas already and a plan for Trust-wide role out



COMMUNICATION STRATEGY

What have we done so far?

- Regularised 121s, team meetings, department meetings and directorate meetings.
- Invested in training.
- Feedback taken on board – opportunities to speak to senior team with ideas.
- Late lunch, big brunch and afternoon tea catch ups.
- Standardised signatures and out of office.
- Standardised inductions for new starters in to P&SC.
- Virtual drop in sessions with Emma, Simon and Joe.
- Clear Standing Operating Procedures for: FOI requests, Waive of Tenders authorisation, Contract Awards and Corporate Identity.

Communication with team

What's next...

- INTRANET
 - Pictures
 - Contact information
 - Good news stories
 - Working with Marketing and Communications Team to develop our internal and external profile



What's next... continued

- RECOGNISING SUCCESS
 - Star of the month
 - Sharing good news
 - AWARDS!



What's next... continued

- CUSTOMER SERVICE
 - Charter
 - Accountability
 - Clear expectations
 - Ownership



And more...

- AMBASSADORS
- STANDARDISED INDUCTION
- SHADOWING



Golden Rules

- Visibility / awareness of any communications going Directors within the organisation
- Highlight issues with external bodies i.e. NHSSC



Any suggestions, ideas or volunteers?





RESOURCE

What have we done so far...

Issues

- Lack of investment for multiple years prior to 2020.
- Reliance on interim and agency in P&SC.
- Struggled to successfully recruit in to a number of vacancies.
- No training budget or succession planning.

Solutions

- Immediately requested additional resource to support key areas of the Trust.
- Made interim posts permanent.
- Made ourselves more attractive to potential candidates.
- Investment in training.

Resource Strategy

- Actively move away from Category Management to Business Partner structure.
- Strategy developed to look at giving:
 - additional senior roles to develop leadership and professionalism of the department within the organisation as we pro-actively engage with stakeholders earlier in the process and support, local, regional and national activities.
 - further operational procurement team members to support to the current Category Managers in the day to day procurement activities and be the point of contact for the divisional stakeholders.
- Developed business case to review contract management team.
- Organisational support but likely will have to phase.
- Structure to support 'grow your own' through both apprentice, graduate and development opportunities within the team.



**The Chartered
Institute of Logistics
and Transport**



skills
development
network

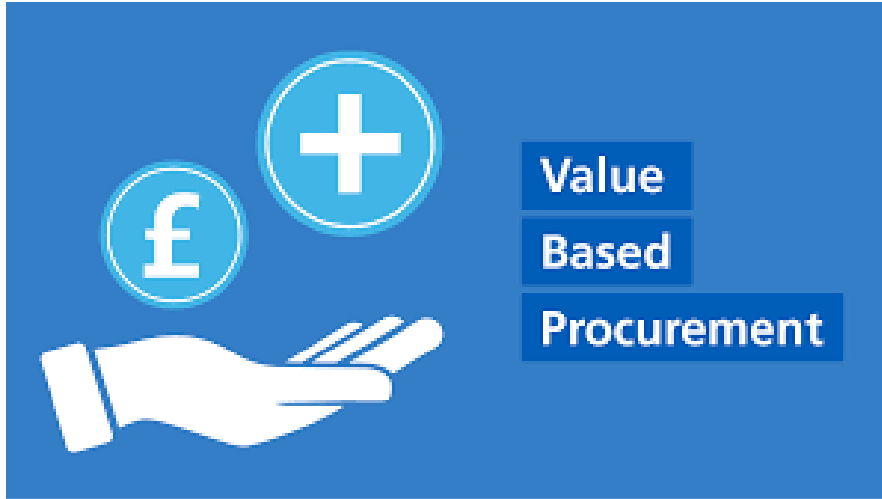
TRAINING AND DEVELOPMENT

Training

- Funding for vocational training review – CMI & CILT
- Funding for MCIPS
- Active membership of the Skills Development Network
- Proactively encouraging attendance at legal seminars
- Shared knowledge / experience
- Refresh Training & Development Policy
- Apprenticeships

Development

- Review of role profiles
- Skills gap analysis aligned with PDP
- Capabilities assessment
- Succession planning
- Appraisals completed on time!



VALUE BASED PROCUREMENT

VBP at NUH

- The Procurement teams are working alongside finance colleagues to understand how the Trust can develop its calculation of value based procurement in line with the “Quality Improvement Waste Reduction” work plans. Value based procurement activities include; the reduction of bed days, products that reduce risk in clinical activities, aid recovery time and reduce outpatient appointments.
- A value based procurement section has been added to the Procurement work plan to start identifying which schemes may have value based savings opportunities. We have categorised these as Bed Days, Surgery Time and Clinic Sessions. There will be tender questions written into all relevant invitations to tender to ask for how they may work with the Trust to drive value based efficiencies in these areas.
- The Procurement Team is undergoing training alongside the Divisions to support the QIWR activity across the organisation.



**Integrated
Care System**

Nottingham & Nottinghamshire

NHS
Nottingham
University Hospitals
NHS Trust

NHS
Sherwood Forest Hospitals
NHS Foundation Trust

NHS
Nottinghamshire Healthcare
NHS Foundation Trust

ICS – NHS WORKING

ICS

- Agreement to work together.
- Regular monthly meetings.
- All allocated leads.
- Looking at 'quick wins' to support activities.
- Shared work plans and structures.
- Working together on specific strategic projects.
- Aligning where possible systems, process and best practice.

Come and speak to us!



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Any Questions

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Driving collaboration and improved commercial outcomes through data and technology

25 November 2021

Nils van de Winkel

NHS England and NHS Improvement



Session outline

1. The relevance of commercial data and technology for buyers and suppliers
2. The requirements around procurement insight, technology and data governance
3. How NHS England and NHS Improvement is working together with Integrated Care Systems to drive value from their data and improve commercial insight



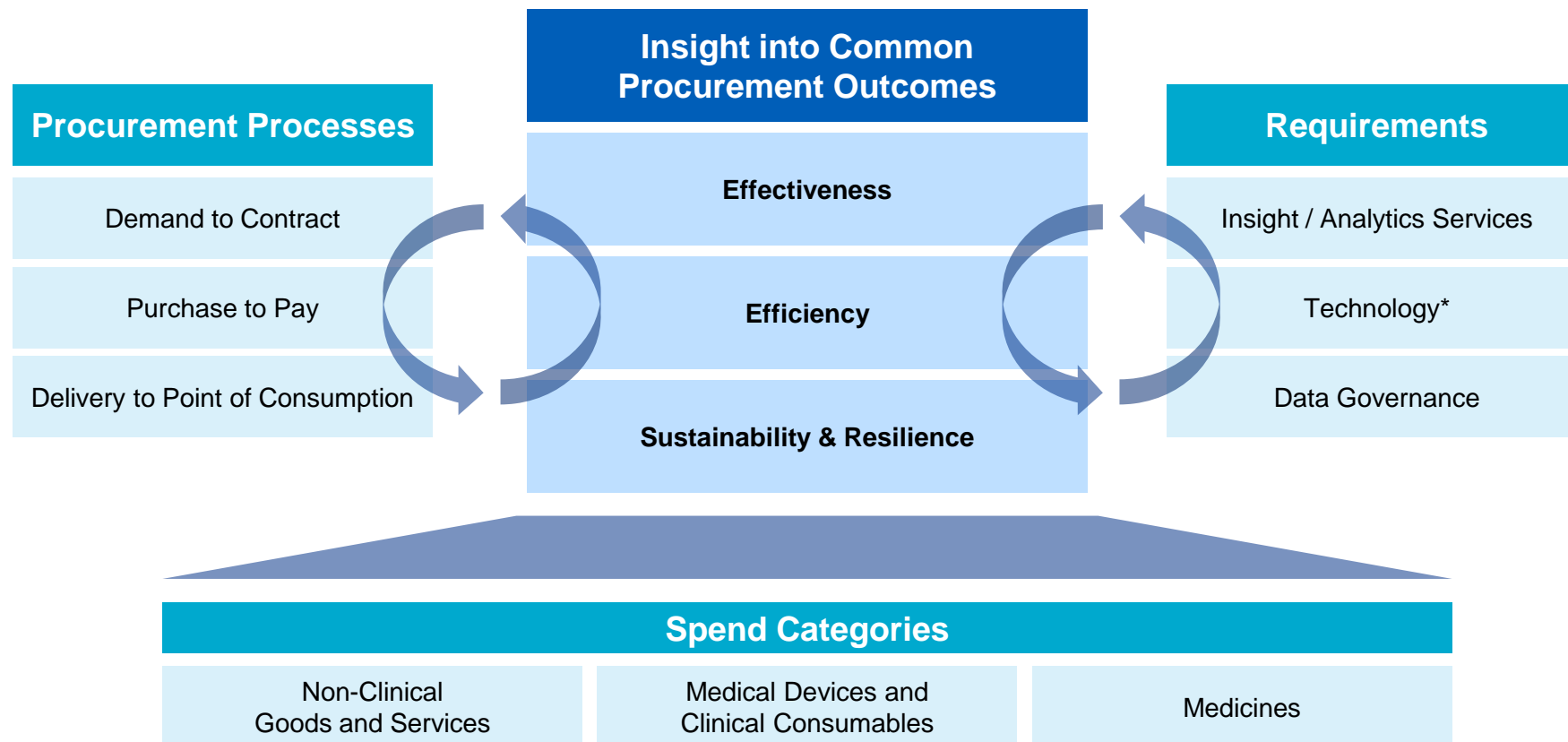
30 min presentation



10 min Q&A

Relevance of procurement data & technology

There is a need for improved commercial insight across the NHS to drive collaboration and common outcomes. Whilst acknowledging nuanced requirements across NHS organisations, common procurement outcomes should be measured and driven towards in order to consistently improve patient care.



*Technology is divided across two (non-exclusive) types of requirements:

1. Operational solutions (e.g. Atamis for D2C, Oracle for P2P), which enable procurement processes and capture operational data
2. Overlay technology that integrates, automates and visualises operational data in order to drive procurement insight and outcomes

Enabling collaboration across the Health System

Whilst there is a long list of potential project and products in order to improve our shared insight and drive outcomes, we have prioritised several for this FY.

Projects & Products

Insight / Analytics Service	Technology	Data Governance
<div>1</div> <div>Model Health System Procurement Metrics resumption</div> <div>P</div>	<div>3</div> <div>Atamis deployment & adoption support across NHSE/I</div> <div>B P</div>	<div>6</div> <div>Data standards definition & maintenance</div> <div>B P</div>
<div>2</div> <div>Value and savings methodology update</div> <div>P</div>	<div>4</div> <div>Atamis deployment & adoption support across providers</div> <div>P</div>	<div>7</div> <div>Data warehousing</div> <div>P</div>
	<div>5</div> <div>NHS Spend Comparison Service</div> <div>B P</div>	

Legend

Our focus 'year to date'

Remainder of FY focus

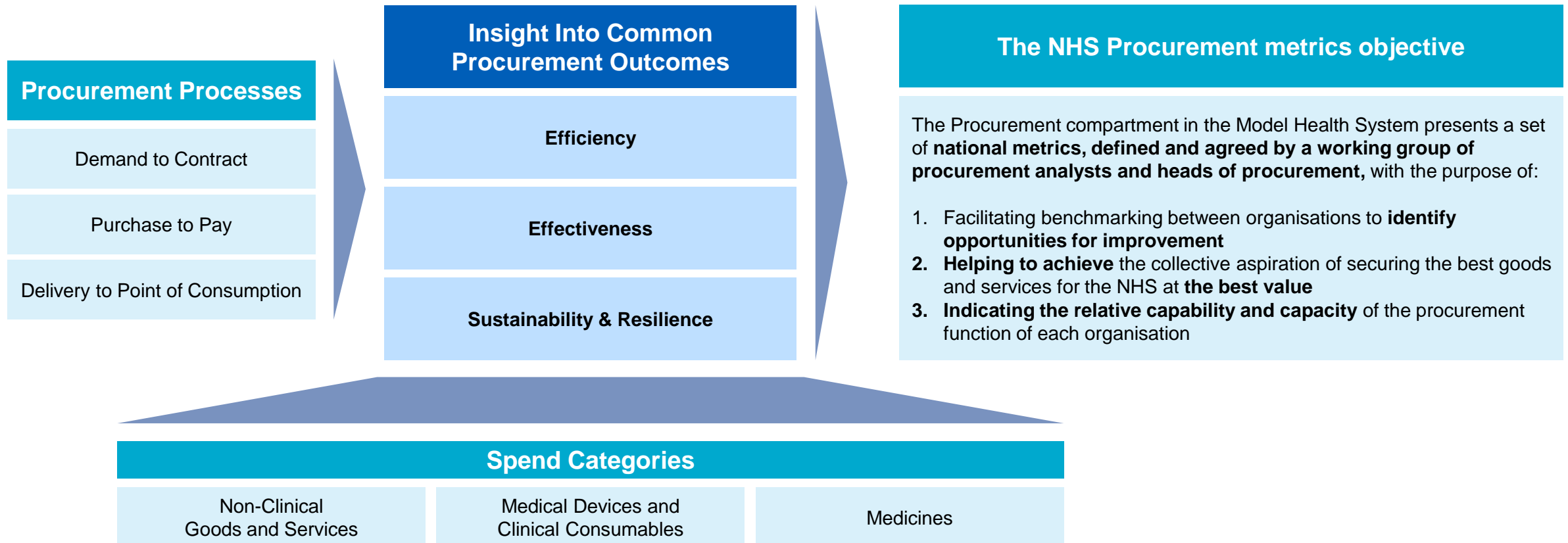
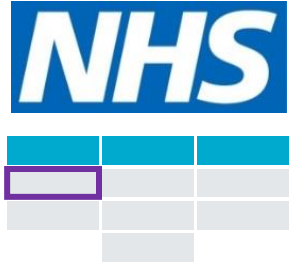
1 Ref

B BAU

Project P

Model Health System – Procurement metrics

With its origins in the Lord Carter review on productivity, Model Hospital has evolved into the Model Health System. Metrics collections have however been paused due to the Coronavirus response since March 2021. We are aiming to restart these again from Q4 of this FY.



Value and savings methodology update

Procurement has and continues to play an important role in the delivery of value and savings across the NHS. In order to evaluate commercial opportunities through the same lens, improve efficiency and achieve a positive impact on patient care, we need to reduce unwarranted variation in how we evaluate, acknowledge and report on value and savings.



Current project objectives*:

1. Improve clarity of definitions and guidance for each savings type, for example through:
 - A. Contributing to updates to the HFMA NHS Efficiency map (worked examples)
 - B. Providing additional guidance as part of Provider and System Finance Returns
2. Enable consistent capture of forecasts through commercial pipeline/ workplan system
3. Ensure alignment of recognition across organisations, on ICS, regional and national level through aggregation and engagement

Atamis adoption across providers

Enabling NHS organisations to manage their workplan and collaborate where relevant, through a consistent commercial pipeline that will provide visibility to suppliers and buyers alike.



Project objectives:

1. Ability to maintain organisational procurement workplan in Atamis and **identify areas for collaboration within their ICS or across collaboratives**, without offline data consolidation, normalisation and reporting, thereby reducing total resource requirement that would otherwise be required.
2. **Ability to jointly work on shared procurement workplan** activity in a single system, reducing offline/ static data and reporting requirements throughout the commercial lifecycle.
3. **Standard reports and dashboards to understand upcoming workplan and resource loading**, with automated reporting out where required/ desired. Prioritise projects based on anticipated value and savings.
4. Understanding of **supplier risk exposure** in their commercial pipeline through embedded integrations.
5. For those also using other Atamis modules, an **integrated source to contract lifecycle**, to enable improved reporting and assurance.
6. For those also looking to use other Atamis modules, a **standard approach to onboarding to Atamis** through the commercial lifecycle, based on your procurement pipeline.
7. For those using other source to contract systems, **ability to schedule standard reports out of Atamis, to feed into local processes and systems.**

NHS Spend Comparison Service

Data provides visibility into the factors behind commercial activities. The NHS SCS gives providers across England the ability to price benchmark and visibility into commonality of expenditure to identify opportunities for collaboration.



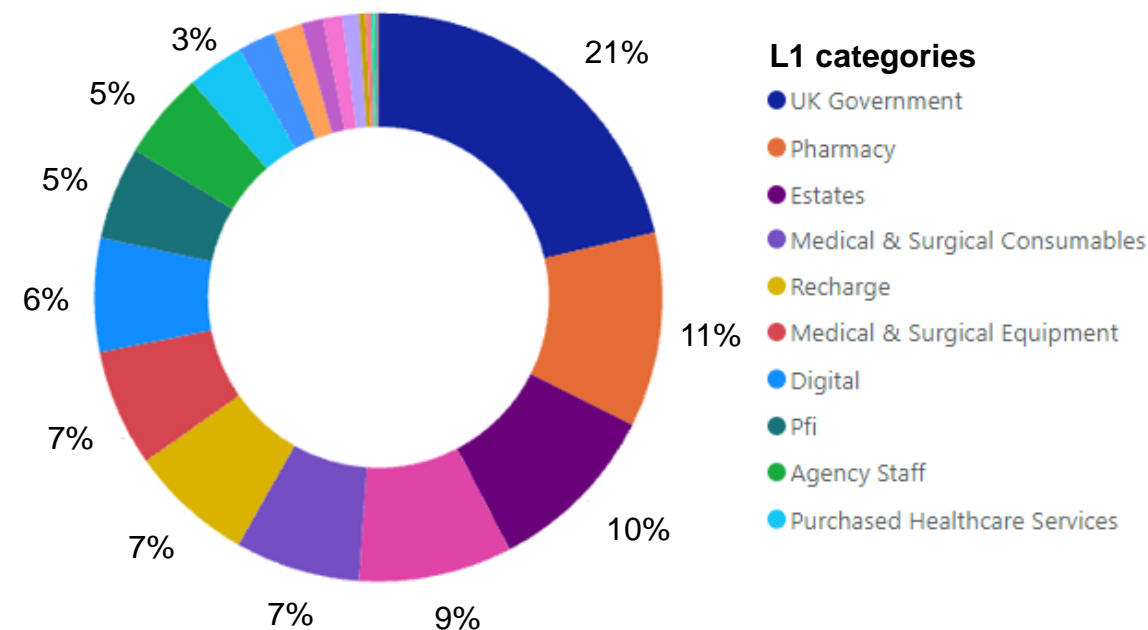
Product objective: enable procurement stakeholders to maximise clinical and social outcomes while minimising costs based on relevant data and insight.

1. Improve patient outcomes
2. Improve product and service safety and quality
3. Improve commercial outcomes
4. Improve regulatory compliance

Aggregating and standardising national data sets, once for all.

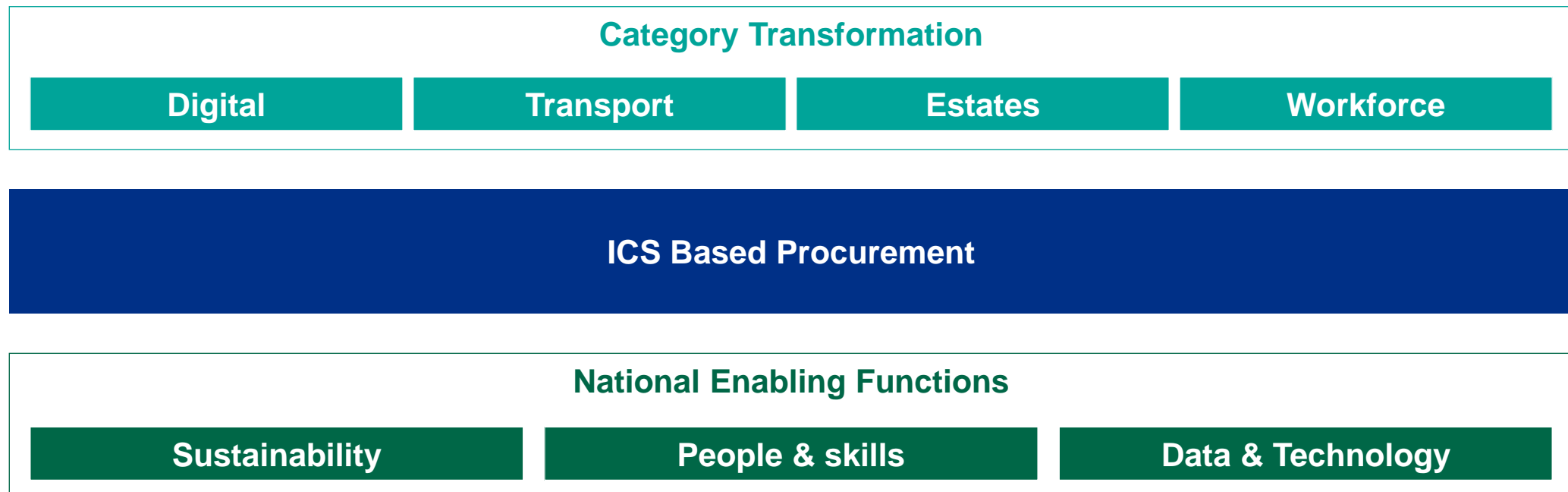
Purchase Order data	Accounts Payable data	Commercial Pipeline/ Procurement Workplan data
Contract data	Inventory data	Catalogue data
Purchase Order Validation	National Catalogue SCCL & GIRFT data	Functional specific data E.g. Estates Returns Information Collection
Supplier MI E.g. Agency Data (CCS & workforce alliance)	Supplier sustainability indicators	Supplier financial strength and risk indicators

Example: How do we spend £100?*



Data & technology should help us chart the way

But it will not answer all our questions or tell us what questions are most important asking in the first place.
We are working in partnership across ICSs to redefine NHS procurement and improve commercial capability and outcomes.



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Government
Commercial
Function

Government Commercial Function

**Melinda Johnson, Commercial Director
Department of Health and Social Care**

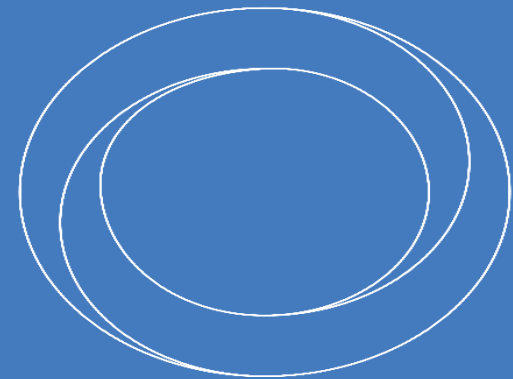
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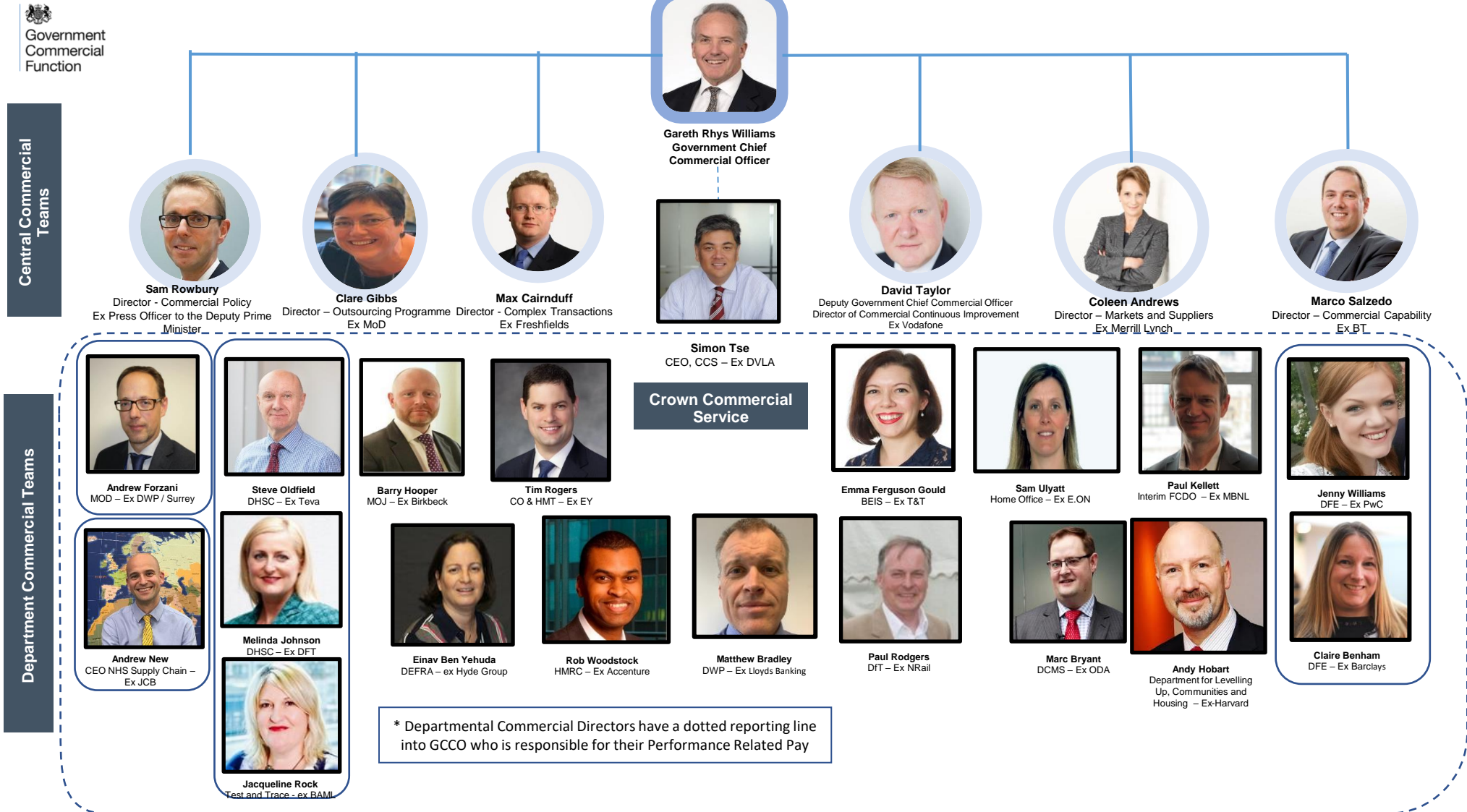
Government
Commercial
Function

“The Government Commercial Function will be the best commercial function in the UK”



Commercial Function Leadership Group 2021

Well recognised experts, working as a network





GOVERNMENT COMMERCIAL FUNCTION:

HOW CAN THE GCF HELP ME?

"HOW DO I EXECUTE
COMPLEX
TRANSACTIONS?"

"HOW CAN I
RESOLVE ISSUES
WITH ONE OF MY
VENDORS?"

"HOW CAN I
STRENGTHEN
CAPABILITY AND
CAPACITY?"

"HOW DO I ACHIEVE
BETTER VALUE FOR
MONEY?"

"HOW CAN THE GOVERNMENT
COMMERCIAL FUNCTION HELP
ME TO DELIVER MY
DEPARTMENT'S POLICY
OBJECTIVES AND
AMBITIONS?"

COMMERCIAL AND CONTRACT MANAGEMENT CAPABILITY TEAM



RECRUIT, DEVELOP AND
ACCREDIT SENIOR
COMMERCIAL
PROFESSIONALS TO IMPROVE
COMMERCIAL DELIVERY AND
CONTRACT MANAGEMENT IN
DEPARTMENTS AND WIDER
GOVERNMENT BODIES

COMMERCIAL POLICY TEAM

SETTING THE RIGHT
COMMERCIAL POLICY
FOR UK GOVERNMENT



GOVERNMENT COMMERCIAL ORGANISATION



SINGLE EMPLOYER OF SENIOR
COMMERCIAL MANAGERS AND
LEADERS, WITH AN ENHANCED
DEVELOPMENT PROGRAMME
TO STRENGTHEN CAPABILITY

A STRONG SENIOR
NETWORK WHICH CAN
PROVIDE PEER SUPPORT
TO DELIVER THE BEST
COMMERCIAL OUTCOMES
FOR GOVERNMENT

CONTINUOUS IMPROVEMENT TEAM

WORK TO ENSURE ALL
COMMERCIAL ACTIVITY
IS UNDERTAKEN IN
THE BEST WAY



MARKET & SUPPLIERS TEAM

RELATIONSHIPS WITH GOVERNMENT'S
STRATEGIC SUPPLIERS ARE MANAGED
CENTRALLY, PROVIDING MARKET,
SECTOR AND SUPPLIER INTELLIGENCE



CROWN COMMERCIAL SERVICE

ACHIEVE GREATER SAVINGS AND
EFFICIENCY BY POOLING THE BUYING
OF COMMON GOODS AND SERVICES



YOUR IN-HOUSE COMMERCIAL TEAM



COMMERCIAL DIRECTORS AND
IN-HOUSE COMMERCIAL
TEAMS SUPPORT THE
PERMANENT
SECRETARY IN
DELIVERING POLICY
OBJECTIVES

COMMERCIAL
DIRECTOR



PERMANENT
SECRETARY

OTHER GOVERNMENT DEPARTMENTS' COMMERCIAL TEAMS

OTHER DEPARTMENTS AND THEIR
COMMERCIAL TEAMS ARE
INCREASINGLY CONNECTED AND
FUNCTIONAL COMMERCIAL SUPPORT
AND EXPERTISE CAN BE ACCESSED
THROUGH THIS COMMUNITY

COMPLEX TRANSACTIONS TEAM

PROVIDE SUPPORT
IN THE DELIVERY OF
THE MOST COMPLEX,
AND CHALLENGING
TRANSACTIONS



Government
Commercial
Function

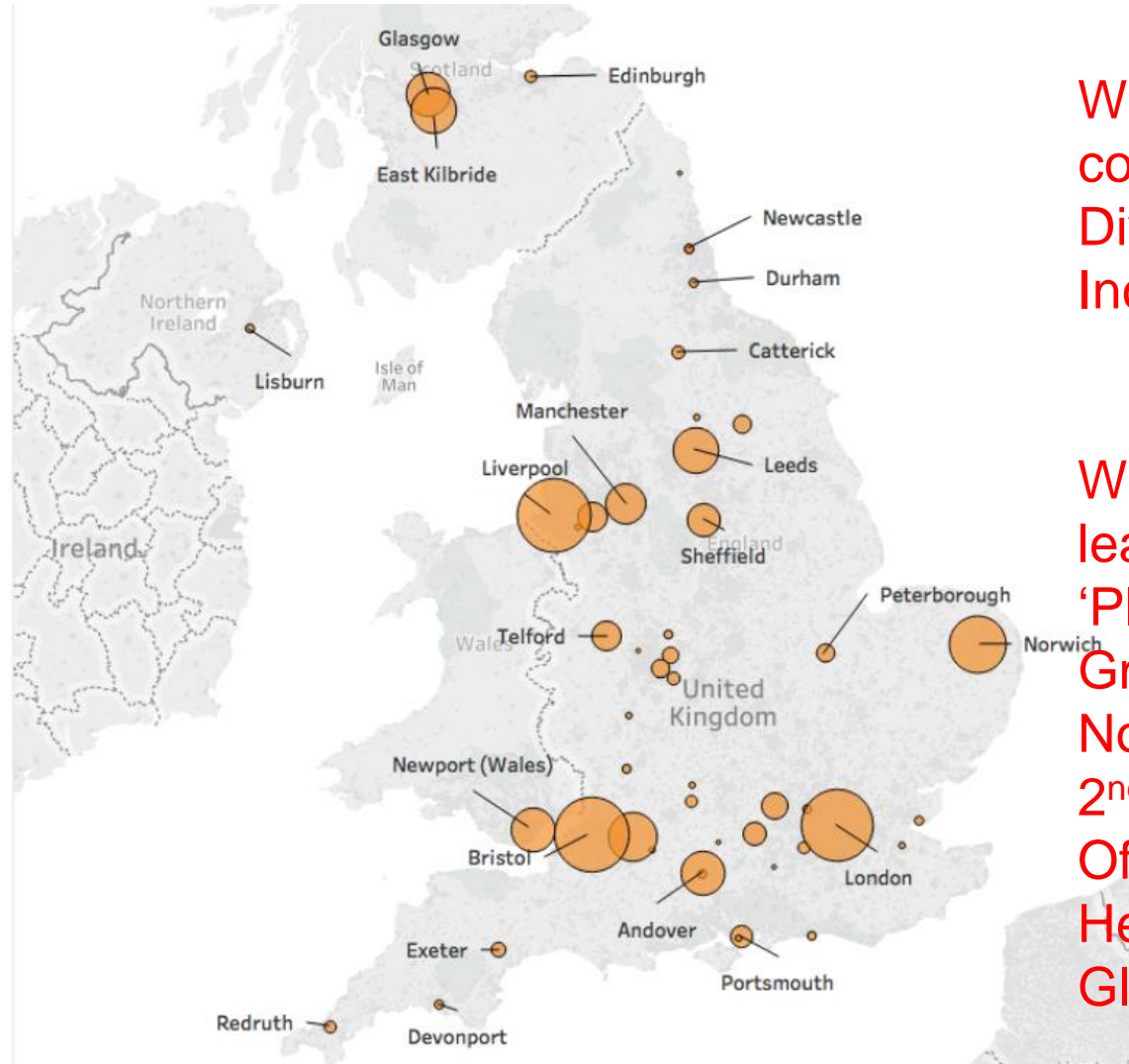
GCF: Logical and efficient structure

Clarity on who does what

Building professionalism and leveraging ‘shared’ resources to maximise effectiveness

Department Commercial Teams	Crown Commercial Service	Central Commercial Teams
<ul style="list-style-type: none"> • Departmental focus • Buying bespoke, mission specific goods and services • Deep understanding of local policy and business area • Responsiveness and flexibility • Efficiency and Continuous Improvement • Contract and performance management depending on Departmental structure <p>c. 2,800 people</p>	<ul style="list-style-type: none"> • Buyer of choice for ‘common goods and services’ for Central Gov’t and Wider Public Service, capturing scale economies • Frameworks for categories that everyone buys: <ul style="list-style-type: none"> • Buildings • Technology • People • Business Services • But not doing bespoke work or contract management that should better be done back in Departments <p>c. 900 people</p>	<ul style="list-style-type: none"> • Commercial Policy; Procurement regs, guidance notes, SME / Prompt Pay policy • Sourcing: Co-generation with industry of best practice sector guides / commitments • Continuous Improvement; Assurance, Commercial Standards, Benchmarking, Masterclasses • Complex Transactions; expert support for high value negotiations and disputes • Market & Supplier Partnerships; Consistent management of “Strategic” suppliers, Market Analysis • Capability: Attract, Retain, Develop, Accredited and Reward our talent <p>c. 280 people</p>

Commercial is the most widely dispersed function Our c.4,000 staff are spread across the UK



We are
committed to
Diversity and
Inclusion

We play a
leading role on
'Places for
Growth' – GCF
Northern Hub
2nd Cabinet
Office
Headquarters
Glasgow

Correct People and Processes lead to Results

£7bn savings and delivery performance through proven capability

People: Mandatory accreditation of internal staff and recruits, attractive to external expertise

- 4,456 individuals assessed against Professional Standards, through ADC; ongoing commercial training up and running, 1,325 senior staff centrally employed on “non civil service” terms and deployed to departments
- Around 1,535 commercial specialists recruited, with a further 791 promoted since 2016

Processes: Improved method across an increasingly integrated Function

- Commercial Operating Standards ‘CCIAF’ rolled out, with benchmarking / continuous improvement ‘masterclasses’ every 3-6 months. Commercial Spending Controls add value/provide oversight.
- 6,902 colleagues on Knowledge Hub; 112 interest groups across 860 Govt and ALBs / WPS organisations
- Shared data: Understanding the supply chain; performance and risks of major strategic suppliers / key markets
- E commerce and business insight – Atamis!

Results: Departmental savings / improved delivery / reduced risk

- > £2bn “Commercial Benefits” for Central Government in each of last four years, c.£1.2bn contributed in 19/20 by GCF central teams
- Improved Contract RAG ratings and Dispute stats across government, improved Prompt Payment performance
- Carillion, Interserve, ‘Clinical Waste’, Amey and hopefully Kier, all potential disasters safely averted



‘Playbooks’ – starting with ‘Outsourcing’ and ‘Construction’ have redefined how we work with industry

Policy	Description	Owner
Should cost modelling	A calculation of the total estimated cost of delivering an outsourced service is essential to calibrate bids / eliminate unrealistically low bids	HMG
Delivery Model Assessments (Make versus Buy assessment)	Made on the basis of optimal service delivery and value for money, before procurement begins.	HMG
Project Validation Reviews (PVR)	A short independent peer assessment ahead of the transition from policy to delivery (Major Outsourcing Projects only) to ensure value will be generated.	HMG
Requirement for Pilots	When outsourcing a service for the first time there is now a presumption that a pilot should be run before.	HMG
Risk Allocation	Working to mitigate risk and then ensure it sits with the party best able to manage them is central to the Government’s approach to delivering value for money and partnering with the private sector.	HMG & Supplier
Publication of Commercial Pipelines	To enable suppliers to understand the likely future demand across government and enable wider participation and greater diversity in our supply chains.	HMG
Resolution Planning	For “critical” contracts the successful bidder should provide us with resolution planning information.	Supplier
Pricing and payment mechanisms	Using the Model Services Contract to ensure consistency clarity from the outset, using data that can be relied on by vendors and contracting authority.	HMG
Key Performance Indicators	It is important that KPIs are relevant and proportionate to the size and complexity of the contract. Getting this wrong can create confusion and tension. We will publish the top 3 KPI’s, focusing our effort and demonstrating value for money for citizens.	HMG & Supplier
Market management and engagement	We will adopt models that promote competition and contestability over time, so that those that win the first contracts know that they must deliver value for money or risk government taking its business elsewhere in future.	HMG
Financial assessment and monitoring of suppliers	We will proactively monitor the financial standing of our critical suppliers on an ongoing basis and introduce standard financial tests for use by procurement teams. For “critical” contracts, vendors will have to confirm ongoing compliance.	HMG & Supplier



Playbook Implementation

The Sourcing Playbook

- The Outsourcing Playbook was updated to V3 - The Sourcing Playbook- on 20 May 2021.
- This latest iteration was reframed as the Sourcing Playbook to better reflect the need to apply these principles to achieve outstanding public services whether through insourcing and mixed model delivery or traditional outsourcing.

The Consultancy Playbook – The new GOVERNMENT CONSULTANCY HUB

- The Consultancy Playbook was published as an addendum to the Sourcing Playbook in May 2021 to support our agenda to commission and engage with consultants effectively.
- The Playbook aims to drive better outcomes, better value for money, and improved civil service capability through the transfer of knowledge and skills

Construction Playbook

- The sourcing team continue to deliver monthly knowledge drop events which cover the key 14 policy areas within the Playbook.
- We are currently developing policy guidance on MMC and digital methods to further improve procurements.
- The Independent Review of Public Sector Construction Frameworks, commissioned by Lord Agnew in February, has been completed and is due to be published shortly.

Digital and Data Playbook

- The Digital, Data and Technology Playbook has been finalised and is due to be published in Autumn 2021 pending final approvals. Created in partnership with the DDaT function and with extensive engagement from industry, the playbook will improve how the Government assesses, procures and delivers DDaT products and services.
- We have completed over 1000 hours of engagement across government and industry to develop 11 key policy reforms and best practice guidance to enable a greater proportion of projects and programmes to achieve 6 cross-cutting priorities.

Government Major Contracts Portfolio

Why are we implementing GMCP:

- The GMCP will allow the Government to become more aware of where risks lie and put the Government in a position to potentially avoid failures through early awareness and action as well as enabling the ability to influence decision making. Ultimate success of the Portfolio implementation will be measured by the ability to avoid failures and enable early intervention.

Government Reform:

- GMCP is a specific action in the Declaration on Government Reform, action 22 - “Institute the Government Major Contracts Portfolio, to improve the contract management of the most critical contracts.”

GMCP Qualifying Criteria:

- Outsourced central government contracts for services
- Outsourcing Playbook criteria for complex contracts
- At least £10m pa spend
- Significant claimed benefits (per business case)

GMCP Current Status:

- The GMCP design phase is complete and the target operating model agreed.
- GMCP was launched on 5th November with the first data commission.

GMCP Next Steps:

- Data to be presented at the inaugural GMCP Board in January 2022.



Incorporating Government Strategic Objectives in Procurement

Social Value

- The Domestic Policy team are continuing to build knowledge and capability across the Function with over 3000 Commercial staff completing eLearning and 1600 participating in detailed seminars.
- Reporting systems are being developed to ensure there is central visibility of the outcomes being delivered in contracts, and case studies showcase best practice. Social Value KPIs are now required on all contracts and will be published (for Gold contracts).

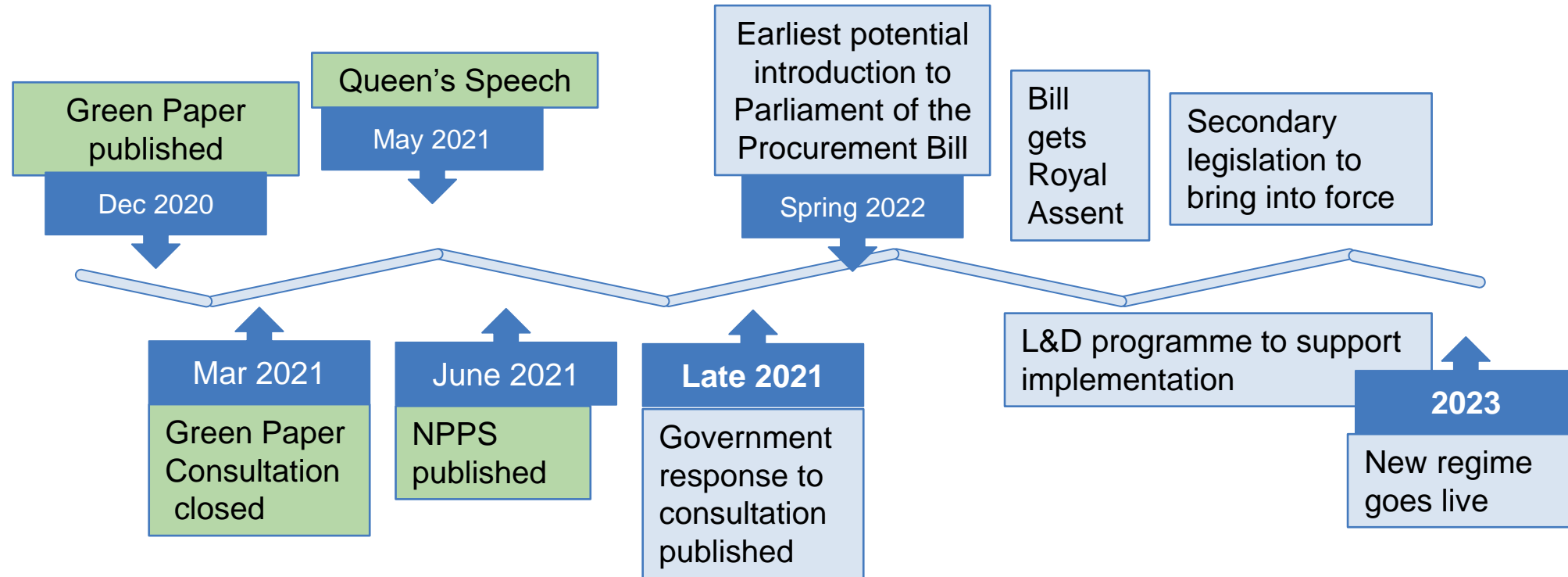
Net Zero

- The Domestic Policy team have developed a new measure which brings suppliers commitments on Net Zero into the commercial process for the first time. This went live on 30 September 2021.
- The measure applies to Central Government procurement of £5m per annum and above where relevant and proportionate.
- All bidding suppliers will need to produce a Carbon Reduction Plan. This CRP will detail their commitment to achieving Net Zero by 2050 at the latest, their operational greenhouse gas emissions and the environmental management measures they will apply in the delivery of the contract.

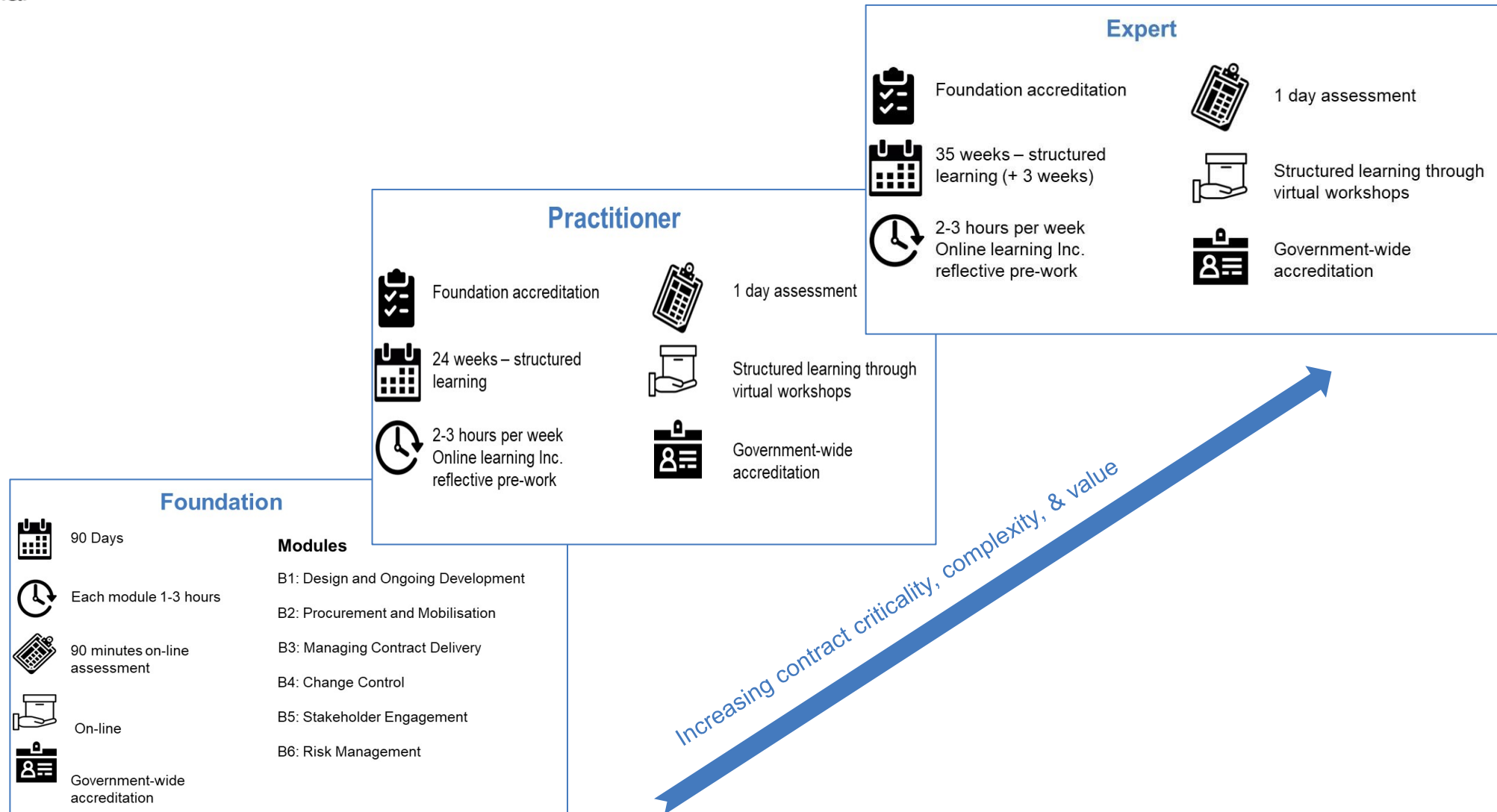
National Procurement Policy Statement

- The NPPS, published in June 2021 sets out Government's strategic national priorities for public procurement, including embedding social value and ensuring public bodies have the right commercial capability and capacity to deliver procurements.
- All contracting authorities are required to "have regard" to the statement including the 3 social value metrics of creating new jobs and skills, tackling climate change and ensuring supplier diversity.
- From April 2022, larger CAs will be required to publish pipelines and benchmark their commercial capability.

Procurement Rules Reform Timeline



The three levels of Contract Management Training



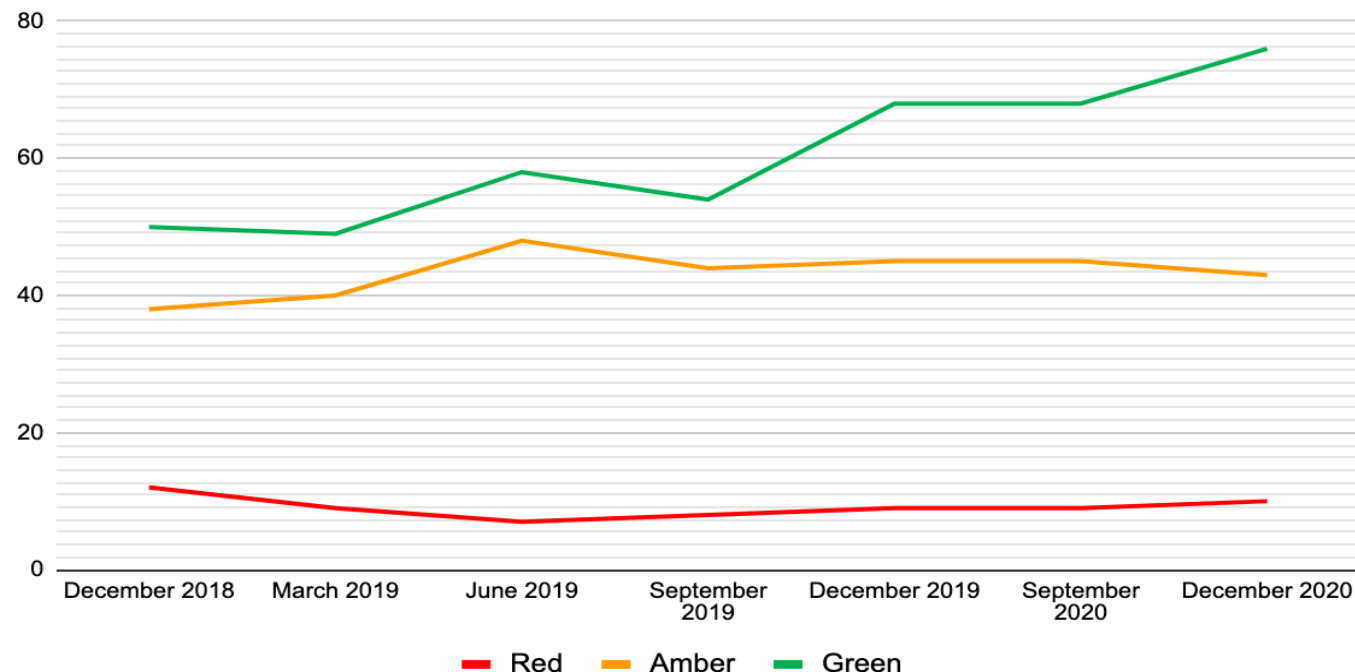


RAG's of contracts in “workstream” process improving dramatically

Supplier management works!

The most critical measure of value creation for the SPP programme is the change of quality assessments of contracts. These numbers are based on the forecast number of contracts already in “workstream” progress

Overview: RAG status of contracts in the last 24 months

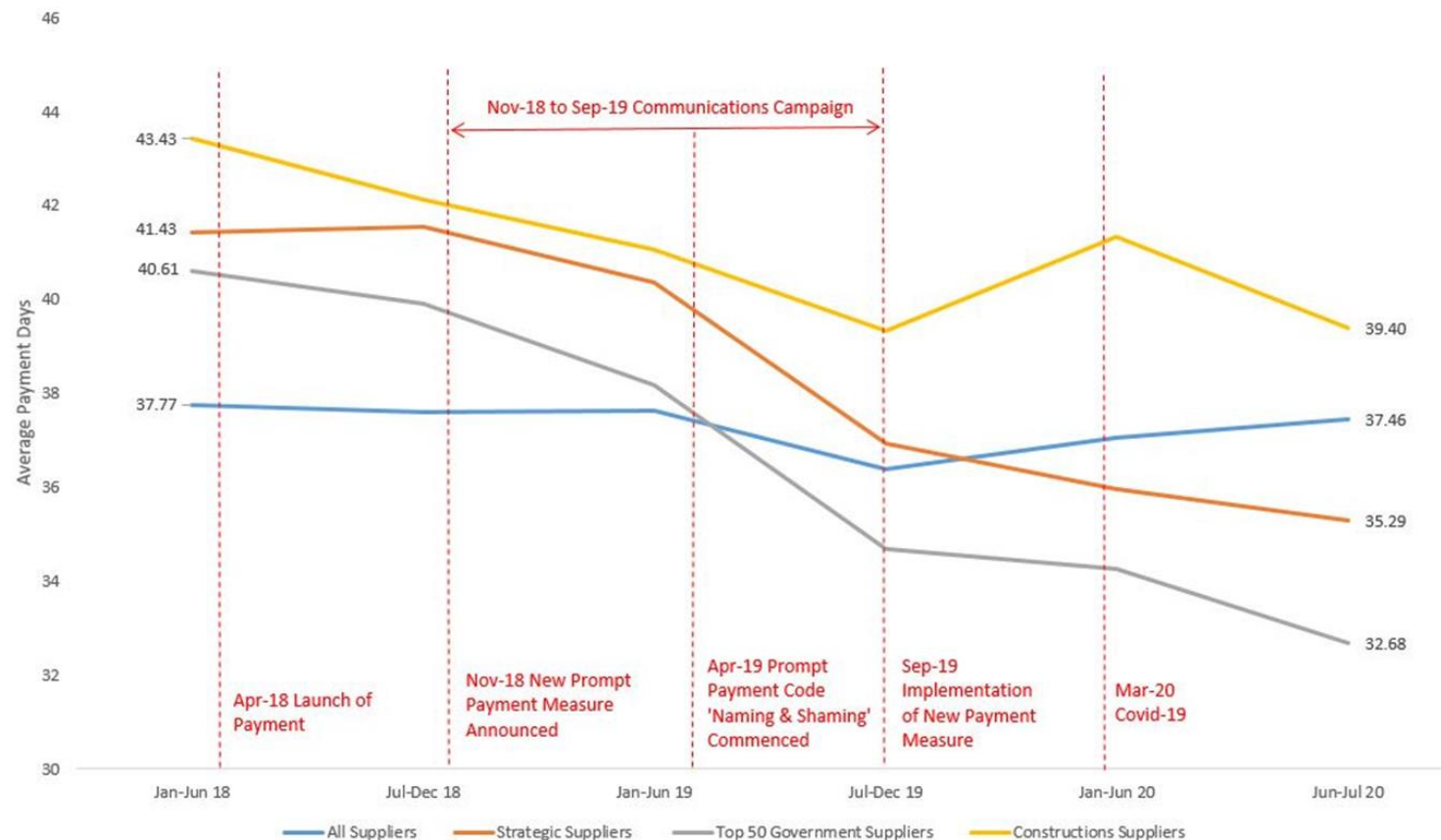


Key movements in RAG status reflect a continued reduction of risk and improvement of policy delivery.

129 out of 135 contracts managed centrally have a RAG rating. The majority (92%) of contracts worked on and managed across the SPP are rated either green or amber, with 8% of contracts rated red in Q3.

[*] The baseline and ongoing quality colour of a contract at any point of time will be jointly assessed by Department and CO.

Payment days reduced across the board



The introduction of the Prompt Payment Measure, and 'Naming and Shaming' on the Prompt Payment Code, appear to have resulted in a fall in average payment days generally. Those suppliers closest to government have had the largest improvement.

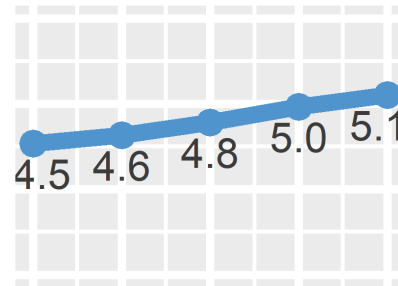
Covid-19 appears to have resulted in a divergence, within those suppliers close to government continuing to improve, and the wider economy falling back slightly.

The construction sector seems to have overcome its initial difficulties at the beginning of the pandemic, whilst the average of all suppliers has continued its slight fall back. Given the deterioration in the UK economy since 2018, it is perhaps surprising that performance is still better overall than three years ago.

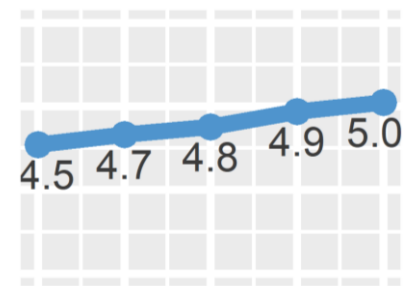
Consistent improvement in how the SCS perceive GCF

Changes in Quality
Ratings between 2017-
2021

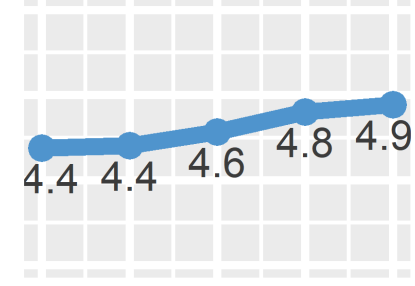
Expertise



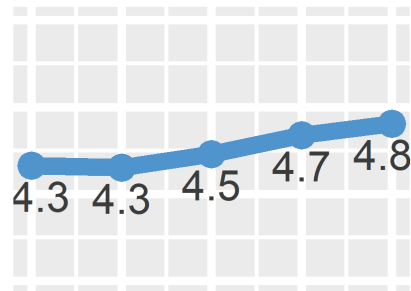
Support Delivery



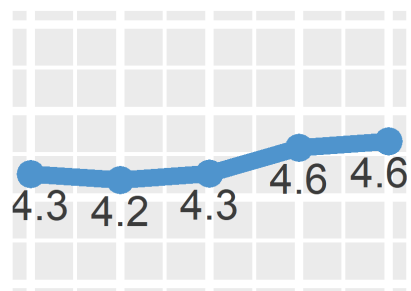
Quality of Support



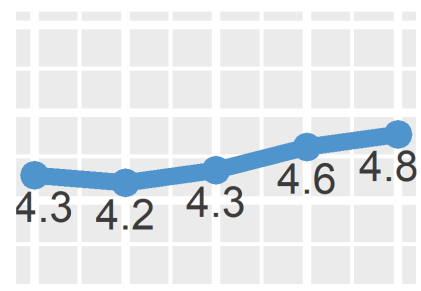
Speak Highly



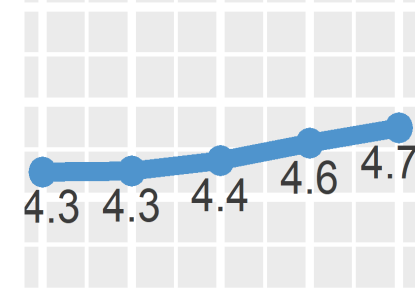
Timescales



Customer Focus



Support Efficiency



We Continue to Win Awards!



Civil Service Awards 2021

- Commercial Award Winner – Complex Transactions Team, GCF, Cabinet Office



CIPS Excellence in Procurement Awards 2021

- Best Procurement Team of the Year, Large Organisation: **The UK Vaccine Taskforce (BEIS)**
- Best Public Procurement Project: **The UK Vaccine Taskforce (BEIS)**
- Best Response to Supply Chain Resilience: **CO Complex Transactions Team, COVID-19 Response**
- Best Approach to Risk Mitigation: **MOD Submarine Delivery Agency**
- Overall CIPS Awards Winner: **The UK Vaccine Taskforce (BEIS)**



GO Awards 2021

- GO Excellence Overall Awards Winner – **DWP**
- GO Outstanding Response to Covid-19 – **DWP**

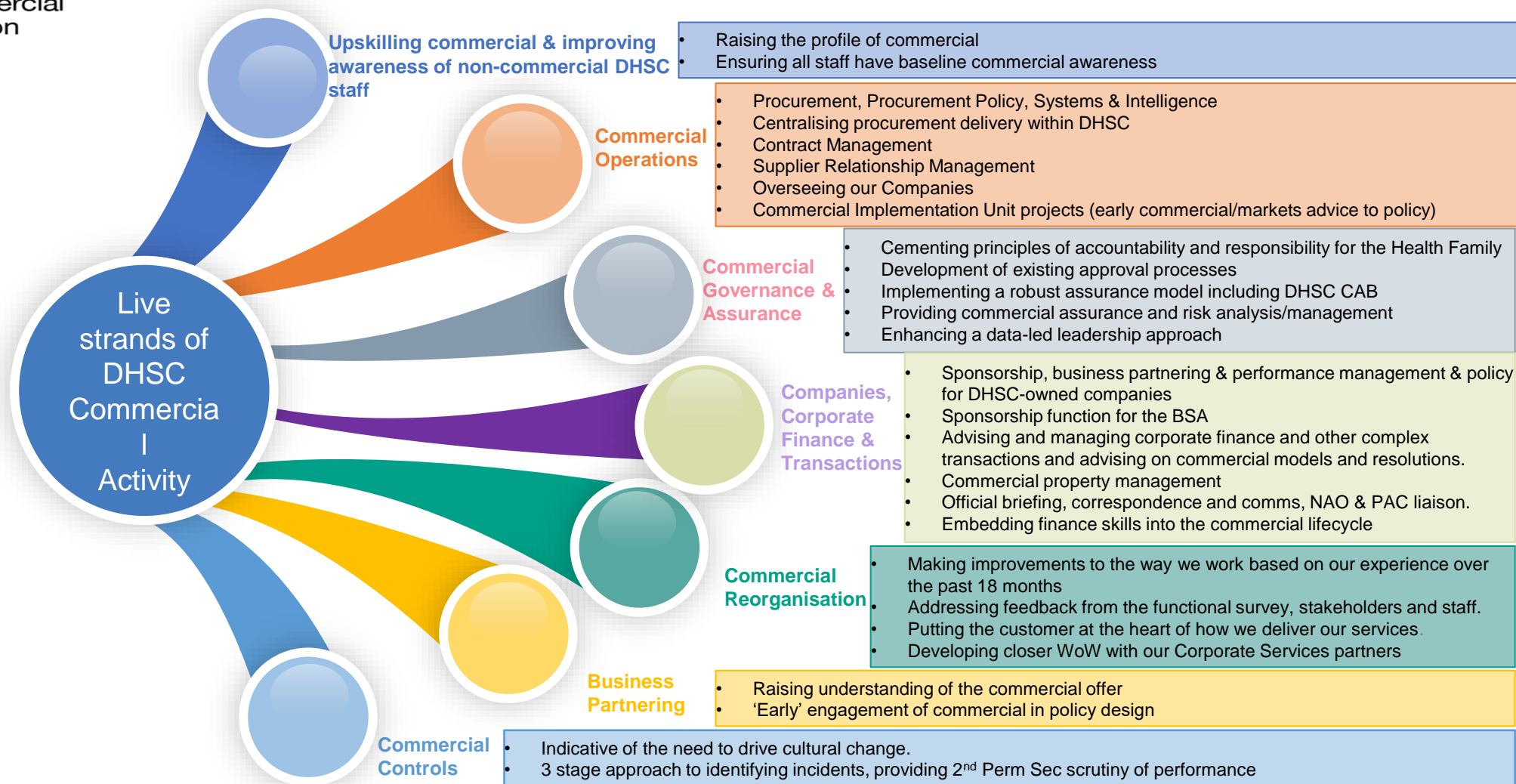


Cabinet Office Awards 2021

- Better Results Winner – Fran Burrell, Payment Policy Team/Markets and Suppliers
- New Ideas Winner – GCF Ventilator Challenge Team
- Leadership Winner – John Newton, CCS



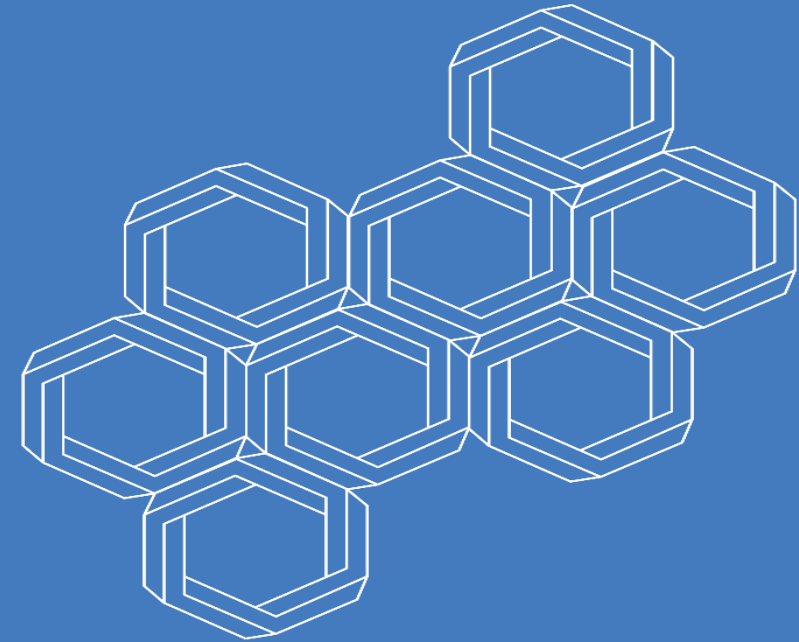
DHSC - A Dynamic Commercial Environment





Government
Commercial
Function

**Thanks for listening, happy to take
any questions or comments**



HCSA

Annual Conference and Exhibition
24-25 November 2021 | Harrogate Convention Centre

Recognising the Value of NHS Procurement

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HCSA

Annual Conference and Exhibition
24-25 November 2021 | Harrogate Convention Centre

Recognising the Value of NHS Procurement

Supporting Pandemics, People, Populations and the Planet
The Role of Procurement and Supply Chain

Karen Conway, Vice President, Healthcare Value,
Global Healthcare Exchange (GHX)

Supporting Pandemics, People, Populations and the Planet: The Expanding Role of Procurement and Supply Chain

Karen Conway, Vice President, Healthcare Value, GHX
Former National Chair, AHRMM



Working in healthcare today...



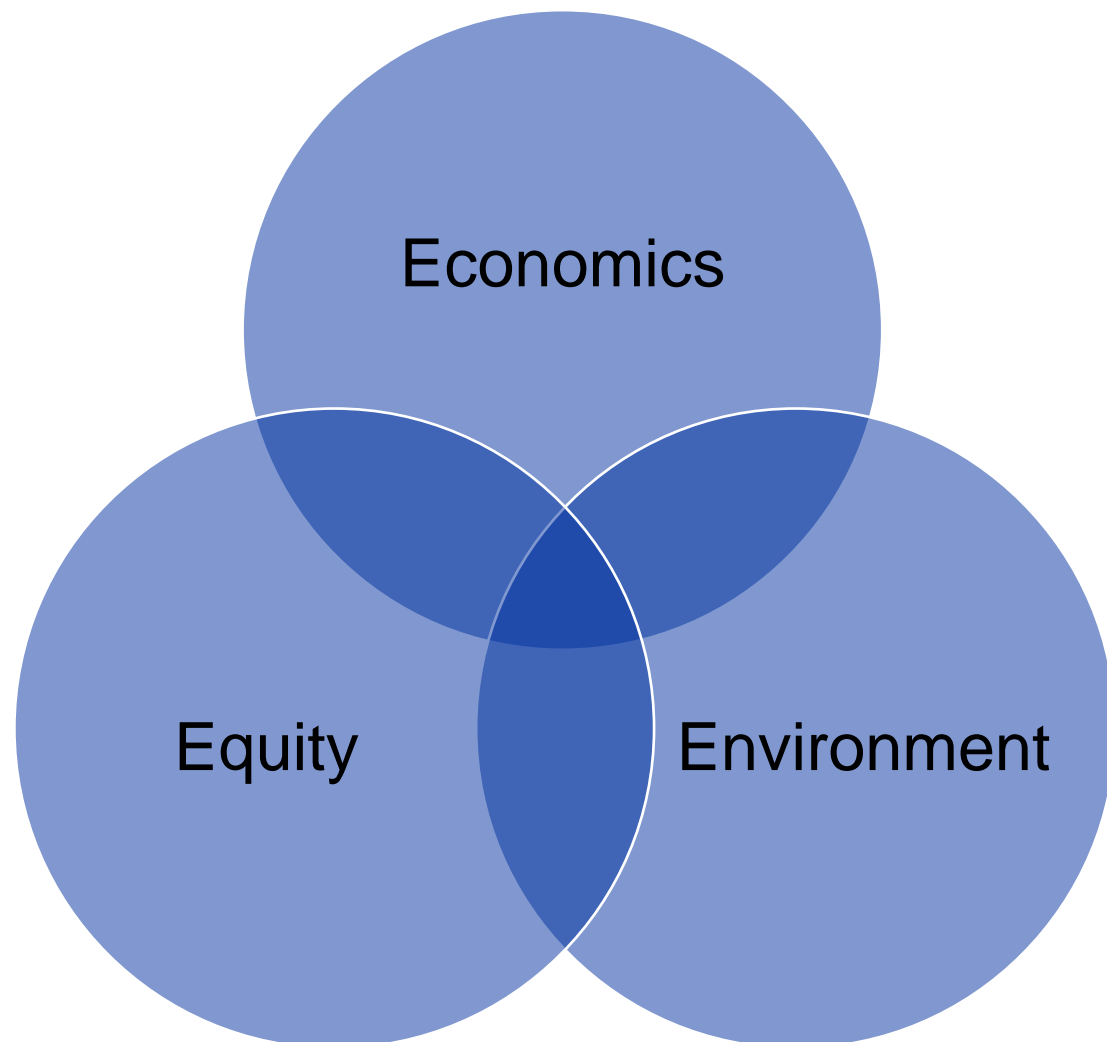
...we face multiple challenges:

- Continuing Covid cases
- Ongoing Shortages
 - Supplies
 - Labor
- Rising prices, increased demand
- Health disparities
- Sustainability demands

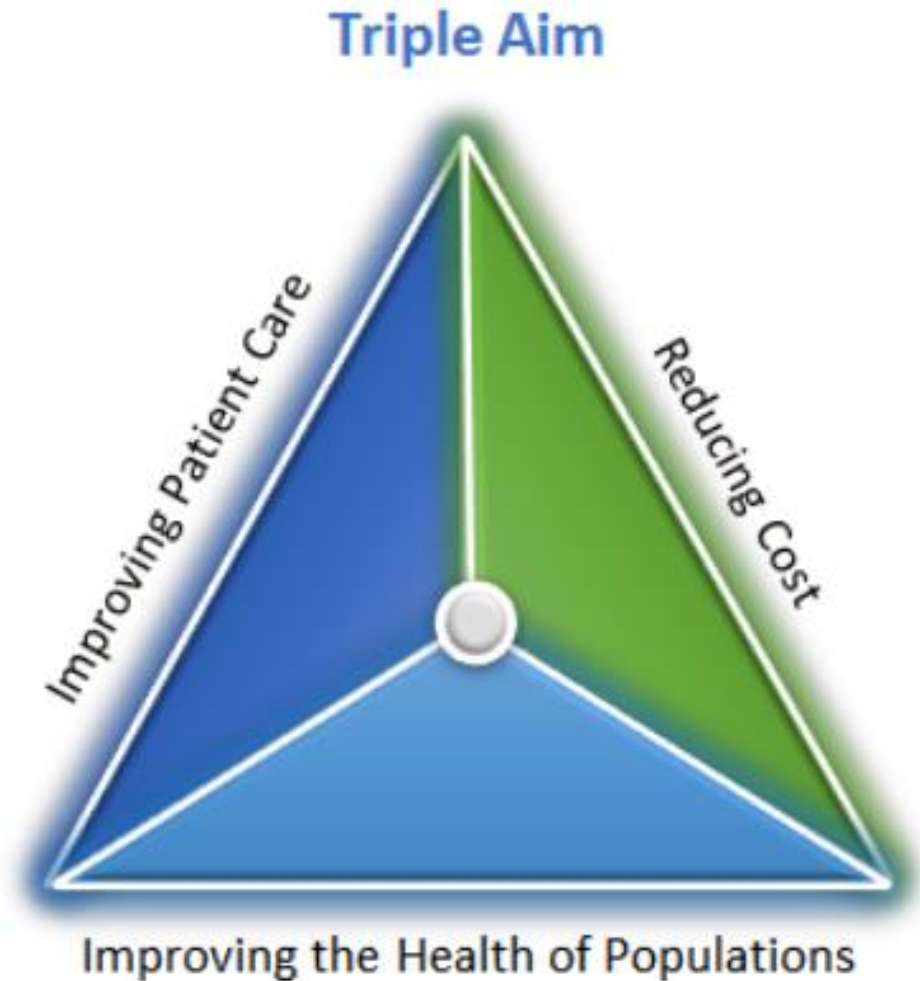
Where do you start?

What do you prioritise?

To truly make a difference, we must address these simultaneously



The Triple Aim: NHS Core Purpose in the Health and Care Bill



1. Promoting health and wellbeing of the population*
2. Improving the quality of care delivered to patients
3. Ensuring sustainable (economically responsible) resource use

*Requires evaluating the clinical, social and economic, behavioral and environmental factors associated with the outcomes

Source: Institute for Health Improvement; Kindig D, Stoddart G. "What Is Population Health?", *American Journal of Public Health*. 2003; 93 (3): 380-383.



The Sustainability Puzzle

Health Equity

**Environmental
Sustainability**

**Economic Viability
(and Resiliency)**

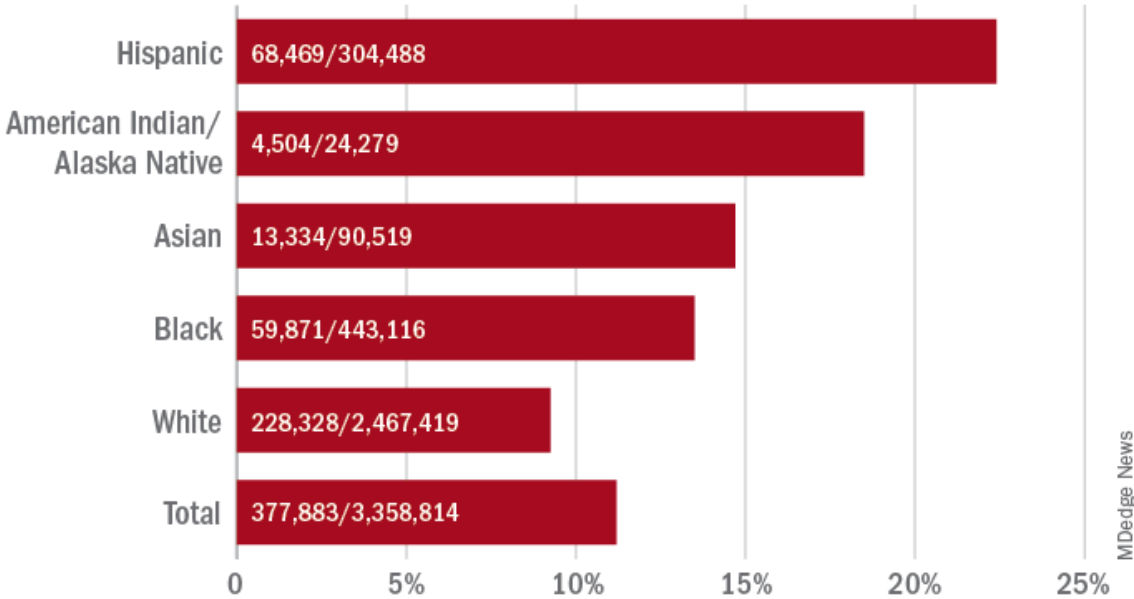


Health Equity

Lessons from the Pandemic: Health Disparities Cost Lives

United States

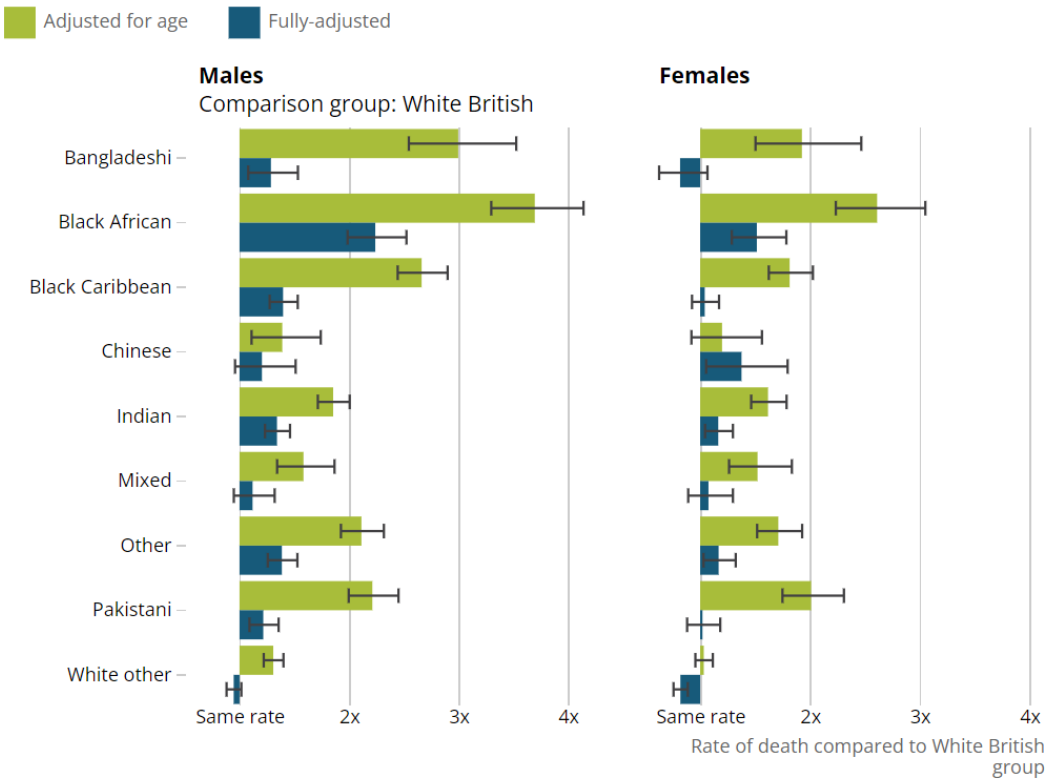
Ratio of COVID-19 deaths to all deaths by race/ethnicity, 2020



Note: Based on provisional National Vital Statistics System death certificate data.

Source: MMWR. 2021 Mar 31;70[early release]:1-4

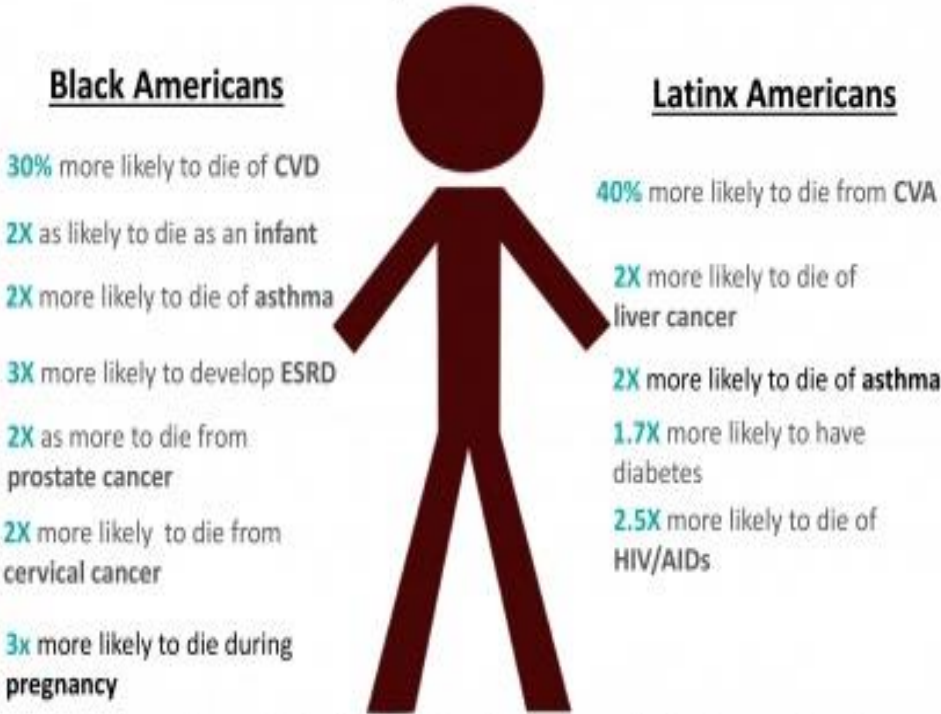
England



Source: Office for National Statistics - Updating ethnic contrasts in deaths involving the coronavirus (COVID-19), England: 24 January 2020 to 31 March 2021

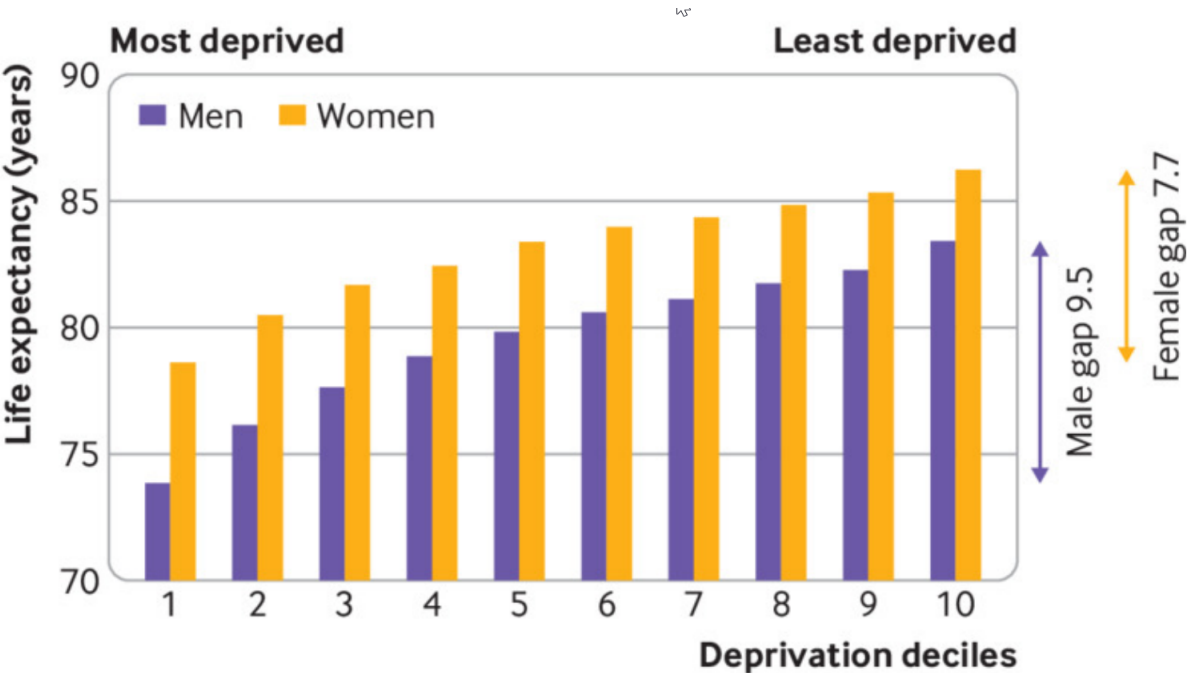
Health Equity is not new, only more widely recognised

The Health Disparities Pandemic



<https://familiesusa.org/resources/racial-and-ethnic-health-inequities-among-communities-of-color-compared-to-non-hispanic-whites/>

Marmot Study, 2020

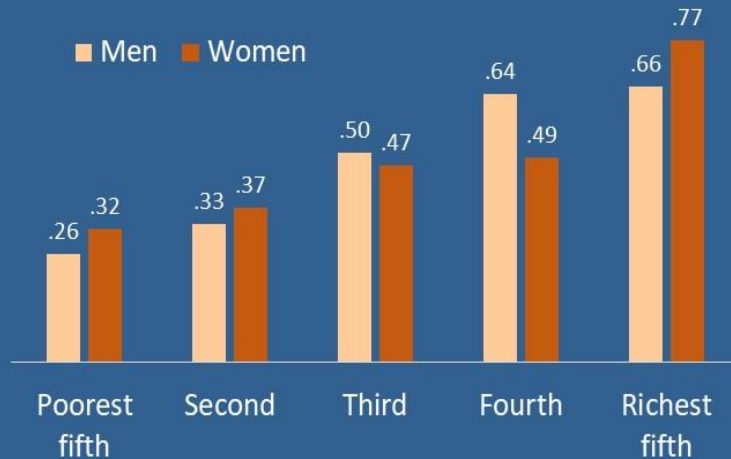


Life Expectancy 2016-2018, England
Source: Public Health England

It's not just about race and ethnicity – it's about poverty

Life expectancy and income

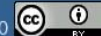
Probability of surviving from
age 50 to 85 by income



Estimates for people born in 1960.

People with higher family
incomes live longer, because of
better living conditions,
healthcare, and health behavior.

CC4.0



U.S. Obesity Rates and Income 2002-2003

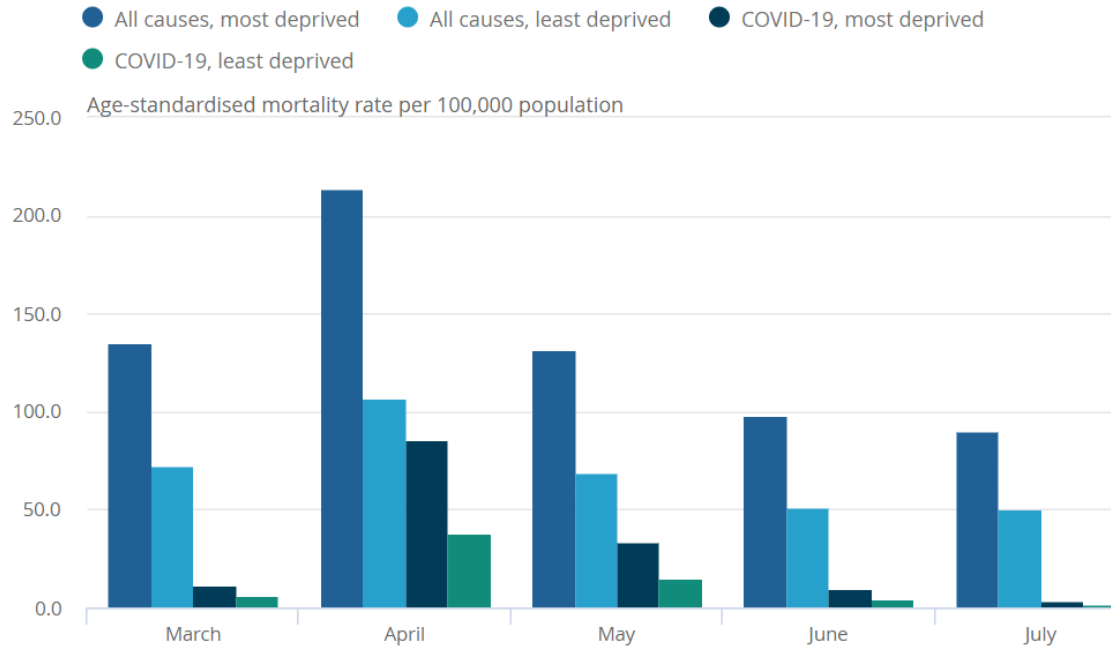
Percent Classified as Obese in Five Income Categories



The Story is the Same Across the UK

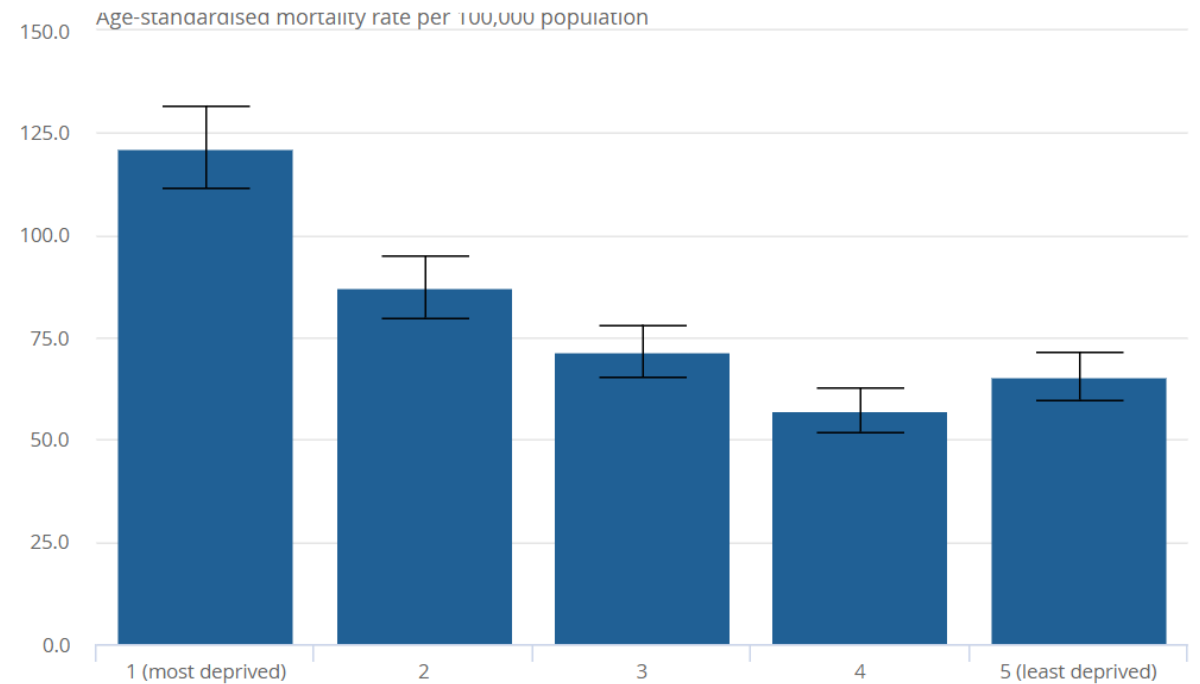
England

Age-standardised mortality rates, all deaths and deaths involving the coronavirus (COVID-19), Index of Multiple Deprivation, England, deaths occurring between 1 March and 31 July 2020



Wales

Age-standardised mortality rates, all deaths and deaths involving the coronavirus (COVID-19), Index of Multiple Deprivation, Wales, deaths occurring between 1 March and 31 July 2020



Source: Office for National Statistics – Deaths involving COVID-19 by local area and socioeconomic deprivation

...and Scotland

Covid in Scotland: People in deprived areas 2.5 times more likely to die

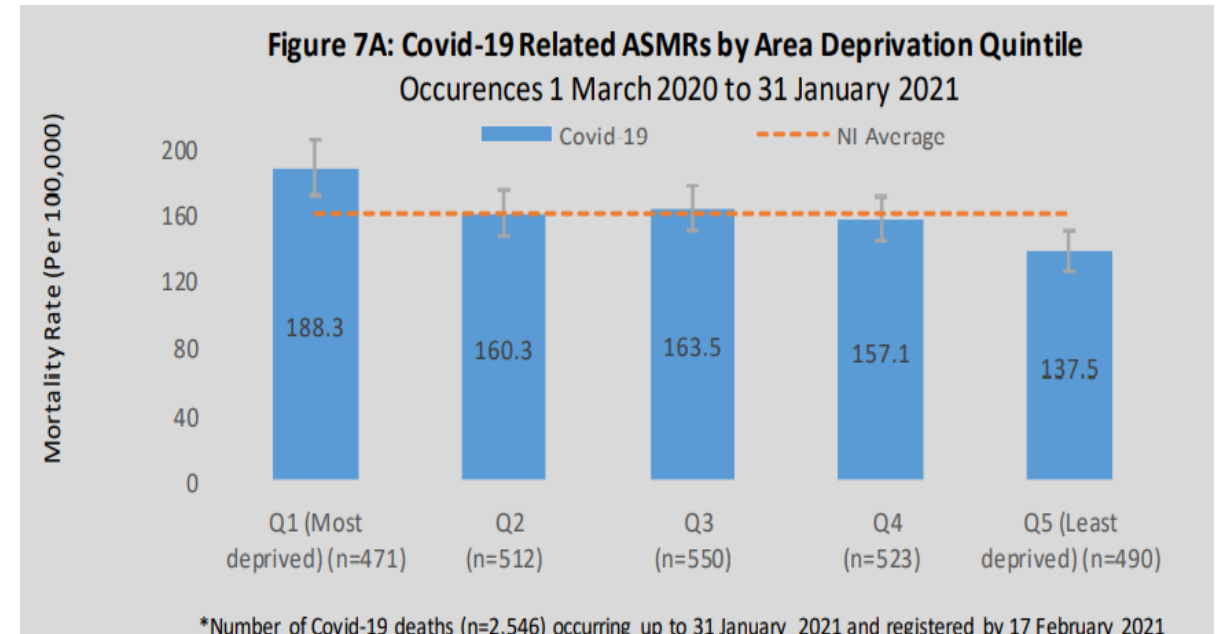


The gap between deaths in the most and least deprived areas has widened during the course of the pandemic

People from the most deprived areas of Scotland are 2.5 times more likely to die with Covid, official figures show.

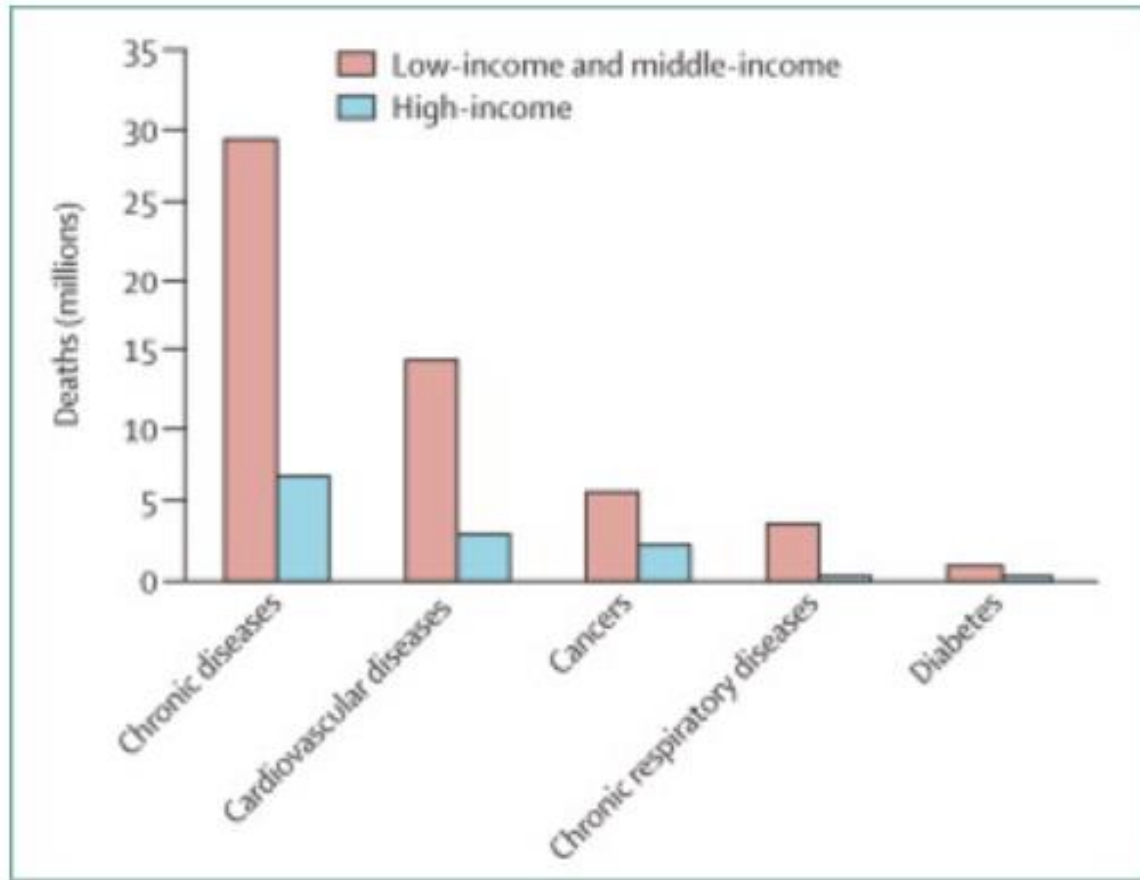
<https://www.bbc.co.uk/news/uk-scotland-59317484>

...and Northern Ireland



https://www.adruk.org/fileadmin/uploads/adruk/Documents/Covid-19_deaths_NI-ASMR_report_25_Feb_2021.pdf

Economics and Chronic Disease



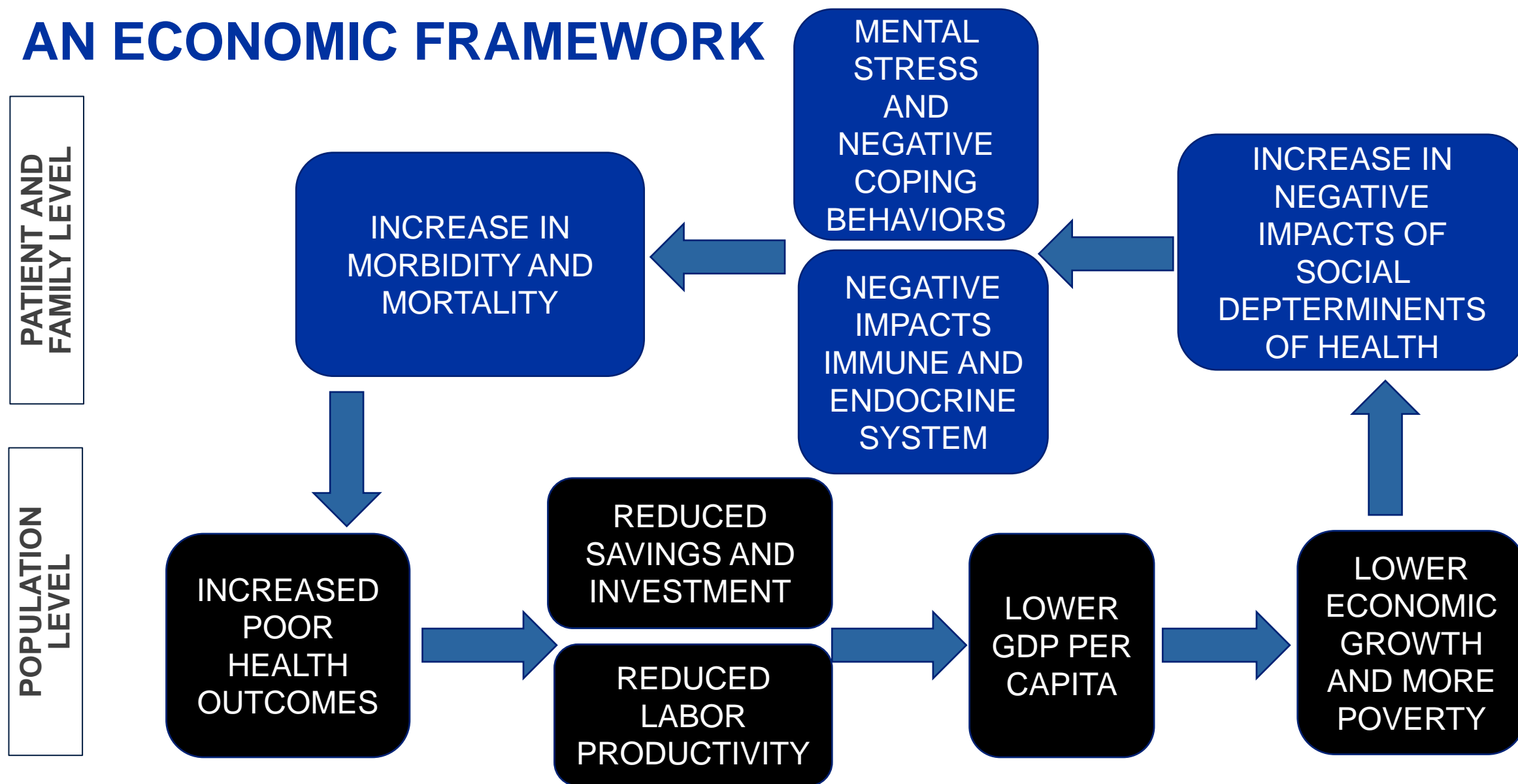
The UK spends approximately 70% of its budget on chronic disease.

People with long-term conditions now account for:

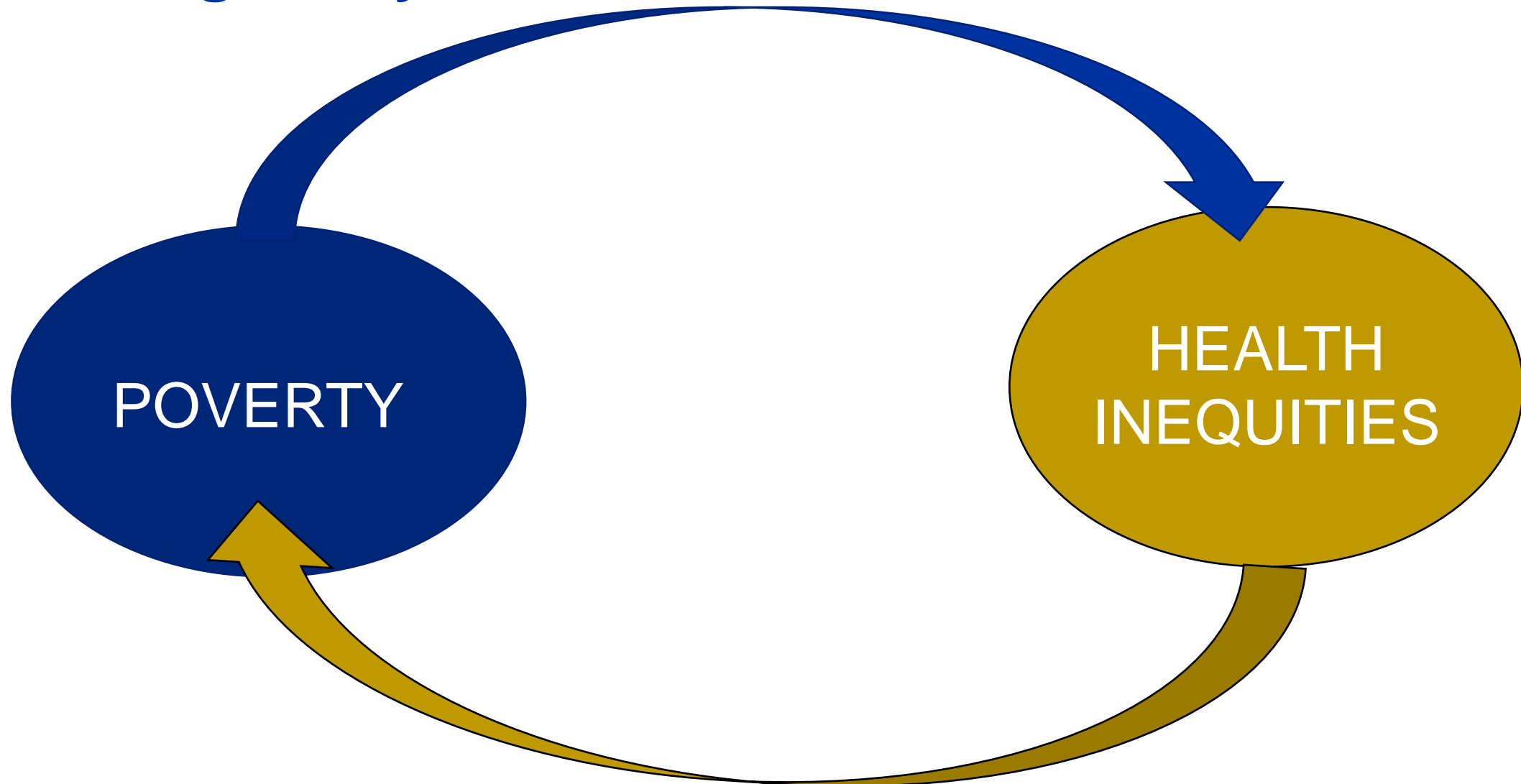
- 50% of all GP appointments
- 64% of all outpatient appointments
- >70% of all inpatient bed days.

Chronic disease consumes over 86% of the U.S. national health expenditures.

AN ECONOMIC FRAMEWORK



Breaking the cycle



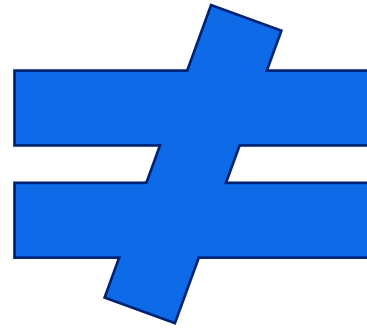


**HEALTH
EQUITY**

**ECONOMIC
VIABILITY**

U.S. RETHINKING OUR APPROACH

**EQUAL
CARE**



**EQUITABLE
CARE**

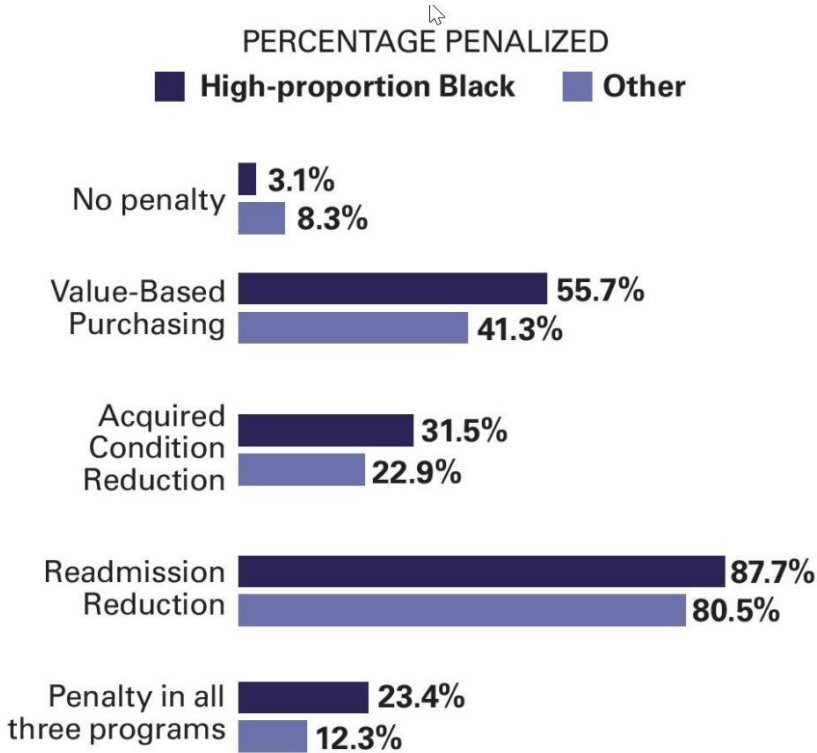
Shifting reimbursement from what we DO to the OUTCOMES ACHIEVED

CHANGE INTERSECTS THE WALLET

“Value-based care programs ...probably propagated inequities unintentionally.”

- Dr. Rishi Wadhera, Beth Israel Deaconess Medical Center

“For every decision being made, we’re asking ourselves, ‘How is this action advancing health equity?’”



Source: “Association Between the Proportion of Black Patients Cared for at Hospitals and Financial Penalties Under Value-Based Payment Programs” JAMA, March 2021



Blue Cross Blue Shield of Massachusetts
Marquee Alternative Quality Contract system to financially reward providers that improve care for people of color.

Three interlocking puzzle pieces are arranged horizontally against a solid red background. The leftmost piece is labeled 'ECONOMIC VIABILITY' in black text. The middle piece is labeled 'HEALTH EQUITY' in black text. The rightmost piece is labeled 'ENVIRONMENTAL SUSTAINABILITY' in red text.

**ECONOMIC
VIABILITY**

**HEALTH
EQUITY**

**ENVIRONMENTAL
SUSTAINABILITY**

Clinicians call on the COP26 and 27 Presidencies to Take Action

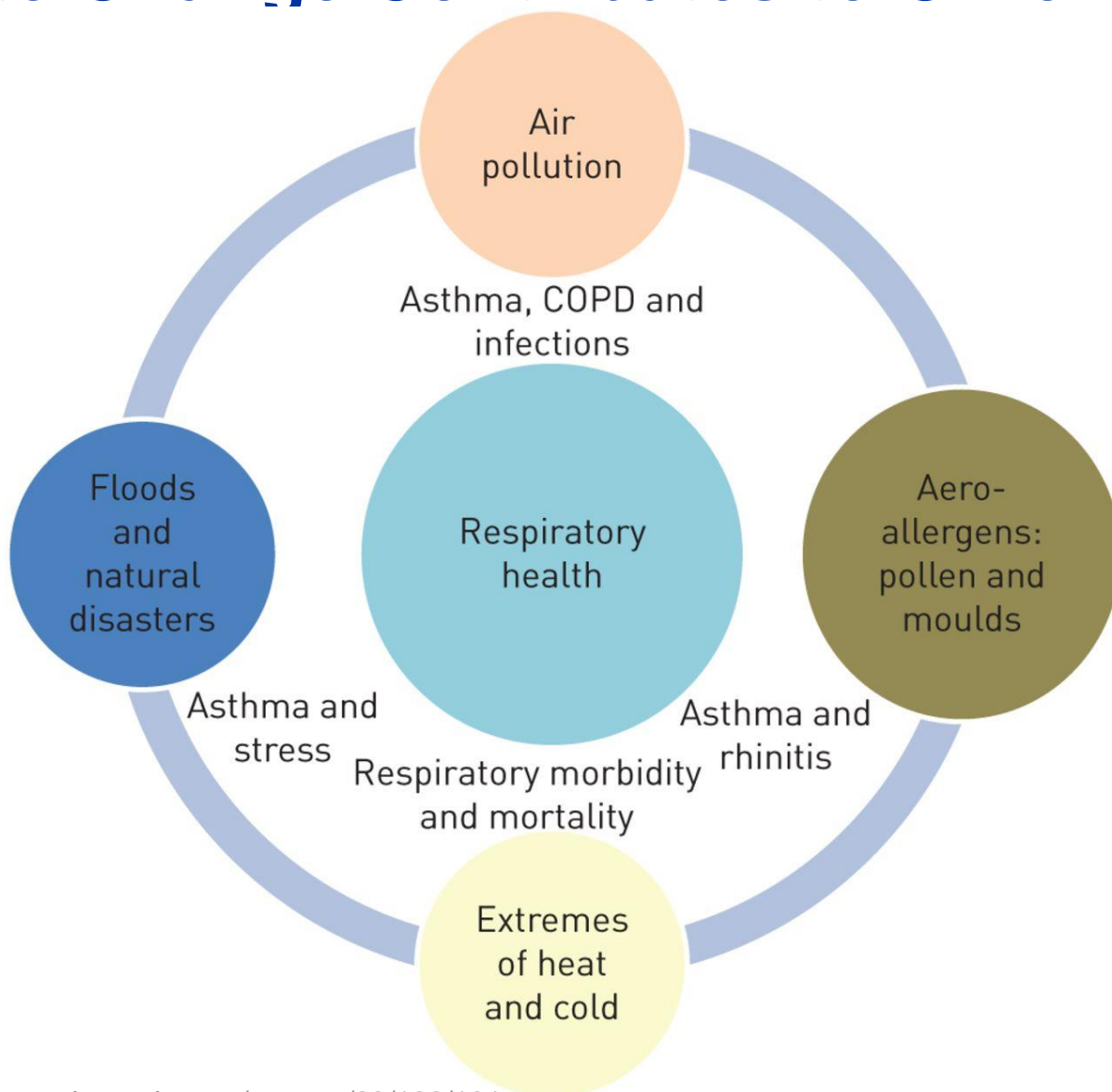


“Wherever we deliver care, in our hospitals, clinics and communities around the world, we are already responding to the health harms caused by climate change.”

- Open Letter from
46 million doctors, nurses and
healthcare workers

[Letter From 46 Million Health Workers Calling for Global Climate Action Delivered to COP26 & COP27 Presidencies - UK Health Alliance](#)

Climate Change Contributes to Chronic Disease



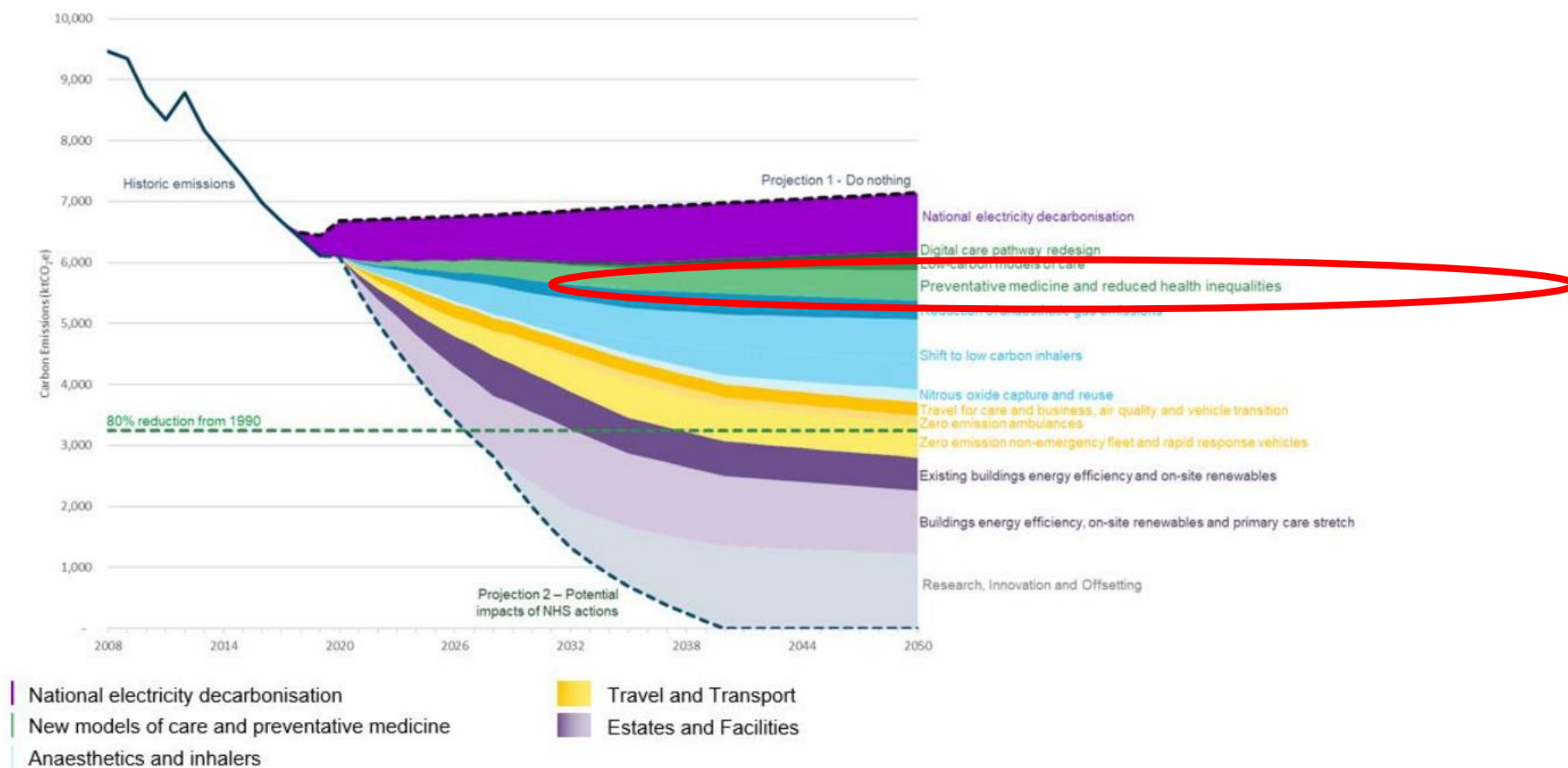
...and Health Inequity

In the UK, Black, Asian and minority ethnic groups are disproportionately affected by high pollution levels.

[delivering-a-net-zero-national-health-service.pdf \(england.nhs.uk\)](https://err.ersjournals.com/content/23/132/161)

Prevention and Health Equity on the Pathway

Figure 4: Pathway to net zero for the NHS Carbon Footprint Scope

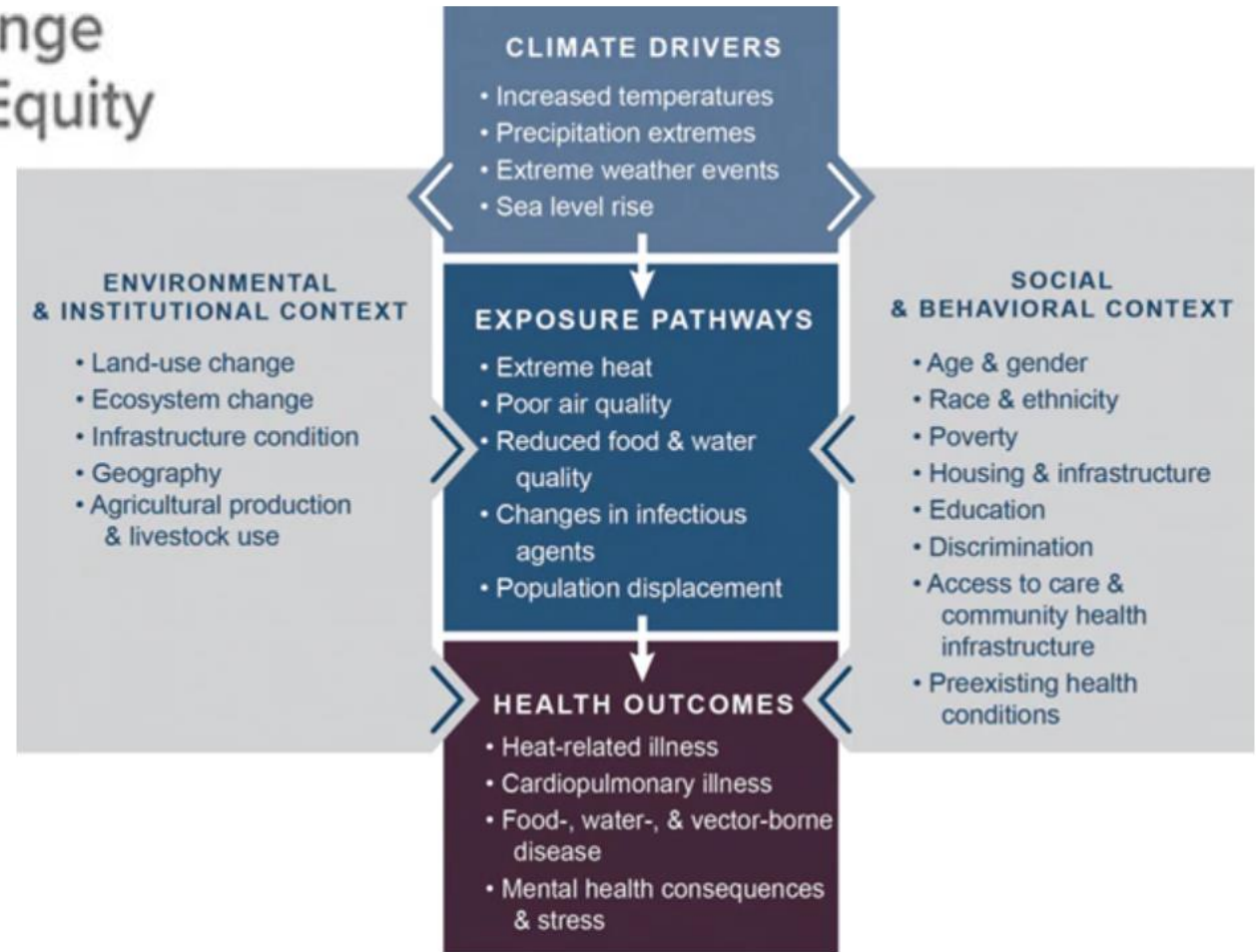


[delivering-a-net-zero-national-health-service.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/wp-content/uploads/2022/07/delivering-a-net-zero-national-health-service.pdf)

Biden Administration Creates New Office



8.5% of the U.S. carbon footprint is attributable to the U.S. health sector, nearly twice that of the health care sector worldwide.



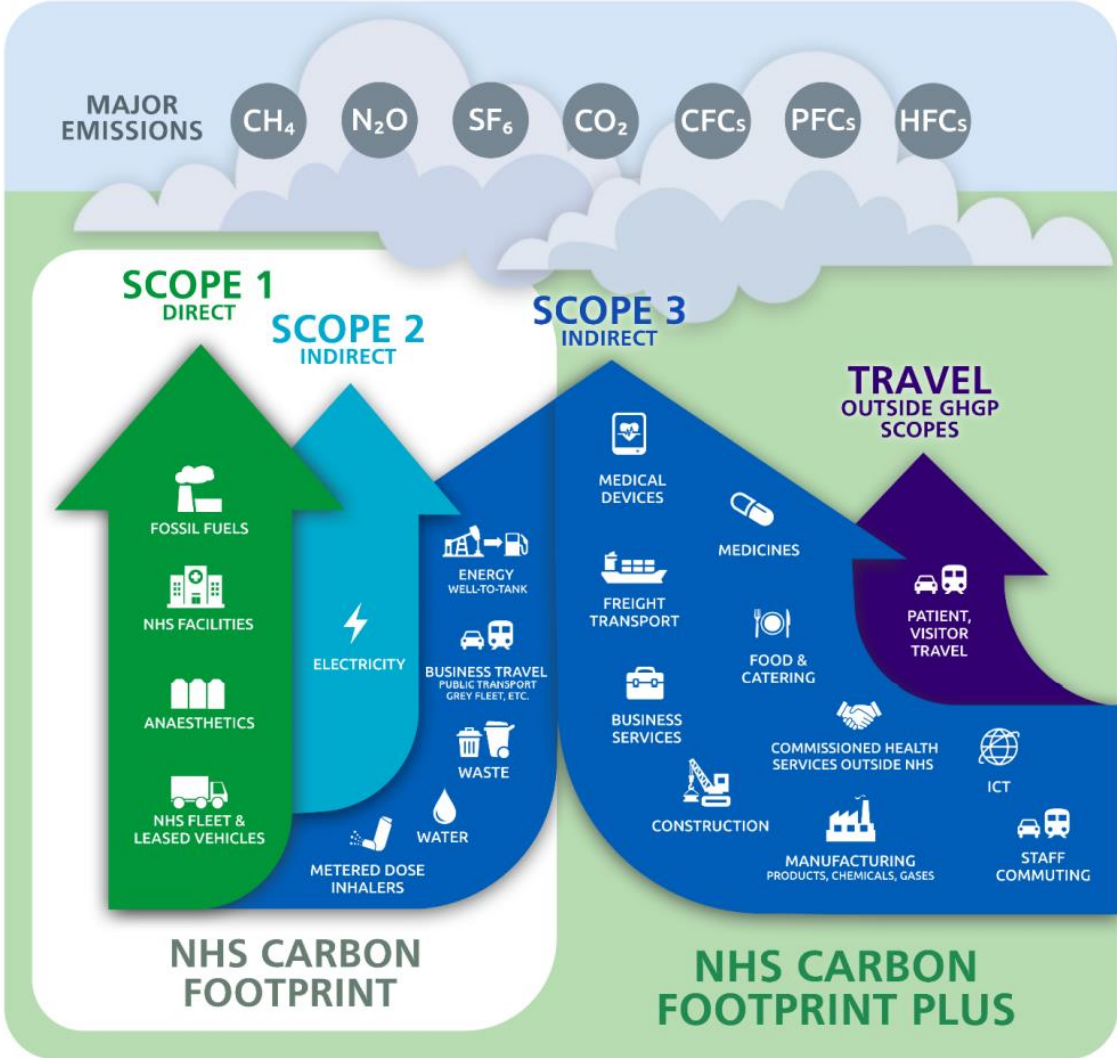
National Academies of Medicine Launch...



Supplier Players Include:

- George Barrett, Co-chair, former CEO, Cardinal Health
- Michelle McMurry-Health, MD, CEO, BioTechnology Innovation Organization (former J&J and US FDA)
 - Chairs the Healthcare Supply Chain and Infrastructure Working Group (1 of 4)
- Greg Smith, Executive Vice President, Global Supply Chain and Operations, Medtronic

The NHS is much further along on Climate Change



- World’s most aggressive decarbonisation commitment
- Identifying and quantification of sources
- Quantifying progress to date

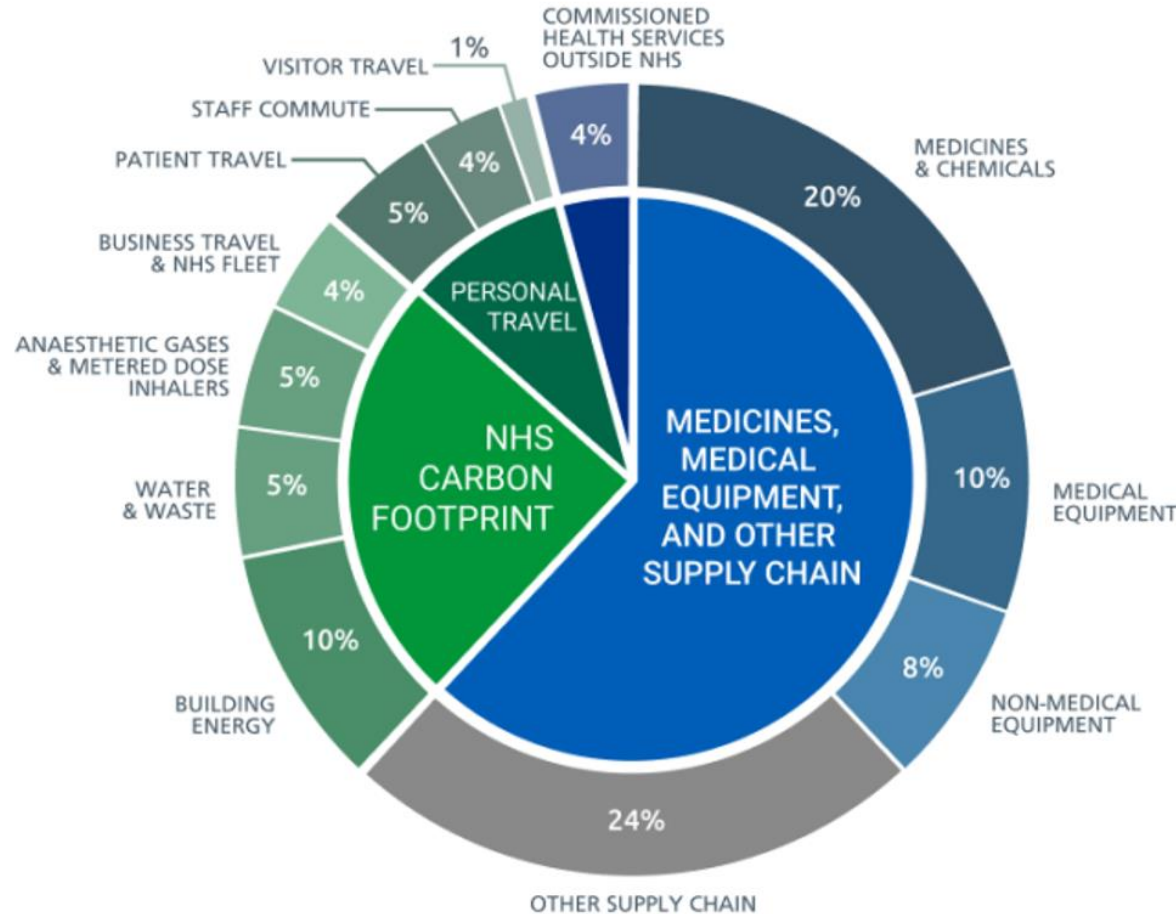
Carbon footprint scope	1990	2010	2015	2019	2020 (est)
Climate Change Act – carbon budget target		25%	31%		37%
NHS Carbon Footprint (MtCO ₂ e)	16.2	8.7	7.4	6.1	6.1
NHS Carbon Footprint as a % reduction on 1990		46%	54%	62%	62%
NHS Carbon Footprint Plus (MtCO ₂ e)	33.8	28.1	27.3	25.0	24.9
NHS Carbon Footprint Plus as a % reduction on 1990		17%	19%	26%	26%

**WHY SHOULD
SUPPLY CHAIN
LEAD THE WAY?**



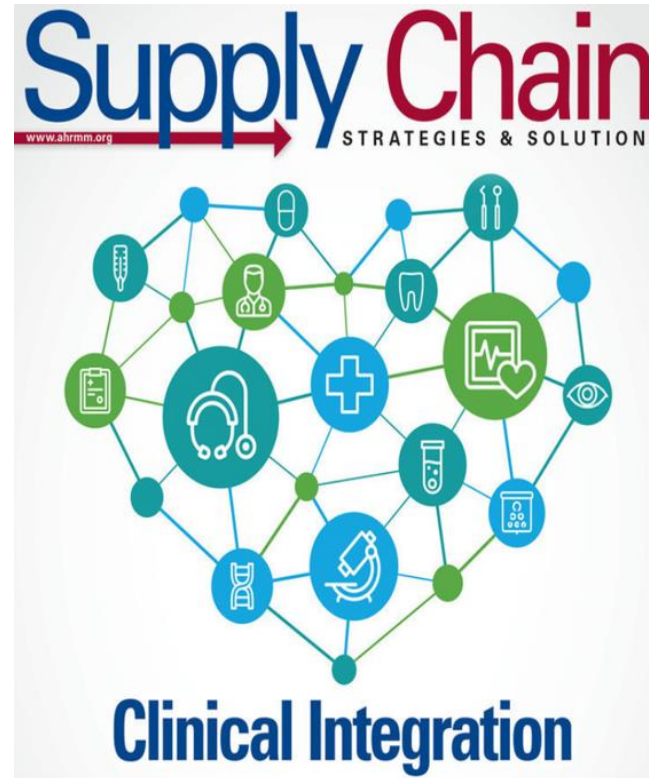
Supply Chain is a Major Contributor (and Solution)

When Supply Chain has a greater footprint, it can have a greater positive impact on the Carbon footprint.



- Estate
- Energy
- Water and Waste
- Construction
- Transport

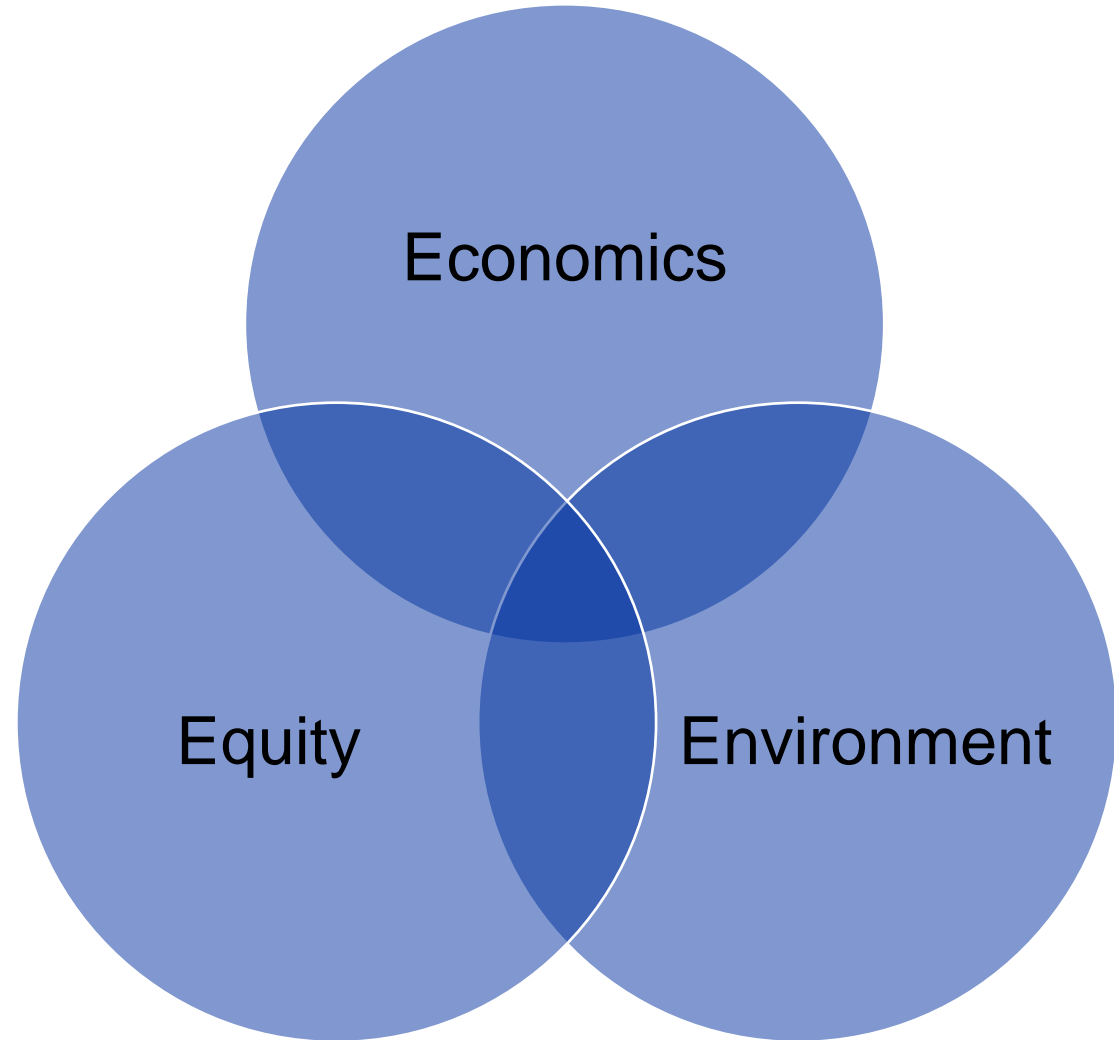
From CQO to CLINICAL INTEGRATION to HEALTHY PATIENTS, HOSPITALS and COMMUNITIES



Evidence Improves Equity, Economics and the Environment

“The most sustainable system is the one that minimizes unnecessary or ineffective use of resources (financial or natural) by delivering the right care, in the right place, at the right time and by preventing care needs from arising at all, where possible.”

Van Hove M, Leng G. A More Sustainable NHS.
BMJ. 2019. 366:l14930.
doi: 10.1136/bmj.l14930



Supply Chain Data Standards Support Evidence Generation

*By promoting incorporation of **UDIs** into electronic health information, a vast quantity of untapped **real-world data** from clinical experience with devices housed in EHRs and other electronic information sources may become available for use in **understanding the benefit-risk profiles of medical devices.***

Jeffrey Shuren, MD, JD
Director, Centers for Devices and Radiological Health, U.S.
FDA



How will I get there?

By train? By plane? By car?

Do I have a ticket?

A car that can make the trip?

How will I pay for it?

Do I have a passport?

Do I have a place to stay when I get there?

Is it safe?

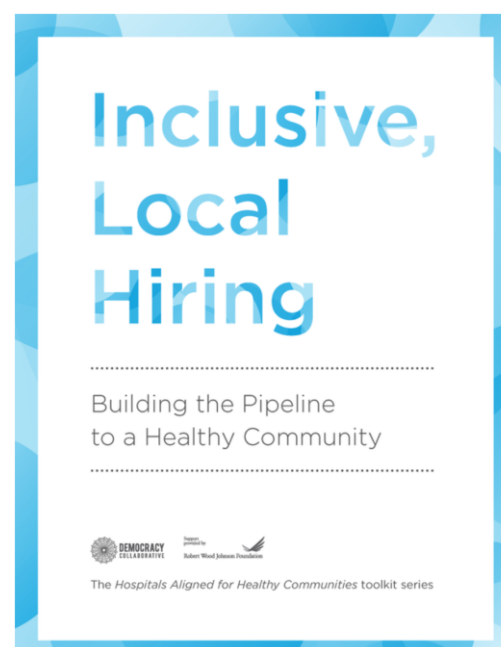
Can I speak the language?

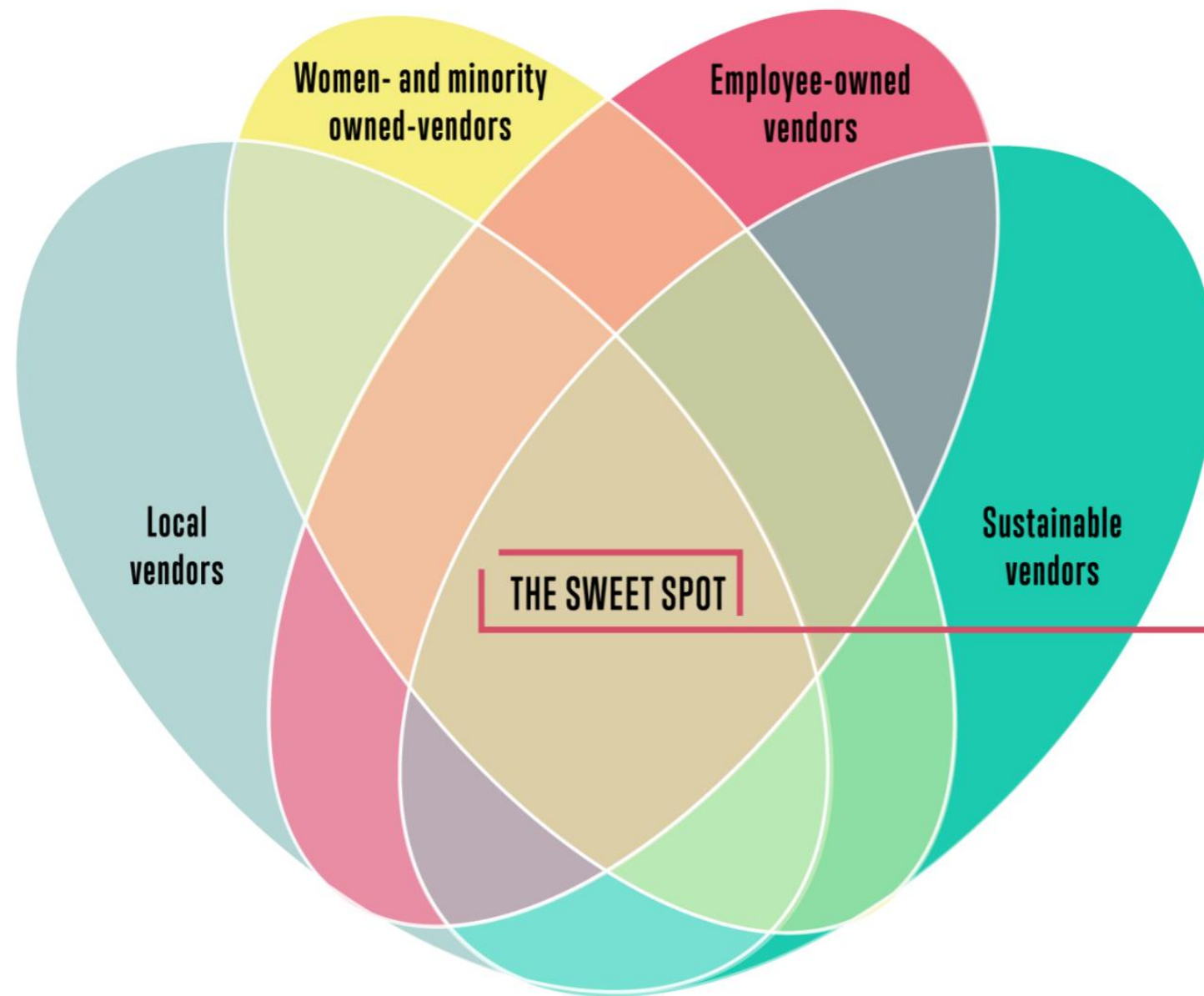
Do I have what I need to take with me?

Travel Plans

Supply Chain Can Help!

Private Organizations and Initiatives





The PROCUREMENT **SWEET** SPOT

How hospitals, health systems and other anchor institutions can improve community health and build community wealth through their everyday building and buying

Procurement from an **employee-owned** firm, at which the majority of employees are **diverse**. The company is based **locally**, operates **sustainably** and/or produces a sustainable good or service.

Healthcare Anchor Network



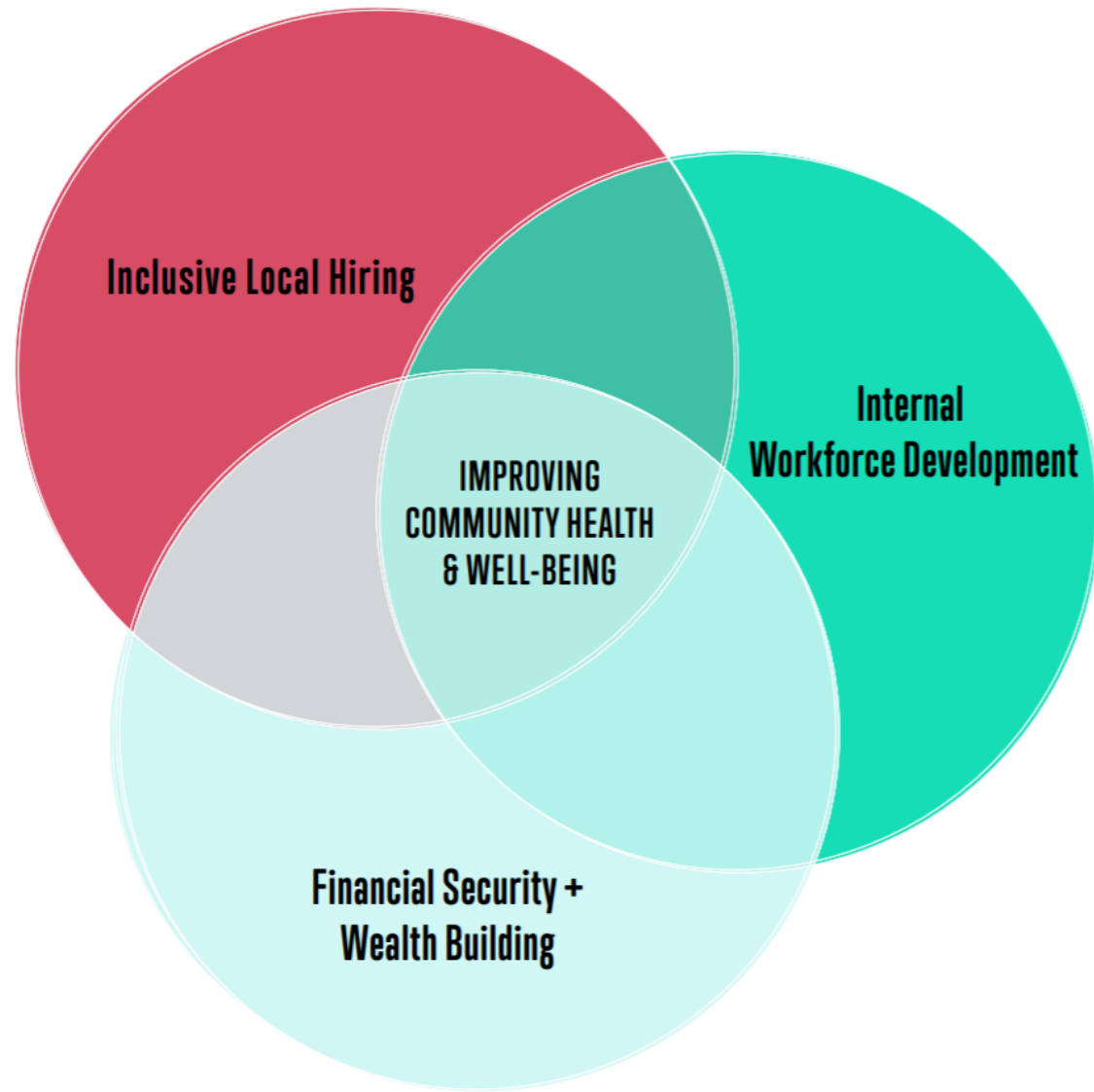
Healthcare Anchor Network Members



A photograph of a city skyline, likely Chicago, with a train on tracks in the foreground. The skyline features several prominent skyscrapers, including the Willis Tower. The train tracks run through the center of the image, with a train visible in the distance. The foreground shows some lower-rise buildings and trees.

WEST SIDE UNITED: Building Blocks
to Better Health

IMPROVING HEALTH THROUGH HIRING



PARTNERING WITH SCHOOLS



Geisinger Fresh Food Farmacy



Improve health

With proper education, support and food we're changing lives by helping our patients to better manage their diabetes and celebrate their successes

[See patient stories](#)

Food as medicine

With healthy food and continuous diabetes education, we're providing patients with a special kind of medicine that simply can't come from a pill bottle

[How the program works](#)

Supply chain's role



Sourcing (with clinicians)



Ensure Food Safety and Compliance



Order Management



Distribution



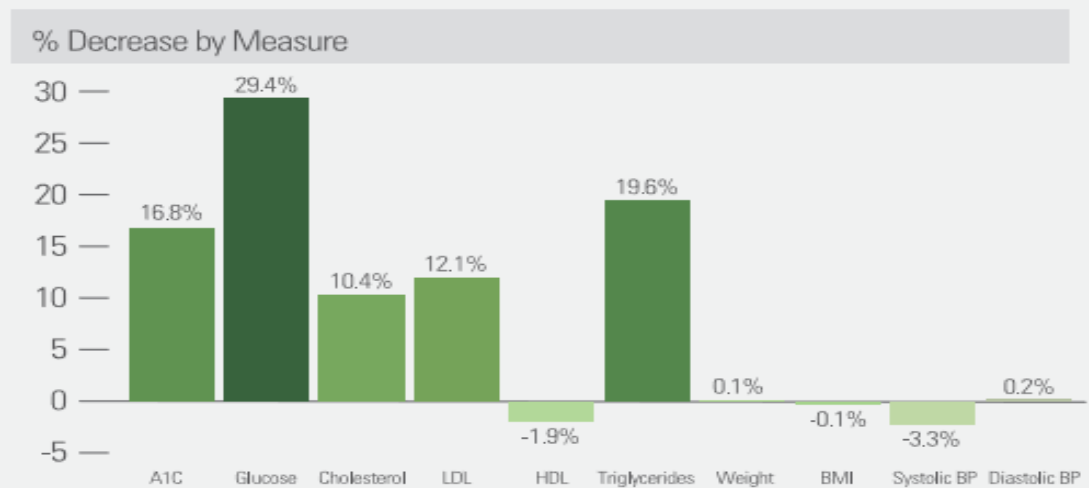
Demand Planning/Inventory Management



Patient Logistics

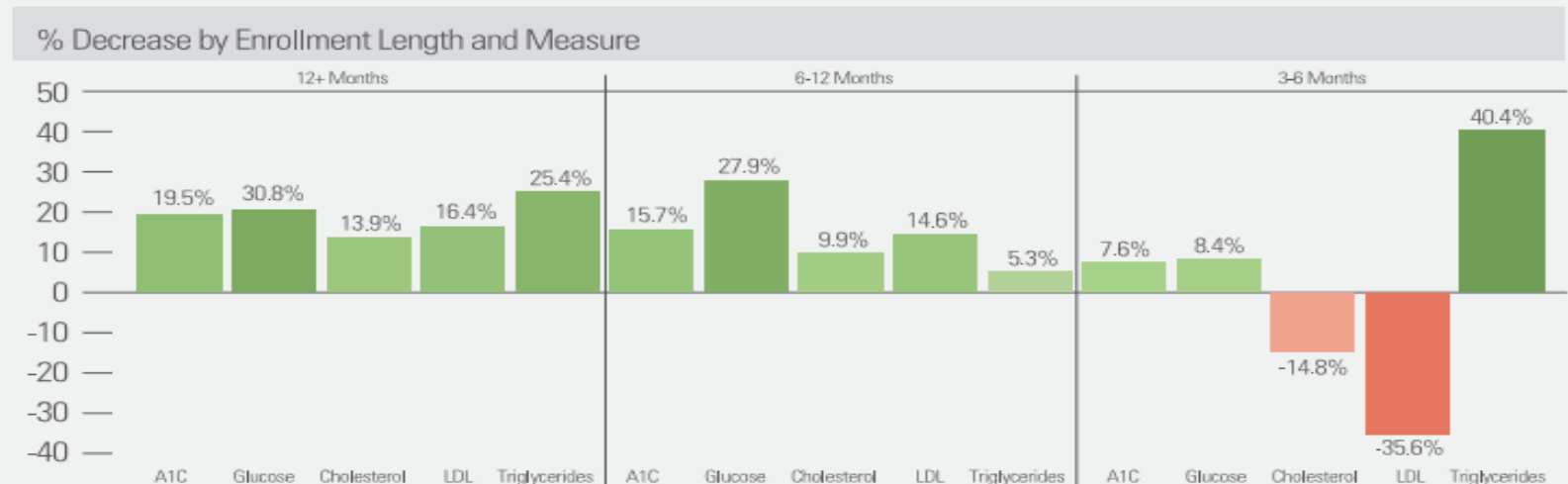
Preliminary Results

- Early results
- Improved labs
- Happier patients
- 25% less ED visits
- 50% fewer admissions compared to cohorts



Notable Decreases

A1C	16.8%
Glucose	29.4%
Cholesterol	10.4%
LDL	12.1%
HDL	1.9%
Triglycerides	19.6%



Bigger Vision for Supply Chain

- I want to pilot this but I don't want to get into food procurement....I'm a physician; I have no training with contracts – we have to get into contracts, pricing, delivery schedules...
- Supply chain will probably look different in 5-10 years where food procurement for a percentage of our population will be part of what you are doing... There will be new business and opportunities and obstacles in supply chain... It is definitely going to change for anybody who is in supply chain.



Andrea Feinberg, MD,
Former head, Geisinger
Health Fresh Food
Farmacy

Need Help? Look in the Basement



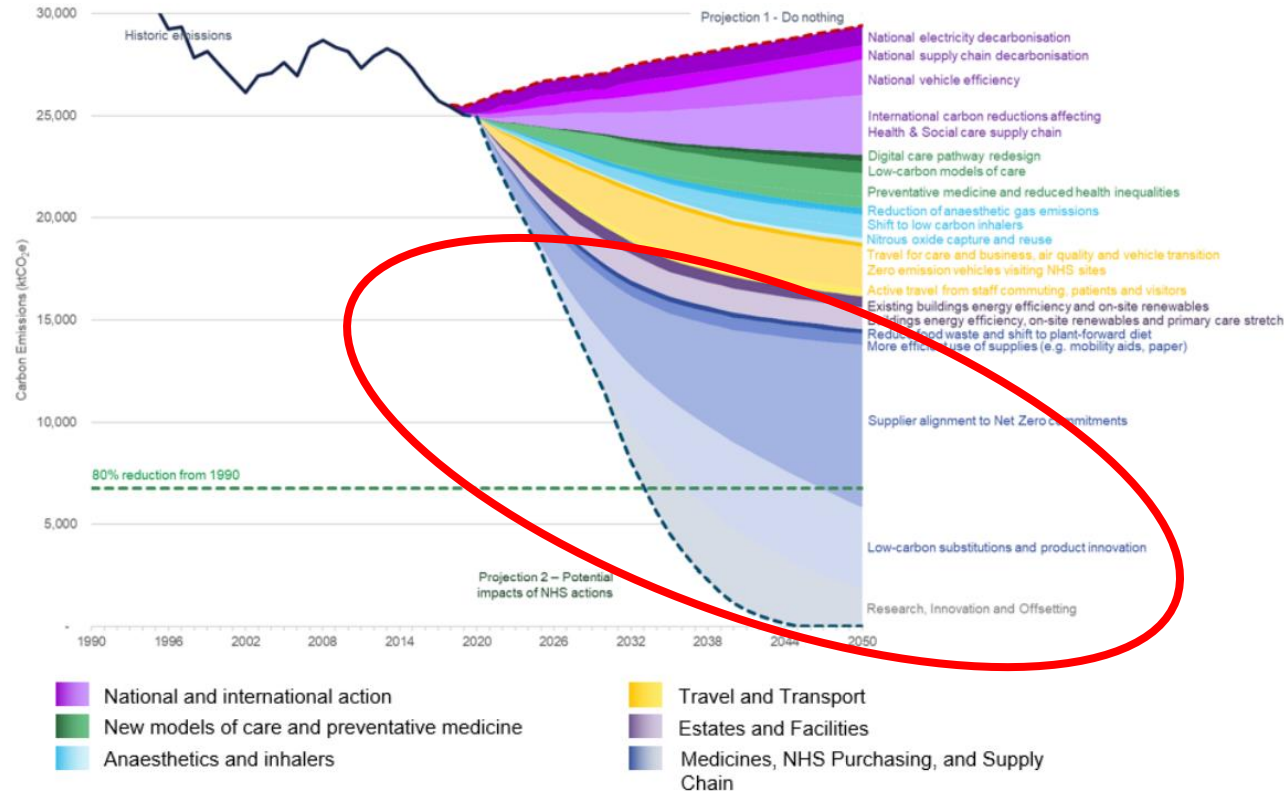
Leverage Supply Chain's Tool Box

- Sourcing
- Contracting
- Inventory Management
- Logistics
- Data Analytics
- Working with multiple parties



Don't Forget Suppliers are on the Path, too

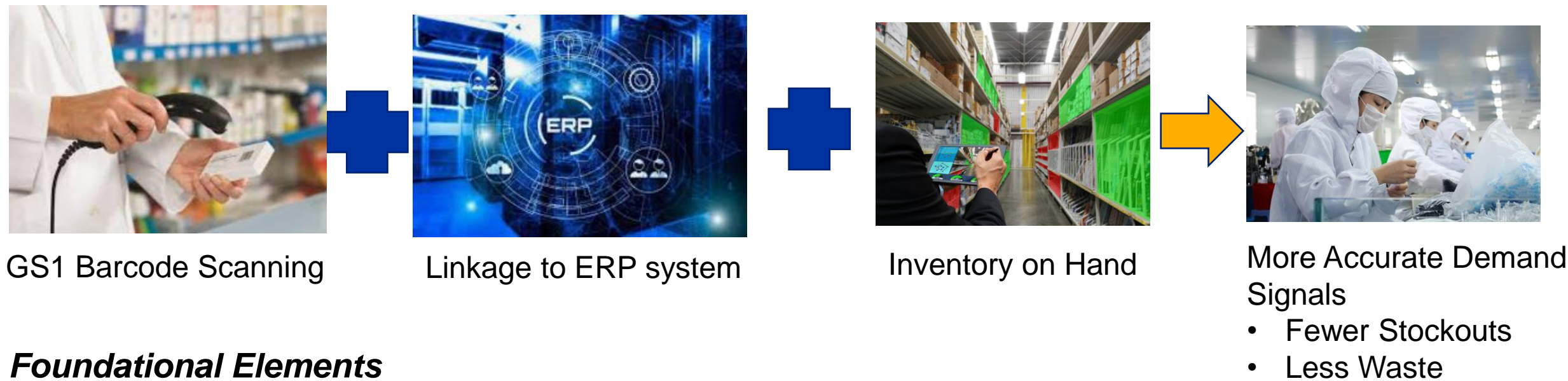
Figure 5: Pathway to net zero for the NHS Carbon Footprint Plus Scope



[delivering-a-net-zero-national-health-service.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/wp-content/uploads/2022/07/delivering-a-net-zero-national-health-service.pdf)

Is Healthcare Finally Ready for Collaborative Demand Planning?

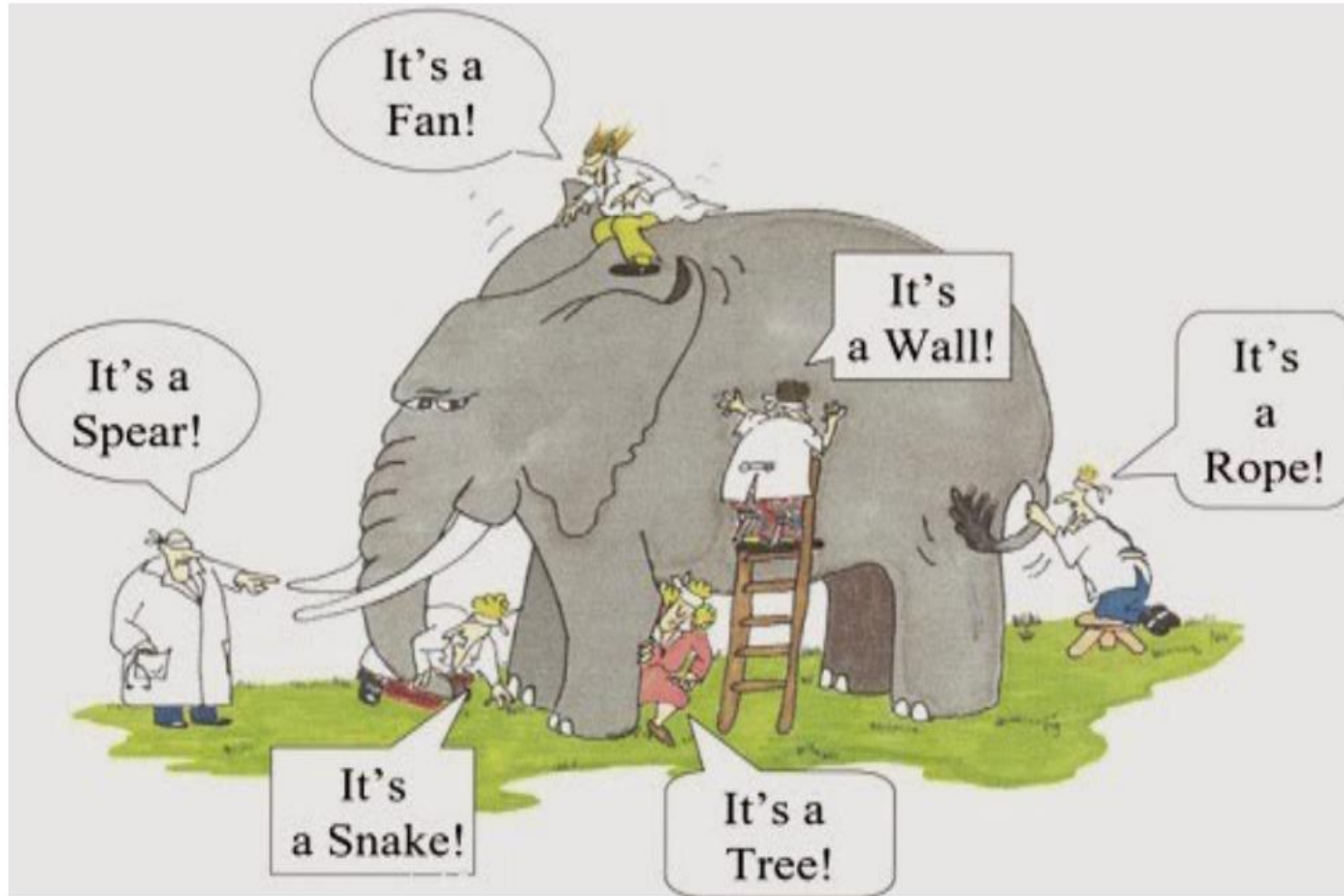
Lessons from the Retail World



Foundational Elements



Who is Looking at the Whole Elephant?





Thank you.

Karen Conway

kconway@ghx.com

Twitter: [@conwaycomments](https://twitter.com/conwaycomments)

LinkedIn: www.linkedin.com/in/karencarlsonconway

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Reform, Recovery, Sustainability and Partnership

Sir David Nicholson KCB CBE Chair Designate-Sandwell
and West Birmingham NHS Trust, current Chair of
Worcestershire Acute Hospitals NHS Trust



Sir David Nicholson KCB CBE

Presentation to HCSA Annual Conference 2021



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World Innovation Summit for Health
من مبادرات مؤسسة قطر
An Initiative of Qatar Foundation



GILEAD



Worcestershire
Acute Hospitals
NHS Trust



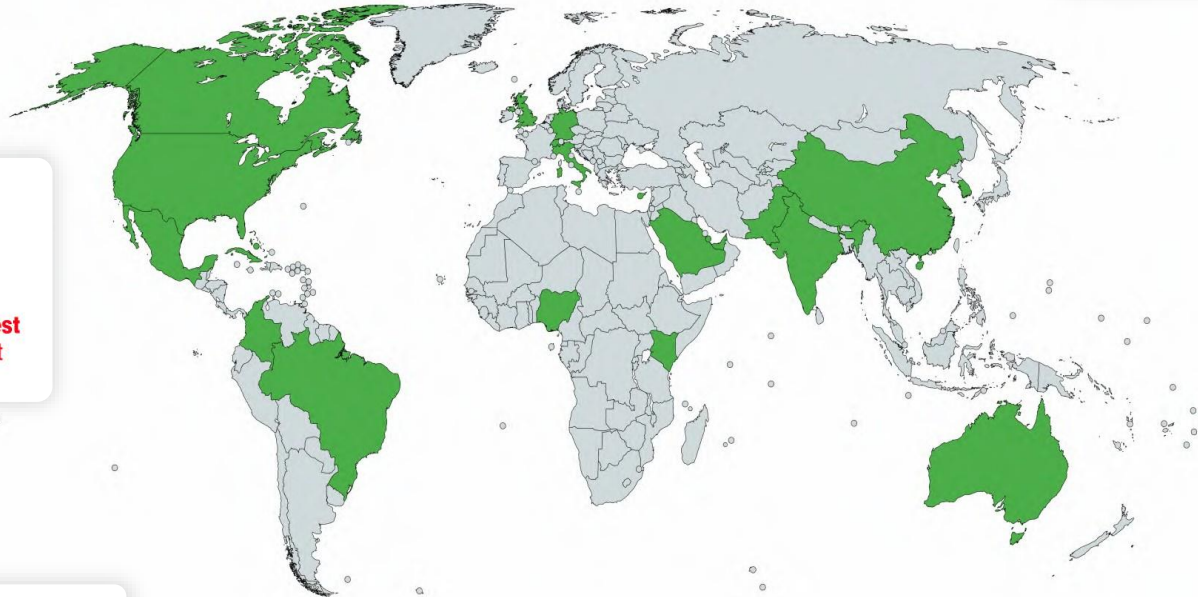
evercare
HOSPITAL LAHORE



Nottingham Forest
Community Trust



LIFECYCLE



THE WORLD BANK



World Health
Organization



REPUBLIC OF CYPRUS
MINISTRY OF HEALTH



CYPRUS
MEDICAL ASSOCIATION



Sandwell and West
Birmingham Hospitals
NHS Trust



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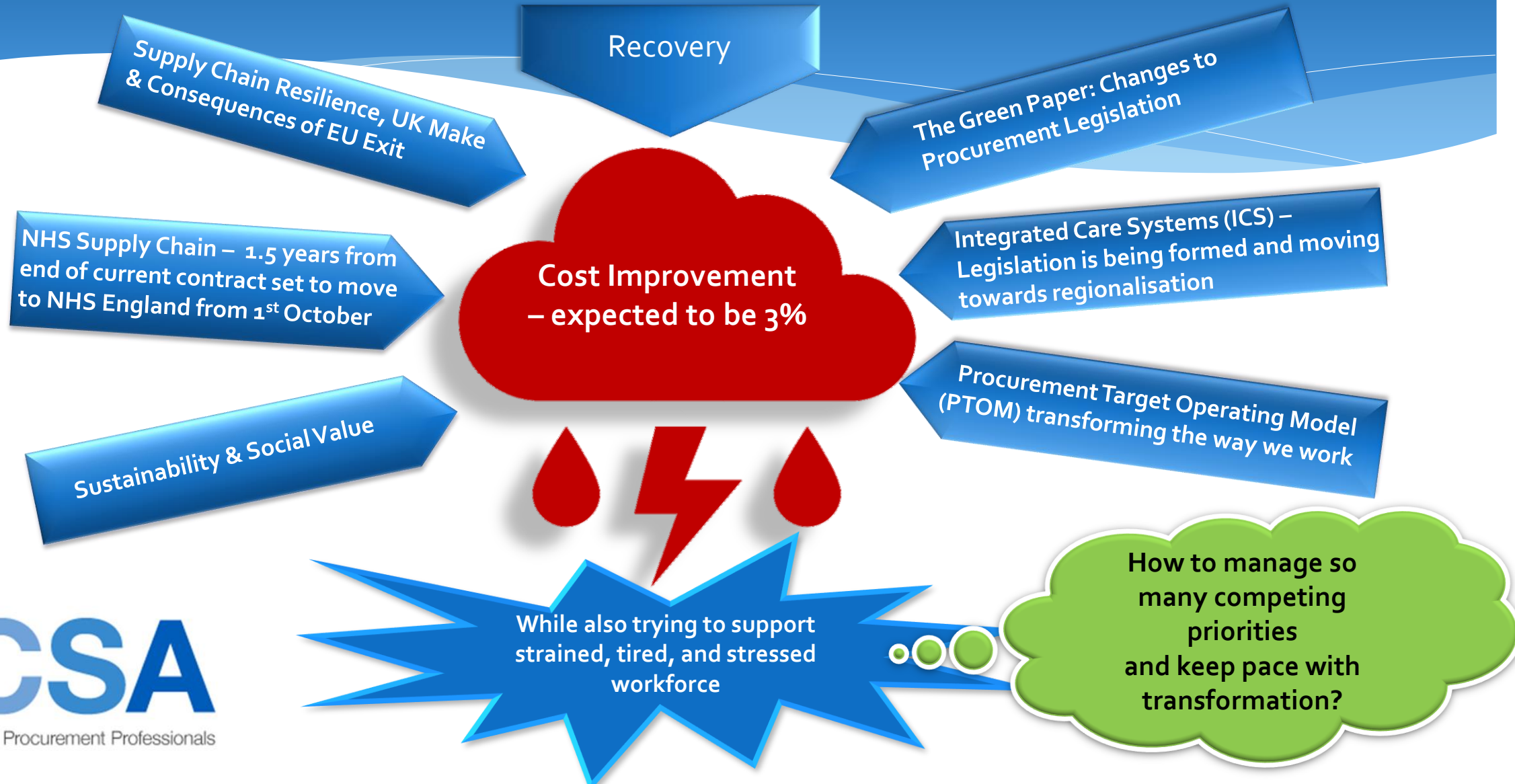


Supporting NHS Procurement Professionals

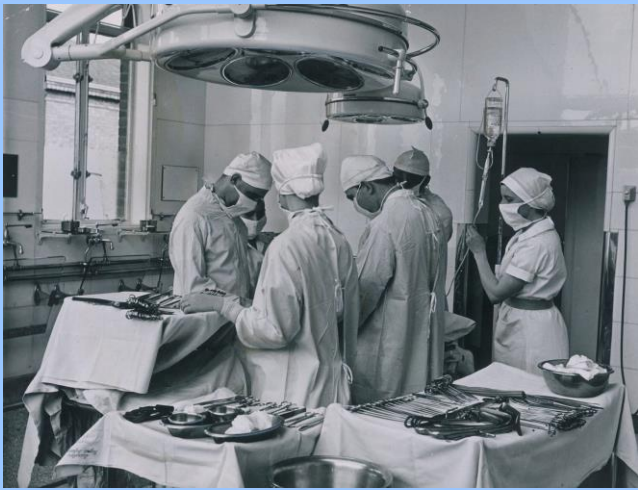
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NHS Procurement: The here and now



HCSA: Past, present and future



HCSA

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HCSA Membership Competition

* Most new

Amazon voucher and will receive 1 x

Conference in Harrogate plus VIP

1st – Claire Parker (Northern Care Alliance)

2nd – Jacqui Yuen (Calderdale & Huddersfield)

3rd – Joseph Fowkes (Nottingham University Hospitals)

will

nice in

receive

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Supporting NHS Procurement Professionals

Dates for diary



- * **Summer Conference:**
Thursday 16th June 2022
- * **House of Lords celebration:**
TBC Mid June 2022
Venue: House of Lords London
- * **Procurement Development Programme:**
Monday 3rd October 2022 to 7th October 2022
- * **Winter Conference 2022:**
Wednesday 23rd November 2022 to 24th November 2022
Venue: Manchester Central



nhsprocurement.org.uk



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