

Key Messages Regional Advisory Forum – September 2023

Regional Focus - South

- National savings £19.4m, the South delivered £4m in guarter one
- Pipeline was £14.5m, current successful conversion rate is around 40% which will be an uplift on last year
- Members were thanked for their work with NHS Supply Chain at very difficult times
- Members were asked to support in working in a more ICS focused way most opportunities are still being
 delivered at trust level, the move needs to be made to system level to unlock further savings. Brief discussion
 was had on reducing the duplicate time and effort which goes into evaluation of opportunities at multiple sites.
 Also, incentivisation of ICSs and regional working needs to be considered
- Each ICS provided an overview of the current status, what is working, where challenges and blockers are etc.
- Darren Williams has a meeting with the NHSE finance team each month therefore he can take key messages into that forum

Key points

- Update on NHS Supply Chain Target Operating Model, key points included:
 - a. The consolidation of colleagues from the Category Towers has now completed, however there is a process of embedding and bringing the entity together
 - b. There has been a communication to all Heads of Procurement regarding the impact for the Customer Team and therefore the impact on NHS Trusts, more detailed discussions on this will continue through individual relationships
 - c. There is now a focus on Hospital Care and Out of Hospital Care
 - d. Overview of patient pathway team and their focus on improving patient care and driving end to end value
 - e. Overview of the ambition of each team was provided
- Update from NHSE, key points included:
 - a. Discussion has been had with David Melbourne on how NHSE can support the Regional Advisory Forums. Suggestion has been made that there will be a written update into the regional meetings and representation in person at the National Board
 - b. CCF is producing a Commercial Strategy on behalf of NHSE, some initial feedback has been sought on this along with support from NHS Supply Chain colleagues. Request was made for this to be shared with the four Regional Chairs
 - c. There is a piece of work on framework accreditation, to ensure there are the right number of frameworks to reduce the level of competition and improve the opportunity for leveraging scale
- Heidi Barnard joined the meeting to provide an overview of the work on labour standards and upstream supply chain management. Key points included:
 - a. How Evergreen is being used and the time frame around compliance, the requirement will be for the Evergreen Assessment to be used going forwards, not Carbon, Waste and Water. All National Framework suppliers will have had to complete the Evergreen assessment by February 2024
 - b. Review of risk for Modern Slavery and why it is an issue. There has always been a requirement through the tendering process to consider modern slavery
 - c. Supply chain mapping work off the back of the Boardman review and the tools which have been used
 - d. NHS Supply Chain has drafted a report, which is going through ministerial sign off on modern slavery
 - e. NHSE is drafting guidance and legislation on how the NHS should manage modern slavery
 - f. Revised PPNs and the impact
 - g. NHS Supply Chain reserves the right to conduct audits, and require 3rd party audits on high risk tenders
 - h. Discussion was had on how to manage incidents of Modern Slavery. NHS Supply Chain is aligned to forthcoming policy
 - i. For a nominal fee to CIPS teams can receive accreditation for Corporate Ethics, suggestion was made that this should be encouraged across the NHS
 - Melanie Hall joined the meeting to provide an update on the supply chain drive and pilot. Key points included:
 - a. In the process of concluding the outcomes, therefore these can't be shared
 - b. There are two core pieces of work, the supply chain drive and the supply chain pilot
 - c. There was also a third piece of work specific to ambulance trusts. There are some areas when they have leading expertise, such as transport, maintenance. Leasing. They have also implemented IM. These learnings could be shared with the wider ICS





- d. 15 of the original 32 ICSs completed the programme to workshop three and therefore will receive the full report
- e. The conclusions and recommendations are being considered, further feedback will be shared
- f. There is a need for a central forum for sharing supply chain opportunities and challenges
- g. The pilot with North Central London focused on IM, with eight core processes
- h. Work is being done to align to the IM work being led by Mark Vallentine at NHS Supply Chain
- i. Concern was raised over the lack of resource in the ICS to support programmes such as this and all the other national and regional programmes with tight resources and financial constraints. The importance of swift return on investment was raised

Actions for the NHS

Proactively share examples of where things have worked to enable sharing of best practice