

## Key Messages Regional Customer Boards – March 2022

### Regional Focus – South

- Darren Williams provided an overview of the performance in the region, key points included:
  - a. Recognition that clinicians' time has been very pressured
  - b. Largest savings delivery of the four regions, recognition of the good work earlier in the year. A lot of the savings are attributed to product switching
  - c. There is a strong correlation between trusts who operate transparently with NHS Supply Chain, sharing PO data means that more savings opportunities tend to be identified
  - d. CRMs should have initiated contact with each trust to go through the Price Management pack
  - e. Current focus for the CRM team is; perusing inflight savings opportunities and getting them complete by year end, completing 22/23 workplans, price mitigation activities, supporting on supplier disruption, highlighting sustainability opportunities, working to understand the impact of formation of ICSs and how NHS Supply Chain can support (particularly around savings delivery)
- Request was made for more detailed discussion at sub regional level our total cost to serve
- Concern was raised over the delays surrounding engagement with CTSPs, members were asked to continue to ensure CRMs are aware so they can escalate appropriately.
- Request was made to have a line of sight of what the CTSPs have coming through in their strategies to unlock further value. Request was made if it would be possible to get a full year view of upcoming contracts and what levers are going to be used to drive cost out
- Many finance colleagues have a fixed view on how CIP savings can be delivered. However, given the economy procurement needs to look for additional levers. Suggestion was made that the groups look at how this can be messaged out into the finance community to manage expectations and support the longer term planning to unlock new opportunities
- Feedback was given that there appeared to be a lack of understanding of the Lead Reference Trust process in the region, therefore indicating the programme is not as effective as it should be, a small group from the region should be formed to support this
- With regards to Value Based Procurement suggestion was made that links with the HFMA Costing for Value institute should be made
- Mark Gronow provided an update from NHSE/I, key points included:
  - a. Request for members for members to feedback on what they would like as an update from NHSE/I
  - b. New CCO at NHSE/I Jacqui Rock
  - c. There is a summary of the ICS tracker against the 34 steps on the PTOM Hub, at the moment it needs to be anonymised at ICS level, the Chair request for this to be shared
  - d. Overview of the procurement standards process and the requirements for self-assessment, aspiration to transfer organisational standards to ICS standards, however this is delayed as has the ICS/ICB timeline
  - e. ICS procurement leads have been invited to out themselves through the Assessment Development Centre, response to this has been positive
  - f. Overview of the procurement leads for each ICS in the region was given

### Key points

- Update on NHS Supply Chain's Target Operating Model was given, key points included:
  - a. The process looks to address the future needs of trusts and ICSs
  - b. Several themes have been consistent to date
  - c. Greater visibility and greater input into key strategies
  - d. Simplification of the model as it is today and improved management of the supplier market
  - e. Better connection with patient pathway and driving value
  - f. Resilience and connected supply chains
  - g. Several pain points which are being worked into the transformation plan
  - h. Market engagement sessions with potential CTSP providers have taken place, these will conclude towards the end of March, ITT will then be issued
  - i. A new ten-year vision is being worked on for the organisation, further input will be sought on this



- j. Chris Homes attended the National Procurement Forum to ask for support on the logistic tender
- k. Further input sought on NHS Supply Chain's Clinical Value Proposition
- Brian Mangan joined the meeting to provide an update on the Value Based Procurement Programme, key points included:
  - a. Working with NHSE/I on system level guidance for efficiency savings, stakeholder group being established with first meeting on 9 March 2022
  - b. Engagement with organisations such as NICE, developing a common language of value
  - c. Toolkit has been developed with the CTSPs, each one now has a VBP lead
- Members of the Resilience Working group, provided an update on its progress, key points included:
  - a. Reassurance was given that demand management and stock issues are being discussed
  - b. Lots of work has been done on ICNs with improvement being made, an Early Inform has now been introduced and well received
  - c. Issues around framework communications is causing problems
  - d. Request being raised are being picked up and acted on which is delivering progress
  - e. Stock availability and issues will continue to arise along with cost pressures
  - f. A separate communication meeting happened, with decision that a comms pack would be developed to share out with all trusts
  - g. Discussion is ongoing around service levels, Chris Holmes and his team are working with UCLH and Oxford on this, further update will be provided on this when there are
- Jason Shirtcliffe joined the meeting to provide an update on the programme, key points included:
  - a. Lead Reference Trusts should be the heart of any strategy, there is option to extend across a wider group of trusts
  - b. Website has been developed; trusts can register their interest in a particular category. A pipeline can be built up
  - c. Escalation processes have now been introduced to ensure two-way engagement. Level of conversation can be assessed at Category Council session
- Phil Nettleton joined the meeting to provide a further update to the group, following the request at the last meeting. Key points included:
  - a. Progress has been made since the last update, there are 27 pain point areas which have now been ranked with input from trust colleagues
  - b. Nine areas out of the 27 are being focused on where the most impact will be made, a governance plan is then being implemented
  - c. There will be a twelve week intensive period to drive the nine projects with full programme support to make continual improvements

### **Request of NHS provider organisations**

- a. Request was made for any ICS who would be willing to take part in a Value Based Procurement pilot to contact Brian Mangan Directly [brian.mangan@supplychain.nhs.uk](mailto:brian.mangan@supplychain.nhs.uk)
- b. Review and sign Lead Reference Trust Charter
- c. Trusts were urged to return roll cages; the cost of replacement is rising which creates additional cost in the system and may impact service going forwards if there are not enough cages in the system
- d. All Trusts are encouraged to ensure they have suitable representation on the regular customer webinars to ensure they are receiving all relevant communications

