SPECIAL REPORT

PROCUREMENT

THE NURSES LOVED IT

Frontline clinicians can be enthused about procurement – and are being urged to get involved in efforts to improve it at a local and national level. Daloni Carlisle reports

Mandie Sunderland, chief nurse for Nottingham University Hospitals Trust, has a rare gift: a knack for engaging nurses in procurement.

It is a knack she has learned through being part of NHS Supply Chain's national Customer Board, where she has put her mind and energy into addressing the inescapable fact that it is clinicians who use supplies and therefore clinicians who must be involved in procurement decisions to deliver savings.

"Being involved with the Customer Board has been a real eye opener," she says. "If we can make savings somewhere other than the front line, I will do it. If we can buy products more efficiently and use standards so that we can buy in bulk and reduce waste, then these are all savings that we can make without looking to staff."

Her eureka moment on procurement came during a cost improvement programme at a previous employer. "I asked the director of finance if savings made other than through the nursing budget would count towards the programme. He said yes. That's when I realised that procurement could contribute and suddenly all my senior nurses were on a mission. We made £800,000 of nurse led procurement savings in a year."

She keeps a number close at hand: every £30,000 saved is a band 5 nurse's job.

Winning over nurses involves more than just citing savings numbers, though: much of her work to convince them focuses on safety. Take an everyday item such as a syringe driver. Standardising across several providers not only drives down cost through bulk buying the kit and disposables, but also means the equipment will be familiar to all nurses, and therefore safer.

It also improves quality of care. "We had

an incident with a patient who was at the end of their life and was admitted to hospital," says Ms Sunderland. "The patient wanted to go home to die and a quick transfer was needed. It was difficult because the community used a different syringe driver to the hospital.

"As a result of that incident, we got together with the community nursing trust and standardised the syringe drivers, the disposables and the training. The nurses totally loved it."

That experience and her work with the NHS Supply Chain Customer Board led to joint work with the Royal College of Nursing called Small Changes, Big Differences. It is all about why and, just as importantly, how to involve nurses in procurement.

Stakeholder voices

Crucial to getting frontline NHS clinicians and managers involved in procurement is the Customer Board, set up "to engage with our senior stakeholder community". The board was refocused last autumn to bring the organisation closer to its customers and to help it deliver £150m of cash releasing savings with the NHS by March next year. As of the end of this August it had achieved just over £100m.

The board involves clinicians, finance and procurement directors, chief executives, the NHS Business Services Authority and the Department of Health – and is chaired by Sir Ian Carruthers. It links to Lord Carter's work on productivity and efficiency in the NHS.

Beneath the national board are local boards and a clinical reference board, which also involve procurement, finance and clinical leads. These are the link between the national board and individual trusts, providing a vital mechanism for feedback



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NHS

NHS Supply Chain





between NHS Supply Chain and the front line, and an opportunity to share learning and benchmark progress against savings targets.

Sir Ian has had a long involvement in improving NHS procurement and, like Ms Sunderland, identifies two drivers. The first is to deliver good value for money for tax payers by maximising the buying power of the NHS pound. "But more important is the direct impact that procurement has on the safety and quality of patient care," he says.

One focus of NHS Supply Chain's work has been the NHS Core List which commits the NHS to larger volumes of a smaller range of products selected for quality and price with the help of clinicians. The commitment allows NHS Supply Chain to leverage good prices. Another is Compare and Save, which encourages trusts to look at what they are paying for items such as wound care and to compare them with lower cost alternatives without compromising on quality.

Suzanne Tracey is director of finance and business development for Royal Devon and Exeter Foundation Trust and chairs NHS Supply Chain's Southern region customer board. "Our role is to deliver the national programme and to make sure we are really communicating with trusts so that everyone knows what's available," she says. "We are really pushing organisations to engage so that they can reap the benefits."

She regards herself as a "critical friend" to NHS Supply Chain – someone who was convinced that the national contract could and should be improved and has now been called on to act.

"What's been really good about getting involved is that I can see the enthusiasm and commitment from NHS Supply Chain to get things right," she says. "They are really making sure that they are focusing on the right places. The national and local customer boards give them access to procurement leads, directors of nursing and directors of finance that they did not have before."

More clinicians and finance directors are getting involved with procurement colleagues to deliver savings.

NHS Supply Chain is closer than ever to its customers. Now trust boards must get behind efforts to improve procurement, says Sir Ian.

He explains: "Quite often procurement is not really addressed in many [trust] boards in the way it should be. Can we collectively, and in the interests of the whole system, really start working on this and start putting procurement high on the agenda? That is going to be the key to getting the greatest benefit and the greatest savings."

Procurement plays a big part in patient safety and the quality of patient care, and it has never been more critical to deliver cash releasing savings for the NHS without compromising patient outcomes. I am proud to work with my team at NHS Supply Chain and the members of Sir Ian Carruthers' Customer Board, who all share the important vision of maximising the buying power of the NHS and most importantly, are all committed to the challenge to drive efficient procurement.

The NHS Supply Chain Customer Board was set up with the vision to engage with NHS trusts, to listen to their pressures and challenges and respond through optimising the use of the national contract's scale and expertise to consistently drive value for money.

In April 2013, we were set a target of delivering £150m cash releasing savings by March 2016 by the Department of Health and, as part of our two year contract extension, an additional £15m savings target was agreed. This means that NHS Supply Chain and the NHS Business Services Authority aim to realise £300m of cash releasing savings for the NHS by October 2018. To deliver these targets, we will continue to work with suppliers and customers on key savings programmes, such as the NHS Core List and Compare and Save, to ensure that we are supporting the NHS with its requirement to deliver further cash releasing savings.

We are aligning our business to work for the NHS to listen and to establish long term savings solutions for quality products. Our next wave of savings will be driven by the category strategies, which we will work on in consultation with our customers and in conjunction with both procurement and clinical leaders. By the end of August, NHS Supply Chain had already achieved savings in excess of £100m against the £150m March 2016 target through working with the NHS Business Services Authority, suppliers and customers. By continuing to collaborate, we believe the £300m is an achievable target by October 2018.

Our work with the Customer Board, the Clinical Reference Board and local boards enables us to share upcoming savings programmes with customers and to ensure that they are fit for purpose through consultation.

By shaping strategies with the Customer Board and its local boards we can engage directly with NHS trusts, clinicians and managers about how we can work better together to deliver savings efficiently and safely. I would encourage your trust to engage with the Customer Board and local boards by emailing customer.board@supplychain.nhs.co.uk.

Nick Gerrard is chief executive of NHS Supply Chain. www.supplychain.nhs.uk