Championing innovation in efficiency

2012 AWARDS
2012 was the year the truth about the NHS efficiency drive became crystal clear to even the most casual observer. This was no dash to a 2015 finish line. The state of public finances made it clear that the need for unprecedented efficiency gains would last the decade.

The quality, innovation, productivity and prevention programme was transferred to the NHS Commissioning Board along with its steward Jim Easton — who told HSJ that QIPP would be “a dominant medium” in healthcare leadership beyond the next election and public spending cycle.

In the same week HSJ revealed the first regional analysis of the QIPP programme, which showed that primary care trusts are aiming to deliver savings worth a total of £13bn by 2014-15.

Of course, not all these regional programmes are worthy of journeying under the QIPP brand. Some are simply crudely disguised cuts. It is also sadly the case that not all the best intentioned programmes will succeed in delivering improved efficiency.

But the second HSJ Efficiency Awards, in association with HealthTrust Europe, gives considerable reason to hope for the best. These pages provide the best evidence yet that some NHS organisations and their partners are reconfiguring services and systems in a way that delivers more for less.

The efficiency revolution – and these awards – are also demonstrating how departments and functions too often given insufficient focus have significant contributions to make. Those working in areas such as procurement and estates management are now increasingly getting the boardroom attention they deserve. The same factors also mean that some of the NHS’s most sacred cows are having to justify their place in the herd. Advances in medicines management and clinical support services are challenging practices that have remained untouched for decades.

HSJ thanks our Efficiency Awards sponsors and judges and we congratulate all our winners and shortlisted entrants. Read on to learn how the NHS is remaking itself.
EFFICIENCY IN CLINICAL SUPPORT SERVICES

WINNER

BOLTON FOUNDATION TRUST
Streamlining laboratory medicine services for the Bolton health economy
In August 2011, Bolton Foundation Trust’s laboratory medicine department was challenged by the commissioner to reduce costs to GPs by 20 per cent and improve quality by the same amount. Meanwhile the trust required it to deliver 5 per cent recurrent savings while improving quality and productivity. By August 2012, a £900,000 saving had been generated using Bolton’s own methodology based on lean principles, through efficiency savings, new ways of working with a reshaped workforce, business ventures that generated income and the development of new services. The work has improved quality and protected jobs.
Judges’ comments An example of pathology department staff taking a wider leadership role in driving and facilitating clinical change. Good evidence of comprehensive staff engagement, with clear metrics identified and achieved.

HIGHLY COMMENDED

EAST KENT HOSPITALS UNIVERSITY FOUNDATION TRUST
Improving access and efficiency in diagnostics through innovative service redesign
By introducing extended contracted working hours, the trust now offers routine scanning seven days a week across its three main hospital sites. This has improved quality and efficiency in diagnostics through improvements including better patient access, reduced waiting times and shorter length of stay.

FINALISTS

ALDER HEY CHILDREN’S FOUNDATION TRUST
Preventative and rapid response community respiratory physiotherapy
Children with complex health needs and associated respiratory conditions faced poor management of symptoms in the community. Alder Hey staff worked with health, education and community colleagues to develop individual chest management plans, leading to a 55 per cent drop in hospital admissions.

BARKING, HAVERING AND REDBRIDGE UNIVERSITY HOSPITALS TRUST AND SYNERGY HEALTH
Compliance, safety and efficiency – achieving win, win, win
Facing PFI obligations and an ageing laundry, the trust needed cost efficiencies in linen services and instrument decontamination. A managed service contract led to a quality service and space previously used by the laundry repurposed for clinical use.

COUNTESS OF CHESTER HOSPITAL FOUNDATION TRUST AND Wirral University Teaching Hospital Foundation Trust
A joint microbiology laboratory service across Chester and Wirral
By creating MicroPath – a merged microbiology service – the two organisations have released annual savings of £800,000. The laboratory opened in April 2012 in a commercial building jointly owned by the two host trusts, on time and within budget.

IMPERIAL COLLEGE HEALTHCARE TRUST
Using exercise testing to improve diagnosis and target high cost drug therapies
Metabolic exercise testing has been introduced to the diagnostic and follow-up procedure for pulmonary hypertension. In a proportion of patients, the test replaces the need for more complex, invasive and expensive diagnostic tools. The result is cost savings and more precise diagnosis and treatment.

THE ROYAL ORTHOPAEDIC HOSPITAL FOUNDATION TRUST
Bone infection unit
At any one time, eight to 15 patients were in hospital for intravenous antibiotic treatment of infected joints. These patients now get oral therapy, enabling them to be at home. Patient experience has been improved and bed days saved.

SOUTH TEES HOSPITALS FOUNDATION TRUST
Demonstrating efficiency in acute clinical support service
Seven-day working was introduced in physiotherapy in April 2006 and has helped improve patients’ recovery from major heart and lung surgery. Patient satisfaction has increased and length of stay fallen, with no increase in readmissions or mortality.
The challenge
The Royal Liverpool University Hospital identified a need for their pharmacy staff to spend more time with patients and further develop services at ward level. The Trust also identified a need to improve patient waiting times for outpatient prescriptions to increase satisfaction with the outpatient service.

The solution
Lloyds Healthcare Services designed and delivered a purpose-built pharmacy in the retail concourse at the Royal Liverpool University Hospital dedicated to the provision of the Outpatient Dispensing Service. The aim was to provide a fast and friendly Outpatient Dispensing Service utilising the Trust’s treatment and advice protocols. The Lloyds Healthcare Services’ outpatient team are working in partnership with the hospital clinical pharmacy specialists to ensure maximum patient care.

The results
Lloydspharmacy are now delivering a full outpatient service and looking with the Trust at how we can improve partnership working to deliver real progressive benefits for the patients and the Trusts.
- Average waiting time for outpatients is currently nine minutes and is monitored continually.
- Hospital clinical pharmacy staff are being released to spend more clinical time with patients and develop other areas of patient services.
- Inpatient and discharge prescription waiting times have also reduced by the phased removal of the competing outpatient dispensing work stream.

The client perspective
“The NHS needs to support and seek out these opportunities for innovation which offer real, tangible benefits to patients. Working with Lloydspharmacy has also helped the Trust make real efficiency gains. It’s taken pressure off my pharmacy staff and allowed me to expand a near-patient clinical technician service which has created savings of up to £1,900 per ward per month. That’s something worth thinking about.”

Alison Ewing, Clinical Director of Pharmacy
Royal Liverpool and Broadgreen University Hospitals Trust

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CROYDON PRIMARY CARE TRUST
Patient navigation services

The organisation is using Band 3 “navigator” staff to address wasteful outpatient appointments. Tactics the staff use include: diverting patients to diagnostics prior to appointments; diverting them to further diagnostics in the event of inconclusive test results; discharging patients to their GPs or community services following normal test results; offering telephone outpatient appointments; bringing patients immediately to a “virtual clinic” if cancer is identified and bringing their appointments forward; and only offering an appointment following a procedure after results are reviewed in a virtual clinic and an appointment is deemed necessary. The service meant 564 appointments across seven specialties were saved in May 2012 alone.

Judges’ comments A simple, well implemented idea that has a clear focus on patient outcomes and patient experience. Clear benefit has not only been demonstrated on the immediate patient pathway – the potential for longer term gain and patient benefit has been demonstrated too.

SOUTH LONDON AND MAUDSLEY FOUNDATION TRUST
Commissioning the use of the Buddi GPS Tracker

“Buddi” – an ankle bracelet with a GPS tracker – enables patients to take more leave from their medium secure unit, so improving safety and enhancing recovery. A two-year research project has found a reduction in leave-related incidents and significant savings in staff time.

ROYAL FREE LONDON FOUNDATION TRUST AND ROYAL BOROUGH OF KENSINGTON AND CHELSEA
A whole person, whole system approach to integration

The trust’s clinical effectiveness and quality standards manager worked with the council’s business information manager to develop a simple, practical way of benchmarking and analysing local use of whole system resources. The data is then used as the basis for discussion and planning.
EFFICIENCY IN INFORMATION TECHNOLOGY

WINNER

Deirdre Anderson, Chi Kong Cham and Isabel Devoy

NHS FORTH VALLEY
Using electronic ward maps to manage patient flow

Thanks to a bespoke bed management system, manually maintained whiteboard maps have been replaced with electronic ward maps on acute and community wards. By identifying potential benefits to stakeholders early, rapid local prototyping of software and hardware, partnership working with the local Releasing Time to Care team, and applying lean principles to development, benefits were realised across Forth Valley. Patient flow staff have been reduced by more than half, principally due to efficiencies gained by having access to all wards’ data from a central location rather than having to “floor walk” to gather the information. Processes have been standardised and nurse interruptions reduced.

Judges’ comments The benefit in terms of timeliness was well demonstrated and evidence of benefits around shared information is persuasive. The project is highly transferable.

HIGHLY COMMENDED

NHS LONDON
Health and social care information sharing programme

By using automated forms and secure email, the information sharing programme provides cost effective and efficient alternatives to posting and faxing. More than 60 trusts and councils are involved in the project, using electronic methods to share admission, discharge and continuing care correspondence.

FINALISTS

ADVANCED HEALTH & CARE

iNurse

The iNurse software system enables community clinicians to record and communicate patient care information using smartphones and tablets. Users at Liverpool Community Health and Medway Community Health Trusts report significant efficiency savings as a result of the system.

BRADFORD DISTRICT CARE TRUST AND NHS AIRDALE, BRADFORD AND LEEDS

‘Living IT’ – Improving physical health for people with serious mental illness

People with serious mental illness die up to 20 years earlier than the general population, the main cause being cardiovascular disease (CVD). An electronic template is helping local GPs to conduct comprehensive physical health checks for all such patients, including a CVD risk calculation.

CARDIFF AND VALE UNIVERSITY HEALTH BOARD

E-discharge

Technical systems and new processes have made it possible for the clinical team to type up patient discharge information on wards and send it to GPs electronically. Timeliness and accuracy of discharge summaries have improved as a result.

DERBYSHIRE HEALTHCARE FOUNDATION TRUST AND DESTINY WIRELESS

Technology-enabled innovation for joint replacement pathways

Integrating clinical pathways into IT systems has given real-time, consultant-level data and detailed trend analysis. It has also made it possible to identify areas for improvement. This, along with a physiotherapy app, has helped the organisation to be ranked best in the country for knee replacements.

EMIS

Delivering integrated care with EMIS Web

By putting patient information at the fingertips of frontline staff whenever and wherever they need it, EMIS Web – an integrated healthcare software system for GPs, extended care, community and secondary care – saves time and delivers efficiency savings.

UK SPECIALIST HOSPITALS

Technology-enabled innovation for joint replacement pathways

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NHS DORSET
In-depth evaluation of personal health budgets

NHS Dorset is one of 20 primary care trusts piloting personal health budgets nationally. The budgets have delivered a significant improvement to personal care and choice, as well as enhancing care quality and use of resources. Through effective joint working of service users, commissioners and clinicians – with support and advice from finance staff in NHS Dorset – the PHB pilot has been implemented successfully and in a financially sustainable way. By improving outcomes at reduced cost, the project links strongly with the aims of the QIPP programme.

Judges’ comments A practical approach with a genuinely patient-centred aim. Hits all the QIPP elements and has a clear potential wider application.

HIGHLY COMMENDED

BRADFORD DISTRICT CARE TRUST
Development of an activity-based costing model within the community health visiting service

An activity-based costing model was developed to help community-based teams improve their quality, productivity and efficiency. It has enabled teams to benchmark their productivity and efficiency, share good practice and identify areas where they are set up inefficiently.

FINALISTS

NHS NORTH EAST LONDON AND THE CITY
Activity and financial modelling

An activity and finance model is helping to standardise the current commissioning process. The model serves as a capacity planning tool, allowing commissioners to build up potential future scenarios as they seek to make the most economical and effective healthcare commissioning decisions.

THE ROYAL ORTHOPAEDIC HOSPITAL FOUNDATION TRUST
‘Visual Stimulation’ – the programme management office

The programme management office is the catalyst for hospital-wide improvement, bringing together a huge number of projects to create a clear path to achieve savings targets. At its heart is a uniform set of controls and measures displayed to the PMO.

WRIGHTINGTON, WIGAN AND LEIGH FOUNDATION TRUST
Devolved financial management – improving clarity, control and confidence

The trust has developed and deployed a user-friendly bespoke reporting tool to improve access to financial information. By increasing the availability of this information, financial awareness among clinicians and managers has been significantly improved.
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TAMESIDE HOSPITAL FOUNDATION TRUST
Laparoscopy managed service

Tameside General Hospital carries out 300 laparoscopic, or keyhole, surgical operations each year but did not have enough fully functioning instruments. This led to reduced theatre capacity, high instrument repair costs, increased spending on fast track instrument sterilisation, cancelled operations, and decreased morale. The trust worked with B. Braun Medical Ltd to develop a pilot for a surgical instrument managed service. The solution that resulted, Aesculap RENU, has delivered significant efficiency, financial and quality benefits.

Judges’ comments: An outstanding example of how an innovative approach to procurement can have much wider benefits for service delivery, reducing costs and improving quality for patients.

NORTH BRISTOL TRUST
Turning around profitability of total hip replacement

A review of primary hip replacements showed each procedure was losing the department £1,252. A procurement exercise for implants was undertaken which enabled savings of 20 per cent. This and other cost improvement work now means the service is making an 8 per cent surplus.

Sponsored by

Health Trust Europe is a group purchasing organisation for the public and private sectors in the UK and Europe. Health Trust Europe is owned by Health Trust Purchasing Group and HCA International – the largest privately owned healthcare organisation in the world. The company specialises in healthcare procurement and has a 10-year legacy with NHS customers. Our value proposition stands for: significant savings, the broadest category of coverage and excellent service with the ultimate objective to improve patient care.

FINALISTS

CENTRAL MANCHESTER UNIVERSITY HOSPITALS FOUNDATION TRUST
The power of procurement – cutting costs, fighting inflation and protecting jobs

By embedding leading edge procurement practices across the trust, £25m of savings have been made in the past seven years.

EAST KENT HOSPITALS UNIVERSITY FOUNDATION TRUST
Improving patient care through the efficient procurement of soft facilities management services

A review and tendering of facilities management services resulted in efficiencies that made it possible to invest £1.7m in new services.

FULHAM ROAD COLLABORATIVE
Soft facilities management project

The collaborative – which includes Chelsea and Westminster Hospital, Royal Marsden, and Royal Brompton & Harefield trusts and the Institute of Cancer Research – was formed to procure goods and services for its four members. The first major project has involved tendering £100m of soft facilities management services, leading to significant cost savings.

KING’S COLLEGE HOSPITAL FOUNDATION TRUST
Auto-replenishment patient costing project

In 2009, the trust introduced automated stock management systems that now control over £7m of inventory. They have helped to massively cut stock and save over 8,000 hours of clinical staff time.

NHS EAST OF ENGLAND COLLABORATIVE PROCUREMENT HUB
The ‘specials’ prescribing toolkit

Unlicensed manufactured medicines (“specials”) cost the NHS £90m each year. To cut costs and encourage best practice, a specials toolkit has been developed that has helped save several million pounds.

NHS COMMERCIAL SOLUTIONS
The procurement of a home oxygen service for NHS South East Coast

NHS Commercial Solutions represented NHS South East Coast in procuring oxygen therapy in homes, identifying potential service and financial benefits and leading to an estimated £20m saving.

THE ROYAL WOLVERHAMPTON TRUST
End to end supply chain transformation

By recording all spend at item and patient level, the trust has optimised clinical stock, saving more than £1m. Clinical teams get the right products at the best price, freeing them to focus on patient care.

Sponsored by

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Supporting you to reach your potential

contact: dsimonds@toyota-tsusho-uk.com
**EFFICIENCY IN TRANSPORTATION AND LOGISTICS**

**WINNER**

**COPERFORMA**
Reducing costs without controversy and delivering excellence without compromise

In 2010, Basingstoke and North Hampshire Foundation Trust (now Hampshire Hospitals Foundation Trust) asked Coperforma to take over its patient transport service – and raise satisfaction levels from 40 to 75 per cent while achieving cost savings of 15 per cent in the first year. Coperforma put a team on site, rolled out their innovative technology-based transport solution, and delivered those targets in under six months. Today, the Coperforma managed service is costing the trust 40 per cent less than its previous transport services, and user satisfaction levels are consistently over 95 per cent.

**Judges’ comments** Innovative approach with genuine patient benefits and real efficiency savings delivered. This is a highly scalable project which is ripe for spread to other organisations.

**HIGHLY COMMENDED**

**SOUTH DEVON HEALTHCARE FOUNDATION TRUST**
Patient transport – improving customer service and reducing cost

By reviewing the patient transport service, the trust has improved the patient experience while retaining jobs and improving efficiency. This has included investing in a new fleet of economical, environmentally friendly vehicles kitted out with state of the art equipment.

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**FINALISTS**

**NHS BLACKPOOL**
Implementation of patient transport service eligibility criteria across the north west of England

By implementing the Department of Health’s eligibility criteria for non-emergency patient transport across all NHS organisations in the north west, it has been possible to reduce 79 contracts with different standards of service to one single contract for all commissioners to use for patient transportation.

**NHS BLOOD AND TRANSPLANT**
Fleet safety

NHS Blood and Transplant drivers have trained to a very high standard. This has reduced the risks of transporting blood, particularly when on emergency runs. A fall in the number of transport incidents has reduced costs and disruption.

**SCOTTISH AMBULANCE SERVICE**
Scheduled care improvement programme

A radical service redesign and significant investment in technology has improved care for patients requiring transport to and from planned healthcare appointments. The programme has delivered efficiency savings, productivity gains and an improved patient experience.

**SOUTH WEST YORKSHIRE PARTNERSHIP FOUNDATION TRUST**
Community equipment services – bringing together the best in logistics

A series of initiatives have been brought together in a single programme to address the cost and efficiency of community equipment services. The programme has brought several improvements, including the development of a unique modular decontamination unit.

**UNIVERSITY HOSPITAL SOUTHAMPTON FOUNDATION TRUST**
Expand the role of the critical care technologist

The role of critical care technologists has been extended to include driving the Southampton paediatric intensive care retrieval ambulances. The additional skills of this specialist team have been used to provide a high quality, cost effective service.
The North West Core Skills Programme addresses the long standing issue of efficiently delivering statutory and mandatory training. The programme has used a collaborative approach to develop a framework of agreed training standards, with key partners including NHS North West, North West Health Innovation and Education Cluster, Skills for Health, and Mersey and North West Deaneries. The programme means that training is recognised across NHS organisations and education institutions in the north west region and removes unnecessary duplication. This has particularly benefited the 5,000 junior doctors and 10,000 healthcare students who rotate across the NHS and who often receive duplicated training. Judges’ comments Addresses the age old problem of how to deliver induction and mandatory training. Impressive scale, scope and can-do attitude, all backed by a very clear business case.

Training is viewed as an essential component of the trust’s quality governance framework. Its approach includes the use of simulation focusing on human factors to improve the care of women and neonates.

The introduction of apprentice posts has transformed recruitment at the organisation. Using apprenticeship frameworks as a gold standard, existing staff in Bands 1-4 are also trained to the highest standards. A pre-apprenticeship programme has now been launched for local college students.

The link nurse framework helps provide burns management training to non-specialist nurses in emergency departments, minor injury units, walk-in centres, prisons and mental health services. The result has been a reduction in the number of inappropriate referrals to burn care services.

By adopting the preceptorship model – established throughout the NHS for newly qualified staff – and applying it to healthcare assistants new to the trust, the organisation has provided structured training and a platform for specialist practitioners to educate healthcare assistants.

The introduction of e-learning has provided 24/7 access to training and the ability to track learning and competence. Following an investment of £20,000, £95,000 in recurrent costs have been saved and the number of training courses completed has significantly increased.

Sponsored by LINER Group Consulting | Training | Recruiting
Efficiency in Medicines Management

Winner

NHS Tees
How medicines optimisation has helped deliver QIPP savings

This initiative aimed to make £2m of savings on the drug budget by switching to more cost effective, evidence based medicines without compromising on quality, safety or efficacy. Following analysis of prescribing data and engagement with key stakeholders, the Tees medicine management team produced a resource pack of tools to support optimisation of medicines in key therapeutic areas. Implementation was monitored over 2011-12, demonstrating savings of £2.4m.

Judges' comments
Good, demonstrable savings from a position where there were no easy wins. Clear involvement along the whole pathway and excellent engagement. The results achieved at NHS Tees are potentially reproducible elsewhere.

NHS North East London and the City
Medicines management-led oral nutritional supplement project

Medicines management and dietetics teams worked together to improve the identification of malnutrition and the appropriate prescribing of oral nutritional supplements in primary care. Introducing a consistent approach has improved patient care and delivered savings through reducing inappropriate prescribing.

Highly Commended

London Procurement Programme and London Specialised Commissioning Group
Therapeutic tendering and rationalisation

The introduction of framework price agreements for high cost, branded medication, mainly payment by results-excluded, has led to more cost effective procurement. The overall aim is to reduce expenditure without compromising care. To date, recurring savings of £27m have been secured.

Finalists

NHS East of England Collaborative Procurement Hub
The ‘specials’ prescribing toolkit

Unlicensed manufactured medicines (“specials”) cost the NHS £90m each year. To minimise costs and encourage best practice among prescribers, a specials prescribing toolkit has been developed. It has helped save several million pounds, spread best practice and enhance patient care.

Isle of Wight Clinical Commissioning Group and Eclipse Solutions
Increased patient safety, quality improvements and cost efficiencies through enhanced data systems

To help improve the safety of medicines prescribing – as well as to monitor commissioning projects and provide accurate benchmarking data for surgeries – a software system is now used to extract 140,000 medication-related patient data sets each week.

Leeds Community Healthcare Trust and Leeds Teaching Hospitals Trust
A multi-faceted approach to improve clinically effective prescribing for wound infections and related cellulitis

A multidisciplinary team developed a clinical guideline and algorithm to direct the management of wound infection. Along with a new formulary, this has reduced both non-compliance with local antibiotic prescribing practice and inappropriate use of wound care products – leading to significant efficiencies and improved treatment for patients.

Sheffield Teaching Hospitals Foundation Trust
Systematic medicines optimisation

The trust’s medicines optimisation project reduced medicines budget costs by almost £4.5m in 2011-12. Developing more efficient services has also enabled staff to plan future service redesign projects, including outsourcing outpatient dispensing, robotic dispensing and electronic prescribing.
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Congratulations to all finalists at this year’s HSJ Efficiency Awards

successful people, projects and performance
COUNTY DURHAM AND DARLINGTON FOUNDATION TRUST
Improving the patient experience through food

County Durham and Darlington has improved the patient experience and delivered efficiencies through the development and introduction of an a la carte menu, which has been rolled out across all wards on the Darlington Memorial Hospital site. There were no financial resources attached to delivering the project – the main resource was the tenacity, drive and commitment of staff and engagement with stakeholders to bring the initiative to fruition. Much medical evidence supports the idea that good nutrition performs a major function in the healing process and promotes a sense of wellbeing.

Judges’ comments A radically more efficient way of delivering this service which has been achieved with no extra resource, simply personal time and commitment. The work has not only made recurrent savings and increased productivity but, importantly, improved patient care and satisfaction.

HIGHLY COMMENDED

SOUTH EAST COAST AMBULANCE SERVICE FOUNDATION TRUST
Make Ready – a catalyst for ambulance service estates rationalisation

The Make Ready initiative is described as the ambulance service version of the Productive Ward. Twelve Make Ready centres are being rolled out across Kent, Surrey and Sussex, moving staff and resources based at old and poorly located ambulance stations into Make Ready centres that serve their area.

SOUTHERN HEALTH AND SOCIAL CARE TRUST
Estate rationalisation – Phase 1 Armagh locality

In partnership with Armagh City Council, the Patient and Client Council, and the Health Estates Agency, the trust established a project to maximise estate use in Armagh. By engaging stakeholders, the organisation has identified opportunities to reconfigure site utilisation, enhancing accommodation for service users, staff and other agencies.

FINALISTS

CENTRAL AND NORTH WEST LONDON FOUNDATION TRUST
Refurbishment of Northwick Park Mental Health Centre

The £12m refurbishment of an existing mental health facility has created a more sustainable building that provides first class accommodation including ensuite bedrooms, single sex accommodation and direct access to the gardens. Positive feedback has been received from patients, carers and staff alike.

RYHURST IN PARTNERSHIP WITH LANCASHIRE CARE FOUNDATION TRUST
Whole estate joint venture partnership – unlocking the potential in trust estates

Formed in October 2010, this joint venture partnership aims to support the trust’s clinical strategy through smart asset management. To date it has delivered £1.6m in savings across hard and soft facilities management, cut consultancy costs in half and improved space utilisation by 39 per cent.

SOUTH LONDON HEALTHCARE TRUST
Driving efficiency and culture change

Through process re-engineering, the trust’s estates and facilities directorate has delivered cumulative staff efficiencies of 21 per cent over three years and removed £12m of costs from the organisation. Its approach is centred on lean information, performance management and assurance.

UNIVERSITY COLLEGE LONDON HOSPITALS FOUNDATION TRUST
Operational efficiency of the new UCH Macmillan cancer centre

A patient flow approach centred on making outpatient visits as stress free and personal as possible has been adopted for the new centre. Meanwhile the introduction of calling screens in cafes, and the use of text messaging and paging means patients can move around the hospital between consultations.
NEW White Paper on Medical Locum Expenditure.

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“It comes down to challenging the culture, improving the lack of data and examining alternative ways to use substantive staff more flexibly.”

Neil Baigent - Government Procurement Service

“How many juniors do we need? What are we training doctors for?”

Bill McMillan - NHS Employers
**WORKFORCE EFFICIENCY**

**WINNER**

**SANDWELL AND WEST BIRMINGHAM HOSPITALS TRUST**

Introduction of an ambulatory pathway for breast cancer surgery patients

Through a collaborative multidisciplinary review of practice, the trust developed a new pathway for breast cancer patients which involved significant changes of responsibilities and skills for the breast care team. Rather than carrying out surgery as an inpatient admission, 95 per cent of such surgery at the organisation is now performed on a day case basis, with minimal morbidity and high audited levels of patient satisfaction. No extra workload has been placed on the primary sector and the pathway has made the hospital’s workload easier to manage. The pathway has now been adopted as national best practice.

**Judges’ comments** An inspiring and innovative project that challenged every step of the process from a patient’s perspective. The result was not only a more efficient process but one that significantly enhanced the patient experience.

**HIGHLY COMMENDED**

**SOUTH EAST COAST AMBULANCE SERVICE FOUNDATION TRUST**

Driving emergency ambulance efficiency to improve clinical quality

By ensuring staff are on duty when emergencies are most likely to happen, and located accordingly, £25m in efficiency savings have been realised in four years.

**UNIVERSITY HOSPITALS OF LEICESTER TRUST**

Transforming clinical support services

The trust has used simulation software to aid service improvement. Having the ability to try out new ideas without disturbing current working practices, and with minimal outlay, has proved extremely helpful in achieving efficiency gains.

**FINALISTS**

**BUCKINGHAMSHIRE HEALTHCARE TRUST**

Occupational health case manager

To drive down sickness absence costs, the role of occupational health case manager has been established. The postholder tracks sick leave, trains managers on the sickness policy and coaches them in holding difficult conversations. It also holds meetings to ensure each sickness absence has an action plan in place.

**HARMONI**

Transforming out of hours healthcare services

In January 2011, Harmoni – the largest independent provider of NHS primary care services – launched an internal QIPP programme. Through extensive use of data and technology, the organisation has achieved annual savings of £3.9m while maintaining quality of care.

**LANCASHIRE TEACHING HOSPITALS FOUNDATION TRUST**

Integrated nutrition and communication

A service redesign brought together the three teams involved in treating patients at risk of malnutrition – speech and language, dietetics and the nutrition nursing team. The integrated approach has reduced length of stay in hospital, improved access to expertise and reduced costs.

**NHS SOUTH OF ENGLAND (SOUTH CENTRAL)**

Driving efficiencies within statutory and mandatory training

A statutory and mandatory training framework has been introduced and has recently been extended to include the assessment and reporting of competence. In addition, a learning app has been launched for health and safety and the use of online assessments is being piloted.

**UNIVERSITY COLLEGE LONDON HOSPITALS FOUNDATION TRUST**

Eliminating agency usage and improving patient care

UCLH is aiming to completely eliminate the use of agency workers in its organisation. The approach focuses on engagement with clinical staff and collaboration with a private sector partner, Bank Partners. It has reduced agency expenditure by £15m since 2009-10.

**UNIVERSITY HOSPITAL SOUTHAMPTON FOUNDATION TRUST**

Developing the assistant practitioner role in neonatal care

Nursery nurses (Band 4) have been trained as assistant practitioners in high dependency neonatal care. The aim is to deliver high quality care by harnessing the expertise of these members of staff. The project has released £200,000 in efficiency savings.

Sponsored by

**NHS Professionals**

27 September 2012 Health Service Journal supplement 15
Helping the NHS in Challenging Times

The harsh reality is that the NHS faces a big challenge: continuing to deliver healthcare to patients in the face of budget pressures and continuous growth in demand for services. They can no longer rely on growth, cutting services or ‘big ticket’ options for the coming challenges. Instead, Trust’s need to look deeper to deliver change.

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EFFICIENCY IN ACUTE SERVICE REDESIGN

WINNER

PAN BIRMINGHAM CANCER NETWORK AND SANDWELL AND WEST BIRMINGHAM HOSPITALS TRUST
Communication alerts: optimising urgent and emergency care in an acute setting
Through audit and process mapping it was discovered that the multidisciplinary team was only being informed of 18 per cent of emergency admissions for known cancer patients. Such admissions now trigger email alerts, enabling specialist cancer staff to attend and triage flagged patients. This has saved over £800,000. The model of delivering an expert at the point of an acute admission is being extended to community teams, who will be made aware of admissions and discharges for long term conditions. This will allow integration of acute medicine throughout the local health economy.

JUDGES’ COMMENTS
Highly patient-focused and brings significant savings without new investment.

HIGHLY COMMENDED

SHEFFIELD TEACHING HOSPITALS FOUNDATION TRUST
Design of the frailty unit using Toyota Oobeya methodology
Staff in the geriatric medicine department adopted a methodology from car firm Toyota when working to redesign their model of care. The result has been innovative design including a frailty unit with seven-day consultant working and higher quality, more timely care.

FINALISTS

ALDER HEY CHILDREN’S FOUNDATION TRUST
Introducing a specialist paediatric nurse-led line insertion service
The cannulation and midline insertion service for paediatric and neonatal patients aims to improve patient experience and reduce use of anaesthetics.

CAMDEN AND ISLINGTON FOUNDATION TRUST
Improving pathways in mental health inpatient services
Crisis beds in community settings, new assessment wards, and opening access to all mental health services for those aged over 65 has saved £4.5m.

CROYDON PRIMARY CARE TRUST WITH CROYDON UNIVERSITY HOSPITAL
Patient navigation service
The team is using Band 3 “navigator” staff to reduce outpatient appointments.

EAST KENT HOSPITALS UNIVERSITY FOUNDATION TRUST
Improving the flow of patients into and out of secondary care
This change programme has improved the flow of non-elective patients and released £4.5m.

EAST SUSSEX HEALTHCARE TRUST
The trauma assisted discharge scheme
Patients with fractured neck of femur are now supported to recover at home rather than in hospital. Over 1,000 bed days and £300,000 were saved in the first six months of the project alone.

SHERWOOD FOREST HOSPITALS FOUNDATION TRUST
“We cannot go through another winter like that” – innovative management of patient flow
Using patient stories, a new approach to managing patient flow has been designed. Benefits include a £2.5m productivity improvement.

UNIVERSITY HOSPITAL OF NORTH STAFFORDSHIRE TRUST
Inpatient care on an outpatient basis – heart failure
By delivering care on an outpatient basis, the ambulatory heart failure unit has improved patient choice and allowed the closure of nine acute beds.

UNIVERSITY HOSPITALS OF LEICESTER TRUST
Interface geriatrics – redesign of the acute care axis for frail older people
Comprehensive geriatric assessment has been established in the emergency department and as a liaison service in acute units and base wards. This has cut admissions in older people by around 20 per cent.
Energy Performance Partnerships in healthcare with British Gas

Opportunities to reduce energy costs by over 20%¹:

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¹ Projected savings based on experience in existing energy-saving partnerships. Actual savings depend on building, equipment and installations.
² Revenue based on the government funding such as the Feed-in-Tariff, Renewable Heat Incentive and Short-term Operating Reserves.
WINNER

ROYAL UNITED HOSPITAL BATH TRUST
Team Green RUH – energy management project

The trust is dedicated to reducing its carbon footprint, saving cash and improving the patient environment. A commitment was made in its corporate sustainability report of 2009-10 to reduce carbon emissions and – by installing new combined heat and power systems, LED lighting, new controls and creating more comfortable patient environments – a 25 per cent reduction in emissions has been achieved along with cash savings of at least £800,000 a year. The trust has built the first neonatal intensive care unit in the NHS rated excellent in BREEAM (BRE environmental assessment method) ratings – and has won both RIBA and Constructing Excellence Awards.

Judges’ comments A whole system approach to sustainable healthcare, based around delivery of a comprehensive and wide ranging energy efficiency programme.

BARTS HEALTH TRUST
Carbon reduction – a holistic approach

£1.6m has been invested in energy efficiency projects, resulting in a 35 per cent reduction in carbon emissions. There has also been a 30 per cent reduction in water consumption and all waste has been diverted from landfill, leading to a £2m saving.

BASILDON AND THURROCK UNIVERSITY HOSPITALS FOUNDATION TRUST
Embedding a sustainability culture

The trust has increased energy efficiency through projects both small and large, with staff invited to submit ideas to save energy and all workable ideas given equal priority. It is also approaching an ambitious target of zero to landfill.

DERBY HOSPITALS FOUNDATION TRUST
Exceeding expectations in energy efficiency

In 2009, the trust committed to cutting carbon emissions by 10 per cent over three years. Measures such as appointing environmental champions helped it to a 12.6 per cent reduction in the first two years of the project alone.

DERBYSHIRE COMMUNITY HEALTH SERVICES TRUST
We Think Green

Successful initiatives have been focused on three areas: energy, waste and travel.

SANDWELL AND WEST BIRMINGHAM HOSPITALS TRUST AND THE CARBON TRUST
Providing healthcare that won’t cost the earth through a progressing carbon management plan

Achievements include the installation of energy efficiency boilers, the development of a sustainability champions workforce, and the use of food waste digesters to cut energy and water consumption.

SOUTH CENTRAL AMBULANCE SERVICE FOUNDATION TRUST
Energy Wise campaign

Environmental impact has been reduced by measures including the installation of sensor lighting and the creation of league tables so managers can compare performance on energy efficiency.

ST GEORGE’S HEALTHCARE TRUST
Heat recovery project – direct contact flue gas economiser

Waste heat gases emitted within the trust’s energy centre have been used to provide heating and hot water for the hospital. This involved installing flue gas technology, financed through an interest-free Salix loan.
WINNER

LEEDS AND YORK PARTNERSHIP FOUNDATION TRUST
Improving wellbeing through the arts

The trust’s communications and engagement team coordinated a seven-week festival to promote and celebrate the role of the arts in improving mental health and wellbeing. Love Arts 2011 ran from 27 September to 16 November 2011 and linked 38 partner organisations to hold 49 individual arts events across the city of Leeds. The festival was also linked to the national Time to Change campaign and aimed at getting people in Leeds thinking and talking about mental health. Through working closely with partner organisations, the aims of the project were achieved efficiently and effectively.

Judges’ comments A breathtaking, imaginative and game changing approach to delivering credible and energising messages which resonated with all sections of the community.

HIGHLY COMMENDED

NHS DUDLEY
Think Pharmacy

Following a successful bid to the Department of Health, NHS Dudley developed a campaign to promote the use of pharmacies to young people. After the campaign, which used social media and the web as well as roadshows, there was a 250 per cent increase in young people accessing pharmacies for advice.

FINALISTS

CHELSEA AND WESTMINSTER HOSPITAL FOUNDATION TRUST
Fit for the Future

Fit for the Future has helped to improve staff engagement and morale while making significant cost improvements. Senior clinicians and managers lead communications activities with staff and encourage ideas to improve quality and cut costs through a “directors’ den” initiative.

NHS EREWASH CLINICAL COMMISSIONING GROUP
Co-creating best practice to increase value

By focusing on quality rather than money, Erewash CCG engaged local GP practices in creating a plan to increase productivity. Through education, peer support and the provision of comparative performance data, more than £1m was saved on referrals and admissions in a year.

NHS SOUTH OF ENGLAND (SOUTH CENTRAL)
Improving end of life care and respecting people’s wishes – introducing unified Do Not Attempt Cardiopulmonary Resuscitation policy

The organisation’s unified Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) policy and documentation is the first in the country to be developed, implemented, audited and reviewed. It improves communication between health and social staff and ensures patient wishes are respected.

NOTTINGHAM UNIVERSITY HOSPITALS TRUST
How we pulled together to deliver essential savings and develop a culture of continuous improvement

Nottingham Hospitals has used innovative communication to get staff on board with its continuous improvement programme. Staff ideas are taken seriously, followed up and implemented and awards celebrate the best. The trust’s savings targets for the year have been achieved and quality and safety improved.

SHERWOOD FOREST HOSPITALS FOUNDATION TRUST
Achieving best care through staff-led transformation within the endoscopy department

The department has focused on both cultural and operational aspects of improvement. Creative problem solving sessions and a daily “communication cell” have enhanced staff engagement and communication while workplace organisation has been improved by the adoption of lean tools.
EFFICIENCY IN COMMUNITY SERVICE REDESIGN

WINNER

NHS SUSSEX
The new Sussex Patient Transport Bureau

In 2009, when the Department of Health removed patient transport services (PTS) from tariff, NHS Sussex held eight separate contracts with the same PTS provider. The result was differing access, varying journey costs, different specifications, poor contract monitoring, inconsistent application of the eligibility criteria, gaps in provision and limited value for money. In January 2011, the organisation undertook a huge service redesign programme to procure new PTS and create a centralised “one stop shop” for patients booking transport. It is predicted that this “Patient Transport Bureau” will deliver savings of around £14.3m over the next three years.

Judges’ comments Tangible savings over three years as well as quality improvements. Others can learn from this.

HIGHLY COMMENDED

BIRMINGHAM COMMUNITY HEALTHCARE TRUST
Implementation of citywide rapid access to a 24-hour community-based services model

A model of care has been developed which enables rapid access to a variety of community services. Long term condition management has been transferred from secondary to primary care, supporting accessible and responsive services delivered close to home.

FINALISTS

ANEURIN BEVAN HEALTH BOARD
Revolution and evolution of continuing healthcare in Gwent

A new service has been introduced for patients with complex conditions who are eligible for continuing care but do not need a nursing home placement. Band 2 and 3 healthcare support workers, supervised by registered nurses, care for these patients and a high level of satisfaction has been reported.

CENTRAL SURRY HEALTH
Creating a sustainable future for podiatry

Reduced funding and increasing referral numbers had meant unacceptable waiting lists for podiatry services. A complete service redesign has been implemented, creating capacity for 4,000 extra appointments each year with no extra funding.

MID NORFOLK CLINICAL COMMISSIONING GROUP
Greater efficiency in collaboration – integrated care teams

Integrated health and social care teams have been introduced, meaning that GP practices in the area have named social workers, district nurses, dementia nurses and therapists. Communication, cooperation and coordination have been improved, streamlining the delivery of services and avoiding unnecessary duplication.

SOUTH WARWICKSHIRE FOUNDATION TRUST
Navigating the system – finding early opportunities to access community services and embedding referral practices

By instigating a collaborative and systematic case finding approach, staff were able to identify early opportunities for inpatients to be discharged. The project has resulted in improved flow, reduction in length of stay, closure of an acute ward and £1m in savings.

UNITED LEAGUE COMMISSIONING AND ST HELENS CLINICAL COMMISSIONING GROUP
Acute visiting service – rapid access community doctor

The acute visiting service provides access to a community doctor within 30 minutes in almost 50 per cent of cases and within an hour in 75 per cent. It has reduced emergency admissions and the service is cost neutral if it avoids two complex admissions a week.
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Greg Quinn, Health Policy Manager, Boehringer Ingelheim

¹ Source: Footfall at HSJ Awards 2011

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WINNER

BLACKPOOL TEACHING HOSPITALS FOUNDATION TRUST
Mobilising community workflows

Community clinicians now have full access to patient and scheduling data through mobile tablet devices. Up to an hour a day is saved on administration and travel, with staff able to spend more time with patients and to provide a more efficient service. Ultimately the mobile solution will replace paper diaries and, over time, will support the complete introduction of paperless clinical notes. Staff can also use the system to access email, the trust intranet, and online clinical guidance.

Judges’ comments Very clear that this project stripped out much of the non-value-adding work that staff were doing on scheduling and note taking. Impressive scale of implementation.

CENTRAL AND NORTH WEST LONDON FOUNDATION TRUST
The placement efficiency project

The project helped commissioners address spending on mental health and learning disability placements out of area and has led to over £7m in savings.

NHS LONDON
Health and social care information sharing programme

More than 60 trusts and councils are using electronic methods to share admission, discharge and continuing care correspondence.

SHEFFIELD TEACHING HOSPITALS FOUNDATION TRUST AND THE BRITISH SOCIETY FOR RHEUMATOLOGY
Clinical microsystems in rheumatology

A microsystem approach was used to redesign the rheumatology service and cut waiting periods. This has generated savings of more than £100,000 a year.

STAFFORDSHIRE COMMISSIONING SUPPORT SERVICES
Using insight to create meaningful service improvement and gain operational efficiencies

By ensuring all patient feedback is turned into intelligence that can influence commissioning decisions, this project is creating service improvement.

THE ROYAL WOLVERHAMPTON HOSPITALS TRUST
Innovative method to improve and streamline outpatient pathways

A review of clinic templates created 13,000 extra clinic slots a year. An IT solution has identified and made use of unfilled capacity while allowing greater patient choice in follow-up appointments and reduced the “did not attend” rate by 16 per cent.

UNIVERSITY COLLEGE LONDON HOSPITALS FOUNDATION TRUST
Operational efficiency of the new UCH Macmillan cancer centre

A patient flow approach centred on making outpatient visits as stress free and personal as possible has been adopted. Calling screens in cafes and the use of text messaging and paging mean patients can move around the hospital between consultations.

UNIVERSITY HOSPITAL SOUTHAMPTON FOUNDATION TRUST
Paper light outpatients

The trust has worked to maximise use of electronically stored patient information. Patient experience and outcomes have improved and there have been savings to date of £120,000.
THE JUDGES

Susan Acott chief executive, Dartford and Gravesham Trust

Charles Alessi chairman, National Association of Primary Care

Stuart Bain chief executive, East Kent Hospitals University Foundation Trust

Lorraine Bewes director of finance and information, Chelsea and Westminster Hospital Foundation Trust

Randall Bowen head of energy performance, British Gas

Nick Carver chief executive, East and North Hertfordshire Trust

Peter Coates commercial director, DH

Andy Cowper editor, Health Policy Insight

Colin Cram managing director, Marc 1 Ltd

Helen Crisp assistant director of research and evaluation, The Health Foundation

Anna Dixon director of policy, The King’s Fund

Jim Easton national director of improvement and efficiency, DH

Mike Evans customer lead (Birmingham and Solihull), Healthcare Commissioning Services

Steve Fairman director of improvement and efficiency, NHS South of England

Jo Farrar director of finance, Homerton University Hospital Foundation Trust

Debbie Fleming chief executive, the SHIP PCT Cluster

David Flory deputy NHS chief executive, DH

Jenny Hargrave head of workforce strategy, NHS Professionals

Andrew Hawes director, Newton Europe

Alastair Henderson chief executive, Academy of Medical Royal Colleges

Helen Hirst chief officer designate, Bradford City and Bradford clinical commissioning groups

Candace Imison deputy director of policy, The King’s Fund

Jonathan Kay professor of health informatics, City University London

Mayur Lakhani chair, National Council for Palliative Care

Gillian Leng deputy chief executive and director for health and social care, National Institute for Health and Clinical Excellence

Tim Litherland national chair, Health Estates & Facilities Management Association

Kirsten Major director of service development, Sheffield Teaching Hospitals Foundation Trust

Andy McKeon managing director of health, Audit Commission

John Oldham national clinical lead – quality and productivity, DH

Linda Patterson clinical vice president, Royal College of Physicians

David Peat non executive director North West Ambulance Trust and retired NHS trust chief executive

David Pencheon director, NHS Sustainable Development Unit

Janice Sigsworth director of nursing, Imperial College Healthcare Trust

Jon Restell chief executive, Managers in Partnership

Bob Ricketts director of NHS provider transition, DH

Francis Rottenburg senior business manager, British Gas Business Services

Ros Roughton deputy director of commissioning development, NHS Commissioning Board

Dean Royles director, NHS Employers

Philip Scott senior lecturer in information systems, University of Portsmouth

Pete Shergill head of national and strategic accounts, Lloydspharmacy Healthcare Services

Janice Sigsworth director of nursing, Imperial College Healthcare Trust

Mike Sinclair chairman, Health Informatics Congress, vice-chair professionalism and vice-chair events, BCS Health

Dimitri Spyridonidis research associate, health management group, Imperial College London

Ming Tang managing director of the South Yorkshire NHS commissioning support service

Natasha Tobin director, Russell Square Communications and Chartered Institute of PR council member

Aris Vrettos programme development director, University of Cambridge Programme for Sustainability Leadership

Angela Wale business manager, HealthTrust Europe

Jonathan Wedgbury chief executive, HealthTrust Europe

Terry Young chair of healthcare systems, Brunel University
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