

Quality, safety and value

NHS Clinical Evaluation Team Outcomes Launch

16 December 2016

- Mandie Sunderland – Chair, NHS Clinical Reference Board & Chief Nurse, Nottingham University Hospitals NHS Trust
- Dr Naomi Chapman – Clinical Programme Lead, NHS Clinical Evaluation Team



Why do we need to make changes?

<p>Evidence suggests that nursing & midwifery involvement in purchasing of clinical products improves quality and patient experience</p>	<p>Wastage in relation to clinical products is putting increasing pressure on the NHS</p>
<p>All trusts are under pressure to make savings, yet we must work together to protect patient safety and the frontline as a priority. Every £30,000 saved equates to one Band 5 nurse</p>	<p>If we can buy products more efficiently across the NHS, then there is less need to look for efficiencies at the bedside</p>

The story of a Chief Nurse from Birmingham...

- Nurse Representative on NHS Supply Chain Customer Board
- 'Befuddled'
- Financial Pressures – 'Lightbulb Moment'!
- Professional Forum delivered circa £700k
- Could this be replicated?
- RCN 'Small Changes – Big Differences' campaign
- 'Every £30k saved is a Band 5 nurse'
- Clinical Reference Board/NHS Clinical Evaluation Team was born!

Nurse led savings – evidence of success



1. Nottingham University Hospitals NHS Trust

- 2013 CAUTI rate = 101
- 2014 development and roll out of “all in one” catheterisation pack
- January 2015 over 400 staff received training/packs used across Trust
- 2015 - to date = 80% reduction in CAUTIs

Catheterisation rate remained stable circa 20%

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
2014	10	12	5	5	11	8	8	8	9	9	7	10
2015	8	8	2	7	4	1	5	3	5	4	6	1
2016	4	1	2	4	1	3	2	1	1	1	0	

- Savings
 - Switch to packs £40,000
 - Cost avoidance total approx. £144,000 (NHSI estimates cost of treating CAUTI = £1765 in 2010)
- Total savings
 - Approx. £184,000

2. Clinical Procurement Specialists

Supporting savings from a clinical perspective by:

- working with procurement professionals, providing senior clinical leadership on procurement decisions
- leading further engagement with clinicians in these important procurement decisions, ensuring clinical confidence in the products selected
- increasing standardisation of products and equipment
- improving both patient and staff safety

Example: Lancashire Care NHS Foundation Trust

Within 3 months of being in post the Clinical Procurement Specialist had identified **£135,000** worth of potential savings across categories including wound care, enteral feeding and sterile saline.

“Colleagues trust that we aren’t choosing cheapest product but the right product.”

Dee Roach, Executive Director of Nursing and Quality, Lancashire Care NHS Foundation Trust

3. Bristol University Hospitals NHS Trust

- Spend on mattresses had not been reviewed for 7 years, with a total spend per year of £700k. Some instances of pressure ulcers could be prevented with more appropriate use of mattresses
- Discounts were requested from the supplier but not forthcoming
- A range of mattresses were clinically evaluated with the best 8 being invited to submit best price
- The supplier was changed to provide a higher spec mattress with a significantly improved maintenance, deliver and service contract
- The tissue viability team then brought in a process so those people who needed a mattress got one, and those that didn't were placed on high spec foam

Results

- Reduced number of pressure ulcers
- Total spend per year reduced from £700k to £260k with more appropriate use of products
- **Total savings = £440k per year**

4. Ambulance and acute sector working together

- Wastage and duplication of resource is a significant issue. Pilot project covers 3 product areas; **electrodes, cannulae** and **dressings**
- Standardising approach, products and centralised purchasing would prevent unnecessary patient intervention, create consistency across care pathway and reduce overall spend
- Sandy Brown (Director of Nursing and Clinical Quality and Deputy Chief Executive, East of England Ambulance Service NHS Trust) is leading on a pilot project to analyse the opportunities across 3 geographical areas:

Yorkshire & Humber	East of England	East Midlands
Yorkshire Ambulance Service	East of England Ambulance Service	East Midlands Ambulance Service
Leeds Teaching Hospitals	Princess Alexandra Hospitals	Nottingham University Hospitals

There is excellent engagement from key stakeholders and data is currently being analysed to identify potential opportunities and savings.

Results will inform next steps.

Ambulance & acute project benefits cont...

- Product synergies
- Reduce waste
- Bulk buying
- Clinical improvement
- Utilising products across the system
- Standardise guidelines such as IP&C Improving Patient Experience
- Not removing and reinserting cannulae
- Not replacing electrodes increasing the risk of skin tears

5. Leeds Teaching Hospitals NHS Trust

- Desire to **promote continence rather than containment**
- Need to **standardise brands** and rationalise the number of different types of continence pads used (previously 70+ different products)
- Aim to reduce the use of absorbent pull ups / all in ones to **enhance quality** patient care and further **promote patient dignity**
- Need to align the products used across **acute and community**
- Opportunity to provide **cost savings**

Product evaluation and rationalisation of products was undertaken by the Trust.

Results

- Reduced number of products from 72 to 19, better patient experience
- Total spend per year reduced from £237k to £197k with opportunity for further savings of an additional £10k per year

The NHS Clinical Evaluation Team's first product areas cover...

Annual usage through NHS Supply Chain catalogue

£117million
per annum

982 different
products

2 billion
items

40 million items in a typical large acute Trust

18,000 potential interactions with products for Nurses

Reduction in price of 1%



Save **£1.17m**
Which could equate to:

39
Band 5 nurses

Reduction in price of 3%



Save **£3.5m**
Which could equate to:

117
Band 5 nurses

Reduction in price of 15%



Save **£17.5m**
Which could equate to:

583
Band 5 nurses

Governance and support



NHS Customer Board for Procurement and Supply

London Customer Board



Colin Gentile
Chair

Chief Financial Officer, Kings
College Hospital NHS
Foundation Trust

National Customer Board



**Sir Ian
Carruthers OBE**
Chair

Northern Customer Board



Mick Guymer
Chair

Director, North West
Procurement
Development

Midlands Customer Board



David Melbourne
Chair

Deputy Chief Executive and
Chief Finance Officer,
Birmingham Children's
Hospital NHS Foundation
Trust

Clinical Reference Board



Mandie Sunderland
Chair

Chief Nurse, Nottingham
University Hospitals NHS
Trust

Southern Customer Board



Suzanne Tracey
Chair

Chief Executive, Royal
Devon and Exeter
NHS Foundation Trust

NHS Clinical Evaluation Team
Dr Naomi Chapman, Clinical Lead

Clinical Reference Board objectives

- Raise awareness of and **champion the role clinicians play** in achieving **high quality and best value** from clinical products
- Establish and effectively **govern the NHS Clinical Evaluation Team**
- Pilot projects which **promote standardisation and safety** and **reduce wastage** across the NHS
- **Support implementation of national policy** including Lord Carter's recommendations

“Quality, safety and value are at the heart of our work and it’s important that we use our clinical experience to deliver high standards of care in ways which also reduce cost and waste in the NHS.”

Mandie Sunderland, Chair, Clinical Reference Board

Clinical Reference Board members

Name	Role & Trust	Name	Role & Trust
Mandie Sunderland (Chair)	Chief Nurse Nottingham University Hospitals NHS Trust	Rose Gallagher	Nurse Adviser Infection Prevention and Control, Royal College of Nursing
Greg Dix (Vice Chair)	Director of Nursing Plymouth Hospitals NHS Trust	Siobhan Heafield	Associate Nurse Director, Midlands NHS Improvement
Suzanne Banks	Chief Nurse, St George's University Hospital NHS FT	Professor Suzanne Hinchliffe	Chief Nurse/Deputy Chief Executive Leeds Teaching Hospitals NHS Trust
Sandy Brown	Director of Nursing and Clinical Quality East of Eng Ambulance Service NHS Trust	Clare Linley	Director of Nursing Leeds and North CCG
Dr Naomi Chapman	Executive Nurse Network Lead Royal College of Nursing	Michelle Norton	Director of Nursing George Eliot Hospital NHS Trust
Geraldine Cunningham	Associate Director of Cultural Change Barts Health NHS Trust	Christine Perry	Interim Nursing Executive Royal Cornwall Hospitals NHS Trust
Shelly Dolan	Chief Nurse, Royal Marsden NHS Foundation Trust	Dee Roach	Executive Director of Nursing and Quality Lancashire Care NHS Foundation Trust