

Adopted Minutes
NHS Northern Customer Board for Procurement and Supply Meeting
9th June 2017
The Met Hotel, King Street, Leeds

Present:		
Chair	Mick Guymer	North West Procurement Development
Board Members:		
	Angela Gaskell	Head of Purchasing and Supplies, St Helens and Knowsley Hospitals NHS Trust
	Lynne Hodgson	Director of Finance, North East Ambulance Service
	Daren Hopkinson	Head of Procurement, North West Ambulance Service
	Helen Lisle	Director of Procurement & Supplies, Newcastle upon Tyne Hospitals NHS Trust
	Brian Mangan	Deputy Director, North West Procurement Development
	Paul Ralston	Head of Procurement, The Rotherham NHS Foundation Trust
	Ian Willis	Head of Procurement, York Teaching Hospital NHS Foundation Trust
Apologies:		
	Lee Bond	Chief Financial Officer, Hull and East Yorks Hospitals NHS Trust
	Dr Naomi Chapman	Clinical Programme Lead, NHS Clinical Evaluation Team
	Jenny Ehrhardt	Acting Director of Finance, Leeds Teaching Hospitals NHS Trust
	Joe Lever	Procurement Director, Salford Royal NHS Foundation Trust
	Paul Havey	Finance Director/Deputy Chief Executive, Lancashire Teaching Hospitals NHS Foundation Trust
In attendance:		
	Stacie Croxton	Customer Service and Marketing Director, NHS Supply Chain
	Angela Donohue	Workforce Lead, Health, Crown Commercial Service
	Andy Harris	Procurement Strategy Lead, NHS Business Services Authority, Regional Co-ordinator for the HCSA
	Gareth Harvey	Head of Customer Engagement, NHS Supply Chain
	Emma Graham	Business Delivery Manager – Health, Crown Commercial Service
	Celia Poole	Stakeholder Engagement Lead Commercial Division - Procurement Transformation Programme - DH
	Ian White	Programme Lead – Carter Procurement Transactions and Sustainable Solutions Director, NHS Improvement
Customer Board Exec:		
	Sindie Clark	Stakeholder Manager, NHS Business Services Authority
	Debbie Pacey	Stakeholder Co-ordinator, NHS Business Services Authority

Section 1 – Closed session for members only

09/06/1 Welcome meeting opens and apologies

- 1.1 Introductions took place and the Chair gave apologies for those unable to attend.
- 1.2 The Chair advised members that the content of the Customer Board packs is confidential and is intended solely for the addressee. The information may also be legally privileged. This information contained within the packs is sent in Trust, for the sole purpose of delivery to the Board members (intended recipients.) If the information within the pack is received in error, any use, reproduction or dissemination of the packs and their contents is strictly prohibited. He also asked the Board to note that any queries from the press/media relating to the work and papers of the Northern Customer Board should be diverted to nhsbsa.customerboard@nhs.net for response, or co-ordination thereof.

Some members requested clarification on who they could share the packs with and Sindie Clark confirmed that this was currently under review at the NHSBSA and would feedback. The Chair commented that we should be working towards greater transparency, not less.

09/06/2 Department of Health update – Future Operating Model (FOM)

- 2.1 Celia Poole joined the meeting to give an update on the Future Operating Model.

Section 2 - Communications

09/06/3 Receive Minutes and Public report from Customer Board meeting on 7th April

- 3.1 No matters of accuracy were raised and the minutes were agreed as a true record.

09/06/4 Matters arising/action report

- 4.1 Ian White provided an update on the following outstanding actions:-

- 8.2 With regard to PTP plans, Ian informed the Board that not all Trusts have submitted their data yet but the data received so far will be analysed and shared. Question was raised as to whether it was just acute Trusts who had been requested to supply the data and it was agreed that it would be very good practice for all Trusts to complete.
- 7.2a/b In January a metrics template was sent for all Trusts to complete giving details of their clinical spend, general spend, % transactions by catalogue and stock turn. So far only 44/136 acute Trusts have submitted their data. The Model Hospital is up and running and will go into beta testing in July. Ian encouraged all members to ensure their data has been submitted as it will be very obvious which Trusts are outstanding when the results are published.
- 3.12 Operational delivery plans have been finalised and due to be presented week commencing 12th June. Ian agreed to share the workplans and how they can best be supported.
- 5.2.2a With regard to the NCP programme, all details giving details of products already launched and timelines of future product launches are available via the NHS Supply Chain website. NHSI will review shortly and Ian will circulate the report.
- 8.4 Ian confirmed that the contact list has not yet been compiled – action still outstanding.
- 8.6 This action had been put on hold during Purdah. Ian confirmed that the data is almost ready and should be available for circulation in July by which time the data will have been refreshed and will provide information up to the end of March 2017. Ian reported that the data shows that 85 Trusts have delivered £200m of savings which is half the target set by Lord Carter. Question was raised as to how the PPIB tool will be funded going forward and Ian confirmed this is still under discussion.

- 4.2 Further updates were provided on the following outstanding actions:-

- 5.3.4 Emma confirmed that the pack of financial initiatives had been circulated to all members. The Board was asked to provide a couple of volunteers to assist with the further work required and the information gathered will be shared with the Board. Emma and Brian Mangan will visit the new FD at Leeds Teaching Hospitals NHS Trust when in post.
- 5.1a The future workplan was dealt with later in the meeting.
- 7.1 Stacie Croxton reported that this has been dealt with in part. The mapping has been done and the data has been provided to the NHSBSA to produce a savings report. Stacie advised the Board that NHS Supply Chain have worked with the Shelford Group on a case study showing the benefits of switching sutures and this will be shared.
- 10.0a With regard to the paper being produced showing how the various initiatives are fitting together in the FOM, Celia confirmed that this has been completed and will share for circulation with the minutes.
- 5.2.2b Stacie informed the Board that this matter is still on-going. NHS Supply Chain have received some intelligence from Trusts who are getting better prices by buying direct. Gloves will become part of the NCP programme going forward and mini comps will be used to negate the price increases.
- 5.2.4 STP representative asked to follow up on emails to DoPs within Trusts that have not provided their base data
- 5.3.5 Neither Will Laing or Lee Bond were in attendance at the meeting. Update to be provided before the next meeting
- 8.4 Ian White to circulate Model Hospital data to enable internal procurement teams to map it against the delivery of CIP targets.
- 8.6 Ian White to provide Model Hospital data, taking into account the different skill/ability records

09/06/5 Messages from National Customer Board

- 5.1 The National Customer Board hasn't met since the last meeting on 4th April, an update of which was shared at the Northern Customer Board meeting on 9th April. It was agreed that the 'Key Messages' from National & last Northern Customer Board meeting, and 'Public Report' be circulated with the minutes.
- 5.2 The Chair informed the Board that an update regarding the procurement model at Kings College Hospital NHS Foundation Trust has not yet been received. Sindie Clark to speak with London Customer Board Chair concerning King's IFM model for sharing with the members.
- 5.3 Ian White agreed to share the position against each target, across the Northern footprint/economy area.

Section 3 – Progress review and workplan

09/06/6 Review progress against objectives for the Northern Board

- 6.1 **Terms of Reference**
The Terms of Reference for the Northern Board were agreed by all members. SMART objectives to be inserted from the finalised iteration of the regional workplan.
- 6.2 **Priorities/Developing Workplan**
The proposed 2017 priorities and draft workplan were shared with members for comment. All were generally in agreement with both, with a couple of small amendments. Andy Harris commented that the Customer Boards need to be more task orientated and members should be assigned to specific tasks. Sindie Clark will update the workplan as agreed and circulate with the minutes, with a view to ratification of them at the next Northern Customer Board.

The member representation map included in the pack highlights areas where there is less representation; Cumberland & Westmorland. The Chair will review and consider where further representation is required and invite Trust representatives to the Board to address those gaps.

6.3 **NHS Supply Chain**

6.3.1 **Dashboard highlights**

Stacie Croxton highlighted that to the end of May, £233m of validated cash releasing savings towards the target £300m has been achieved, ahead of forecast. To achieve the target, the savings figure needs to reach £4.5m per month and Stacie reported that despite monthly price increase challenges from suppliers, the current rate of savings is £6.5/£7m.

The Northern region is performing well, with the regional savings as a percentage of sales at 4.7% and is still the best performing region in the country.

NHS Supply Chain account managers are currently focussing on providing support to every acute Trust to show where switching via Compare and Save and the NCP programme will enable the greatest level of savings. The Chair was keen to see the NHS Supply Chain's engagement strategy include smaller District General Hospitals. Stacie agreed to attend specific forums, e.g. STP meetings, NE Ambulance forum, once provided by members.

6.3.2 **Core List programme and Nationally Contracted Products (NCP)**

Couch Rolls went live on 27th March and Helen Lisle commented that there have been issues in her Trust with increased usage. Stacie reported that usage at every Trust is being reviewed and any issues will be dealt with accordingly.

Blunt Fill Drawing Up Devices went live in April.

24 category strategies have now been agreed and details of these were shared within the pre-read pack.

6.3.3 **NHS England HCTED programme support**

NHS Supply Chain talked through the relevant slides within the dashboard.

6.3.4 **Cardiology 'Super-tender'**

Stacie reported that the cardiology super-tender has been significantly delayed due to trade association challenge and supplier responses. Award is imminent and a communication will be issued once the contract has been issued. Stacie Croxton to provide a comprehensive update at the next meeting.

6.3.5 **Personnel changes**

Gareth Harvey updated the Board on recent personnel changes within the NHS Supply Chain structure. The Northern region now has a full complement of account managers and the only role waiting to be backfilled is the Clinical Nurse Advisor to replace Karen Hudson who has joined the NHS Clinical Evaluation Team. Trusts should see much more engagement and the account managers will specifically target those Trusts who currently realise less than 3% savings against spend.

6.3.6 **Clinical Engagement Groups (CEGs)**

Andy Harris advised that NHS Supply Chain account managers have been tasked with providing the detail of where Trusts employ Clinical Procurement Specialist Nurse (CPSN) and/or CEGs. This information should demonstrate if there is a correlation with the level of savings achieved and the measure of success rate where a CPSN is in place. If this is found to be true Andy would like to consider sharing effective systems and processes (*e.g. Terms of Reference for the group, job descriptions, support*) with other Trusts, encouraging other Trusts to put CEGs in place. Progress of these newer CEG-prevalent Trusts will be RAG rated; thresholds to be determined.

6.3.7 **Capital**

Mark Brian advised the Board about the latest capital initiatives that are currently being worked on.

Mark informed the Board that currently only 9/50 acute Trusts in the Northern region have Capital plans in place and work is being done to show where Trusts have bought effectively and opportunities have been achieved via aggregated savings.

Mark reiterated that capital planners are available to help each Trust to develop a plan. It was suggested that the details should be included in the data provided to NHSI.

The Chair queried the data and offered the Board's support in progressing any challenges facing targets identified by the Capital team, *e.g. support increased traction*. The Chair expressed that Trust level data would be helpful/useful. Mark agreed to provide more granularity going forward, i.e. to individual Trust level and the benchmark against last year will be shown.

Mark agreed to submit two papers for discussion at the next meeting; risk paper focussing on the threat(s) to Capital, DH funding streams (in celebration of its fifth anniversary.)

6.4 **Crown Commercial Service (CCS)**

- 6.4.1 Emma Graham referred the Board to the dashboard which had been shared showing that spend through CCS is up in the Northern region and Trusts are better utilising the agreements that are available to them.
- 6.4.2 Reference was made to the case study in the pre-read pack showing how CCS had helped 11 NHS Trusts to save c£832k through aggregated procurement on video conferencing services.
- 6.4.3 Included in the quarterly newsletter were details of webinars being held to provide Trusts with an overview of the Technology Products 2 framework. Members were encouraged to cascade to their Trust colleagues.
- 6.4.4 Emma gave details of the CCS account manager for the Northern region, Fiona, will visit Trusts to develop workplans with them.
- 6.4.5 Emma introduced Angela Donohue, Workforce Lead, Health, to the meeting. Angela explained that there are currently three frameworks in place; Clinical, Non-clinical and Workforce Management. All CCS agreements are NHSI approved and have price caps built into them. Workforce spend in the Northern region is circa £184m.
- 6.4.6 CCS is currently working on a number of new initiatives collaboratively with hubs and with individual Trusts. Angela pointed the Board to a case study available on their website (link provided in the quarterly newsletter in the pre-read pack) showing how NHS Trusts worked together to save £9m on locum doctors.
- 6.4.7 CCS is developing their workforce solutions, looking at things like how can CCS help Trusts work more collaboratively, such as shared banks. CCS is keen to engage with Trusts to understand what is needed in the future so that agreements can be shaped to meet them in the future.
- 6.4.8 Update was provided that a different model for the next round of frameworks is being developed for workforce; it is being rolled out in central government this year and will come into the NHS in 2019. CCS is looking to work with Trusts to reduce agency spend and develop total talent management. Angela is looking for clusters of Trusts to pilot some of the agreements and input into the new frameworks and the Board was asked to provide volunteers.
- 6.4.9 Angela Gaskell commented that her Trust had received great support from CCS with regard to video conferencing.

09/06/7 STP Discussion

7.1 STP Footprint and savings measured

- 7.1.1 Stacie agreed to share STP information and this will be circulated with the minutes

- 7.1.2 Sindie agreed to check which Trusts haven't signed data sharing agreement and which data has been agreed to be shared by those who have.
- 7.1.3 The HSJ article will be shared with members with the minutes, when circulated.
- 7.1.4 A recent survey has been issued, via Survey Monkey, to all Customer Board members to ascertain the level of engagement between Trusts and STPs. Response so far has been low and members were encouraged to complete the survey to give a better overview. The link to the survey will be circulated again with the minutes.
- 7.1.5 Representatives from CCS will be invited to attend future STP workshops together with NHS Supply Chain and members of the DH FOM team. Emma Graham and Helen Lisle to further discuss.

Section 3 - Information

09/06/7 Trusted Customer discussion

- 7.1 Andy Harris gave an update on the Trusted Customer programme, which is now directly involved with all national and category procurement strategies and directed members to the summary document which had been included in the pre-read pack.
- 7.2 Andy reported that there are lots of regional events planned and encouraged members to attend. The dates will be shared.
- 7.3 The category towers are currently being assessed for gaps and volunteer specialists will be approached, i.e. Ophthalmology products, Moorfields Eye Hospital NHS Foundation Trust and Spinal, Stoke Mandeville Hospital.
- 7.4 Where Trusted Customers are assessing products that they don't use as Acutes (e.g. podiatry packs), they are asked to feed down to Community Trusts for feedback. Angela Gaskell reported that as a Trusted Customer, she has been liaising with Bridgewater Community Hospital to further support them in aligning with NCP programme in relation to surgical instruments.

09/06/8 Supporting Carter recommendations across the North

- 8.1 It was reported that NHSI is still awaiting data from the majority of Trusts. All members were asked to ensure that their Trusts and those Trusts within their STP have submitted their data. It was agreed to re-circulate the template to all Board members to complete their own data showing data to the end of June. The collated information will be included in the pre-read pack for the next meeting in September.

09/06/9 Update from Collaboratives

- 9.1 **NWPD/Greater Manchester** – still working closely with STPs to drive best practice and visibility of savings opportunities. Group consultants have been appointed and there is a lot of work planned over the next six months to get Trusts to work collaboratively.
- 9.2 **Cheshire & Mersey** – each LDS will bring MOU structure and targets for delivery which will be presented at a meeting to be held on 26th June. DoF of StH&K is the STP back-office SRO. Agency staffing currently at Phase 2 and Angela Gaskell will pick up with Angela Donohue outside of the meeting to discuss. With regard to Radiology, a meeting will be held mid June looking at equipment and plans over the next three years. The Theatre Group project is looking at theatre consumables, including sutures.
- 9.3 **Working Together Group** – currently working on a joint workplan with acutes, mental health and community Trusts to realise savings of c£1.8m by working with NHS Supply Chain on sutures. Engaged with CCS looking at mobile telephony and IT.
- 9.4 **North-East** – meeting regularly. Gareth Harvey will attend the next meeting to develop workplans. Stacie referred to the excellent haemostat project which has been carried out at Newcastle upon Tyne Hospitals NHS Trust, the details of which will be shared.
- 9.4 **Yorkshire & Humber** – the planned joint meeting with STP has been postponed by a couple of weeks. The group is currently developing a workplan to assess how they can best support each

other and this workplan will mirror the Customer Board objectives. A joint Capital workplan is also being developed.

- 9.5 **Shelford Group** – NE PSD is working well in the NE supporting the achievement of NHS Standards of Procurement and delivery a variety of training events and web-based modules.

The region is also benefiting from the work of Shelford with access being offered to projects around standardisation.

Many of the Trusts in the North have or are considering the establishment of wholly owned subsidiaries with procurement often falling within the new companies. For example: Gateshead (QE Facilities) and in recent months CDDFT has established a similar set-up with procurement sitting in their sub-company. NTW has also moved to this set-up. North Tees are currently scoping and South Tyneside and Sunderland are also looking at this avenue. And as you know Northumbria has the Northumberland County Council / Northumbria Healthcare procurement relationship. NB: these are not joint arrangements there are all individually Trust owned.

- 9.6 **Ambulance Service** – current procurement workstreams include projects on Medical Gases and Fleet Management, ePRF, electrodes and working with CCS on tyres. There are plans to work towards the Carter recommendations within the Ambulance Service and there is a meeting on 28th June to discuss this. Sandy Brown's project on electrodes is gaining traction and all members agreed he should be invited to the next meeting to give an update.

07/04/10 Procurement Skills Development Network update/report (PSDN)

- 10.1 **North East:** Helen Lisle is working with CIPS and central associations on a two year plan to move towards MCIPS equivalent for higher education and MoD (CAP) to ensure the course for NHS procurement staff is more NHS focused. Progress includes:
- Cohort 1 is expected to start in September 2017
- An additional 3 Trusts have reached Level 1. Best practice to be shared.

The Practitioner level will be equivalent to level 4, Advanced Practitioner M6. The cost for each will be £3.5k for Practitioner level, £4.5k for Advanced.

North West: An additional Trust has achieved Level 1, taking the NW total to 14. Blackpool, Central Manchester & Salford have achieved Level 2, taking the NW total to 3. It is felt that attainment of Level 3 is far in the future, as further work is required in terms of rationale and implementation.

Yorkshire & Humber: In Yorkshire & Humber the fifth Trust (York) has recently become accredited. And it is expected that 9 out of the 11 Trusts will hold the accreditation by the end of July. The sub-region is considering how best to increase traction.

Communications:

Ian Willis and Helen Lisle to discuss a public sector commercial outlining apprenticeship funding available for Level 4; £9k available. It is anticipated that Level 4 will take 18 months; CPIs + 6 months.

PSDN & HCSA's web-sites will be launched, where evidence will be stored on a sort-term basis.

Ian Willis enquired about additional cohorts across the region. It was explained that each cohort needed to include 16 Trusts as a minimum, and have the funding agreed and in place.

07/04/12 AOB

- 12.1 None received.

07/04/13 Meeting close

- 13.1 The Chair thanked the Board for their commitment and time and brought the meeting to a close. The next meeting is on Friday 8th September between 10.30 and 2.30pm.