

Meeting Report
NHS Southern Customer Board Meeting for Procurement & Supply
31st August 2017
Hilton London Metropole, 225 Edgware Road, London, W2 1JU

Present:		
Board Members:		
	Nick Gerrard (Chair)	Director of Finance and Performance Management, East Kent Hospitals University NHS Foundation Trust
	Greg Dix	Director of Nursing, Plymouth Hospitals NHS Trust
	Alex Gild	Director of Finance, Performance and Information, Berkshire Healthcare NHS Foundation Trust
	Jane Harrison	Procurement Director, NHS Commercial Solutions
	Mark Gronow	Director of Procurement, Peninsula Purchasing and Supply Alliance
	Stephen Orpin	Director of Finance, Maidstone & Tunbridge Wells NHS Trust
	Darren Proctor	Head Of Procurement, Northern Devon Healthcare NHS Trust
	Mark Slaney	Head of Procurement and Logistics, (Acute Services) Torbay and South Devon NHS Foundation Trust
Apologies:		
	Chris Adcock	Director of Finance, Portsmouth Hospitals NHS Trust
	Sarah Brampton	Director of Finance, Devon Partnership NHS Trust
	Naomi Chapman	Clinical Evaluation Team
	Justine Henson	Engagement & Communication Lead, Commercial Division - Procurement Transformation Programme, Department of Health
	Alan Hoskins	Director of Procurement and Commercial Services, NHS South of England Procurement Services
	Martin Sykes	Director of Finance & Strategy and Deputy Chief Executive, Frimley Health NHS Foundation Trust
	Sarah Truelove	Director of Finance and Deputy Chief Executive Officer, Royal United Hospital Bath NHS Trust
	David Robertson	Business Director South, NHS Improvement
	Lisa Thomas	Director of Finance and Procurement, Salisbury NHS Foundation Trust
	Clive Tracey	Assistant Director Commercial Services, Kent Community Health NHS Foundation Trust
	Steve Vandyken	Director of Procurement and Supply Chain, University Hospital Southampton NHS Foundation Trust
	Richard Ward	Procurement Transformation Lead, Royal United Hospital Bath NHS Foundation Trust
In attendance		
	Mark Brian	Head of Account Management Capital, NHS Supply Chain
	Andy Harris	Procurement Delivery Manager – Clinical Supplier Management, NHSBSA
	Steve Milliner	Head of Trust Engagement, NHS Procurement Transformation Programme DH
	Jane Platts	Business Delivery Manager Health, Crown Commercial Service
	Darren Williams	Regional Account Manager, South, NHS Supply Chain
Customer Board Exec:		
	Marie Aubin	Stakeholder Manager, NHSBSA
	Catherine Barker	Stakeholder Co-ordinator, NHSBSA

Part 1

31/08/1 Welcome and Introductions

- 1.0 The Chair gave a brief introduction and explained he had now been appointed as Chair. A brief introduction was made around the table.

31/08/2 Minutes from 7th June 2017

- 2.0 All were in agreement that the minutes were a true and accurate record of the meeting.
- 2.1 All were in agreement that the minutes and pre-read pack should be routinely distributed after each meeting to all Directors of Finance and Heads of Procurement in the Southern region in draft form with the confidentiality reminder as outlined above.

31/08/3 Action Report

- 3.0 The Chair noted that most actions were either complete or would be covered during the agenda.
- 3.1 The Chair asked for two volunteers to work with CCS on developing their workforce strategy. Jane Platts gave an overview of what was expected of the volunteers. Darren Proctor agreed to volunteer and to try and get another volunteer, but it would be from the same region. If no further volunteers come forwards the Chair will link a colleague from his trust in.
- 3.2 Conflict of Interest – All were reminded to complete their declarations. Marie Aubin was asked to send out a reminder.

31/08/4 Update from the National Customer Board meeting 7th July 2017

- 4.0 The Chair drew members' attention to the paper in the pack which summarised the key messages from the National Meeting on 7th July 2017.

31/08/5 Review Draft National metrics and Review and Agree Workplan

- 5.0 Members were asked for comments on the draft National Metrics. Mark Brian asked that rather than submission of Capital Plan the measure should be around engagement in planning, and he agreed to send some suggestions though. Question was raised over what the role of the Customer Board would be in terms of action following reviewing the metrics; the Chair acknowledged that further discussion needed to take place nationally. It was noted that work is being done with CCS on developing their metrics.
- 5.1 It was raised that transparency around trust engagement with the FOM is key moving forwards and the Customer Board has a role to play in this to ensure the model is successful.
- 5.2 All were in agreement that the metrics would be good to use at local level so the data needs to ideally be at individual provider, STP, regional and National level.
- 5.3 The Chair drew members' attention to the draft regional workplan, focusing on the vision and aims and setting the context of how this group can best support trusts, STPs and other key partners. It was tabled that now could be an opportunity to ask the wider healthcare economy what they want from the Customer Board.
- 5.4 Discussion moved on to membership with suggestions being made by Andy Harris. All were in agreement that Mental Health and Community is under represented on the Southern Board, the Chair agreed to pick this up. Commercial Solutions have a mental health and community group who could be linked into the Customer Board. NHS Confed also has similar groups who could be engaged.
- 5.5 It was noted that there has been a failure to engage Medical Directors, the Chair suggested he write out to members asking them to engage with Medics in their trusts.

31/08/6 People and Leadership

- 6.0 Discussion was had on the format of the PPSA and Commercial Solutions meetings, it was agreed that membership of these groups would be re-mapped for the use of the Board and that question would be asked of the Trusts who lead the groups on attendance and invitees.
- 6.1 **PSDN Update**
South West – five, nearly six, acute trusts are accredited to level one. At the National PSDN Board it was acknowledged that there won't be enough trusts hitting the level one target this year and that

there has to be 12 months between level one and level two. Concern was raised that there won't be enough assessors to be able to accredit trusts to level two. The Task Force training sessions are trying to be re-kindled and the South West are being asked to try and support South Central and South East.

South East – there are no assessors and no trust has been accredited, so level two on 1st September 2018 will not happen.

It was summarised that there are significant gaps that need to be plugged in terms of process and assessors Mark Gronow agreed to share a list of assessors. All were in agreement that the new NHSI Heads of Procurement should become assessors to speed up the process and once a trust has reached level one accreditation they can then become assessors.

6.2 **CCS Update**

Jane Platts provided an update on the new style data pack and asked for feedback from members. A request for more granular data was made. There is a lack of clarity of additional forums for CCS to engage with the South through. A request was made for members to highlight the key strategic areas that CCS should be covering at the Boards. Suggestion was made that the Carter data could be used to highlight key areas to target such as electricity where the South has been seen to be an outlier.

6.3 **Trusted Customer Update**

Andy Harris provided an update on the programme referring to the paper included in the pre-read pack which gives an update on the 24 categories. Customers were recently invited to two events, one in London and one in Chester where a programme update was provided. There is a sense that clinicians feel as though they are not being engaged in this process. With regards to future events, these have been put on hold due to the imminent award of future categories and therefore it would be inappropriate for NHS Supply Chain to be presenting their strategies. The programme has been recruiting further partners to bridge some gaps and ensure the FOM is supported. The programme is being integrated into the FOM now and is really becoming embedded. Alex Gild volunteered Berkshire Healthcare NHS Foundation Trust to work with Andy Harris from a Community perspective.

31/08/7 Process

7.0 **NCP**

Darren Williams gave an update on NCP. There are product areas which have been moved back in terms of launch timing from Q3 to Q4, Sharps, Pads and Copier Paper have both also been added to Q4. There are a number of contracts that NHS Supply Chain hold which are being transferred into the NCP programme. With regards to Exam Gloves, Latex and Vinyl have been awarded and stock has been secured for the next 12 months with a small price decrease. The Nitrile Gloves is on-going and unlikely to come through in Q3, it is more likely to be Q4 2017. Trusts need to be encouraged to follow the NCP approach as there has been activity in the supplier base to undermine the National approach. Parallel was drawn to agency staffing and how NHSI need to support trusts in this situation. The Chair agreed to communicate to the region that they need to support the NCP programme and not go with supplier deals that undermine the National Programme.

Question was raised over whether outsource organisations can utilise NCP contracts, as long as the NHS organisation sees the price benefit then theoretically it is possible. A request was made for the revised launch dates to be issued out.

7.1 **PEPPA**

The Carter metric for PPIB log in was raised, members were updated that this was a topic of discussion at NPF and NHSI has been asked to look at the usefulness of this as a measure and the behaviour it could drive in trusts.

NHS Supply Chain has had very few requests where customers have come to them saying that their price is higher, possibly because trusts are just making the switch to lower cost providers, whereas they have had lots of requests from trusts wanting to move over to NHS Supply Chain where they are cheaper.

The complexity over comparing like for like pricing was discussed; the impact of things such as rebates makes comparisons more complex. The NHSBSA is working with NHS Supply Chain on rebates and what to do with them to facilitate the Carter principal of transparency.

Discussion moved on to how trusts move the agenda to whether the right products are in fact being used for the right procedures once the best price has been achieved, an example of which was couch rolls and whether if appropriate decontamination is done whether it is needed at all. The FOM will drive an interactive process of improvement where the basics are achieved and then improvements made from there. Work is being done to understand the link between clinical procurement colleagues being involved and driving savings and standardisation improvement.

7.2 **STP**

In Wiltshire there is now a combined plan with NHS Supply Chain, Kent is also trying to achieve this but it may be less feasible due to the way they work. Dorset is also working at STP level on Pathology. Mark Gronow raised that consideration needs to be given to developing procurement strategies at STP level when actually it works already at an even greater aggregated level through organisation such as PPSA. Suggestion was made to ask Richard Ward to present to the Board on the work being done by Wiltshire.

It was agreed that the STP survey would be re-circulated.

31/08/8 Quality

8.0 **Scan4Safety**

A round table discussion took place with acknowledgement that it is a massive undertaking and commitment for trusts. Update was given that things are going well in Plymouth, the medics are really well engaged. The Trust is holding an open day mid-September for other trusts in the region. The DH confirmed that the business case for funding for the next 25 trusts is in sign off stage, the note is due to come out in January 2018.

8.1 **CET Update**

Greg Dix provided an update on the work of the CET, the first round of clinical reviews are completed and are all on the website. The CET has been approached by suppliers who haven't received three stars for their products on how to improve their product to get a three star rating which is positive behaviour. Further funding has been secured for further roles in the CET.

Update was given on the great work on electrodes across the ambulance sector. Further reviews on a number of products are also underway; it is a very busy time for the CET.

Close work is being done with the Royal Collage of Nursing particularly on the 'Small Changes Big Difference Campaign'. However, there are still challenges linking in with doctors.

It was agreed that the Clinical Maturity matrix research would be updated by Greg following the CRB meeting in September and shared again with the Southern Board.

Question was raised over how uptake of products following CET evaluation is tracked; going forwards the DH confirmed this would be captured under the FOM.

31/08/9 Performance

9.0 **NHS Supply Chain Update**

Darren Williams provided update on the NHS Supply Chain savings, which were at £239.2m by the end of June 2017. There are still a number of challenges in the market however in Capital and Consumable the business is on track to meet its target. Overall the Southern region is doing well as, particularly against the NCP programme. Further work needs to be done to understand the decline in volume spend through the NHS Supply Chain contract, there is a belief that this could be due to work happening in SPP and also non-transacted purchases.

Customer satisfaction hit a peak number of 8.5, the highest it has been recorded as, which should demonstrate the service is delivering what customers need to support them.

Some of the savings numbers in the South East Trusts are slightly skewed due to a rebate from B. Braun which comes through all together through Commercial Solutions, also some of the usage declines in the region are due to services being closed or moved over to other trusts.

Challenge was raised over the NCP figures and some trusts are 100% compliant, but due to low volume are not highlighted as being a top trusts, explanation was given that it is a % of spend volumes submitted to the NCP programme as a baseline.

Members' attention was drawn to the STP data, which going forwards may be used as an indicative measure of engagement. An overview of the way of working with Wiltshire was given, although only a few meetings have taken place a number of opportunities have already been implemented and new opportunities have been identified, the end to end process has been speeded up enabling faster realisation of savings.

9.1 NHS England Zero Cost Model

Members' attention was drawn to the papers in the pack, with a few trusts in the region needing to submit baseline data, they will be picked up with individually. Discussion moved on to how things will work through PPSA, update was given that agreement has been reached between PPSA and NHS Supply Chain to support the NHS England Zero Cost Model.

9.2 With regards to the outstanding engagement action form the last meeting, Darren Williams provided update that all trusts have been approached about the prompt settlement discount, due to trusts' financial positions they are looking at where the lowest penalty is for late payment, rather than where prompt payment is rewarded. Confirmation was given that there aren't any trusts in the South that NHS Supply Chain is not engaging with.

9.3 Capital

Savings are ahead of plan; everything is being done to drive best practice. There is a general feeling that plans are not getting signed off as quickly which is inhibiting planning. The drive is to improve engagement which will facilitate better planning. There is now an MTA calendar which gives visibility to trusts and will facilitate greater savings. There was acceptance the model is proven and the more uptake the better the savings to the NHS. Where trusts have plans, the Customer Board has a role to play in ensuring they are submitted through the Board. It was agreed that maintenance would be added on to the Capital dashboard.

9.4 A final point was raised around recycling of capital items such as beds between trusts, it was confirmed that there is nothing up and running at present.

31/08/10 AOB

10.1 The Chair summarised the key points and those that would be escalated to the National Board. He asked for members to seek feedback from their wider network on what the Customer Board could do to be more useful and to also come forwards with recommendations for membership.

Part 2 – Closed Session

Steve Milliner from the DH provided an update on the FOM. A briefing document is due out from the DH by 11th September 2017, summarising all the information on the FOM, there will be supplementary information on the Office Solutions contract. The following week there will be webinars to provide additional communications and support.

The Chair brought the meeting to a close and thanked members for their attendance. The next meeting will be held on Wednesday 15th November 2017.