NW PROCUREMENT ACCREDITATION – PEER REVIEW MEETING
NOTES OF MEETING HELD ON THE 30th JUNE 2015

<table>
<thead>
<tr>
<th>NAME</th>
<th>ORGANISATION</th>
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<tr>
<td>Jacky Bowman</td>
<td>NW Procurement Office</td>
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<tr>
<td>Karla Cartwright</td>
<td>Wrightington, Wigan and Leigh NHS Foundation Trust</td>
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<td>Sue Colbeck</td>
<td>Aintree University Hospitals NHS Foundation Trust</td>
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<td>Mick Guymer (Chair)</td>
<td>North West Procurement Development Office</td>
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<td>Daren Hopkinson</td>
<td>North West Ambulance Service</td>
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<td>Elizabeth McKenna</td>
<td>Salford Royal NHS Foundation Trust</td>
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<td>Chris McNamara</td>
<td>St Helens and Knowsley Teaching Hospitals NHS Foundation Trust</td>
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<td>Brian Mangan</td>
<td>North West Procurement Development Office</td>
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<td>Lisa Nightingale</td>
<td>Central Manchester University Hospitals NHS Foundation Trust</td>
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<td>Julie Rice</td>
<td>Pennine Care NHS Foundation Trust</td>
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<td>Diane Sinclair</td>
<td>The Christie NHS Foundation Trust</td>
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<td>Louise Timms</td>
<td>Bolton NHS Foundation Trust</td>
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IN ATTENDANCE
Carolyn Harding - Finance Skills Development
Richard Perrin - Central Manchester University Hospitals NHS Foundation Trust

APOLOGIES
Angela Gaskell - St Helens and Knowsley Teaching Hospitals NHS Foundation Trust
Joe Lever - Salford Royal NHS Foundation Trust
Tracy Smith - Mersey Care NHS Trust

1. Welcome, Introduction and Apologies
Mick Guymer (MG) welcomed everyone to the meeting and also welcomed the three new members, Karla Cartwright (KC), Lisa Nightingale (LN) and Louise Timms (LT). The apologies were noted.

2. Notes of the Meeting held on 25th February 2015
The notes of the meeting held on 25th February 2015 were noted. MG advised there is one change which would be brought up under 3.3 Matters Arising. The notes were then agreed as a true record.

3. Matters Arising
The following were matters arising from the meeting on 25th February 2015

3.1 Website Development
Jacky Bowman (JAB) advised that a meeting was being set up with Mike Doyle (MD) and would report back at the September meeting.

   ACTION: JAB

3.2 Guidance on evidence
JAB advised that no responses had been received from members of the group with regard to the revised guidance on evidence, therefore, the changes were agreed.
3.3 Assessors

MG advised that with regard to point 5 – Procurement standards status report – from the notes of the 25th February meeting what he should have said was “As Towards Excellence is a peer review process, in order to establish and retain credibility, it is essential that assessors are either Heads of Procurement or individuals holding posts at a senior level within the procurement function and are professionally qualified and CPD active”.

4. Assessments

4.1 The Christie NHS Foundation Trust – Level 1

The Pre-assessment was undertaken by Elizabeth McKenna (EMcK) and the assessment was undertaken by EMcK, Tracy Smith (TS) and Chris McNamara (CMcN).

EMcK advised that they had a short meeting with Suzanne Robinson (SR) the Deputy Director of Finance which cemented the commitment to the assessment, gave full assurance that procurement has a high profile within the Trust and is an integral function of the organisation. It was evident that Diane Sinclair (DS) and the procurement team are highly regarded within the finance team and the trust as a whole.

The Christie NHS Foundation Trust’s procurement department is well organised and provides an effective and efficient service to the organisation. It was evident that the department is well regarded within the Trust and contributes to the achievement of the Trust’s corporate objectives.

The following areas of good practice were taken from the assessor report:-

- The procurement team have a video on the intranet that provides details on the whole procurement process and the relevant SFI’s and EU Procurement Legislation.
- The head of procurement signs off all business cases and all award documents so has a holistic view of all spend within the trust.
- The Christie have a really good staff suggestion scheme for savings
- The procurement team look at aggregated spend and are accountable to the audit committee.

DS advised that she would be happy to share the areas of good practice on the PSD website.

Brian Mangan (BM) suggested that it would be good to try and get the same engagement with other Directors of Finance. JAB suggested that the Director of Finance Engagement meetings would be a good forum to promote Towards Excellence Procurement and mentioned that perhaps Sue Robinson could speak on behalf of the Christie FT, as well as representatives from Wrightington Wigan & Leigh FT, given that they were the first organisation to attain accreditation across all 3 disciplines. It was agreed that this would be a good idea.

**ACTION: JAB**

Following a discussion it was agreed to award The Christie NHS Foundation Trust accreditation at Level 1.

4.2 Central Manchester University Hospitals NHS Foundation Trust – Level 2

Lisa Nightingale (LN) and Richard Perrin (RP) made a presentation to the Group which included the following:-

- Increasing collaboration, e.g. (Shelford Group, NWPD)
- Leading on GS1 adoption
- Finance Transformation Project
- Focus on data
- Professional qualifications and training across the department
- Fostering links with wider business community, inc. corridor & GMAHSN

The assessment was undertaken by Julie Rice (JR), Daren Hopkinson (DH) and Dan Garvey (DG). As this was a Level 2 peer to peer assessment it was felt appropriate that the Trust’s Director of Finance, Sam Simpson, was fully engaged with the review. Sam Simpson made herself available and gave an overview of Procurement’s integration not only with the wider organisation at both a strategic and operational level but also with the wider finance team. Sam felt that Procurement are held in high regard across the Trust and are seen as innovative and forward thinking. This enables Procurement to meet the Trust’s requirements and objectives, particularly during the current financial climate.
DH advised that the assessment predominantly took the format of LN and RP leading with key individuals joining to discuss relevant evaluation relevant criteria during the day. The evidence was reviewed and discussed, by the panel, so that a clear understanding could be gained of how it supported the each criterion. The wide range of individuals who the panel met demonstrated how embedded the NHS Standards for Procurement are across the Procurement department and the wider organisation. This was further demonstrated by Sister Carole O’Brien, Lead nurse for Theatres, who discussed the recently introduced inventory system and identified some of its advantages not only from a stock control and efficiency perspective but also from supporting and improving patient care.

The following areas of good practice were taken from the assessor report:-

1.3.2 – Initiatives in place to raise levels of efficiency awareness. There are various posters around the Trust designed to raise awareness of cost efficiency campaigns. Any savings are directly equated to WTE posts saved. The Procurement Department have the freedom and support from the executive management team to raise awareness and have support for new initiatives.

2.1.1 – Detailed NPE data is captured by category/ supplier and detailed line item from AP and PO data which is analysed using proprietary business analytics tools. Data and information. Removed reliance on Suppliers proving data. Have an analytical team as part of Procurement reviewing data, creating reports, dashboards and KPI’s, linking DISCO, NHSSC and AP Forensics. They undertake “Deep Dives” into specific data/reports. The years of data allow for various comparisons, e.g. last week, last month, last year. In addition the new inventory system will provide additional reports and data.

2.3.2 – E- procurement solution operating effectively and transacting significant expenditure/ volume based on GS1. A new stock management software package has been introduced in the theatres which is GS1 compliant. The system is modular and will be rolled out across the Trust as opportunities and funds become available, including FRID tagging of equipment

2.6.4 – Policies and procedures are in place to assist with the control of commercial/ sales representatives on site. Policies exist and are embedded across the stakeholder network. Stakeholders recognise the benefits of controlling access of representatives and ensuring that procurement are fully engaged in supplier meetings from an efficiency, economic and innovation perspective. They have a Supplier Guidance document on the internet and issue a supplier pack to new suppliers that engage with them.

3.4.1 – Procurement policies and initiatives clearly support engagement of “encouraged enterprises”. CMFT hold and or attend regular meet the buyer events. In addition, a database is held of all suppliers who contact Procurement so that as procurement opportunities arise they can be informed of any appropriate opportunities. The use of Contracts Finder Pipeline supports the National agenda to help SME’s. Vendor records have been amended in Oracle to identify SME’s to ensure they are paid sooner (providing a 3 way match). They have used Survey Monkey questionnaires to engage with vendors in particular when working to identify SME’s. They are also used after projects or tenders to obtain feedback.

DH concluded by saying that Central Manchester’s Procurement department is a well organised and provides an effective and efficient quality service to its organisation’s stakeholders at both a strategic and operational level. The Procurement department appears to be well regarded, within the organisation and is seen as an enabler to support the Trust meeting it corporate objectives. Stakeholder engagement is at a high level with stakeholders recognising that Procurement contribute to patient care. The senior Procurement team are working hard to develop opportunities to improve efficiencies to support the Trust’s agenda.

Following the presentation MG asked how they had differentiated between the move from level 1 to level 2. DH advised that it was more about how things are embedded which was evident when they came to do the assessment.

BM suggested that with regard to the procedures around AP, it would perhaps be beneficial for a paper to be written to share as best practice. JAB suggested that perhaps a joint session with finance and procurement to share best practice around embedding of AP. BM advised that he would arrange a meeting with LN and DO to discuss.

**ACTION: BM**

Following a discussion it was agreed to award Central Manchester University Hospitals NHS Foundation Trust accreditation at Level 2.
5. **Procurement Standards Status Report**

The Status Report was discussed and will be updated in line with today’s meeting and will be circulated to the Group. JAB advised that Warrington & Halton Hospital have deferred their level 2 assessment until the September 2015 meeting.

**ACTION: JAB**

6. **National Updates**

**Capability Meeting Notes** – MG advised that the notes from the May Capability Meeting are now on the website and CH agreed to circulate to the group. MG also advised that he would be attending the next meeting which is taking place on 1st July as they will be discussing the development of a mentor process. MG advised that he is going to raise creating a PSD structure in line with the FSD structure and Hazel Rushton from the network is also going to attend the meeting. MG will update at the September meeting.

**HCSA DH Peer Review Proposal & HCSA DH Procurement Standards Q&A Sheet** – the documents were discussed and noted, however, MG felt that not all areas are encouraging the peer review process and JAB advised that not all areas have the Network the North West has.

7. **Any Other Business**

7.1 **Proposed Branding for Accreditation**

JAB tabled the proposed branding for the accreditation process across all three disciplines. The aim is for organisations who have been successful in being accredited, could include the branding as part of their email signature. JAB advised that the proposed branding would be taken to the various meetings for formal approval.

7.2 **Elizabeth McKenna**

EMcK advised that she would be leaving Salford Royal in September. MG thanked EMcK for her hard work and commitment to the Group and wished her well for the future.

8. **Dates for 2015**

23rd September at 10:00 – Seminar Room, Halton Education Centre, Halton Hospital WA7 2DA