

Procurement Shared Service Strategy 2017 – 2021



Providing a professional procurement service to one of the largest geographical areas of any NHS Trust and Local Authority in England

Document Control

Version Control

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Approvals

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2.0	07/04/17	SSBP	Procurement Shared Service Board
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1. Reference Documents

Document	Date
Shared Procurement Service Business Case	March 2014
Better Procurement, Better Value, Better Care – A procurement development programme for the NHS	August 2013
Operational Productivity and Performance in English acute hospitals: Unwarranted variations (an independent report of Department of Health by Lord Carter of Coles)	February 2016
NHS Procurement and Commercial Standards	July 2016
National Procurement Strategy for Local Government in England	September 2014
Northumbria Healthcare NHS Foundation Trust 5 year strategy 2014 - 2019	2014 - 2019
Northumberland County Council Corporate Plan 2013 - 2017	2013 - 2017
Northumberland County Council Economic Strategy 2015 - 2020	2015 - 2020

2. Preface

2.1 Purpose

The purpose of this document is to set out the strategy for the shared procurement service between Northumberland County Council (NCC) and Northumbria Healthcare NHS Foundation (NHFT) for a period of four years between 2017-2021. The strategy builds on the agreed shared vision between the two organisations, and the subsequent approval of the business case in June 2014, to develop a shared procurement service to provide a sustainable cost effective procurement service for both stakeholders.

The shared objectives for the procurement service are;

- To deliver a value adding sustainable professional procurement service
- To maximise collaborative spend and savings opportunities
- To increase economic benefits for Northumberland

The purpose of this strategy is to provide elected members, Trust Board members, staff across the two organisations, suppliers and the public with an understanding of the context of Northumberland County Councils and Northumbria Healthcare NHS Foundation Trust procurement activity, and to set out the direction this will take over the period of this strategy.

The strategy has been designed in the context of the two organisations corporate strategies and objectives, and the unprecedented financial pressures both stakeholders are currently facing. In a period of tight finance and rising customer expectations, it is critical that the shared procurement service leverages its combined procurement expertise and purchasing power to secure value for money to the taxpayers.

Procurement as a function is uniquely placed to provide an important contribution to the development of new service delivery models, control costs, achieve savings and deliver value for money solutions. Procurement also has a vital role in supporting the economic recovery and securing positive social and environmental outcomes across the geographic region it covers. The aim of this strategy is to provide a framework for both to be achieved.

It must be however be recognised that procurement is not an activity that is restricted to procurement professionals. Everyone involved in the end to end procurement process has the responsibility for ensuring that the products and services that are selected, bought and used represent value for money, provide the right outcome for patients or residents and are not wasted.

2.2 Strategic Context

NHFT five year strategy (2014 – 2019) states the ambition for the trust is to provide local patients with the highest possible set of sustainable healthcare services by achieving the vision - *“to be the leader in providing high quality, caring, and safe health and care services”*. To achieve this ambition there are six strategic goals set to support the achievement of the vision. The procurement function and this strategy primarily contribute to the achievement of two of the six goals:

- To provide the safest health and care services to patients and service users (by ensuring the products and services that are selected and procured, not only represent value for money, but provide the right outcomes for patients and service users)
- Maintain long term financial strength despite the challenging environment (by consistently applying professional commercial leverage to areas of non-pay spend which can contribute to the cost improvement programme within the trust.

2.3 Audience

This document is intended for:

- Northumberland County Council (NCC)
- Northumbria Healthcare NHS Foundation Trust (NHFT)
- Business Community

2.4 Scope

This strategy in common with the Council and the NHS Trusts individual Standing Financial Instructions and Standing Orders, Contract Procedure Rules and Public Contact Regulations 2015, applies to all commercial spend activity within the two stakeholder organisations.

2 Introduction

2.1 Background

Over the last 10 years there has been the largest contraction in peacetime public sector expenditure, as public sector spending has been cut by an average 28%. This has been coupled with the expectations on public services to deliver better, higher quality personalised and diverse services which are joined up with other public, private and third sector partners.

In responding to this challenge, public service leaders and managers are considering radical changes in their organisational structures and operating models, and sharing back office services has long been seen as one of the models that can reduce an organisations costs. In June 2014 the then three stakeholders, Northumberland County Council (NCC), Northumbria Healthcare NHS Foundation Trust (NHFT) and North Cumbria University Hospital NHS Trust (NCUH) (at this point expected to be acquired by NHFT), jointly agreed at a senior level a business case to develop a shared procurement service for the provision of a sustainable cost effective procurement service, for all stakeholders. The aspiration that a shared service model would allow for skilled procurement resources and leadership costs to be shared, alongside the opportunities for commercial leverage by acting as 'one customer' where there is spend synergy.

The Shared Procurement Service came into operation on the 5th January 2015, and during the first two years of operation which included a period of significant change for both individual teams cost improvement savings of circ £22,159m have been achieved during the financial period 2015/16 and 2016/17.

The shared service composes of four distinct teams:

- Leadership Team – Providing collaborative strategic leadership and managerial responsibility for each team
- Central Contracting Team – Providing specialist procurement and contracts service for procurement activity above £50,000, focusing on stakeholders cost improvement programmes.
- E-Business and Procurement Intelligence Team – Providing and administrating procurement systems and business intelligence to support the procurement function
- NHS Operations team – providing purchasing (procurement activity below £50,000), receipt and distribution and materials management services to the NHS Trust and key to implementation of benefits realisation.

The priority from the inception of the procurement shared service has been to focus on the contribution to the stakeholders cost improvement programme (CIP). To date this has provided a robust project management approach to the trusts CIP. This continues to develop and become more embedded as engagement with business units/directorates progresses.

2.2 Current Landscape

NCC and NHFT cover one of the largest geographical areas of any NHS Trust and Local Authority in England, with a resident population within Northumberland of 315,263 residents.

The Trust provides a full range of health services to over half a million people across Northumberland and North Tyneside. The services are delivered in the community, and at the 12 hospital sites listed below;

- One specialist emergency care hospital in Cramlington
- Three general hospitals at Hexham, North Tyneside and Wansbeck
- Four community hospitals in Alnwick, Berwick, Rothbury and Blyth
- An integrated community hospital at Haltwhistle
- An elderly care unit in Morpeth
- Two outpatient diagnostic centres at Wallsend and Morpeth

The Council provides a full range of local services to the residents of Northumberland including the following

- Environmental and regulatory services
- Planning & Building services
- Housing – Homes for Northumberland
- Public Health services
- Fire and Rescue services
- Education and Children’s services
- Roads, streets and Transport services
- Cultural and related services
- Registrars services
- Adult social care
- Democratic supporting services

2.3 Stakeholders Spend

The two stakeholders combined, have an annual spend of circ £1.4bn (2015/16) of which 40% (circ £600k) are direct employee costs. The remaining estimated £870k of external 3rd party spend is a combination of commercial and non-commercial spend. The breakdown is shown in the following table and diagrams below:

Northumbria NHS Trust FT

Northumberland County Council

Spend Area	2015/16 (£000)	Spend Area	2015/16 (£000)
Commercial supplies & services	61,236	Supplies and Services	215,305
Premises & Establishment	52,395	Third Party Payments	163,912
Drugs	29,361	Capital Charges	111,619
Third Party Payments	11,111	Transfer Payments	94,699
Services from other NHS Bodies	8,047	Support Services	57,268
Purchase of healthcare from non-NHS Bodies	3,598	Transport	49,600
Other	2,236	Premises	27,010
Total External 3rd Party Spend	167,984	Total External 3rd Party Spend	719,413

Diagram 1 Northumberland County Council External 3rd Party Spend 2015/16 (£000)

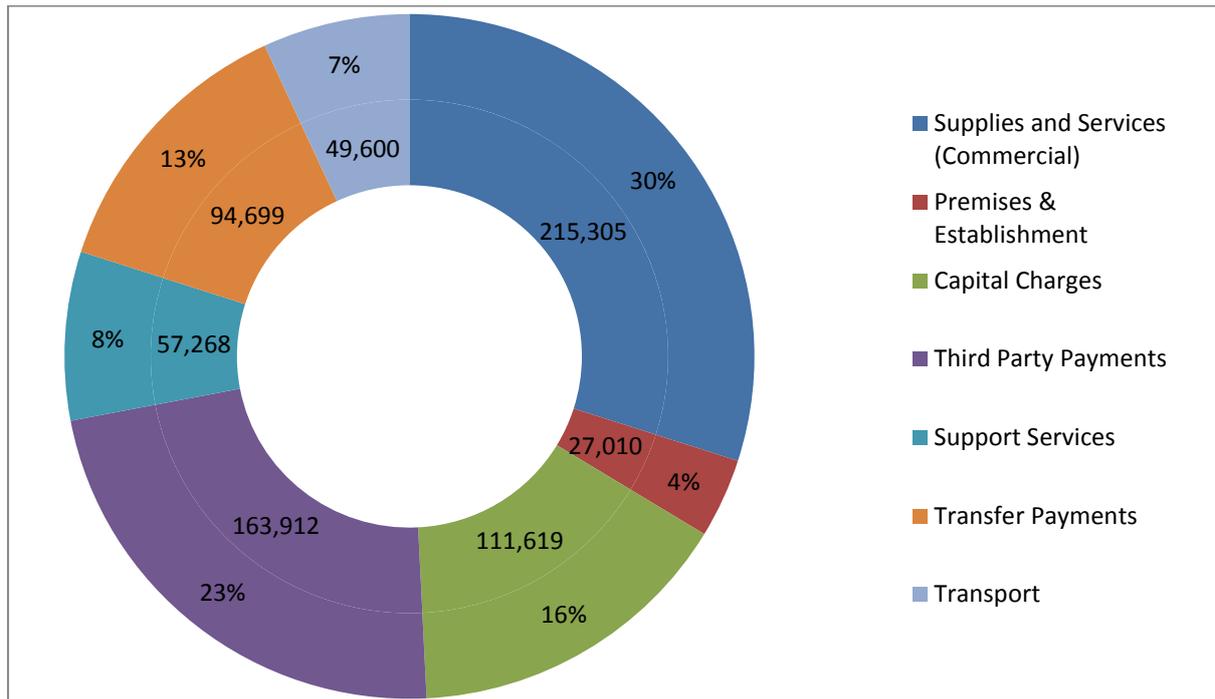
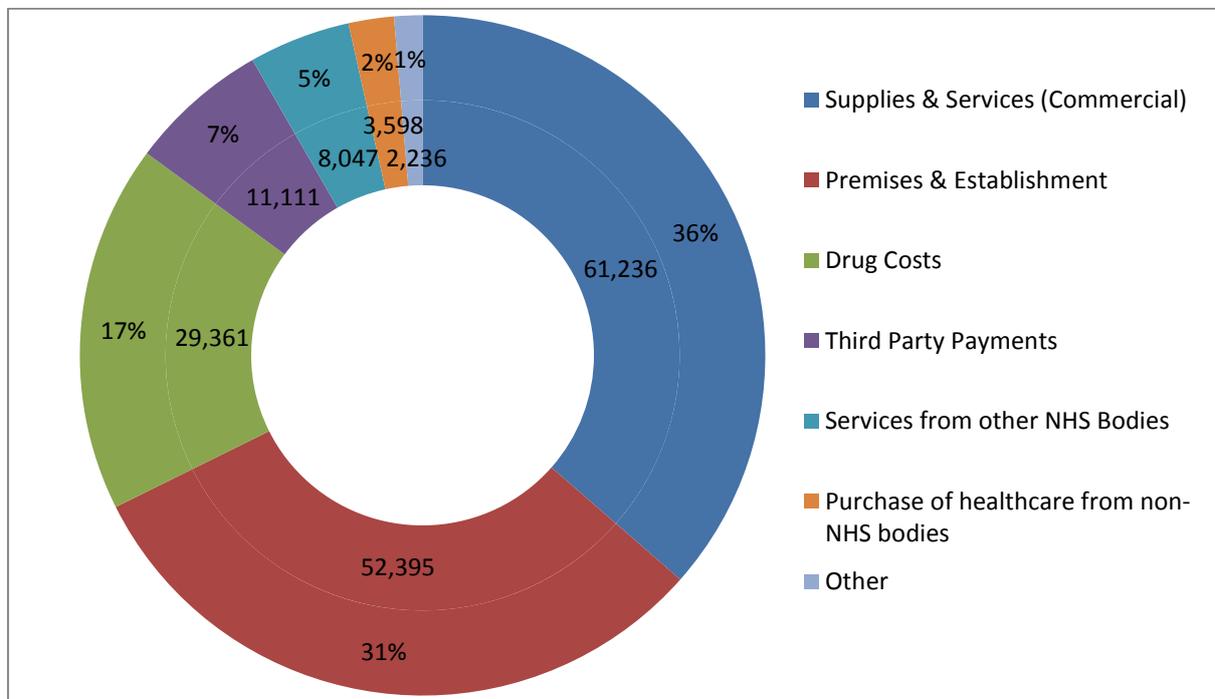


Diagram 2 Northumbria Healthcare NHS Foundation Trust External 3rd Party Spend 2015/16 (£000)



The procurement shared service has categorised the commercial spend which it can currently influence within the two organisation based on 2015/16 procurement spend analysis. For Northumbria Healthcare NHS Foundation Trust it is an estimated £65.9m (39.2% of the total external 3rd party spend) and for Northumberland County Council it is an estimated £99.7m (14% of the total external 3rd party spend).

During the timeframe of the strategy, and as the coding and business intelligence improves, it is expected that a more systematic approach to identifying commercial spend will be established that can be subject to procurement influence.

2.4 External Initiatives/Influences

Between the two organisations there are a number of external initiatives and drivers from central government which will influence the future strategy of the procurement function. They provide the key drivers within this strategy, and by embracing these it is expected that the Shared Procurement Service will be in a healthy position to respond and achieve the required objectives and outcomes both nationally and locally. These include:

- (i) *Operational Productivity and Performance in English acute hospitals: Unwarranted variations (an independent report of Department of Health by Lord Carter of Coles)*

In June 2014 Lord Carter of Coles was commissioned by the Department of Health to review productivity and efficiency in English non-specialist acute hospitals, which account for half of the total health budget and to develop a series of metrics and benchmarks to enable comparison.

The report published in February 2016 identified a £5bn efficiency opportunity – a potential contribution of at least 9% on the £55.6bn spent in acute hospitals. The report makes fifteen recommendations designed to achieve this £5bn and help trusts to improve their performance to match the best.

Recommendation five relates specifically to procurement. “A stretch target of £1bn, with £700m more likely has been identified as efficiency savings from procurement. This has been calculated on the basis of a 9.5% reduction on the £6.5bn clinical and general supplies/services spend plus some additional savings related to agency and estates and facilities spend.”

To achieve this there is the requirement for every acute provider NHS Trust to produce a Procurement Transformation Plan (PTP) to deliver the agreed actions from the Carter review. In September 2015 the shared service developed the required PTP and obtained Board approval. The delivery of the PTP and its outcomes are a fundamental driver for this strategy. Progress and associated key performance indicators will be monitored at Board level, which includes a nominated non-executive director to account for the delivery of the plan.

- (ii) *Sustainable Transformation Plans (STP)*

The NHS is currently driving forward Sustainable Transformation Plans (STP) which bring together the NHS and local councils across 44 areas covering the whole of England. The purpose of the STP is to help ensure health and social care services in England are built around the needs of the local population. Corporate back office services will be reviewed as part of the STP development and as both NCC and NHFT are within the same STP footprint this will facilitate

discussions on how procurement integrates into the future operating model of the corporate back office as part of the STP planning process.

(iii) *NHS e-Procurement Strategy/Scan4Safety*

In August 2014 the NHS e-procurement strategy was published, which establishes the global GS1 coding and PEPOL (Pan Public Procurement On Line) messaging standards to be used throughout the healthcare sector and its supporting supply chains. The objective of the GS1 programme is the adoption of common global standards by NHS providers and their suppliers, throughout their internal and external supply chains. This will create efficiency and quality benefits for all parties.

The national Scan4Safety project has been working to support Acute Trusts within the NHS, initially through six demonstrator sites, to implement the Department of Health (DOH) aim that all NHS Trusts and their business partners should implement standards and common ways of working (base on GS1 and PEPOL).

Through the implementation of these standards, Trusts will be able to better track their patients, products and locations:-

- Patient – improving safety, improving care
- Product – everything recorded, everything accounted for
- Place – everything trackable, everything traceable
- Process – Simplifying processes, releasing time to care

The shared service is following closely their progress and the Trust has established a multi-disciplinary GS1 Programme Board to take forward the initiative and the development of a business case for investment.

Underpinning and enabling progress is the greater use of procurement intelligence in both procurement planning and measurement to improve the outcomes of contracting activity, the addressing of procurement risks, efficiency of transactional purchasing and external benchmarking of performance.

The Shared Service is continually working to improve the quality of information through codification and classification of data and the development of Business Intelligence capability to visualise data to inform procurement planning and measurement.

(iv) *NHS Procurement & Commercial Standards (Revised July 2016)*

The NHS procurement and commercial standards are structured to enable Boards and other key stakeholders to assess and benchmark procurement performance and identify areas of improvement. There are three levels:-

- Level 1 – Building
- Level 2 – Achieving
- Level 3 – Excelling

A target has been set by the Cater review to achieve level 1 by September 2017 and level 2 within three years.

(v) *Social Value Act Review 2015*

The social value act came into force on the 31st January 2013, and requires all public bodies to consider how the services they commission and procure might improve the economic, social and environmental well-being of the area. The act currently only applies to services (not goods or works) above the EU threshold, currently £164,176 at the pre-procurement stage.

Lord Young's review of the Act in February 2015 requested a further extension of the Act to below EU threshold procurements, and to expand it to cover all procurement activity including goods and works contracts. Although this review concluded that this would not be beneficial at this early stage of development of the Act, it is the shared service intention to review all procurement activity over £50,000 and consider how the social and environmental factors can be considered through the procurement process.

Part of the revised sustainable procurement policy agreed by the Shared Procurement Board in October 2015 includes an impact assessment that assesses the economic, social and environmental opportunities on all procurement activity over £50,000. The intention is to review the policy on a bi-annual basis to ensure it reflects local and national initiatives.

(vi) *National Procurement Strategy for Local Government (2014)*

The strategy sets out the vision for local government and encourages all councils in England to engage with the delivery of outcomes in four key areas:-

- 1) Making savings through the effective use of category management, partnering and collaboration, contract management, performance monitoring, risk and demand management
- 2) Supporting local economies by the inclusion of economic, environmental and social value in all contracts where appropriate and improving access for SME and the voluntary sector to do business with the public sector
- 3) Leadership with commitment from the top to recognise the strategic importance of procurement and seeing procurement as a part of the strategic commissioning cycle
- 4) Modernising procurement in terms of scope, use of technology, practices and procedures to help respond to financial pressures through commercialisation and income generation.

3 Shared Procurement Service – Vision and Themes

The vision for the shared procurement service is to simply provide a sustainable professional procurement service which adds value to our stakeholders and supports delivery of cost improvement programmes for each stakeholder.

The strategy is broken down into six distinct themes

- (1) Leadership & Governance & Engagement
- (2) People & Structure
- (3) Processes, Policy and Systems
- (4) Sustainability, Economic and Social Responsibility
- (5) Contract Management
- (6) Collaboration

3.1 Leadership, Governance & Engagement

Executive oversight and leadership is provided via a shared service collaboration agreement, which has been signed by both stakeholders executive lead. The governance arrangements within the agreement is provided by the Procurement Shared Service Board (PSSB) which is held once a quarter and is represented by each stakeholders nominated lead. The agenda for the board covers procurement compliance and performance including a suite of local KPI's alongside mandatory national KPI where appropriate.

The procurement leader reports into each stakeholders senior management reporting structure as required, and the internal engagement structure within the organisations is shown in Appendix A.

It is important that the role of procurement in delivering each stakeholders objectives is understood and supported at every level. Engagement throughout the organisations of the role and value contribution procurement can provide, is an important part of the strategy and will be provided by a range of measures from Board level to operational areas including;

- Identification an NHS Non-Executive Director and an Elected Member procurement champion to provide support for the strategy and its delivery
- Improve and introduce a range of communication channels within the stakeholders organisations on procurement policy, procedures and cost saving initiatives
- Introduce mandatory procurement training for all stakeholders employees who have responsibility for budgets, and to make it part of induction where a new employee is identified as being a budget holder
- Departmental and annual plans to include procurement objectives and initiatives
- Continue with Directorate/Business Unit Spend Focus Groups and Procurement Efficiency Groups
- Regular engagement with specialists who have responsibility for high spend categories of goods and/or services
- Provide a named procurement specialist to work with commissioners for the high value suppliers to ensure contractual and commercial arrangements are optimised
- Integrate procurement into the financial and business planning process

3.2 Structure & People

3.2.1 Structure

The shared service composes of four distinct teams:

- (i) **Leadership Team** – Provides collaborative strategic leadership, consisting of the senior manager responsible for each team
- (ii) **Central Contracting Team** – Providing specialist procurement and contracting service for procurement activity above £50,000. The central team operates on a hybrid category management model.

The Category management approach aims to ensure a cross-organisational view of the major spend areas in order to maximise cost reduction and value for money. The category management approach objective is to;

- Undertake a proactive review of spend in relevant categories to understand the demand side (now and in the future), the supply side, external influences and the competitive nature of the category.
- Consider the total spend in category areas where a requirement is common to more than one operational area
- Review all commercial opportunities to decide on the best sourcing approach for each spend category
- Lead market engagement as a category approach wherever possible to inform innovation and ensure a range of supply options
- Define, classify, baseline, calculate, implement and record the financial and non-financial outcomes of procurement activity in a consistent and robust manner via agreed outcome and benefit realisation reporting.

There are two portfolios of spend; Health and Social Care and Non-Healthcare each led by a Procurement Relationship Manager. Within each portfolio the commercial spend is further sub-divided into high level categories of spend. This is shown in the table below alongside the combined spend in these categories of from 2015/16**.

Health and Social Care Portfolio*	Combined Spend (£) 2015/16	Non-Healthcare Portfolio	Combined Spend (£) 2015/16
Medical & Surgical Equipment (including hire)	6,683,822	Agency/Temporary Labour	11,439,714
Orthopaedic Implants	4,860,632	Waste Management	20,837,656
Surgical Instruments	1,452,159	Utilities	14,879,263
Appliances (including Home Loans)	3,678,702	General repairs and maintenance – Facilities Mgt	4,230,006
Continence Products	1,065,004	Transport and associated costs	6,591,855
Laboratory equipment and consumables	4,927,163	Recruitment and Employment services Telecoms	976,773
Medical and surgical maintenance contracts	1,360,147	Cleaning and Janitorial services and supplies – Facilities Mgt	3,599,738
Patients Appliances	1,613,760	Catering and provisions – Facilities mgt	3,193,540
Social Care Commissioning	16,981,981	Professional Fees	9,068,727
Radiology Equipment	785,777	Consultancy Fees	1,787,160
Misc Clinical Costs	415,186	Office Services	7,755,649
		Plant Hire	3,584,071
		Highways materials	2,659,730

		Grounds Maintenance	1,031,715
		ICT and associated costs	18,580,532
		Utilities	20,837,656
		Training and associated costs	1,874,930
		Furniture and Fittings	1,961,874
		Laundry Services	1,128,982
		Telecoms	3,297,234
		Clinical Waste Management	776,321
		Clothing/Uniforms/Protective clothing	578,518
		Construction	994,604
		Books, publications & media	690,057
		Security services	313,583
Portfolio Total	43,824,334	Portfolio Total	62,911,579

*The healthcare portfolio is expected to follow the national approach and definitions of categories of spend once established

** Established from 2015/16 final accounts of both stakeholder organisations

- (iii) ***E-Business and Procurement Intelligence Team*** – Providing procurement systems administration and business intelligence to support the procurement function, and provide leadership on the implementation of the e-procurement strategy
- (iv) ***NHS Operations team*** – providing purchasing (procurement activity below £50,000), receipt and distribution and materials management services to the NHS Trust, and to provide leadership on inventory management.

3.2.2 People

All staff in the procurement process are appropriately trained and understand the role of procurement within the organisation, which is supported by the procurement staff induction programme and continued professional support. The team already has a significant number of professionally qualified individuals who are encouraged to continue with their continuous professional development via Chartered Institute of Purchasing and Supply (CIPS).

For those members of the team who are not yet qualified, investing in those individuals that undertake prominent procurement roles is key to the delivery of this strategy. The shared service will invest in supporting attainment of professional qualifications or vocational qualifications that are appropriate to service delivery. A good training mix of both “on the job” and classroom academic style training will be supported. A skills gap analysis and annual training plans informed from appraisals will be part of the annual planning cycle.

The Shared Service will make maximum value of training networks such as the NHS Procurement Skills Development Network, the Chartered Institute of Public Finance & Accountancy (CIPFA) Procurement and Commissioning Network and professional development via CIPS (Chartered Institute of Purchasing and Supply).

For budget holders who require an understanding of procurement processes and the value adding contribution of procurement voluntary training will be available alongside mandatory training for all new budget holders to receive a form of procurement training and awareness.

3.2 Processes, Policy & Systems

The shared service has a dedicated Procurement E-Business and Intelligence team who are responsible for processes and systems that are used to support the procurement function. This includes Oracle for purchase to pay systems and e-catalogue management, NHS Supply Chain EDC (electronic data capture) for materials management and inventory management, Due North Pro-Contract for electronic tendering and quotation processes, platforms to support collaboration and spend analytic tools including the national Purchase Price Index Benchmarking (PPIB).

The value and efficiency of these tools and or processes they drive are part of key performance indicators which are monitored at the Shared Procurement Services Board, and contribute to the delivery of the national E-Procurement strategy.

To provide assurance on procurement policy and process the shared service operates from a set of standard operating procedures that are complimentary to the wider organisational policies and procedures, and regularly reviewed both internally and externally.

3.4 Sustainability, Economic and Social Responsibility

The procurement shared service has developed a policy to support both organisations and the wider community in achieving its aims and objectives for a sustainable future. The aim of the policy is to procure requirements for goods, services and works in a way that achieves value for money on a whole-life costing basis, not only generating benefits to the stakeholders but also to the wider society and economy, whilst reducing damage to the environment and creating an improved social impact.

Working in close partnership with the sustainability management groups and key commissioners in both organisations, in line with the Public Contract Regulations, the shared procurement service will identify key areas where sustainable procurement can be achieved, measured and monitored.

The key sustainable procurement objective is to commit to undertake a sustainability and economic benefits impact assessment for each new procurement activity over £50k which incorporates :

- Compliance with the Social Value Act 2012 (including early market engagement where appropriate)
- Consideration of the use of local SME (Small, Medium Enterprises) and the voluntary sector
- Ability to include life cycle costing
- Consideration of ability to reduce or contribute to the reduction of carbon omissions
- Consideration of targeted recruitment and training, particularly in construction contracts over £1m which will use the NSAC (National Skills Academy for Construction) deliverables where appropriate.
- Consider appropriate structure of the procurement, in order to consider the use of 'lots' to maximise SME participation
- Consideration where appropriate of the preventative healthcare developments in specifications as described in NHS England five year forward plan
- Application, where appropriate of CEEQUAL, the evidence based sustainability assessment, rating and awards scheme for civil engineering, infrastructure, landscaping and works in public space

- Inclusion where appropriate of CLOCS (Construction Logistics and Community Safety) standards to manage risk to communities from construction traffic
- Compliance with the Equality Act 2010 and the Public Sector Equality Duty (PSED) considerations

The output of the impact assessment tool makes it possible for the procurement specialists in conjunction with the lead commissioner to assess what sustainability and economic opportunities could be incorporated into the procurement process and/or if further specialist input is required. The assessment works on a traffic light system, red, amber, green. A red indicates a high sustainability or economic impact/opportunity or risk and therefore highlighting the need/opportunity for relevant measures in relation to sustainability, economic and social responsibilities to be included within the procurement process (i.e specification and evaluation criteria)

All members of the shared service team who are members of Chartered Institute of Procurement and Supply (CIPS) are subject to their code of ethics which includes promoting the eradication of unethical business practices. The shared service aims to develop its own ethical procurement and supply policy and supplier charter (providing suppliers with the standards of service they can expect when dealing with the shared service) for adoption by the two stakeholders.

3.5 Contract Management

Both NCC and NHFT spend a significant amount of money with external 3rd party suppliers/providers/contractors, therefore to assist with the delivery of its outcomes and day to day operations. It is therefore important that these contracts and relationships are performance managed appropriately.

The term contract management can be defined as *'A process that ensures that the contract produces the outcomes and benefits envisaged and that any financial or other advantage secured during the procurement process is realised and enhanced through pro-active performance and relationship management'*

The shared procurement service priority and focus is on the procurement of contracts that are fit for purpose, value adding and where ever possible contributing to cost improvement programmes. The function of contract management sits with the commissioner or business unit or directorate (whichever is appropriate) once the procurement is complete, however the shared procurement service will provide a corporate contract management framework to support this role which will include the following:

- Definitions of roles and responsibilities during the lifespan of an external 3rd party contract, including the identification of named contract lead
- Risk Assessment Tool to identify the level of risk associated with each contract to ensure that all contract management activities are proportionate to risk, value and complexity
- A contract performance management toolkit containing a list of key contract activities, which include information and guidance on how and when these tasks should be undertaken
- Relationship management of the key high spend suppliers and a timetable for structured qualitative and quantitative measures are regularly reviewed.

The shared procurement service will be the custodian of the stakeholders and electronic central contracts register which will provide a central database of contracts that have been

awarded by procurement or the award has been notified to procurement. This contracts register will provide electronic alerts for renewals.

3.6 Collaboration

The shared service will engage with other organisations (local authority or NHS) locally, regionally or nationally to develop strategies for common goods and services where it is appropriate and timely. This includes the NHS Supply Chain partnership arrangement. The service will also explore opportunities to procure through existing routes to market as part of options appraisals for all relevant procurement activity.

The procurement leader will continue to be part of national networks including the NHS Procurement Forum which is taking forward the future operating model of procurement within the NHS and the Local Government Associations procurement strategy review taskforce

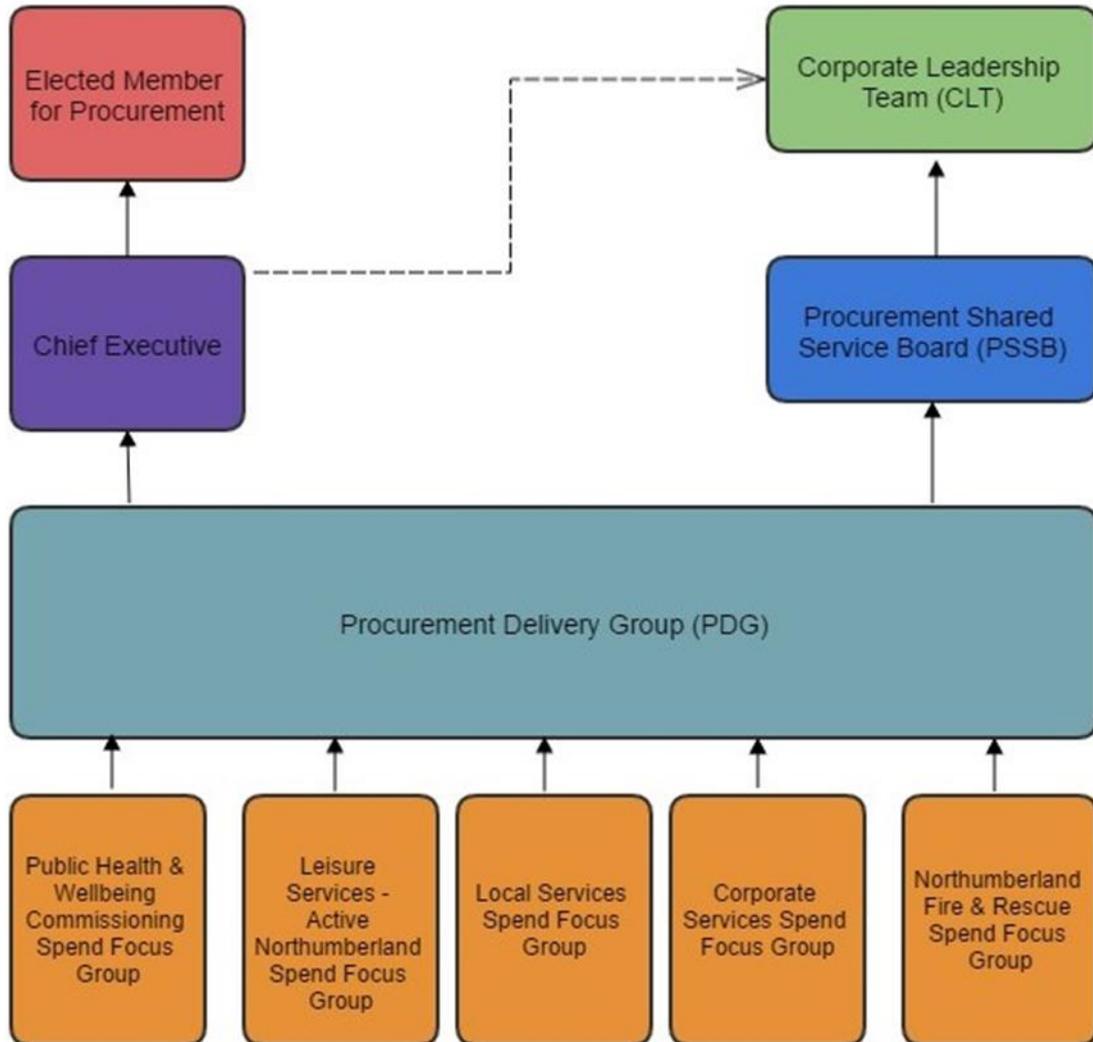
4 Delivery of the Strategy

The delivery of this strategy and its objectives will be monitored by the Shared Procurement Service Board. The key documents that will be used to monitor progress are:

- NHS Lord Carter - Procurement Transformation Plan and associated KPI
- Achievement of the relevant Standards of Procurement
- Stakeholders cost improvement programme requirements
- Procurement activity and outcomes achieved

Appendix A

Northumberland County Council - Governance Arrangements



Appendix A

Northumbria Healthcare NHS FT - Governance Arrangements

