NHS Supply Chain – Value Based Procurement Project - Summary



Phase 1

Pilot study completed

- 27 submissions, 13 pilot projects selected. Covid-19 impacted on 3.
- 2 pilots failed to demonstrate supplier claims.
- 8 verified demonstrating clinical and efficiency benefits.

Key messages:

- Created number of case studies to demonstrate delivery of value (available early 2021)
- VBP approach supported from finance and procurement. View is that VBP should deliver tangible, measurable benefits that make a positive impact on patient care and increased efficiency.
- NHS needs assurance from suppliers to substantiate claims, this will aide VBP adoption.
- Need for common understanding of value between buyers and suppliers.
- Clinical support/engagement critical to adoption of VBP.
- Value created across 5 main categories

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Reduction in consumption	"In patient" to day case	Change in patient pathway	Operational productivity	Reduction in infection
• 2 pilots demonstrated ROI based on higher quality product requiring reduce use of existing products	• 3 different solutions enabling day case surgery with average LOS reduction of 3 days improved theatre efficiency and patient experience	 Solution to maximised opportunity for 10 days of antibiotics to be administered at home rather than in an acute setting 	 Transnasal endoscopy equipment – improved patient experience, clinical outcomes and demand/capacity management 	 Reduction of infection is high risk cardiac patents Reduced CAUTI rates (additional benefit to reduction in consumption)

Pilot project areas

Wound Care, Ward Based Consumables, Endoscopy and Endourology, Cardiology and Capital Equipment



