

# Procurement Strategy 2021 – 2024

**PROCUREMENT VISION** - *To achieve excellence in procurement, supply chain and eCommerce solutions, with a focus on quality, safety, innovation and value for money.*

## **TABLE OF CONTENTS**

<b>Page 3</b>	<b>INTRODUCTION</b>
<b>Page 4</b>	<b>SPEND PROFILE &amp; STRUCTURE</b>
<b>Page 8</b>	<b>CONTEXT</b>
<b>Page 10</b>	<b>KEY THEMES</b>
<b>Page 12</b>	<b>STRATEGIC AIMS</b>
<b>Page 12</b>	<b>STRATEGIC PROCUREMENT</b>
<b>Page 13</b>	<b>PEOPLE &amp; SKILLS</b>
<b>Page 14</b>	<b>SUPPLY CHAIN MANAGEMENT</b>
<b>Page 14</b>	<b>SYSTEMS INCLUDING DATA</b>
<b>Page 15</b>	<b>COLLABORATIVE PROCUREMENT</b>
<b>Page 17</b>	<b>SOCIAL VALUE &amp; SUSTAINABILITY</b>
<b>Page 20</b>	<b>APPENDIX A – IMPACT EQUALITY &amp; COMPLIANCE ASSESSMENT</b>

## INTRODUCTION

The purpose of this strategy is to embed a vision for the direction of procurement at Dorset County Hospital NHS Foundation Trust (DCHFT). This strategy has been developed in line with the relevant legislation and guidelines, and its implementation will ensure a consistent, automated and successful approach to all procurement carried out by the Trust.

**The success of the strategy is hinged on robust clinical and non-clinical engagement with stakeholders, working together to drive value for the organisation.**

This strategy applies to all staff employed by DCHFT.

The term procurement has a far broader meaning than that of purchasing or buying; it includes the basic “make or buy” decision (i.e. whether to make, or employ direct staff to provide service or to buy from an external supplier). It spans the “whole life” of the asset or contract. The “make or buy” decision is based on best value for money which means Dorset County Hospital NHS Foundation Trust (DCHFT) having the skills and frameworks in place to select the option that offers the optimum combination of whole life costs and benefits to meet the required outcomes.

Procurement plays a key role in supporting **high quality patient outcomes** whilst ensuring **value for money** is achieved.

Where the term “value” is used it must reflect all value-adding benefits and not just be based on the lowest cost. The strategy outlines how procurement will define and obtain value throughout the procurement process.

Where appropriate patient or public engagement will be used to formulate category specific strategies, in particular where pathways are being revised or where the ongoing use of a product continues into the patient’s home.

The aim of this procurement strategy is to build on the excellent progress already achieved, and to set a challenging framework of objectives for procurement throughout DCHFT over the next three years. It will provide a clear set of objectives for consistently delivering **best value for money** across all areas of DCHFT’s expenditure and is central to the success of the Trust’s financial strategy and the delivery of ongoing efficiencies.

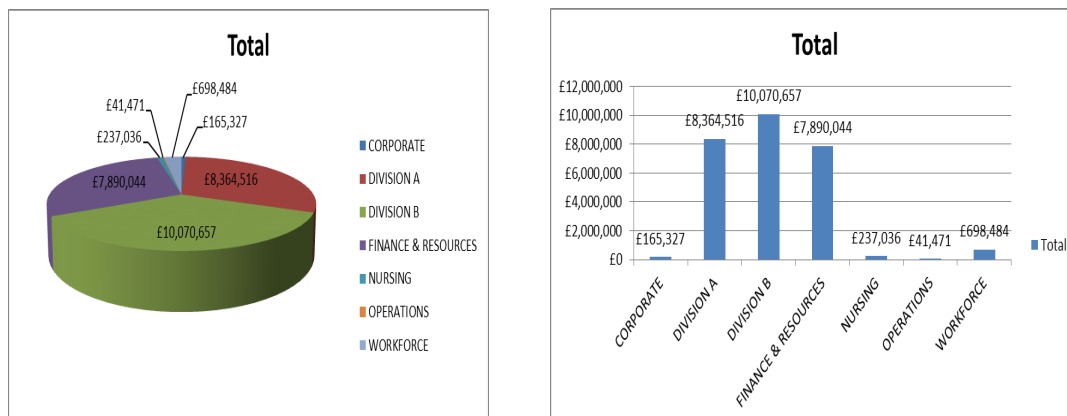
The ongoing delivery of this strategy is based upon **successful stakeholder engagement** and partnership working with our internal clinical and non-clinical customers to identify, specify, procure and deliver *fit for purpose* goods and services that deliver the best outcomes, quality standards, choice, and ultimately achieve the delivery of sustainable “value for money” throughout the life cycle of the product and/or service procured.

This document will be published on the Trust’s Intranet with the Procurement Manual and other key policies. These, supplemented by budget holder training will provide all Trust staff with an understanding of procurement, its objectives, and processes.

The Trust spends circa **£35m** on goods, services and works, and an additional £18m on drugs which sits outside the influence of procurement. This is spent with around circa **1500 suppliers** and is almost a third of the Trust's annual income. How Procurement manage this spend is critical, and excellent procurement is therefore at the heart of DCHFT's ability to deliver good quality, value for money services and supplies.

## SPEND PROFILE & STRUCTURE

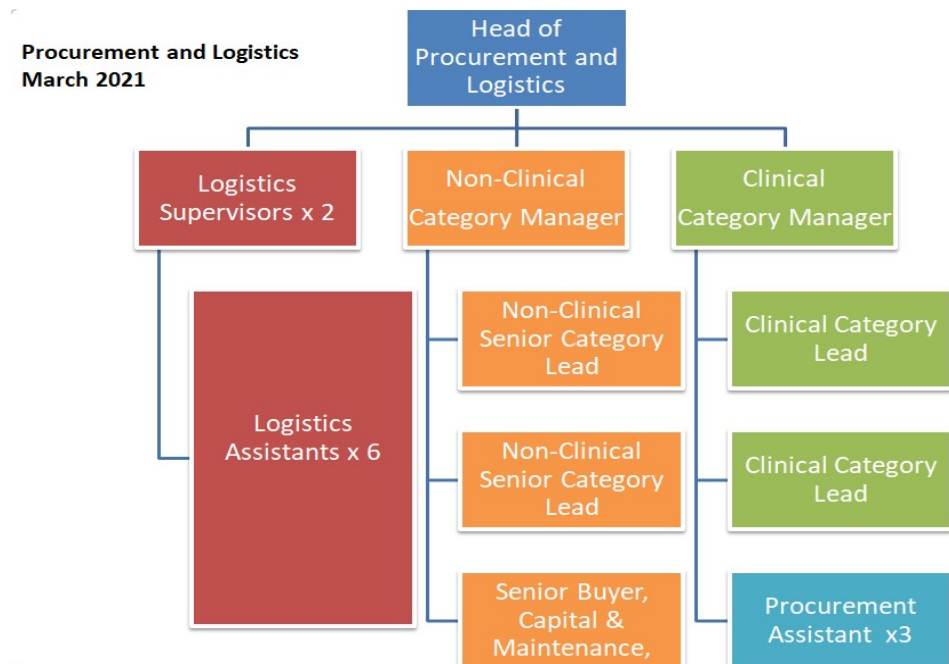
During 2019/20 the Trust spent just over £35m with external suppliers (excluding drugs and non-influenceable spend), a breakdown of spend is shown below.



Of this spend, £24m (68%) is currently covered by contract and;

- £21m is on non clinical spend
- £14m is on clinical products

In order to address the spend using category management techniques the procurement team is organised as follows with a separate team overseeing the replenishment of ward consumables and inbound delivery of goods:



Effective procurement ensures that a fully informed decision-making process is followed which enables the Trust to secure the most appropriate goods and services from the most appropriate suppliers in the most efficient and effective manner.

This strategy will ensure that risks associated with the procurement process are minimised and mitigated where possible.

The financial challenges faced by the NHS mean that cutting prices alone will not deliver the savings that are required; change is required both in the way that we work and our approach to redesigning patient pathways. Procurement will encourage and facilitate clinicians and suppliers working together to identify opportunities for efficiencies and improved outcomes for our patients.

In addition this Strategy seeks to support **National procurement initiatives**, including the Operational Productivity and Performance in English NHS Acute Trusts: Unwarranted Variation (2016). Recommendation 5 from this document continues to drive our progress:

**Recommendation 5:** All trusts should report their procurement information monthly to NHS Improvement to create an NHS Purchasing Price Index commencing April 2016, collaborate with other trusts and NHS Supply Chain with immediate effect, and commit to the Department of Health's NHS Procurement Transformation Programme (PTP), so that there is an increase in transparency and a reduction of at least 10% in non-pay costs is delivered across the NHS by April 2018.

Delivered by:

- a) developing PTP plans at a local level with each trust board nominating a Director to work with their procurement lead to implement the changes identified, overseen by NHS Improvement and in collaboration with professional colleagues locally, regionally and nationally;
- b) NHS Improvement providing a national spend analysis and benchmarking solution from high quality trust spend data to be fully operational by April 2017. This will include a purchasing price index starting with an initial basket of 100 products with immediate effect. NHS Improvement will hold trusts boards to account in performance against the index from October 2016;
- c) all trusts to prioritise the role of procurement on ensuring effective system control and compliance, building supply chain capability in terms of both inventory management systems and people. Trusts to aim to work in collaboration both with national procurement strategies and other trusts to explore common systems adoption e.g. efficient electronic catalogues using retail system standards, enhancing current purchase to pay systems, adopting (GS1) and Pan European Public Procurement Online (PEPPOL) standards detailed in the eProcurement Strategy, and to align with NHSSC on category initiatives;
- d) trusts focusing on the measurement of key procurement metrics and being responsible for driving compliance to the following targets by September 2017: 80% addressable spend transaction volume on catalogue, 90% addressable spend transaction volume with a purchase order, 90% addressable spend by value under contract;
- e) trusts accelerating collaboration with other trusts to develop aggregated sourcing work plans to reduce variety (including with NHS Supply Chain for their categories) for 2016-17 and 2017-18, including contributing to clinically driven product testing and evaluation, and adopting the outcome of these processes, switching products where appropriate, unless a clinically agreed exception exists; and,
- f) trusts embracing the adoption and promotion of the NHS Standards of Procurement with the support of the new Skills Development Networks, with those that have already achieved Level 1 achieving Level 2 of the standards by October 2018; and those trusts that are yet to attain Level 1 achieving that level by October 2017. All trusts to produce a self-improvement plan to meet their target standard by March 2017.

Our strategy also includes a commitment to collaborate with other NHS bodies and Trusts where there is a benefit in doing so whilst promoting competition in the marketplace via fair, open and transparent processes.

It is therefore considered key, that the Trust vision, mission, values and objectives are supported by this strategy and illustrated below:

## Our Mission

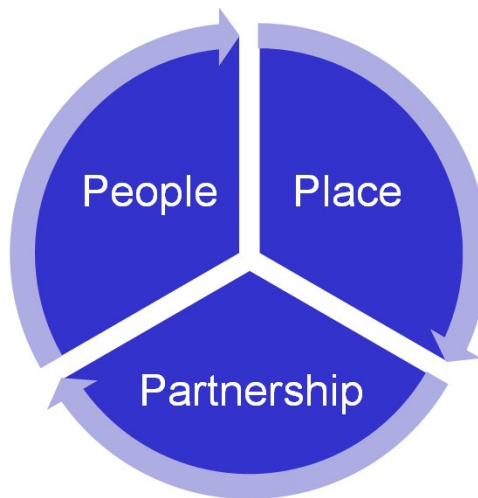
Outstanding care for people in ways which matter to them.

## Our Vision

Dorset County Hospital, working with our health and social care partners, will be at the heart of improving the wellbeing of our communities.



The Trust's strategic objectives are:



### **People – putting our people first**

*In support Procurement will:*

- *Promote and enable electronic processes that reduce admin burden and free up clinical time*
- *Ensure stakeholder engagement throughout each procurement process*
- *Support the professional attainment of CIPS by procurement team members*
- *Deliver finance and procurement training to budget holders*

### **Place – a healthier place**

*In support Procurement will:*

- *Place contracts that reduce patient pathway costs*
- *Develop innovative supply chain models that reduce the cost of supply and waste*
- *Support the strategic site development plans.*
- *Encourage the concept of Scan4Safety to improve patient safety and efficiencies across the organisation using digital technology*
- *Seek social value and sustainable benefits in all activity it undertakes encouraging local suppliers to work with us*

### **Partnership – working together**

*In support Procurement will:*

- *Ensure the availability of quality goods and services and actively promote supplier innovation.*
- *Work hard to maintain strong internal clinical engagement*
- *Network at ICS level and nationally with others to optimise all opportunities to learn from each other and collaborate*
- *Support all national initiatives that maximise supply chain models*



## CONTEXT

The NHS is facing an unprecedented challenge to meet the rising demands of healthcare driven by an aging population and a background of tighter budgetary control. People are living longer and chronic long-term conditions like diabetes are on the increase. Our focus must be on improving the health of our population, keeping people well and out of hospital.

The local picture in Dorset is no different and this means that we cannot continue as we have always done and as such need to transform the way in which procurement services are perceived and delivered, seeking new ways of reducing the overall cost whilst improving the quality of products and services we receive.

### **The NHS Five Year Forward View**

The NHS Five Year Forward View was published in 2014 and detailed how health and social care would be delivered over the next five years. This was the first time all the regulatory bodies came together to develop a shared approach to service delivery and this collective vision has become the basis of planning for the delivery of healthcare in England.

The document warned that a combination of growing demand and limited funding could produce a mismatch between resources and patient needs of nearly £22billion a year by 2020/21.

It set out an approach focussing on collaboration not competition and described new models of care which would break down barriers between NHS organisations to improve services to patients.

### **Local challenges and opportunities**

If we are to achieve our ambitions and support Dorset Clinical Commissioning Group (CCG) in improving the health of the Dorset population, there are a number of challenges that we will need to address:

- The health and wellbeing gap
- Ageing population
- Quality
- Finances
- Workforce
- Informatics and Technology
- Care closer to home
- Partnership and collaboration
- Pace of change

During 2020 the NHS in the UK had to deal with the impacts of leaving the European Commission and the Covid-19 pandemic. A new normal has emerged which presents challenges and opportunities for exploration and exploitation.



Every local health and care system in England have come together to create their own ambitious local plan for accelerating the implementation of the Five Year Forward View vision of better health and wellbeing, improved quality of care, and stronger NHS finance and efficiency.

Dorset County Hospital is part of 'Our Dorset' which is a partnership of health and social care organisations working together to deliver Integrated Care Systems. It has three programmes of work, two of which are designed to enable:

- Prevention at scale
- Integrated community services
- One acute network of services
- Leading and working differently
- Digitally enabled Dorset

### **Drivers for Procurement**

Throughout all procurement activities the Trust is required to adhere with current legislation and local governance, including:

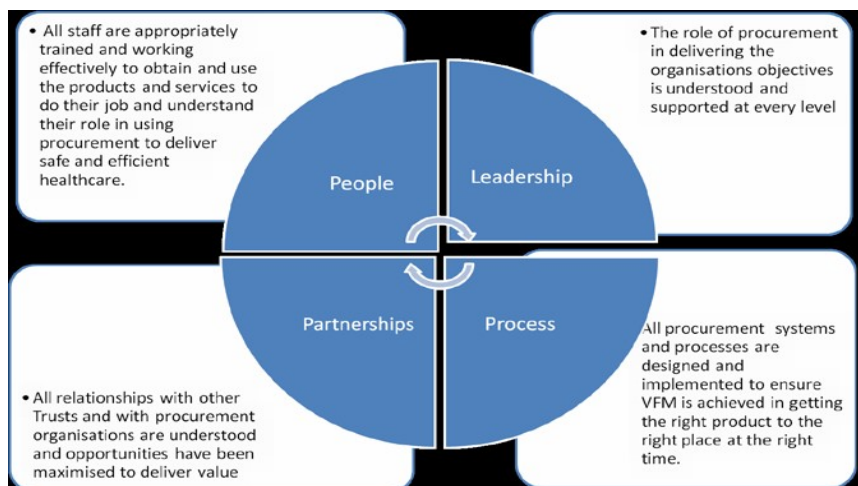
- Statutory and mandatory public procurement regulations.
- NHS policy and guidance.
- Trust Standing Orders and Standing Financial Instructions.
- Other relevant legislation such as, but not limited to: the Bribery Act 2010, Equality Act 2010, Freedom of Information Act 2010, Public Services (Social Value Act) 2012 and Modern Day Slavery Act 2015.

In addition, the **National profile for Procurement has increased** with various Governmental, Department of Health & Social Care, and NHS initiatives launched in the last few years. The Trust has where appropriate implemented these recommendations to position procurement as a strategic function within the Trust. Key publications include:

- NHS Standards of Procurement (June 2013), updated (June 2016).
- Improving procurement in the NHS - Better Procurement, Better Value, Better Care (August 2013).
- NHS procurement: improving transparency and understanding performance – Dashboard (November 2013).
- NHS Procurement Transparency (March 2014).
- NHS eProcurement Strategy (May 2014).
- Operational Productivity and Performance in English NHS Acute Hospitals: Unwarranted Variation (2016).

## KEY THEMES

In line with the NHS Procurement & Commercial Standards and the NHS Procurement Strategy 'Better Procurement Better Value Better Care' (August 2013), the following key themes underpin the components of the procurement strategy and are at the heart of everything we do:



The above themes headline a range of underpinning national standards for the wider procurement operations and are used to assess and indicate the relative maturity of the organisation.

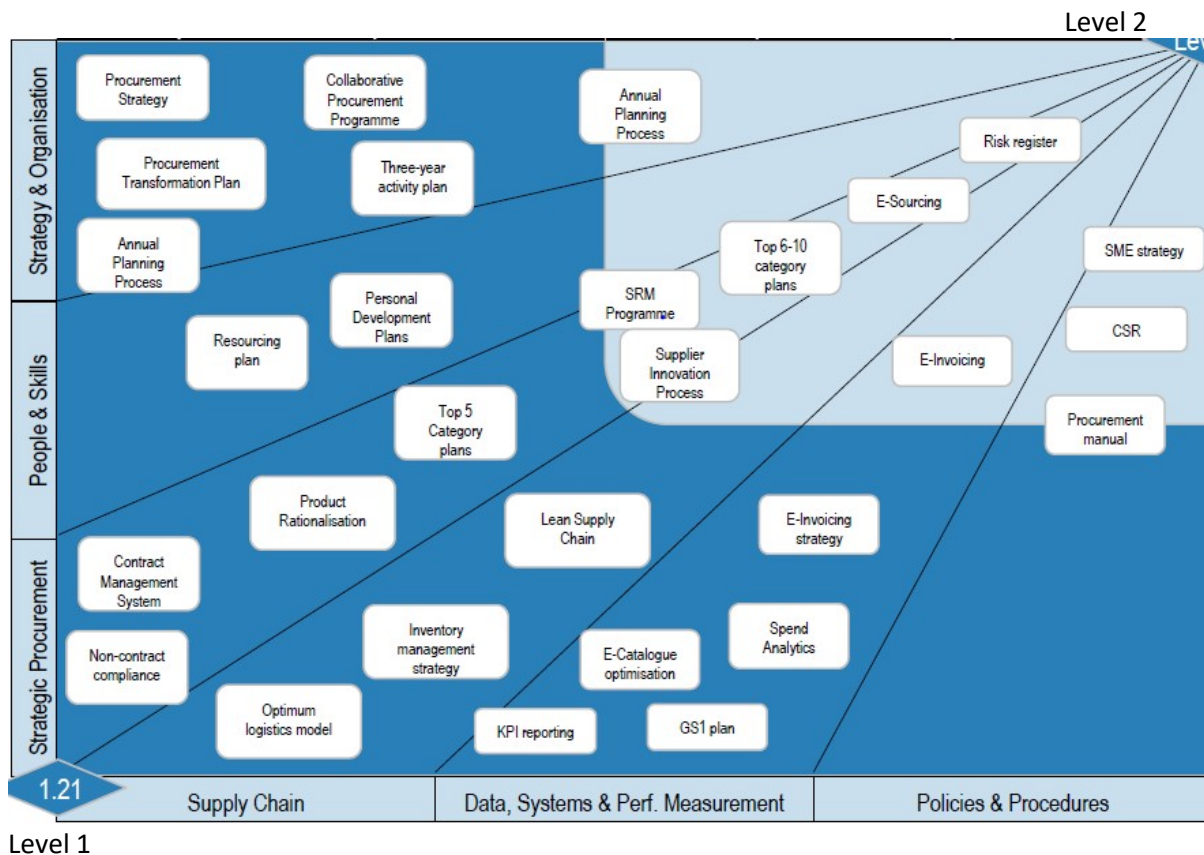
Maturity levels 1 to 3 identifying the attributes of:

Level 1 – Building – awareness and building blocks in place

Level 2 – Achieving – making good, strong progress

Level 3 – Excelling – outstanding commercial and procurement performance

Within the Standards there are three levels that can be reached, and the Trust has already achieved Level 1 with an aim to achieve Level 2 during June 2021. Following that a plan to achieve Level 3 will be developed. A Procurement Transformation Plan was developed as a result of attaining Level 1 to indicate the direction of travel towards Level 2 and progress has been good:



Level 1

It is understood that the pace of change must be realistic and is often reliant on investment in systems to enable efficiencies and different ways of working. Risks that arise as change is implemented will be managed and mitigated accordingly.

The Standards are organised under six domains: Strategy & Organisation, People & Skills, Strategic Procurement & Supply Chain, Data Systems and Performance Management, and Policies & Procedures.

## STRATEGIC AIMS

Procurement plays a key role in supporting **high quality patient outcomes** whilst ensuring **value for money** is achieved.

Where the term “value” is used it must reflect all value-adding benefits and not just be based on the lowest cost. The strategy outlines how procurement will define and obtain value throughout the procurement process.

This strategy focuses on the following six key aims and outlines the tactical methods deployed to ensure measurable delivery:

- Strategic procurement
- People
- Supply chain management
- Systems including data
- Collaborative procurement
- Social value & sustainability

In order to ensure best value for money in the goods and services we buy, the procurement team ensures engagement with all stakeholders.

The introduction of any new clinical products is overseen by the Trust’s Clinical Product Evaluation Group (CPEG) which is chaired by the Matron for Specialist Medicine and supported by the Associate Director of Infection Prevention & Control. Decisions are made by clinicians for clinicians and are based on quality, value and cost with an overall aim of improving patient safety.

## Strategic Procurement

**Aim** – Strategic procurement incorporates actions aimed at reducing the supplier base, negotiations, communication and maintaining long-term relationships with suppliers

- Apply the principles of **Category Management** to ensure that a comprehensive view of overall external spend is considered in order to maximise value for money and secure other non-financial benefits.
- Develop and maintain a **contracts database** and long-term work plan.
- Define, select and implement **strategic sourcing activity** ensuring that procurement processes are **proportionate** to the value, complexity and risks associated with each particular requirement, and that potential suppliers are not excluded through overly bureaucratic processes.
- Key suppliers will be identified, and structured measures embedded in contract management, following **Supplier Relationship Management (SRM)** principles.

- Ensure specifications are developed, governed and evaluated by stakeholder groups taking into account **whole life costing**, and challenged where appropriate.
- Develop **relationships** with stakeholders (Internal and External), working collectively to encourage continual improvement in the quality of goods and services that are provided and, where it is in the public interest, stimulate and support innovation and target new service areas encouraging new entrants to the market.
- Manage all non-pay expenditure in a **compliant** and **professional** manner, minimising clinical risk, improving patient care and evidencing best value against all such activity. Emphasis will be on ensuring **expenditure compliance** in line with regulation and Trust Standing Financial Instructions (SFI's).
- Undertake regular reviews of non-pay expenditure with a view to **optimising** commercial opportunity. Each commercial arrangement should produce benefits in terms of a reduction in **Cost**, a reduction in **Delivery Time**, or an increase in **Quality** with an overall aim of improving patient safety. Procurement will record all tangible & non-tangible savings and efficiencies.

### People & Skills

**Aim** - The Trust aims to have the appropriate commercial capability to ensure that efficiencies are made in non-pay expenditure whilst maintaining/improving the patient experience.

- The Procurement leadership team will actively participate and undertake appraisals with all team members focusing on **support, development and objective outcomes**.
- Continuously work to enhance **competencies and professional standards** of all procurement staff and anyone involved in procurement activity through focused key skills training and academic standards.
- Engaging and **empowering** all staff to develop, adapt and embrace new ways of working.
- Ensure that **responsibility** and **accountability** for procurement is clear throughout the Trust and that all staff are aware of procurement procedures, governance and what they need to do.
- Ensure good procurement development practice is established, maintained and developed with focus upon the key domains as set out in the **NHS Procurement & Commercial Standards**.
- Continue to focus on and implement a **procurement transformation plan (PTP)** to recognise areas of good practice and outline plans to reach a position of improvement leading up to a peer assessment for the national NHS Procurement & Commercial Standards.

## Supply Chain Management

**Aim** – To identify, minimise or eradicate waste in all supply chain activity

- Use benchmarking tools to give confidence over spend and the evidence to challenge supplier behaviour.
- Optimise stock levels using available technology, and methodology practices including 'Just in Time (JIT)' to ensure best use of storage facilities.
- Develop the benefits that existing systems present, to automate as far as possible in order to reduce the risk of error and ensure maximum efficiencies.
- Support the introduction of a GS1 accredited Inventory Management (IM) solution to improve visibility of stock on hand, and to improve patient safety through product traceability.
- Encourage supplier innovation supported by stakeholder input.
- Monitor and manage supplier performance using Supplier Relationship Management (SRM) tools and embed the importance of contract management across the organisation.

## Systems including data

**Aim:** to improve data and information including the adoption of GS1 standards and Scan4Safety

Procurement will:

- Continuously publish nationally and work towards improving performance against **key metrics** and drive **compliance** to the following targets identified by the Carter Review:
  - 80% addressable spend transaction volume on catalogue,
  - 90% addressable spend transaction volume with a purchase order,
  - 90% addressable spend by value under contract.
- Improve our position on the national Procurement League Table which measures process efficiency and price efficiency.
- Maximise the use of existing systems and demonstrate the need for advanced systems to:
  - Improve and automate the Procure to Pay (P2P) process, introducing PEPPOL (Pan-European Public Procurement Online) for seamless machine integration for purchase order, advice note and invoice messaging.

- Introduce catalogue management.
  - Promote the adoption of common global standards such as GS1 standards (to uniquely identify our products, locations and people) in accordance with the NHS e-Procurement Strategy.
  - Develop contract management practices to continuously improve contracts for both parties
  - Use benchmarking data to give assurance around spend and to empower procurement staff to negotiate with confidence
- Provide a regular dashboard of the core procurement metrics to the Better Care, Better Value Committee
- Enforce a **No PO No PAY** policy for all invoices/orders with all suppliers, excluding those on an approved list of exceptions. By enforcing this policy more information related to what the Trust is purchasing will be visible to the procurement department therefore spend can be categorised which in turn may create additional opportunities to tender and drive out further savings.

### Collaborative Procurement

**Aim:** Collaborate with other organisations on procurement and supply activity to maximise opportunities including but not limited to, driving greater efficiencies.

Improve the buying power of the NHS by collaborating locally, regionally and nationally where appropriate in order to mitigate pressure on public sector budgets and extend services as far as possible, and to develop a more resilient resource model and support the sharing of skills in order to maximise service efficiency.

Collaboration can include the use of pre-tendered collaborative frameworks (either by mini-competition or direct award), or organisations choosing to work together collaboratively with the intention of awarding a contract.

The decision when and how to collaborate is project specific and must be carefully considered. In all cases factors such as timescales, level of spend and risk must be understood and evaluated by all parties. The use of pre-tendered collaborative frameworks will always be explored before the Trust embarks on its own tender process, either in isolation or with others.

- Locally – As part of the Dorset Integrated Care System (ICS) and to support the work of NHS England & Improvement the Trust will work with the other public sector organisations on developing plans to formally integrate in the future, aligning systems, contracts, work plans and resource.



**ICS Procurement: SUPPORTING PROCUREMENT WITH THE SHIFT  
 TOWARDS SYSTEMS BASED OPERATIONS**



- Regionally & Nationally - Working with partners across the NHS (e.g. like minded NHS Trusts, Regional Groups e.g. Peninsula Purchasing & Supply Alliance (PPSA), NHS SupplyChain, Category Towers, Central Medicines Unit, Thames Valley & Wessex Pharmacy Procurement Services etc. and the wider public sector, to leverage a combined purchasing power on common areas of spend, that would not be possible if working alone.

The following benefits are achievable through collaboration:

- standardisation leading to the reduction or removal of unwarranted variation and cost improvements.
- category expertise is developed and shared leading to a once only approach to procurement.
- commitment based procurement enables better deals to be negotiated with suppliers.
- improve partnerships with industry, encouraging supply chain improvements for mutual benefit and realising suppliers' maximum capabilities. This will be applied through the category management process ensuring that this approach is appropriately employed based on a high mutual focus on pricing and relationship building as well as instances of co-dependency.

## Social Value (SV) & Sustainability

**Aim:** Support the Trusts Social Value policy and action plan which pledges to reduce inequalities and improve the overall wellbeing of the local community we serve and recognise as a procurement team that we have an important part to play.

As a Trust,

### WE PLEDGE TO:



**maximise local investment**



**champion equality,  
diversity and inclusion**



**increase local employment**



**be green and sustainable**



**be a good employer**



**promote civic partnerships**

Procurement will demonstrate sustainable procurement practice and will work with our supply chains to achieve this by addressing specific aspects such as:

- Reducing fossil fuel usage to minimise climate change
- Reducing usage of hazardous materials
- Reducing waste
- Reducing use of transport
- Improving Social Value

Five of the commitments in the Trusts Social Value Action Plan can be directly affected by the actions of procurement:

- **Develop Anchor Networks across the Dorset System** - Dorset County Hospital NHS Foundation Trust commits as an anchor institution to build social value objectives into its planning for the delivery of the NHS Long Term Plan, and in partnership across the Dorset ICS system. With our system partners, we will develop Our Dorset's social value vision and pledge in order to maximise our contribution to the wider health and well-being of our local communities.
- **Maximise Local Investment** - We commit to maximise local investment which is financially generative to the local economy, retaining and recirculating wealth locally. We will take account of the social, economic and environmental impacts of buying locally when procuring goods and services.

- **Increase Local Employment** - Support the local economy to create jobs and apprenticeships, by adopting procurement strategies that remove barriers to local businesses.
- Be recognised as a Good Employer
- Champion Equality, Diversity & Inclusion
- **Greener & Sustainable** - We commit to our DCH Green Plan (Sustainable Development Management Plan) to deliver long term improvements to the sustainability performance of the hospital. We recognise the impact we have on the environment and our responsibility to improve our sustainability and contribute to better health and well-being of our local community.  
We will work towards the Greener NHS Net-Zero objectives committing to protecting the environment, minimising waste, water, and energy consumption and using other resources efficiently within our organisation and supply chains.
- Promote Civic Partnerships
- Involve Our Community
- **Monitor & Report** - We will monitor and demonstrate our commitment to delivering social value by implementing recognised procedures for measuring and reporting our Social Value outcomes and Social Return on Investment.

To measure progress, a set of metrics are being developed to indicate monthly performance with local and other suppliers. The suppliers are categorised as follows:

**Local – postcode in Dorset**

**Regional – postcode in Hampshire, Wiltshire, Devon, or Somerset**

**National – all other postcodes**

The developing metrics will feed into the Trust's SV dashboard from a summary:

	Apr-21	May-21	Jun-21
<b>Total Spend</b>	£5,867,193	£5,350,248	
<b>Total Number of Suppliers</b>	633	631	
<b>Local suppliers</b>	106	39	
<b>% of suppliers local</b>	16.75%	6.18%	
<b>Local spend</b>	£261,797	£222,858	
<b>% of spend local</b>	4.46%	4.17%	
<b>Regional suppliers</b>	68	39	
<b>% of suppliers regional</b>	10.74%	6.18%	
<b>Regional spend</b>	£1,041,977	£214,328	
<b>% of spend regional</b>	17.76%	4.01%	
<b>Other suppliers</b>	479	571	
<b>% of other suppliers</b>	75.67%	90.49%	
<b>Other supplier spend</b>	£4,563,234	£4,913,061	
<b>% of spend with other suppliers</b>	77.78%	91.83%	

More than half of the NHS England's total carbon footprint is associated with the products and services it procures. Carbon emissions associated with the extraction, processing, assembly, packaging, transport, storage and handling of products and materials that are consumed directly and indirectly by service provider's account for 60% of the total NHS England carbon footprint.

We commit to:

- Wherever possible reduce, reuse, recycle.
- Encourage small to medium sized enterprises (SMEs) to engage with us in the delivery of goods and services.
- Promote our Sustainable Procurement Policy throughout the organisation.
- Measure “green” benefits to demonstrate the importance of sustainability\*.

\* A **more sustainable Product** can be described as:

- Fit for purpose and providing value for money
- Energy efficient and resource efficient
- Non (or reduced) polluting
- Durable, easily upgraded, and repairable
- Reusable and recyclable
- Ethically sourced, ethically sound and socially sustainable, this includes supplier’s workplace practices

## Appendix A

### EQUALITY IMPACT AND COMPLIANCE ASSESSMENT

#### 1. General

<b>Title of document</b>	<b>PROCUREMENT STRATEGY</b>
<b>Purpose of document</b>	<b>TO CLARIFY THE TRUST'S PROCUREMENT STRATEGY 2021-2024</b>
<b>Intended scope</b>	<b>TRUST WIDE</b>

#### 2. Consultation

<b>Which groups/associations/bodies or individuals were consulted in the formulation of this document?</b>	Procurement staff, Finance staff, Key stakeholders (clinical and non-clinical), other Heads of Procurement.
<b>What was the impact of any feedback on the document?</b>	The document was refined to incorporate changes.
<b>Who was involved in the approval of the final document?</b>	Head of Procurement, Deputy Director of Finance.
<b>Any other comments to record?</b>	

#### 3. Equality Impact Assessment

<b>Does the document unfairly affect certain staff or groups of staff? If so, please state how this is justified.</b>	No
<b>What measures are proposed to address any inequity?</b>	N/A
<b>Can the document be made available in alternative format or in translation?</b>	Yes

#### 4. Compliance Assessment

<b>Does the document comply with relevant employment legislation? Please specify.</b>	N/A
---	-----

#### 5. Document assessed by:

<b>Name</b>	Louise Brereton
<b>Post Title/Position</b>	Head of Procurement & Logistics
<b>Date</b>	May 2021