HCSA (2022)

324-CPPA 5, HCSA Clinical Procurement in Partnership Award

NEW Integrated Care Solution and Collaborative Approach to Topical Negative Pressure



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Entry details

Summary Overview

NHS Commercial Solutions (NHSCS) is a collaborative procurement organisation that has supported trusts with collaborative opportunities across the southern region for fifteen years on a wide range of projects. An opportunity arose to work with both Acute and Community providers to review improvements to both processes and patient experiences associated with Topical Negative Pressure (TNP) therapies.

Taking a collaborative and systematic approach NHS Commercial Solutions engaged with Community and Acute Tissue Viability Teams, the Acute Vascular Leads, and the incumbent framework supplier to develop and prove new innovative processes. The primary aim was to significantly reduce length of stay and this was achieved through an extensive redesign of the patient pathway, enhancing the patient experience. In addition, multiple aspects of quality and costs were also improved.

This award submission details the approach we followed to achieve the reduction of length of stay, quality improvements and cost savings. The new ways of working developed during the project were designed to enable them to be easily repeated in other community and acute topical negative pressure(TNP) therapy settings.

I wish to nominate the following person (or group/organisation) for award. I understand that by submitting this nomination I declare that the information I have provided is – to the best of my knowledge – accurate and complete.

~

Nominee NHS Commercial Solutions

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Nominees Organisation NHS Commercial Solutions

Nominees Region South East Coast

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Supporting Info

Supporting Statement

1. Introduction

NHS Commercial Solutions (NHSCS) is a collaborative procurement organisation that has supported trusts with collaborative opportunities across the southern region for fifteen years on a wide range of projects. An opportunity arose to work with both Acute and Community providers to review improvements to both processes and patient experiences associated with Topical Negative Pressure (TNP) therapies.

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2. Background

The Acute Trust was not integrated with Community for a seamless transfer of care for TNP therapy.

This transformational project designed and implemented a fully integrated care pathway.

Medically fit for discharge (MFFD) patients with topical negative pressure (TNP) frequently had a prolonged length of stay (LOS). This was the result of lack of coordination of patient pathway management from Acute to Community settings. This led to increased bed occupancy, incremental costs, and poor patient flow, with often an adverse impact on patient experience and satisfaction**.

3. Aims and Objectives

The aims of the project were to:

- I Reduce the current 5-day LOS by 48 hours
- I Improve patient experience
- Improve patient flow
- Streamline product supply chain to reduce delayed discharge
- Simplify administrative activities
- Improve patient clinical outcomes
- Improve staff productivity
- Increase bed capacity
- Reduce costs

4. Planning and Execution

At the outset of the project it was recognised that key to the successful delivery and meeting the aims and objectives would require extensive stakeholder and client engagement.

Therefore, a multi-disciplinary team was formed to ensure that the decisions made had input from all key stakeholders, the membership included:

- Procurement
- [] Key Supplier
- | Finance
- I TVNs
- Surgeons
- BBME Team

The project required 2 phases. Phase 1 was the redesign of the current processes to make immediate improvements. Phase 2 applied innovative new technologies to further enhance the improvements identified in phase 1.

The new technologies in phase 2 added the following three clear improvements:

- The healing rates showed a 30% improved efficacy
- Less intrusive for the patient
- · A more intuitive user-friendly device, improving the patient experience

* | Project phase 1

- Redesign of current processes for acute patient discharge to community May 2019.
- Introduced supplier consignment stock of pumps to replace acute owned devices, therefore enabling the patient to discharge on the same day June 2019.
- Cost reduction for community rental of pumps, June 2019

Project phase 2

- Innovation driven new modernised pumps introduced April 2021
- Worked with Acute Trust to negotiate a placed agreement Free of Charge (FOC), which removed capital costs for this
 financial year 2021/22
- Both Acute and Community Clinical Teams trained in new ways of working and signed off phase 2.- April 21
- Transition review June 2021
- Clinicians unanimously reported zero issues or concerns June 21
- The Community Trust will move to the placed agreement during October 2021 removing rental costs for part year effect 2021/22

Tools & Techniques:

- Cross-functional working with supplier and clinical leads
- Process analysis and total cost analysis
- Make v buy options evaluation
- · Lean management principles

5. Impact and results

We transformed the TNP therapy pathway by reengineering current processes and applying new innovative technologies. Most importantly the project achieved an improved pathway of patients discharged with TNP, reducing length of stay (LOS) by a minimum of 2 days, we also enhanced the redesign of the integration of TNP therapy across both acute and community settings.

6. Plans to develop and sustain

The learning from this project was used as part of our commitment to continuous improvement both internally and with the wider NHS.

Our next steps, focused discussions on this successful solution, transferable across other therapy pathways:

Working with our Procurement in Partnership (PIP) colleagues across four national collaborative procurement hubs (CPH's), ensuring as a first step we work with our southern region, with 4 other trusts already in early stage discussions, to continue and improve, prioritising benefit impact by trust.

Integrated Care Systems footprints scoped, development across regional borders, NHS Commercial Solutions (NHSCS) have also identified the potential for a National roll out, with our continued close working relationship with the key framework supplier we can enhance this potentially across the wider NHS landscape.

Through our Customer Advisory Board, this was presented as an innovation and integrated project that met many deliverables, through working closely with key stakeholders across trust types, clinical teams, and procurement leaders. Applying the same methodologies for other therapies and services, the blueprint is tried and tested and can only lead to more forward thinking and more improvements to integrated care, improved patient experience, with streamlined processes impacting on efficiencies including financial impact across non pay and improved clinical outcomes.

Patient feedback will be monitored by acute and community providers, this will form part of the monthly operational and

clinical reviews, led by NHS Commercial Solutions and with all key stakeholders, Heads of Procurement, Clinical teams, and the framework supplier.

We are in the process of knowledge sharing with NHSEI Model Hospital Team in keeping with Lord Carters review of unwarranted operational variation.

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