

Tendering and Contracting SOP (PP02)

Date	Version
23/02/2017	1
Purpose	
To identify the key activities involved in tendering and contracting throughout the Trust.	
Who should read this document?	
All those that are involved in tendering and contracting within the Trust.	
Key messages	
SOPs aim to achieve efficiency, quality output and uniformity of performance, while reducing miscommunication and failure to comply with industry and Trust regulations.	
Accountabilities	
Production	Head of Non-Clinical Procurement & Head of Clinical Procurement
Review and approval	Scan4Safety GTIN/P2P Project Board
Ratification	Chief Procurement Officer
Dissemination	Head of Procurement
Compliance	Records & Information Forum
Links to other policies and procedures	
P2P Policy PP01v.1	
Version History	
1	2 nd May 2017 Ratified by Head of Supply Chain on behalf of Chief Procurement Officer and published Trust-wide
Last Approval	
May 2017	
Due for Review	
2 nd May 2020	

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on the Trust Documents Network Share Folder (G:\TrustDocuments). Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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Standard Operating Procedure (SOP) Tendering and Contracting SOP

1 Purpose and Scope

1.1 Introduction

The purpose of this SOP is to identify the key activities in tendering and contracting throughout the Trust.

This procedure is applicable to all those involved in tendering and contracting within the Trust.

It should be applied across the Trust, with particular relevance to Procurement and Supply Chain functions.

1.2 Definitions

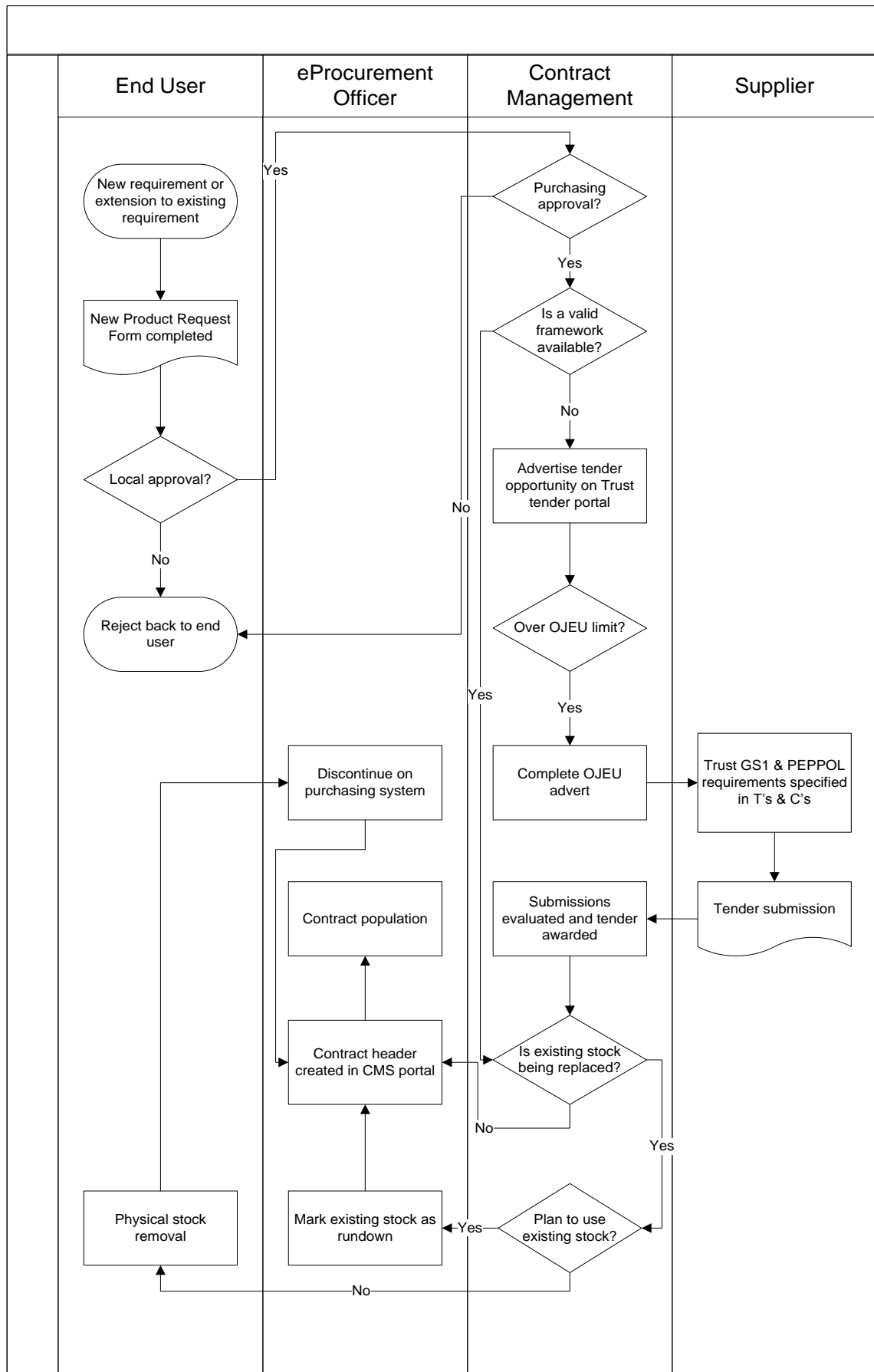
- **SOP** – Standard Operating Procedure
- **CPO** – Chief Procurement Officer
- **HOP** – Head of Procurement
- **HONCP** - Head of Non-Clinical Procurement
- **HOCP** – Head of Clinical Procurement
- **DOF** – Director of Finance
- **OJEU** – Official Journal of the European Union

1.3 Regulatory background

Public Contracts Regulations 2015 which govern UK public sector procurement.

1.4 Key Duties

Main Roles and typical duties are summarised below:



1.5 Monitoring and assurance

- Accountability for adherence to this procedure will be monitored by the HONCP & HOCP.

- The HOP will be responsible for ensuring this procedure is followed operationally.
- Adherence to the identified procedure will be monitored through regular reviews.
- Procurement personnel shall be monitored on process adherence at their regular one to one progress reviews.

2 Procedure to Follow

2.1 The following is an overview of contract setup within the Trust:

Before creating a new tender opportunity for a requirement all existing relevant tenders, frameworks and price agreements must be reviewed.

Tender documents must include the following questions where applicable: -

- 1) *Plymouth Hospitals is a GS1 demonstrator site along with 5 other UK Trusts. The Service Provider must evidence an understanding of GS1 Standards within healthcare and is working towards full GS1 compliance. For further information follow the web link to the UK GS1 website below. <https://www.gs1uk.org/our-industries/healthcare>*

The below requirements are strong 'desired'. Suppliers must provide firm clarification of their position, with milestones defined where required.
- 2) *Is your company a member of GS1 UK (formerly EAN – European Article Number Association) - please contact Juliette.New@gs1uk.org for more information?*
- 3) *Describe the support services applicable to clinical systems relating to GS1 standards and particularly positive patient identification.*
- 4) *The system from go-live will enable where appropriate:*
 - *patient identification using a GSRN (Global Service Relationship Number) wristband that is ISB 1077 compliant*
 - *product identification using a GTIN (Global Trade Item Number)*
 - *location identification using a GLN (Global Location Number).*
- 5) *The system MUST support safe data entry for the right patient at the right time. The System must support the ability to scan barcodes, patients wristbands - GS1 compliance.*

All terms & conditions associated with supplier negotiations must include the following statement:

“The Supplier shall provide appropriate product/service data relating to the contents of the contract electronically to the Authority in a pre-determined format. Wherever possible, this data will be provided directly into the Trust’s contract management system.

The data provided should include Global Trade Identification Numbers (GTINs) as product barcodes where available. The applicability of these barcodes to provided products or services is determined by DH guidance, which, for Medical and In-Vitro Diagnostic Devices is specified in the “GS1 and PEPOL Adoption: Compliance Timeline for Medical Devices and In-Vitro Diagnostic Device Suppliers”.

Further information can be found for all Suppliers by joining: <https://dhexchange.kahootz.com/connect.ti/SePWS/grouphome>

Newly awarded tenders must be uploaded into the Trust Catalogue Management System (CMS) for suppliers to access and load into. E-contracts must also be set up in the CMS to ensure all pricing options are available. This relates to all price files including those that cover: medical products, non-medical products & services.

Wherever a new agreement negates the need for continued use of existing stock, that stock should be reviewed for removal or rundown. This must be performed prior to replacement stock being used and the replaced stock should become unavailable within Trust systems once all stock is depleted.

3 Document Ratification Process

3.1 The design and process of review and revision of this procedural document will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved and ratified by the CPO.

Non-significant amendments to this document may be made, under delegated authority from the CPO, by the nominated author.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

3.2 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the CPO and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

4 Reference Material

n/a