





Meeting Date	10 March 2022	Agenda	Item 5.3	
Report Title	NWSSP Procurement: single tender actions and			
	quotations			
Report Author	Keir Warner, Head of Procurement			
Report Sponsor	Darren Griffiths, Director of Finance and Performance			
Presented by	Keir Warner, Head of Procurement			
Freedom of	Open			
Information				
Purpose of the Report	In accordance with Health Instructions (SFIs), this report the Health Board has approve to report to Audit Committee. This report covers the period	rt provides d and that	s details of activity which it is required	
	This report covers the period	01/01/22 (.0 10/02/22.	
Key Issues	 The activity the Health Board is required to report is categorised as follows: Single Quotation Action (SQA) Single Tender Action (STA) Extensions of contract within the agreement term Award of additional business within the scope of an existing agreement, but that which could not be foreseen at the time of the original competition The table below summarises the activity reported for the period as falls into the above list: 			
	Standard Reporting in	1		
	SQA	8 22	£105,116.51	
	STA	0	£2,041,225.56 0	
	Contract Extensions	0	0	
	Further Matters to Bring to the Attention of the Audit Committee (Retrospective Action)			
	File Notes £5k-<£25k	1	n/a	
	File Notes >£25k-<£OJEU	1	n/a	
	File Notes >£OJEU	0	0	
	Total Retrospective action value for period	2	£43,523.05	

	 The volume and values of SQA/STAs approved is higher than the previous two-month reporting period. The number of Retrospective Action requests remains similar to the previous reporting period. Values have increased however. 			
Specific Action	Information	Discussion	Assurance	Approval
Required	\boxtimes			\boxtimes
(please choose one only)				
Recommendations	The Committee	l na ia aakad ta na	to the information	h provided in
Recommendations	this report and The activity	ee is asked to not specifically NO	TE: as been appro	oved by the
	 Health Board, in accordance with the Scheme of Delegation, for the period reported and as presented in Appendix 1 of this report. The actions taken to benchmark activity, to ensure value for money has been achieved. 			

NWSSP PROCUREMENT: SINGLE TENDER ACTIONS AND QUOTATIONS

1. INTRODUCTION

1.1. This report provides the Audit Committee with details of the Single Tender Actions (STAs), Single Quotation Actions (SQAs), additional activity associated with contract extensions, awards of further business and/or further matters as may have been approved by the Health Board for the period 01/01/22 to 18/02/22. Appendix 1 to this report sets out all such actions for the period.

2. BACKGROUND

- 2.1. Standing Financial Instructions (SFIs) require three competitive quotations to be obtained for the purchase of goods and services between the value of £5,000 and £25,000 exclusive of VAT. Where the sum exceeds £25,000 competitive tendering is required for the purchase of goods and services. SQAs and STAs should be an exception and only necessary when a single firm or contractor or a proprietary item or service of a special characteristic is required.
- 2.2. Such applications must be formally authorised by the Director of Finance/Director of Strategy/Chief Operating Officer and reported to the Audit Committee.
- 2.3. During the period 01/01/22 to 18/02/22 there were 8 SQAs approved, with a total value of £105,116.51 (excl. VAT) and 22 STAs, with a total value of £2,041,225.56 (excl. VAT). 2 Retrospective action file notes, with a total value of £ 43,523.05 (excl. VAT) were sent to the Head of Procurement for approval.
- 2.4. The volume of STA and SQA are higher than the previous reporting period. Values are however lower. The volume and value of Retrospective Action requests is significantly lower and can be partly attributed to better engagement between the procurement team and stakeholders.

Standard Reporting in Accordance with SFIs (01/01/22 to 18/02/22)		Previous reporting period 15/10/21 to 31/12/21		
SQA	8	£105,116.51	7	£98,490.24
STA	22	£2,041,225.56	18	£2,635,289.47
CCN	0	0	0	0
Contract Extensions	0	0	0	0
Further Matters to Bring to the Attention of the Audit Committee (Retrospective Action)				
File Notes £5k-<£25k	1	n/a	3	n/a
File Notes >£25k-<£OJEU	1	n/a	2	n/a
File Notes >£OJEU	0	0	1	n/a
Total Retrospective action value for period	2	£43,523.05	6	£453,355.14

- 2.5. High values and volumes of STA requests can be attributed to significant investment from the Health Board in enhancing existing systems. May of these systems are only able to be modified/upgraded by the Original Equipment Manufacturer (OEM) and so no competition is available.
- 2.6. There is also a high level of expenditure attributed to temporary/agency specialist staffing requirements. The procurement department has exhausted all existing framework options for sourcing these individuals before agreeing that an STA was an appropriate course of action.
- 2.7. The commitment made by Procurement Services to raise the level of transparency to the Audit Committee progresses. Through data analysis focusing on recurring and aggregated spend, activity has been identified of purchases made without Procurement Services involvement. To address such issues, the introduction in **Appendix 1** of 'further matters' to be reported to the Audit Committee has been introduced.
- 2.8. As agreed by the Executive Board, the contract register is now readily available and issued to Finance colleagues on a monthly basis. Any gaps in the allocation to a Senior Responsible Owner will be addressed as part of ongoing performance agendas.

3. GOVERNANCE AND RISK ISSUES

- 3.1. Procurement training materials have been developed and delivered to Primary Community Therapies Group (PCTG) business meeting by the procurement team and are include as appendices for reference (2 & 3). The procurement team are continuing to work with PCTG to identify and establish how procurement training can effectively be delivered to clusters. This training will be delivered by the end of May 2022.
- 3.2. The number of and value relating to Retrospective Action taken by the Health Board introduces an element of increased risk. Any expenditure committed must be in accordance with the Standing Financial Instructions and competition must be sought for all expenditure over £5k, where an existing compliant contract is not already in place. This will be addressed by increasing awareness of procurement compliance requirements and training of budget holders.
- 3.3. Following the January 2022 Audit committee meeting it has been agreed with the Acting Head of Corporate governance that Appendix one will be categories in expenditure bands. This is to protect the commercial confidentiality and sensitivity of individual contracts. Full detail of any SQA/STA/RA is available from the Procurement department upon request.
- 3.4. Procurement Policy Notes (PPNs) are issued by the Cabinet Office and provide specific guidance on matters relating to the Public Contract Regulations (2015)

- and as such are cascaded via the policy division within the Welsh Government hosted National Procurement Service for Wales.
- 3.5. Certain matters reported (**Appendix 1**) are covered by the publication of 'Procurement Policy Note 01/20: Responding to Covid-19'.
- 3.6. Two further notices have been published for which best practice across the Health Board and Procurement Service will need to be updated in due course:
 - 3.6.1. Procurement Policy Note 07/20 Taking account of a bidder's approach to payment in the procurement of major government contracts
 - 3.6.2. Procurement Policy Note 06/20 taking account of social value in the award of central government contracts
- 3.7. At this time, it is not envisaged by the Procurement Service that any of the necessary activity could be assessed as high risk in terms of market challenge.
- 3.8. In terms of internal Health Board governance, procurement activity is reported in the attached appendices accordingly.
- 3.9. Due to the Procurement Service e-Contract Management System operating independently of the Financial Management Systems (FMS), as previously reported it is challenging to confirm the Health Board's true position in relation to compliance with the SFIs. With the support of the Health Board, procurement resource is in the process of being redirected within the Local Procurement Team from administrative activity, to that which adds value and increases the transparency of buying activity across the Health Board. The training on the new data tool (Advise Inc.) has now been delivered, the benefits of which combines the data from the two systems and allows for greater interrogation at a budget and category level and across the groups within the Health Board and wider across Wales.
- 3.10. The Head of Procurement has updated the Health Board's Financial Control Procedure (FCP) for Procurement and Tendering to reflect legislative and accounting changes relating to the Procurement of goods and services. These include changes to the Public Procurement thresholds, including the need to consider VAT in assessing total contract/expenditure when considering the threshold.

4. FINANCIAL IMPLICATIONS

4.1. Where possible, requests reported in this submission are reviewed by NWSSP Procurement Services, to ensure best value for money is obtained and particularly in relation to the Health Board response to the Covid-19 pandemic. This ensures that the financial implications of each request are considered prior to expenditure being committed. No financial assurance is given by the Procurement team however in relation to Retrospective Action requests.

- 4.2. A more proactive approach to managing SQA/STA agreements will continue and it is anticipated further opportunities will continue to be added to the work plan.
- 4.3. The Procurement team is working to ensure that all SQA/STA requests that are recurrent in nature become part of the work plan and quotations are received through the Multiquote online quotation system or tendered via the EtenderWales online tendering platform.

5. NEXT STEPS

- 5.1. In agreement with the Finance Team, action has been taken to facilitate a closer working relationship between the NWSSP Procurement Service and Finance Team and will commence. All such matters reported in this paper will form part of the standing agenda in appropriate performance related meetings. A proposal to address operational engagement is included in the draft Procurement Business Plan, which has recently been updated and is currently with the Interim DoF for consideration.
- 5.2. The activity undertaken by the Procurement Service to seek assurance of budget availability in association with matters reported, remains an ongoing activity. Any concerns arising are addressed with the operational service lead, budget owner and Finance Business Partner at the time of identification.
- 5.3. Any additional expenditure relating to the Health Board response to the Covid 19 pandemic will be reported using the same format as this document.

6. **RECOMMENDATIONS**

- 6.1. The Committee is asked to note the information provided in this report and specifically **NOTE**:
 - The activity presented has been approved by the Health Board, in accordance with the Scheme of Delegation, for the period reported and as presented in Appendix 1 of this report.
 - The actions taken to benchmark activity, to ensure value for money has been achieved.

Governance an	d Assurance			
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting	and	
Objectives	Partnerships for Improving Health and Wellbeing	\boxtimes		
(please choose)	Co-Production and Health Literacy			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Digitally Enabled Health and Wellbeing			
Deliver better care through excellent health and care services ac		es achieving	the	
	outcomes that matter most to people			
	Best Value Outcomes and High Quality Care	\boxtimes		
	Partnerships for Care			
	Excellent Staff			
	Digitally Enabled Care			
	Outstanding Research, Innovation, Education and Learning	\boxtimes		
Health and Car	e Standards			
(please choose)	Staying Healthy			
	Safe Care	\boxtimes		
	Effective Care	\boxtimes		
	Dignified Care			
	Timely Care			
	Individual Care			
	Staff and Resources			
Quality, Safety and Patient Experience				
The approach a	llows for a quality focused approach to the way in whicl	h the Healt	h	

The approach allows for a quality focused approach to the way in which the Health Board manages its governance process in relation to SQAs/STAs and such activity. This ensures increased opportunities for planning future activity, including closer monitoring of compliance against Health Board standing orders and supplier performance.

Financial Implications

As detailed in section 4 above.

Legal Implications (including equality and diversity assessment)

As detailed in section 3 above.

Staffing Implications

The Procurement team is now at full staffing compliment. This will allow for an enhanced procurement service.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

- Long Term The increased engagement with Procurement Services raises visibility of the Procurement Service and supports the Health Board to improve planning. This will result in short and long term financial benefits.
- Prevention Situations whereby ineffective contracts or 'evergreen' contracts are in place continue to be reduced as a result of this approach.
- Integration This activity will allow for better integration within the Health Board and with partner organisations. An Increased understanding of which contracts are in place will allow for significantly improved planning between public bodies.

- Collaboration Data analysis underway will highlight opportunities to improve the visibility of Health Board wide activity, ensuring like needs are aggregated to maximize commercial return and remove unwarranted variation.
- Involvement The nature of the activity requires the involvement of all parts of the organisation and through the presentation of a Procurement Business Plan the endorsement of the Executive Team.

Report History	Procurement matters are a standing agenda item. The last paper was presented at the Audit Committee meeting that took place in January 2022.
Appendices	Details of Expenditure Committed (Appendix 1). Introduction to Procurement Manual (Appendix 2). Primary Care Procurement Details (Appendix 3).