

27th April 2017

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New HealthChat

Prof Henry Mintzberg - the virtuoso management academic

In conversation with Roy Lilley

11th May - London - Special deal for IHM members -

[Full details here.](#)



Good luck with that...

News and Comment from Roy Lilley

There's not much lurve for companies that sell stuff to the NHS. I get that but the truth is, we need partnerships that give us ideas, better, safer and more efficient ways of doing things. But it is tricky...

Pharma... well, we all know the history. Device manufacturers all but ignored and companies contracting for NHS, patient-facing contracts are treated, in some quarters, like lepers.

There is another side to the coin... the NHS pound. There are some services that the NHS is not good at and companies and partners can do a great job with us and for us.

I'm no fan of tendering; the bureaucracy-costs, the process is torturous and anyway, most of the players have fallen by the way-side. Or, end-up like Virgin, [threatening to sue](#) their customers.

Medicine for Managers



**Dr Paul Lambden
Ichthyosis**

'...oooh nasty...'



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shout about from the
roof tops**

Let's not forget the centre-piece; Hinchingsbrooke Hospital. Investors, Circle lost £5m trying to run it and paid another £2m to get out of running it.

Let's park all that. There's no money in healthcare, tendering and commissioning is dying a death.

What I am much more bothered about is pharma and the kit-n-caboodle makers.

Although we all think the NHS is jolly-fine, it is only 3% of the global market. Despite the PPRS and NICE, we do manage to get pharma to launch products here, partly because of the cachet the NHS has (remember the opening of the Olympics), because top-pharma people like living here, the timezones work, Heathrow is a hub, we speak English, it's safe for their families and Waitrose.

However, the European Medicines Agency is Brexiting. A disaster. Apart from the loss of jobs and there is a queue of EU countries who see the benefits of playing host, we are mad to let them go because we'll end up waiting months to buy new drugs, already available to bigger markets.

The EU is 25% of the global market. You see my point.

We can't fix that. We will have to develop our own regulator, with all the attendant costs just to duplicate the EU. The three people left at NICE will end up evaluating corn-plasters...

My other worry; the kit-n-caboodle people. We must have a good supply of consumables, devices, equipment and new ideas.

Aside from a post-Brexit tariff-import concatenation we could do without, selling to the NHS is a nightmare.

There's no front door. Over 150 Trusts and a central tendering system that was invented by someone with a Phd in deterring-participation... an EU invention. It'll be replaced with something equally labyrinthine.

Add to that, about 8,300 GP practices and 212 CCGs, community hospitals and services and all the rest.

If you are selling to the NHS, bear in mind; CCGs are disappearing, less and less influential in buying things. STPs will take on the role of strategic health authorities

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News and Stuff



>> **CQC (them again) external assessment of their board** - ouch!

>> **Labour promises a pay-rise and safe staffing** - looking for the 1.3m votes in the NHS. But, a 1% rise costs half a billion quid and you can't have safe staffing unless it is resourced. My guess is Labour's health shadow, Jon Ashworth, will know that, too. I expect a more defining announcement in the manifesto.

Worth watching out for.

>> **RCGP manifesto** - six sound points. Let's see how they match-up to the real thing.

>> **HIV** - the future of services. good read from the King's Fund.

>> **International Code of Practice for Planning, Commissioning and Providing Technology Enabled Care Services** - download here.

Practice Managers

Roy Lilley answers their questions for

Practice Index.

Watch for FREE, here

Missed the Helen Stokes-Lampard, chair of the RCGP, HealthChat?

Here is is, **in full and for free.**
A great guest, full of energy and

and far too remote to buy things. **So, good luck.**

Accountable Care Organisations are creeping up on us. They will only want products and kit that can span primary and secondary care. A trick very few companies have been able to pull off. **Good luck with that.**

Let's say you have a really good, value for money gismo or consumable that the NHS would find handy, help reduce costs and improve outcomes. How will you sell it to the NHS?

You could try and get it listed, FP10... prescribed. The NHS is trying to cut the prescription Bill. **Good luck with that.**

You could wear out your shoes traipsing around knocking on +9,000 doors. **Good luck with that.**

Use your phone book? You'll find the people you once knew, have been made redundant, moved to a new job or retired. **Good luck with that.**

You could produce a fabulous business-case, highlighting a wow-return-on-investment and flash it about like a fly fisherman with a Gold Ribbed Hare's Ear on a still, summer evening. **Good luck with that.**

The NHS is preoccupied with reorganisation, cuts, fighting off regulators and struggling to recruit and retain staff. Interest them in anything new? **Good luck with that.**

The NHS is set to save £30bn by 2020, or whatever that translates into after the election. A big slice will depend on adopting new ideas, innovations, product developments and new stuff.

That means the NHS will have to try them, evaluate them, use them, tweak them and make them sweat.

But, first, they'll have to find them... good luck with that.

Contact Roy - please use this e-address
roy.lilley@nhsmanagers.net

Know something I don't - [email me](#) in confidence.

Leaving the NHS, changing jobs - you don't have to say goodbye to us! You can update your Email Address from the link you'll find right at the bottom of the page, and we'll keep mailing.

ideas. A delightful 90mins that just flew by.

Gossip



This is what I'm hearing; if you know different, [tell me here](#)

>> **I'm hearing** - DH have parked their response to the Caldicott review. They've had nearly a year to do it. Now they have kicked it into the long-grass, blaming purdah. How convenient.

HealthChats

Prof Henry Mintzberg

Virtuoso Management Academic
11th May - [Details Here.](#)

Read his latest HR article on why the US can't be run like a business.
[Here](#)

Chris Hopson

NHS Providers
in conversation with Roy Lilley
This'll be good!
25th May - London

[Details here.](#)
[Read his latest blog here.](#)
Well worth a read.

Claire Murdoch

From nurse to national MH director; what a journey.
In discussion with
Roy Lilley
7th June - London

[Details here](#)



Need inspiration, a good idea or solve a problem
[Look here.](#)

>> **The future of social care** - bleak or bright?
>> **Major IT problem** - Barts.
>> **LAS appoints new boss** - ex-bus-driver?
>> **Hospital charges staff £90 a month to park** - why would you work there? It's in London there are plenty other employers in the area. Go somewhere you are

[Disclaimer](#)

valued.

>> **Why the NHS has a problem with staff health** - coz they are knackered?

>> **Mental health care** - cuts.

>> **Bob the Builder** - having another go it.



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