

# Jen Flores

ROLE

Senior Manager, Purchasing  
Department

LOCATION

Nottingham, UK

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I am a 35 year old manager in our purchasing department. I've always worked in procurement having started in a large medical company and then moved around for promotion.

The job has changed over the years and I now feel like a key part of the hospital team, with a much higher profile. I often find myself having to work late and asking surgeons to justify why they need something. Long gone are the days when I would be told to just buy it. Now I need to make sure that we are protecting the hospital at all times and achieving our tough cost budgets.

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Purchasing is a growing sector as hospitals and clinics come under increasing pressure to manage their costs down in the face of falling reimbursements and budget constraints.

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My responsibility is to ensure that there is an unbroken chain of supply to the hospital and medical professionals, including the procurement, storage and distribution of all the equipment and supplies they need; from bed linen and bedpans to prostheses and pacemakers.

All this needs to be delivered within a pre agreed budget framework and I achieve this by focusing on reducing the number of vendors we contract with and medical devices we stock. I aim to negotiate a low unit cost and ensure that the device delivers on the clinical efficacy and cost savings that are promised. My department is divided into admin, contracting, purchasing and logistics.

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- ① To achieve my budget and cost saving objectives, and in turn my bonus payments.
- ② To do a good job and maintain the hospital supply chain without incident.
- ③ To be seen by my healthcare colleagues as an important and valuable resource rather than just another obstacle to overcome.

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Delivering my cost saving targets →

Managing new products requests →

Enforcing procurements policy →

Price transparency →

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## Delivering my cost saving targets

In the last few years the focus on cost savings has grown enormously. I'm still expected to ensure that we have all we need when we need it, but now I need to find savings at every turn. My bonus is directly linked to my success in this area.

## How I overcome it today

I manage our inventory very closely both in terms of our unit cost and how much we are stocking at any one time. Technology allows me to know exactly who is using what and when items are nearing their expiry date. To reduce our costs further we:

- Categorise our medical devices and operate a matrix payment schedule, with a price cap, for each category.
- Limit the number of suppliers for each category and look for an item to be removed if a new one is added.
- Continuously review the efficacy and cost impact of the device.
- Hold stock on consignment where possible or long term loan for larger pieces of equipment.
- Regularly look to renegotiate the price for higher contract value items

## How can Biocomposites help?

The use of Stimulan as part of your infection management strategy delivers improved clinical outcomes and eliminates the need for a second procedure to remove the device. If you decide to mix Stimulan with antibiotics, they will be released at supra MIC levels locally. This will protect the device from colonisation by bacteria, can reduce the need for longer term systemic delivery and help with your antibiotic stewardship – transforming outcomes and lowering costs of care.

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## Managing new product requests

I am inundated with requests from manufactures to add their medical devices and pharmaceuticals to our inventory. This not only consumes a large amount of time, but is often outside my field of expertise.

## How I overcome it today

I prioritise those items that are being requested by the clinicians and check to see if anything we currently stock will meet their needs, instead of bringing in a new product.

## How can Biocomposites help?

- Work with purchasing department to give them the information they need to approve.
- Help secure a sponsor surgeon who is willing to support us.



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## Enforcing procurement policy

Even though we have stated procurement policies it's not uncommon to find that a surgeon is trialling a new medical device without authorisation. This not only impacts my ability to manage cost and inventory but also puts the hospital at risk of malpractice.

## How I overcome it today

I regularly brief the clinical teams within the hospital and in particular the Theatre Manager who controls what goes in and out of the theatre. Surgeons can be heavily influenced by the distributor reps and so we actively control their access in and out of the hospital through the use of technology. The reps are briefed on our policies and know that any items they bring in outside of the process won't be paid for.

## How can Biocomposites help?

- Observe a hospital's procurement policy.

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## Price transparency

Negotiating with suppliers can be difficult. There is very limited transparency on the unit cost other hospitals are paying and therefore I never know if I have really achieved a good deal. I would go as far as to say that some suppliers actively disintermediate the market to preserve this advantage.

## How I overcome it today

At our hospital group we have centralized purchasing so that we can see what each individual hospital is paying for each item and select the best deal.

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- 1 The surgeon.
- 2 The efficacy and cost impact of the medical device.

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- 1 Benchmark studies from GPO or ECRI.
- 2 Specialist seminars and conventions e.g. American Hospital Seminars for Materials Management.
- 3 Peer to peer conversations.
- 4 Distributor reps and sales calls.

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Common **Questions**



- ① Which surgeons in my hospital want this?
- ② What is Stimulan indicated for?
- ③ What volume of product is used in a typical case?
- ④ How much does it cost?
- ⑤ What can it replace from my existing inventory?
- ⑥ Who are your competitors and how does your product compare?

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