



Finance Current Awareness Bulletin

January 2024

The aim of this current awareness bulletin is to provide a digest of recent guidelines, reports, research and best practice. The scope of this bulletin includes the UK economy, finance, procurement, sustainability, and good working practices.

2024 voluntary scheme for branded medicines pricing, access and growth

[The scheme is a voluntary agreement between the DHSC, NHS England and the Association of the British Pharmaceutical Industry.](#) The voluntary scheme aims to: promote better patient outcomes and a healthier population; support UK economic growth; and contribute to a financially sustainable NHS.

Competition in public procurement

The government spent £259 billion procuring goods and services in 2021–22, but this [report from the House of Commons Committee of Public Accounts](#) finds that it is unable to demonstrate that it is achieving value for money in public procurement, due to significant issues with the quality and completeness of data on contracts.

Funding for local public services – ripe for reform?

To create a healthy society for everyone, we need all the right building blocks in place: secure housing, good work, quality education and much more. Our public services can make a big difference in supporting these building blocks. This [analysis from the Health Foundation, based on work from the Institute of Fiscal Studies](#), shows that many local authorities are not receiving funding allocations in line with local need. It also shows that the most deprived areas of the country receive less than their share of funding for public services when compared with the most affluent. With the UK's health vulnerable and deep inequalities continuing, local government funding needs reform. We must ensure allocations are fair, and that local services can invest in the building blocks of health.

NHS Supply Chain and efficiencies in procurement

The NHS is not making the most of its spending power to save money in purchasing medical equipment and consumables. It has continued to spend more than £3 billion outside NHS Supply Chain, its purpose-built procurement route, as customer satisfaction with Supply Chain has declined, a [new National Audit Office \(NAO\) report has found](#).

Review of risk of modern slavery and human trafficking in the NHS supply chain

This [review from the Department of Health & Social Care](#) considered more than 1,300 suppliers, representing 600,000 NHS products, to identify modern slavery risks and build a more ethical and reliable UK health system. In delivering the recommendations of the review, DHSC will work in partnership with NHS England and NHS Supply Chain to: lay new regulations; develop a cross-government response to map supply chains to improve knowledge and identify where action must be taken; and enable NHS staff to better understand and address modern slavery risks.



Separate pay spine for nursing

In May 2023 the government agreed a deal for the Agenda for Change (AfC) workforce through the NHS Staff Council. During negotiations, concerns were raised about how the AfC pay structure is affecting the career progression and professional development of nurses, and the direct impact that this is having on recruitment and retention. The Royal College of Nursing suggested that a separate pay spine for nursing staff could address these concerns. The [government is now seeking views on the benefits and challenges of a separate pay spine for nursing staff](#). This call for evidence closes at 11.59pm on 4 April 2024.

The cost of breast cancer: modelling the economic impact to the UK

This [research from Demos finds that breast cancer will likely cost the UK economy between £2.6 billion and £2.8 billion in 2024](#). It also estimates that wellbeing costs associated with the disease will amount to £17.5 billion in 2024. This report, supported by Breast Cancer Now, sets out how a number of critical interventions can mitigate the human and financial impacts of breast cancer. The economic modelling shows that higher levels of screening, more cancer nurse specialists, and better help for people returning to work would deliver the highest impact.

The NHS estate continues to deteriorate

Recently released NHS estates data shows that the NHS needs to spend £11.6 billion to return its run-down buildings and equipment to a suitable condition. Charlotte Wickens, a policy adviser at The King's Fund, [looks at how the state of the estate affects more than just buildings](#).

Using financial incentives to tackle health inequalities

Finance staff have a key role in ensuring that financial incentives are designed effectively and form part of a wider financial strategy to reduce health inequalities. Financial incentives should be considered as one tool of many, not to be used in isolation but as part of a wider change programme. They work best when they are simple, predictable, use a clear evidence base, and are designed to avoid the pitfalls. This [briefing from the Healthcare Financial Management Association summarises the financial incentives that are already built in at a national level](#), and looks at opportunities for individual systems to use financial incentives at a local level. The briefing is published alongside a case study on Bolton Clinical Commissioning Group.



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