

Managing outstanding medicines orders: from reactive to proactive

09 September 2026

The first stop for professional medicines advice

What is an outstanding order?

A purchase order or order line not fulfilled within the expected lead time

They can be caused by:

Supply disruptions

Order failure (not received by supplier,
incorrect product code)

Human error (missing from delivery, not
booked in)

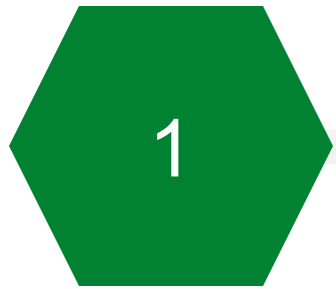
Why the project happened?

Procurement process review following off contract claims project

Confirmation that effective management of outstanding orders and actions taken have a direct impact on the number of claims made

This project is not about reducing the number of supply disruptions but how to manage the outstanding order process

Why does outstanding order management matter?



Supply disruptions, order failures, human error are inevitable



Unmanaged outstanding orders can cause stock-outs



Delayed identification increases operational issues, emergency orders and the risk of missed off-contract claims



Inconsistent local processes reduces visibility of emerging supply problems



Risk to patient safety

What the project set out to achieve

Aim: To reduce medicines stock-outs and improve contract compliance through best-practice guidance and a standardised digital solution specification.

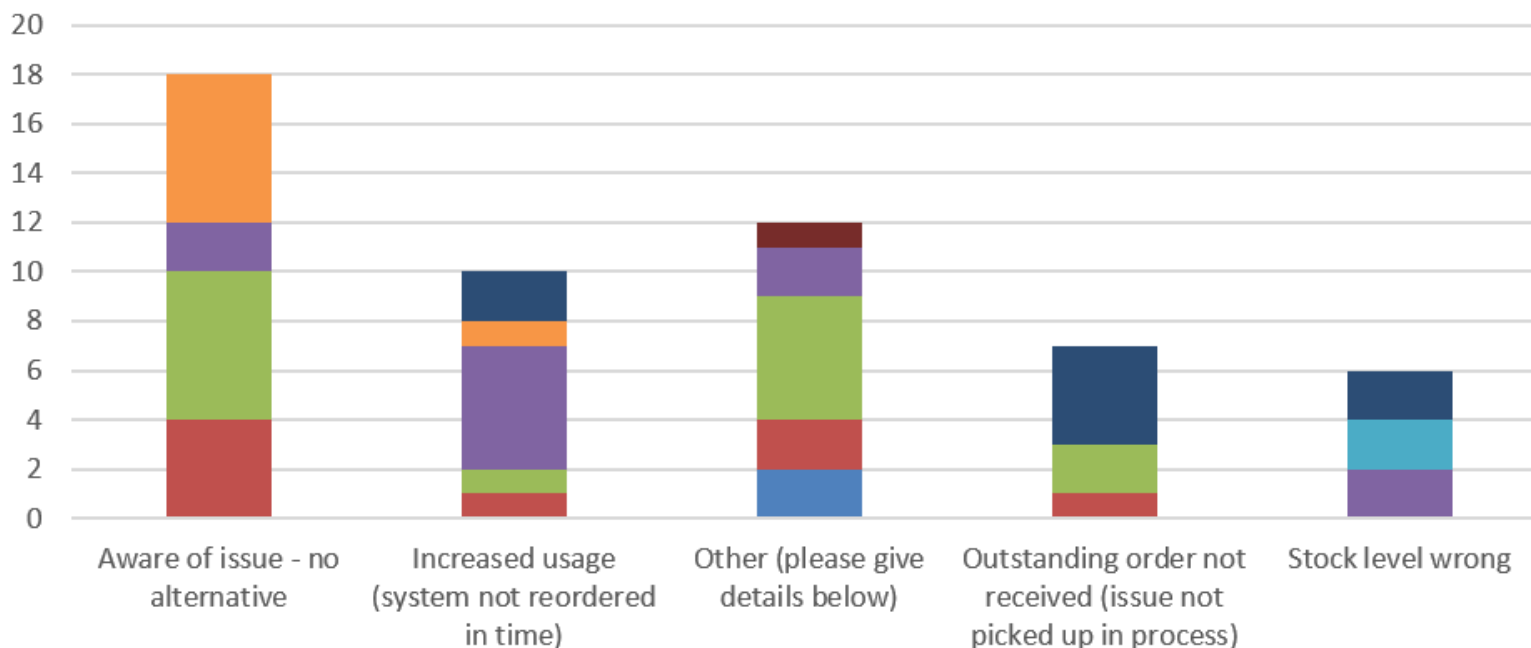
- Through structured surveys understand how Trusts currently manage outstanding orders and where practice varies.
- Identify the causes of stock-outs linked to outstanding orders and quantify operational impact using baseline out-of-stock data
- Develop practical guidance, system requirements and measurable improvement options.

What did the project find?

- Outstanding order management varies considerably between Trusts.
- Some teams have structured, proactive processes; others rely heavily on manual review and individual knowledge.
- Pharmacy system reports are valuable, but standard reports do not consistently provide the full information needed to manage the process.
- The frequency of review of reports and the amount of staff resource needed is very variable.
- The effectiveness of the process is closely linked to accurate inventory, timely review of order replies and clear ownership of actions.
- Information about supplier responses, back orders and expected resupply is not always captured consistently which can result in duplication.

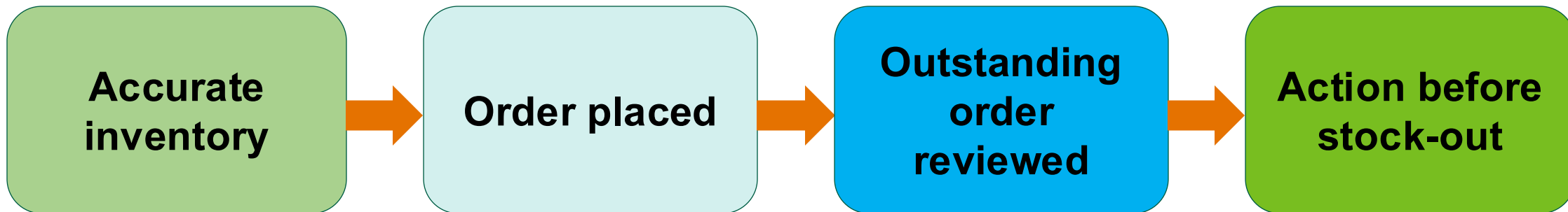
Out of stocks survey results

Count of Reason for out of stock/near miss not picked up and actioned through current outstanding order management process



- Even if issues are known, these seem to **not be well communicated** and teams still receive a lot of queries on why there is no stock.
- Most 'other' responses can be linked back to a **proactive process not being followed** for outstanding order review.
- **Accurate inventory and system reordering parameters are key** to allowing enough time for orders to be delivered or issues identified.

The Basic Process



If any link fails, the risk of a stock-out, unnecessary alternative purchasing or missed financial recovery increases.

The key is identifying a clear process with what actions need to be taken and decisions made at each step and how this is recorded/shared with the right people.

An example of best practice from MSE

Welcome Luke Tyler, Pharmacy Operations Manager - Procurement from
Mid and South Essex NHS Foundation Trust

MANAGING HOSPITAL PHARMACY OUTSTANDING ORDERS

A practical, standardised approach to medicines availability, supplier performance and financial control.

MSE Pharmacy Procurement

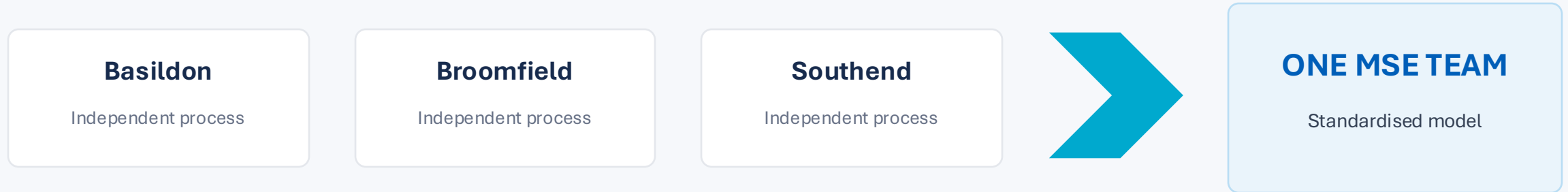


Luke Tyler – Pharmacy Procurement Operations Manager
September 2026

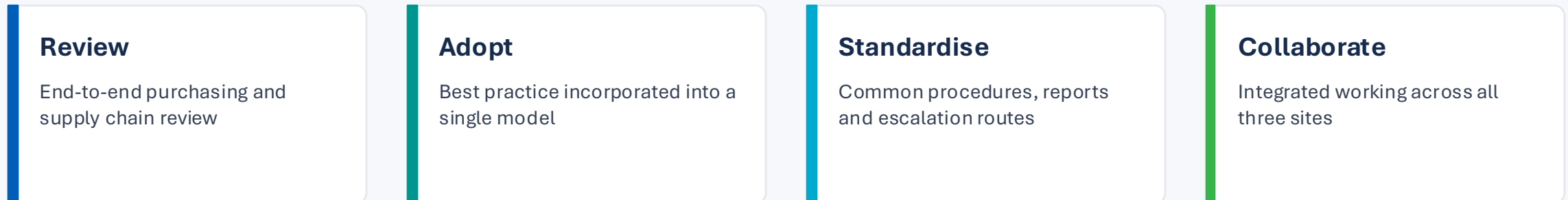


From three local teams to one procurement function

The merger created the opportunity to standardise how outstanding orders and supply disruption are managed.



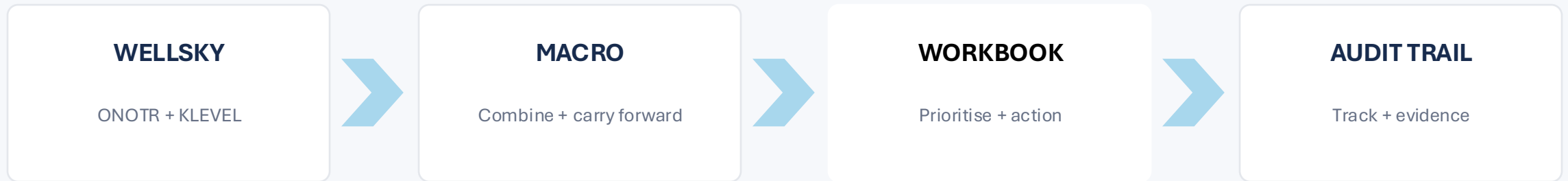
What changed



Outcome A safer, more resilient and more consistent procurement service across the Trust.

One daily view of risk, stock and action

WellSky extracts feed a macro-enabled workbook that preserves continuity and creates a consistent audit trail.
Outstanding Order Spreadsheets



ONOTR

Goods ordered but not received. The primary daily list of supplier orders awaiting receipt.

KLEVEL

Minimum stock and holding information used to identify medicines approaching stock exhaustion.

Bespoke macro

Combines reports, carries comments forward and standardises the daily working view.

The outstanding-orders workbook

A single operational view brings supplier, order, stock and follow-up information together.

Supplier	Supplier Contact	Order Number	Date Ordered	Date Expected	Description	Location
MAWDSLEYS (PMS)	01908 525 180	ORN0820695	20-Aug-26	24-Aug-26	CLARITHROMYCIN 500 mg Tablets 14 Tablet Pack	NSPU Orsett
MAWDSLEYS (PMS)	01908 525 180	ORN0820695	20-Aug-26	24-Aug-26	CO-AMOXICLAV 250/125 Amoxicillin 250mg & Clavulanic acid 1	NSPU Orsett
ALLIANCE HEALTHCARE (CD	03448544998	BAD0819389	19-Aug-26	24-Aug-26	DIAMORPHINE HYDROCHLORIDE 10 mg Injection 5 x 10mg amp	Basildon Dispen
ALLIANCE HEALTHCARE EDI	0344 854 2183	BRO0818873	19-Aug-26	24-Aug-26	ERYTHROMYCIN (Sugar Free) 250 mg in 5ml Suspension 100 mL	Broomfield Phari
ALLIANCE HEALTHCARE EDI	0344 854 2183	BRO0819892	19-Aug-26	24-Aug-26	ERYTHROMYCIN (Sugar Free) 125 mg in 5ml Suspension 100 mL	Broomfield Phari
MAWDSLEYS (PMS)	01908 525 180	BRO0819903	20-Aug-26	24-Aug-26	PEGINTERFERON ALFA-2a (PEGASYS) Prefilled Syringe 135 micr	Broomfield Phari
MAWDSLEYS (PMS)	01908 525 180	U082012478	20-Aug-26	24-Aug-26	DOMESTOLONE 10 mg Tablets 14 Tablet Pack	Broomfield Phari

Qty Order	Qty Deliver	Qty Outst and	Qty in Stoc	In Stock	On Ord	Minimum	No. days stock holding left	Comments
20	0	20	0	#N/A	#N/A	#N/A	#N/A	On SPWA spreadsheet
10	0	10	0	#N/A	#N/A	#N/A	#N/A	24/08/2026 - Invoice 2083389 proc
3	0	3	0	0/0	3	3	#DIV/0!	Supply Problem - MSE Initiated
6	0	6	4	#N/A	#N/A	#N/A	#N/A	On SPWA spreadsheet
8	0	8	0	0/0	11	2	0	On SPWA spreadsheet
6	0	6	4	#N/A	#N/A	#N/A	#N/A	24/08/2026 - oos at mawds - will se

Supplier + order

Who and what is outstanding

Stock position

Qty ordered, delivered and in stock

Risk signal

Minimum level and days cover

Action trail

Comments and follow-up history

Two workstreams, one safety-first principle

Resources are focused where patient impact and supply risk are greatest.

CRITICAL + PRIORITY

Immediate review and escalation

- Critical medicines
- High-risk medicines
- Trust procurement priorities
- Significant patient-safety implications

NON-CRITICAL

Managed alongside critical orders

- Routine stock items
- Lower-risk medicines
- Adequate alternative stock cover

Same daily discipline, different urgency.

A repeatable rhythm from extraction to escalation

Clear ownership and consistent comments keep unresolved orders visible until closure.

1

Extract

Run the outstanding-order report

2

Review

Check order, stock, and comments

3

Chase

Contact supplier and update comments

4

Supply Problem with Alternative or Supply Problem

5

Escalate

Raise unresolved high-risk items

6

Close

Confirm resolution and retain trail

Document every decision and action

Supply Problem With Alternative (SPWA) or Supply Problem: the gateway decision

Confirm the contracted line cannot be sourced, preserve the claim trail, then choose the correct route.

Confirm issue

Manufacturer update or MPSC notification

Check supply

Alternative supplier or direct manufacturer

Keep order open

Required for any future off-contract claim

Alternative available

Add to the Supply Problems with Alternatives workbook and manage off-contract process.



No licensed alternative

Add to the Supply Problem workbook and initiate the shortage communication route.

Stock ordering is based on current WellSky holdings and the timing of any anticipated claim. Where off-contract ordering cannot yet begin, Procurement will typically order up to one week's stock.

Off-contract purchasing without losing the audit trail

The level of price difference determines the route and evidence required.

Off Contract orders > £25 difference - process of making the Off Contract Claim

1. We only pursue an off-contract claim with the contracted supplier if the difference in order price is £25 or greater.
2. Check the MPSC website to ensure contract is still in place and the manufacturer and route of purchase e.g. AAH, Alliance etc.
3. Using KANAL on Wellsky check the outstanding order is over 14 days old.
4. Check that alternative pip code identified on the spreadsheet is still available to purchase.
5. Fill in the relevant information on the second page of the official MPSC Off contract Claim form:
6. The CMU Supplier is contacted via email, using the designated mailbox - mse.offcontractclaimspharmacy@nhs.net. The information that they will need to assess the claim is the details of the outstanding order and the cost etc of the alternative purchase.
7. Once the Supplier has responded and given you an off contract reference the purchase can then be made for the alternative stock.
8. Ensure that the Off-contract purchase is made using the Supplier Off Contract e.g., Phoenix (Claimable Off Contract) – EDI.
9. The order that the claim is made against will then need to be deleted on both Wellsky and the wholesalers. Ensuring that the if there is no access on the wholesaler website to delete orders that they are emailed requesting for the back order to be deleted.
10. A new order will then need to be placed for a months' worth of stock for the contracted CMU line so that we can then claim again in 14 days.
11. Populate the Supply problems with alternative spreadsheet.
12. Ensure that all other sites are checked for stock and the above steps followed if necessary.
13. When the claim reference is received from the Supplier complete all sections of the BGMA form. Once the form is completed save the form, the file should be saved site-Drug Name – date e.g. BAS-Paracetamol 500MG Caps – 07.03.25.

> £25

Complete the formal off-contract claim route

< £25

Follow the local lower-value claim process

Control point

Retain the contracted supplier order and supporting evidence.

One shortage record

Standard updates ensure we do not run out of stock.



Date added	Site	Drug Descriptions	Form	strength	Pack Size	Supplier/ Telephone Number	CMU Expiry Date/not CMU	Estimated Re-supply date	Original Pip Code
23/07/2026	Basildon Store	Aciclovir Dispersible	Tablets	400mg	56	Sunpharma Cserv.uk@sunpharma.com	31/05/2027	TBC	Mawds - 1069947
23/07/2026	Southend Dispensary	Aciclovir Dispersible	Tablets	400mg	56	Sunpharma Cserv.uk@sunpharma.com	31/05/2027	TBC	Mawds - 1069947
23/07/2026	Broomfield Pharmacy	Aciclovir Dispersible	Tablets	400mg	56	Sunpharma Cserv.uk@sunpharma.com	31/05/2027	TBC	Mawds - 1069947

Wholesaler/ Manufacturer/ Off Contract Purchase Made From	Pip code ordered	Original Order Number	Off Contract Purchase Order Number	Quantity ordered	Off Contract reference number	Claimed order cancelled on Wellsky and with supplier	Order number of contracted item (placed ready for next claim)	Order Date	Last Updated Comment Date	Date to claim off Contract	Comments
Alliance Mawdsleys	7049141 1056456	BAS0805636	BAS0819917	20	Pooja Chauhan	Y	BAS0819918	19/08/26	19/08/26	02/09/26	19/08/26 - emailed for occ ref - LCK 06/08/26 - Ordered x 10 NC - claim on 19th - LCK 06/08/26 - Emailed purchasing low stock no alternative 23/07/26 - 14 in stock - KM
Alliance Mawdsleys	7049141 1056456								19/08/26	02/09/26	19/08/26 - 48pks & 80du in stock - LCK 06/08/26 - oredred x 20 NC - claim on 19th - LCK 06/08/26 - Emailed purchasing low stock no alternative 23/07/26 - 24 pks & 95 DU - KM
Alliance Mawdsleys	7049141 1056456								20/08/26	03/09/26	20/08/26 - 20pks & 88du in stock - LCK 06/08/26 - Emailed purchasing low stock no alternative 23/07/26 - 13 pks & 86 DU. 5 ordered - KM

Clinical teams

Dispensaries

Wards

Pharmacy leadership



Supply-problem notification at a glance

A compact email template turns operational data into a clear request for clinical action.

BNF CHAPTER	LEAD SITE	RAG RATING	URGENCY OF RESPONSE FROM CLINICAL TEAM

MSE Stock Summary

levels escalating any discrepancies via this email chain and make system corrections as soon as possible

Stocked in Emergency Drug Room/Cupboard Locations? No

Total packs in stock	Average issues per day	Estimated days stock remaining	Estimated days to re-supply
0	0	#DIV/0!	0

Individual site breakdown (please refer to the attached BDRG and DSUM for usage summary and areas held as stock)

Basildon	Number of days stock	#DIV/0!
BNF Lead -	Number of packs in stock	
2nd Lead -	Average number of packs used per day	

Broomfield	Number of days stock	#DIV/0!
BNF Lead -	Number of packs in stock	
2nd Lead -	Average number of packs used per day	

Southend	Number of days stock	#DIV/0!
BNF Lead -	Number of packs in stock	

Boots	Number of days stock	#DIV/0!
BNF Lead -	Number of packs in stock	
	Average number of packs used per day	

Manufacturer	
Other Suppliers available (Yes/No)	
Start date	
Anticipated date of resolution	

Please follow SOP for "Procedure on how to deal with medicines availability problems"

RAG Rate	Total Stock Status until resolution	Urgency of Response needed from clinical team
RED	Under 7 days stock	within 24 hours
AMBER	7-14 days stock	within 48 hours
GREEN	Over 14 days stock	within 4 working days

Guide to completing

1: Enter BNF Chapter and Lead Site on the 1st table

2: Enter the number of packs in stock and average number of packs used per day for each of the sites on the "Individual site breakdown table (The number of days stock remaining for each site and the MSE Stock Summary table will auto complete)

3: Enter the BNF leads and 2nd leads on the "Individual site breakdown table"

4: Enter the RAG Rating and Urgency of response on the 1st table based on the Estimated days stock remaining on the "MSE Stock Summary table"

5: Check BDR reports to confirm if drug is kept in Emergency Drug Room/Cupboard locations with either YES or NO in cell D7 (if yes, set font colour to RED)

6: Select cell C30 and enter the Manufacturer

7: Select cell C31 and indicate if other suppliers are available

8: Enter start date in format dd/mm/yy (this will be the date the MSE supply issue is being initiated)

9: Enter the anticipated date of resolution in format dd/mm/yy

10: Select from Row 1 to 35 through Columns A to F then copy and paste into email providing summary of supply issue and attach combined BDRG's and DSUM's for all sites.



Pharmacy
and Medication

Good escalation answers four questions: what is affected, how long stock may last, who needs to act, and by when.

A live record from first alert to resolution

The workbook combines ownership, clinical input, supply status, financial status and closure evidence.

Drug/Strength/Form	Manufacturer	Start Date (date mse supp issue email sent)	Anticipated Resupply Date	Supply resolution date	Chap	Lead Site	Lead Pharmaci	Deadline for circulation o Memo	Memo Issue Da	Date Supplier Last Chased
Rifampicin 600mg IV	Sanofi	05/08/2025	intermittent Supply		5	Southend	Titi Odewumi	11/08/2025	no memo required	25/08/2026

Date To get Update From Supplier	Added to Planner	Procurement notes	Pharmacist notes	Tariff status	Supplier updated to "MS supply issue"
25/09/2026		16/01/26 - Currently available and able to meet demand within MSE but SPS advises supply is limited and may be intermittant - DT 06/08/2025 - 26/12/2025 return date - DG	SW 21/04/26 - have unlicensed if needed	Tariff	N

SAFETY

Prioritise patient impact

AVAILABILITY

Protect continuity of supply

CONTROL

Maintain claim evidence

ASSURANCE

Create a clear audit trail

Daily management of the Supply Problems workbook

Allocated to a Senior Pharmacy Procurement Assistant and Pharmacy Technician with defined escalation and closure steps.

1

REVIEW

Sort by Date Last Chased and check open actions

2

CHECK

Review SPS availability or resupply updates

3

CONTACT

Request a supplier update and estimated date

4

ESCALATE

Follow up with the relevant Chapter Lead Pharmacist

5

RESOLVE

Issue closure communication and move the record

Recording of Outstanding orders

Date	Total Number of lines	Total Number of lines with no comments (Over date expected - Take into account weekends)	Total Number of lines with no comments for Critical Medicines/Procurement Prioritisation (Over date expected - Take into account weekends)	Total Number of lines with no comment with zero stock (Over date expected - Take into account weekends)	Total Number of lines with no comment for Critical Medicines/Procurement Prioritisation with zero stock (Over date expected - Take into account weekends)	Total Number of lines ordered in last 3 days	Total Number of lines ordered in last 3 days that are zero stock	Total Number of lines ordered in last 3 days that are zero stock and a Critical Medicine/Procurement Prioritisation
Aug-26								
03/08/2026	1205	38	11	0	0	520	109	22
04/08/2026	1375	102	19	14	0	649	121	30
05/08/2026	1510	74	0	14	0	803	143	27
06/08/2026	1490	86	0	8	0	587	100	26
07/08/2026	1356	70	0	0	0	625	121	28
10/08/2026	1254	42	0	4	0	530	99	23
11/08/2026	1447	129	23	29	3	723	113	32

4

Total Number of lines with no comments (Over date expected - Take into account weekends) (This / Total Number of lines)	Total Number of lines with no comments for Critical Medicines/Procurement Prioritisation (Over date expected - Take into account weekends) (This / Total Number of lines)	Total Number of lines with no comment with zero stock (Over date expected - Take into account weekends) (This / Total Number of lines)	Total Number of lines with no comment for Critical Medicines/Procurement Prioritisation with zero stock (Over date expected - Take into account weekends) (This / Total Number of lines)
3%	1%	0%	0%
7%	1%	1%	0%
5%	0%	1%	0%
6%	0%	1%	0%
5%	0%	0%	0%
3%	0%	0%	0%
9%	2%	2%	0%



Procurement Dashboard

Dash Board - Procurement		Target			Date											
		On Target	Of Concern	Action Required	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26
KPI's	% of overdue outstanding orders with comments															
	Number of lines with comments	>85%	84%-70%	>70%	95%	95%	97%	98%	95%	90%	96%	98%	98%	98%	95%	96%
	Number of lines with comments for Critical Medicines/Procurement Prioritisation				99%	100%	100%	100%	99%	100%	100%	100%	99%	100%	100%	100%
	Number of lines with comment with zero stock				99%	100%	100%	100%	99%	98%	100%	100%	100%	100%	100%	100%
	Number of lines with comment for Critical Medicines/Procurement Prioritisation with zero stock				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	% Pharmacy Invoices Matched Prior to Due Date															
	Total	>85%	84%-70%	>70%	97%	96%	95%	97%	97%	94%	97%	96%	95%	95%	95%	95%
	%Pharmacy Invoices processed electronically															
	Total	>50%	49% - 40%	>40%	57%	52%	53%	56%	53%	54%	55%	49%	50%	55%	61%	62%
	% of overdue OSNI invoices with comments															
	Total	>85%	84%-70%	>70%	100%	100%	99%	93%	100%	100%	98%	100%	100%	100%	100%	100%
	% of overdue wholesaler statement invoices with comments															
	Total	>85%	84%-70%	>70%	94%	44%	60%	58%	80%	65%	87%	89%	100%	80%	100%	100%
	% of overdue homecare statement invoices with comments															
	Total	>85%	84%-70%	>70%	95%	97%	94%	95%	87%	95%	100%	100%	100%	100%	100%	100%
% Sent to Homecare Company within 48hrs – Screened to Sending																
Total	>85%	84%-70%	>70%	New KPI to start June 2026											92%	84%
Contract Variance																
Process Implementation Error (Extend)	>95%	90%	85%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Procurement Dashboard – Continued

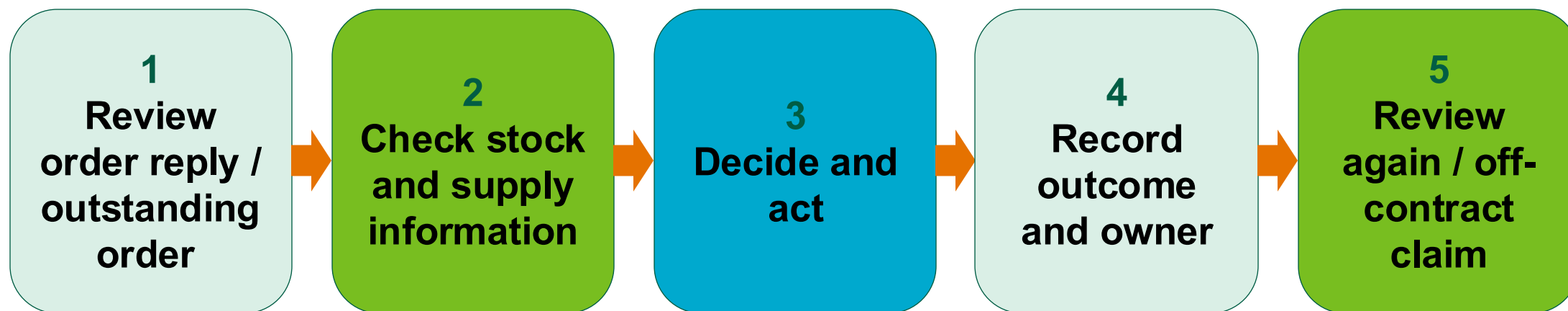
Purchasing															
No. of external orders raised monthly				2913	3086	3233	2991	3287	3113	3169	3229	3071	2715	3114	3132
Number of items received				9024	10010	10778	10173	11344	10084	10185	10647	9746	8735	9818	9843
Number of invoices processed				4512	4729	5108	4436	4669	5176	4446	5178	4798	3462	3357	3035
Number of Pharmacy Invoices Matched Prior to Due Date				4377	4527	4877	4310	4536	4881	4292	4970	4573	3290	3199	2839
Number of Shortages				87	89	91	89	79	79	92	100	96	101	83	87
Number of Supply Problems with Alternatives				155	153	139	128	173	146	158	153	116	92	146	117

3

4

Key principles of a proactive process

Starting with accurate inventory so that an order is generated at the right time:



These steps apply when using every pharmacy system and in every team, the exact actions within these may vary dependent on reports, available resource and department set up.

Step 1 & 2: Review order replies promptly

- Utilise electronic ordering platforms such as Powergate and Medecator
- All available order replies should be checked as soon as possible after orders are sent
- All order lines flagged as out of stock should be reviewed and action taken
- Check current stock, expected usage and supplier resupply information.
- Check whether contracted stock is available through another route.
- If alternative supply is needed, order only the quantity required to maintain supply.
- Review of order replies with appropriate actions taken significantly reduces the number of lines that go through to outstanding order reports

Step 3 & 4: make and record decisions

Possible actions

- Order from another contracted route
- Keep the line on back order
- Cancel and reorder where appropriate
- Source alternative stock if required

Record

- Action and date
- Supplier response / expected resupply
- Person responsible
- Next review date / claim requirement

The aim is to maintain supply at minimal additional cost

Step 5: review outstanding order reports regularly

- **Outstanding order reports should be reviewed frequently, best practice is daily** but this should only need to be new items and those that have hit a review date.
- **Each pharmacy system has reports that present outstanding order data** but these don't provide a full solution.
 - System C – ONOTR, KLEVEL, TFCHECK
 - EMIS – Goods ordered not received, Items below danger level
 - EPIC – Custom built in each Trust set-up
- **A process for actions and how these are recorded** will need to be developed around the outstanding order reports.
- **Ensure you have strong links with clinical teams** to escalate supply issues where direct alternatives are not available

Actions to take for each outstanding order

- Confirm that the order has been received by the supplier
- Identify goods receipt errors
- Check whether the item has been invoiced
- Confirm whether the item is on back order
- Check current pharmacy stock
- Identify whether alternative stock is required
- Record actions and expected resupply dates
- Identify when further escalation or an off-contract claim may be required

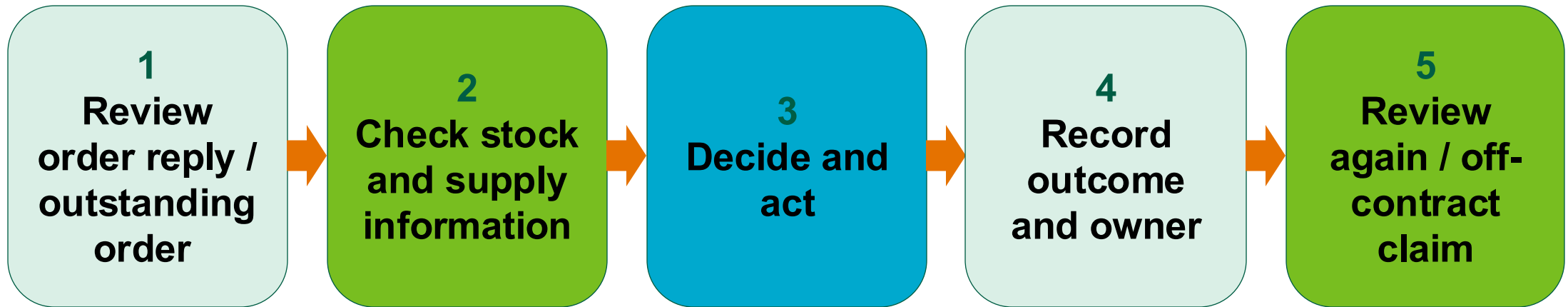
Only a small number of new lines should normally need to be investigated through the outstanding order process each day.

How this impacts successful off-contract claims

- Only enough stock is ordered to get to 14 days so minimum unclaimable spend
- Good record keeping of when an off-contract claim can be made
- Good communication with suppliers so more likely to get claims reference number in timely manner
- Staff member with ownership of the issue can do all pre-requisite steps even if someone else in the team completes and submits claims paperwork



Key principles of a proactive process



Pharmacy systems & managing overdue orders

Common Report Field Naming / Purpose	EMIS / Optum Field name	CMM / System C Fields Name	Epic Field name	CMM Trust A	CMM Trust B	EPIC Trust C
Order Date	Order Date	Released Date	Submit Date / Time	✓	✓	✓
Order Number	Order Number	Order Number	Request Number	✓	✓	✓
Date Order Expected		Expected Delivery		✓	✓	
Supplier Unique System Code	Supplier			✓		
Supplier Name	Supplier Name	Supplier Name	Purchase Contract	✓	✓	✓
Supplier Contact Number		Supplier Contact		✓	✓	
Product Unique System Code	NSV Code		Item Package	✓		✓
Product Description	Product Stores Description	Description	Item		✓	✓
Product Pack size	Re Order Pack size	Pack Size	Package Size	✓	✓	✓
Total Quantity Ordered		Quantity Ordered	Requested Package Count	✓	✓	✓
Total Quantity Delivered		Quantity Delivered	Received Package Count	✓		
Total Quantity Undelivered	Total Outstanding Sum	Quantity Outstanding	Quantity Discrepancy (Flat Value)	✓	✓	
Location / Site for Delivery	Site	Location	Destination Location	✓	✓	✓
Order Net Value	Total Outstanding Value Net Sum	Expected Value		✓		
Order Gross Value	Total Outstanding Value Gross Sum	Expected Value ???		✓		
Minimum Stock Holding Level		Minimum Stock		✓	✓	
Total Quantity in Stock		Quantity in Stock	Destination Balance	✓	✓	
Order Text Field		Order Ref	Destination Comments	✓		
Other Outstanding Orders		[On KLEVEL Report]		✓		
Order Status		Order Status	Current Request Status	✓		
Order Fill Status			Fill Status		✓	

Pharmacy systems & managing overdue orders

1
Review order
reply /
outstanding order

- Systems provide similar basic data on overdue orders through reporting processes.

2
Check stock and
supply
information

- Most systems require additional supplier or live-stock data to complete the work

3
Decide and act

- Investigations and decisions can't be automated for you

4
Record outcome
and owner

- Not all systems are capable of capturing any auditable data: actions taken, decisions made or review dates

... for most, the process restarts from the beginning **every day!**

Potential for a national system to support Trusts

- We are looking to develop an Output Based Specification (OBS) to commission development work on a national system
 - Sufficient commonality on essential fields between main pharmacy systems
 - Stock data and Trust : Contracting region mapping already exists in national systems
 - Key development will be bringing in a user front end that allows better management of investigations into overdue orders – capturing auditable data.

Looking for early signals...

- Aggregated national data on overdue orders provides a snapshot view of supply issues that the NHS is currently facing.
- Triaging needs to establish critical issues quickly, and differentiate between types of supply issue
- Coded data could provide early intel on regional and national issues
- Supply issues overlayed with stock data could support a rapid identification of urgent / potential supply issues.



To Take Away

- **Supply disruptions, order failures and human error will always exist** – this is a process worth investing time in to get right.
- **It is not good use of NHS money** to buy weeks of stock of an alternative product if a contract line will only be out of stock for a few days – you must have an appropriate review process.
- **Your teams need to know what actions to take and decisions to make.** A national system will help with visibility and audit but can't make decisions for you – get that in place now.
- **System reports give you the data but not the process.** Custom reports or spreadsheets help to structure the data, record what has been done and reduce duplication. Ask your IT teams for help.