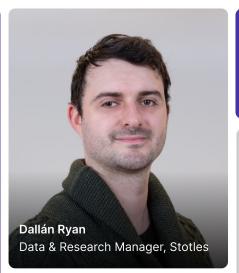
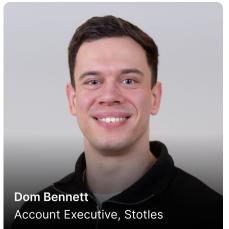
WEBINAR

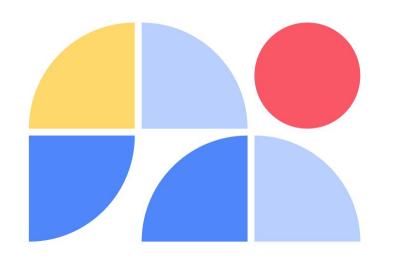
Navigate NHS ICS funding: Leverage procurement trends, avoid mistakes and win more

- † 10-11:30am, Tuesday 25th March 2025
- Zoom









stotles.

The platform for doing business with government





































Aims

The aim of this session is to:

- Unravel the structure of the NHS, flow of funding and key procurement themes across the 42 ICSs.
- Provide concrete tactics for suppliers to approach the new NHS ICS budget with confidence.

Agenda

Introductions

Section 1: NHS ICS Structure

Section 2: Themes across the 42 ICSs

Section 3: Supplier pitfalls and solutions

Section 4: Concrete strategies to win

• Q&A stotles.



Join at slido.com #3722250







What is your level of public sector experience?







What emoji best describes your understanding of the structure of the NHS?







Unravelling the NHS





Interesting times! (an introduction)

- NHS E pre-abolished (Dec → 2y); DHSC merger and cuts too.
- ICBs to cut operating costs by 50% by December! Impact!
- Trusts to cut business roles. Vague / TBC.
- Many QUANGOs to go.

Political and unclear statements on a war on bureaucracy, red tape and gatekeeping.



Expectations

- Desperately needed NHS 10 year plan being written by DHSC due May.
- Political lead-up next month.
- More QUANGO abolishment.
- ICB response, and shifting role, will filter down over the coming months.

This is something many of you should monitor.



Themes across the 42 ICSs

Key takeaways

Most important themes we'll focus on

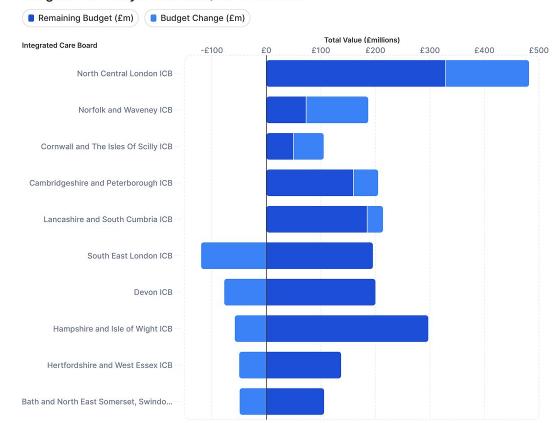
- **5** Follow the flow of funding
- ? What's being bought?
- Map your competitors
- Know the preferred route-to-market

Funding Flow

- S ICBs received £127.2B
- ∠ 40% of regions' budgets increased
- Funding = opportunity
- Be aware of reductions

stotles.

Integrated Care Systems 2024/25 Allocations



What services are in demand?



Map your market

Be aware of your market's landscape

- Y Know the winners of the ICS funding
- SME preference
- Monitor competitors



Insight Direct



Softcat



CDW



Phoenix Software



BT



Stryker

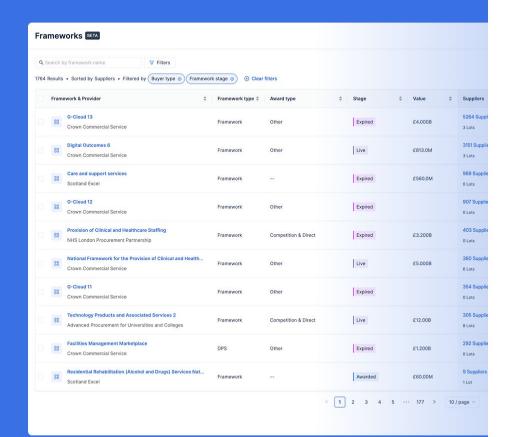


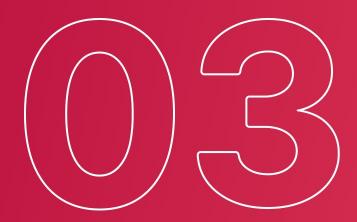
Civica

Routes-to-market

Qualify an opportunity

- Mow preferred routes-to-market
- M Explore partnership opportunities



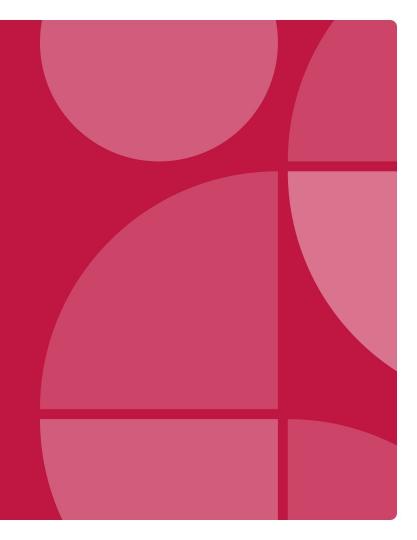


Supplier pitfalls & solutions

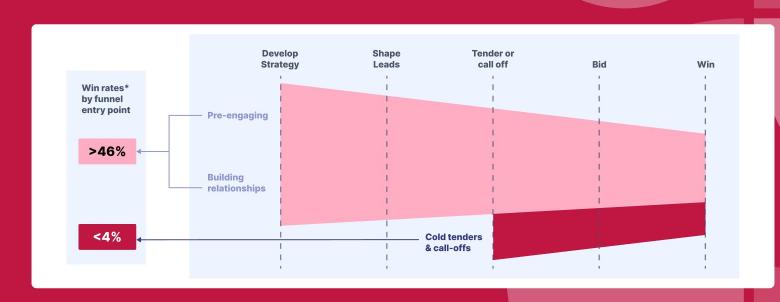
Most common pitfalls

What are the most common pitfalls

- Not knowing where to focus your time
- Mis-qualifying opportunities
- Reactive sales process
- Uncertainty about the right decision-maker

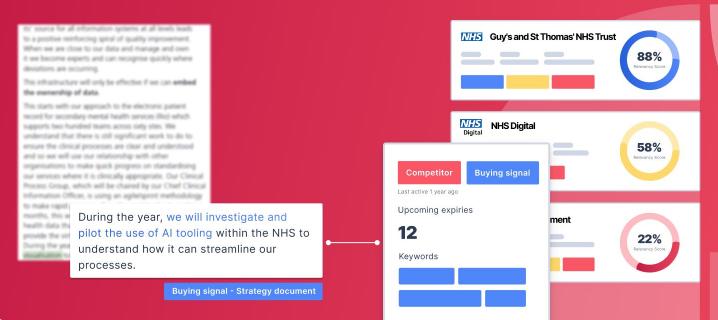


Why do you need a strong strategy to sell to the NHS



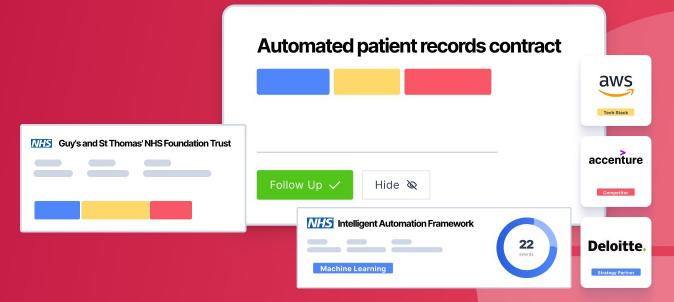
Identify Qualify Action

Identify early buying signals



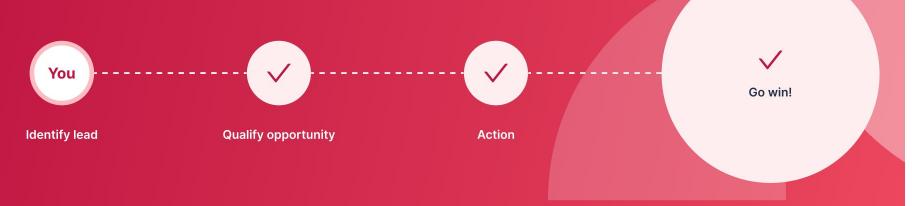
Identify Qualify Action

Qualify the account and opportunity





Time to action



"Identified, qualified, now it's time to action" stotles.

Success in action



36%

increase in quarter on quarter revenue

Read case study



88%

year on year growth, in public sector sales

Read case study



pdh. Priority Digital Health

361%

increase in pipeline over 12 months

Read case study

Takeaway: Identify, Qualify, Action

Right opportunity, right person, right time

- Leverage existing intelligence and NHS data to uncover early buying intent
- Understand strategic objectives, incumbent suppliers, and routes to market
- Proactively reach out to buyers and establish yourself as a trusted advisor

Here to help

Get a personalised "Battle Pack" with:

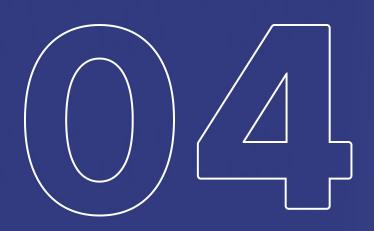
Relevant upcoming NHS contract expiries

industry reports

Framework intelligence

Simply **book a follow-up meeting** with our team after the session to claim yours.





Concrete strategies to win



AKA how to understand and not get broken by a difficult NHS!

Systems



Trusts



What is the landscape and what this means

- The NHS is broke.
- Many systems and trusts are savagely cutting spend. Incl. digital + core target work.
- 3. Huge number of **ICBs** <u>currently</u> with NHS E control measures.
- 4. **Trust** landscape is riddled with CIP.

Plus

- Additional announcements to reduce ICB operating costs!
- Possible changes in how 'recovery support' happens.

ICBs Highest Level (4)

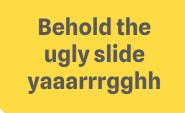
Devon, Hampshire and the Isle of Wight, and Shropshire, Telford and Wrekin, and Lancashire (recent).

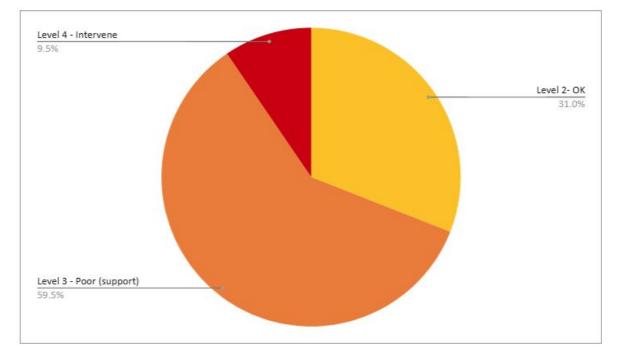
 Level 1 - Great
 0

 Level 2- OK
 13

 Level 3 - Poor (support)
 25

 Level 4 - Intervene
 4





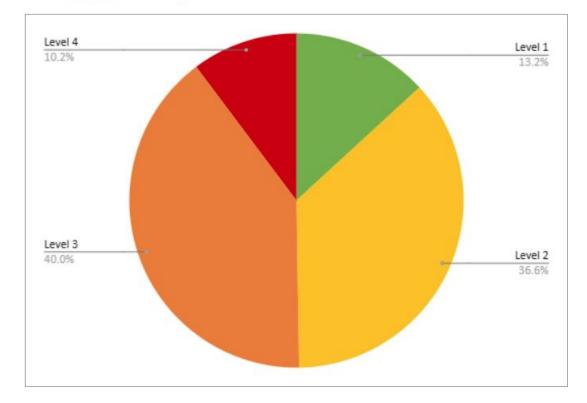
https://www.england.nhs.uk/publication/nhs-oversight-framework-segmentation/

Trusts - Highest Level (4)

Blackpool Teaching Hospitals NHS FT; East Kent Hospitals University NHS FT; East Lancashire Hospitals NHS Trust; Greater Manchester Mental Health NHS FT; Hampshire and Isle of Wight Healthcare NHS FT; Hampshire Hospitals NHS FT; Isle of Wight NHS Trust; King's College Hospital NHS FT; Lancashire Teaching Hospitals NHS FT; Medway NHS FT; Mid and South Essex NHS FT; Nottingham University Hospitals NHS Trust; Nottinghamshire Healthcare NHS FT; Portsmouth Hospitals University NHS Trust; Royal Devon University Healthcare NHS FT; Shrewsbury and Telford Hospital NHS Trust: South Central Ambulance Service NHS FT; South East Coast Ambulance Service NHS FT; Torbay and South Devon NHS FT; University Hospital Southampton NHS FT; University Hospitals of Leicester NHS Trust; University Hospitals Plymouth **NHS Trust**

Level 1	27
Level 2	75
Level 3	82
Level 4	21

https://www.england.nhs.uk/publication/nhs-oversight-framework-segmentation/





Knowing NHS factors matters

- Their financial position / targets
- The level of intervention
- Their role in the local system
- Most pressing matters (board mins)
- New Reshaping and cuts

This will shape where and how you approach, autonomy and financial routes

Understand → Intel → Segment = WHO → Personalise = HOW

So great intel will help you plan

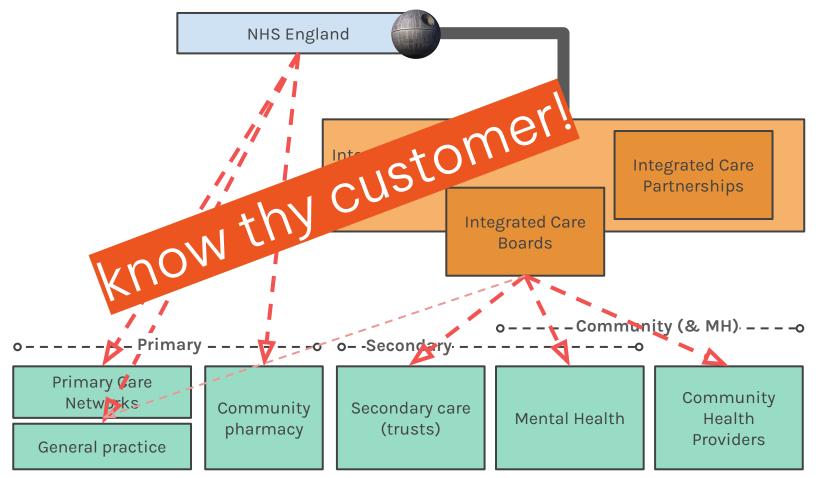
WHO

- ... to approach
- ... will respond better to what narrative
- ... is viable

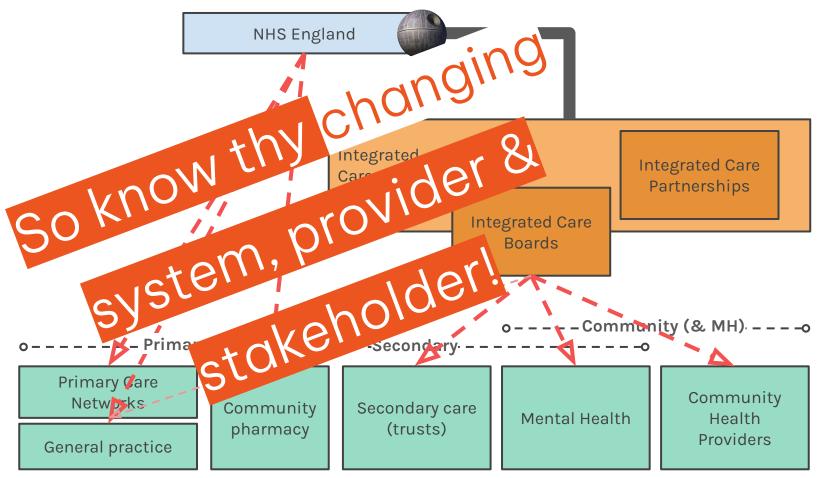
HOW

- ... to connect and empathise
- ... to help lead relevant thinking in a way that hits their biggest jobs, pains and gains
- ... to make the case in the most strategically relevant way





^{*} Not covering - VCFSE; Other Primary; Specialist; Women's and Children's, Palliative etc.



* Not covering - VCFSE; Other Primary; Specialist; Women's and Children's, Palliative etc.

Know who supports and who pays AKA customer / market etc





Behold my 'buying signals'

Micro Macro Milestone





The commercial landscape creates fast track routes







8 hours of fun video (!)

Module 1/11 - Using assets to get ahead

Module 2 - How to convince them

Module 3 - Understand who pays

Module 4 - How to influence with peers

Module 5 - Help look / feel proven to them

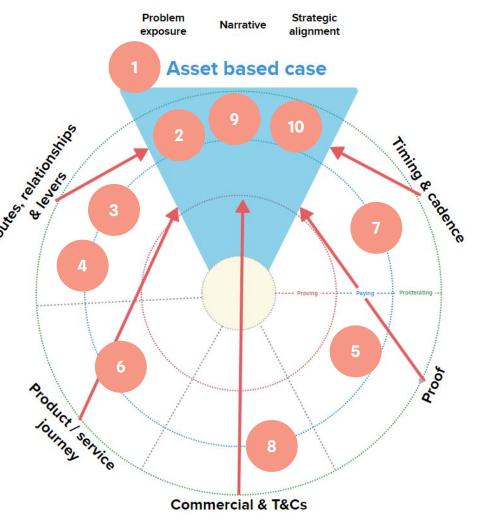
Module 6 - Structure your offering

Module 7 - Plan the perfect sales year

Module 8 - Commercial fast track routes

Module 9 - Objection handling

Module 10 - The (business) case









Final words

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