

# Case study

## Introducing innovation procurement methods : Rawicz County Hospital, Poland

### Overview

Rawicz County Hospital is a 200 bed county hospital serving a population of about 69,000 in the west of Poland. The hospital was built in late 1920s and still mainly operates from these buildings today.

The Hospital Board faces a major challenge: it needs to secure funding for, and complete, a programme of refurbishment by the end of 2016 in order to meet legal infrastructure standards and patient expectations for a high quality clinical environment. The legal requirements will make mandatory a doubling of the clinical space (space per patient, size of operating theatres, etc.).

As part of the LCB-HEALTHCARE project, the CEO is exploring how this necessary refurbishment could be an opportunity to increase the energy efficiency of the hospital, enhance the patient and clinical environment, and ensure that the clinical services meet the needs of the region and its population into the future.

Over the last 10 years Rawicz Hospital has carried out remedial and refurbishment works to some parts of the site. For example, thermal insulation of walls and windows to improve energy efficiency, replacement of the coal fired boiler with a modern gas fired boiler, and grant aided installation of solar panels.

Although these have improved the energy efficiency of the main hospital building, the thermal insulation solutions in particular had certain weaknesses and opportunities such as the introduction of Combined Heat and Power (CHP) were not available.



*The renovated entrance to Rawicz Hospital*

Drawing from innovation procurement approaches adopted in other LCB-HEALTHCARE projects, and with energy efficiency firmly in his mind, the CEO is now leading a pilot innovation procurement project to deliver a low carbon refurbishment project.

### Changing the procurement practice

Becoming a member of the LCB-HEALTHCARE project induced the need for a major change in the approach to procurement. In the past all procurements were carried out in the same way, and in common with other healthcare units in Poland. That is, detailed specifications were drawn up and selection was based mainly on lowest price. The concepts of outcome based specifications and whole life-cycle costing were unknown. Therefore for quite a while it was difficult for the Rawicz Hospital employees to conceptualise the idea of what the project was trying to achieve.

To overcome this barrier, and enable staff to 'try out' new approaches, a 'pre-pilot project' on a simpler, small scale contract was developed.

Peer learning visits to UK LCB-HEALTHCARE partners Erasmus University Medical Centre, Nottingham University Hospitals, and Rotherham Hospital helped to overcome concerns about new methods of procurement and demonstrated the benefits of adopting innovation procurement techniques.

The team also met members of a supply chain consortium at Rotherham Hospital and heard first hand the value of early consultation with the supply chain.

### Pre-pilot supporting project – hospital uniforms

The contract for the supply of hospital uniforms is due for renewal in 2012. The project team therefore decided to use this opportunity to explore new approaches to public procurement.

#### 1. Consultation with users

Together with project facilitators, the procurement officer began by interviewing nurses. They were asked for their feedback on the current uniforms, what they liked and didn't like, and what their 'ideal' uniform would look like. There was some interesting feedback which the team used to define the outcome based specification.

## 2. Developing an outcome based specification

This exercise resulted in a new requirement: the new uniform should be:

- functional
- pleasant looking
- friendly for the user
- easy to wash and keep clean
- environmentally friendly (with no impact on its usefulness)
- durable and of good quality (allowing an extension of its lifespan)
- cost effective

## 3. Whole-life costing

For the first time, the evaluation criteria will use factors other than price, and consider whole life benefits and links to the hospital's environmental objectives.

## 4. Collaboration to achieve a critical mass of demand

The project team contacted other hospitals, healthcare centres, associations and the LCB-HEALTHCARE network, and explained to them how it was changing its approach to the procurement of uniforms and how it was going about stimulating an innovative response from potential suppliers.

## 5. Communication with the supply chain

The hospital is now putting together a plan to pro-actively communicate this requirement and market demand to potential suppliers.

The hospital estimates that the contract for the new clothing will be signed before 30th June 2012.

The pre-pilot and peer learning has helped to overcome some of the barriers to new approaches. However, this remains a significant cultural shift.

### Next steps

Encouraged by the positive experience of the 'pre-pilot', the CEO is now leading the project team in defining the 'unmet need' and outcome based requirement for the low carbon refurbishment plan.

For example:

**The hospital needs to have in place a cost effective renovation and re-configuration plan, that will meet legal requirements concerning hospital infrastructure, the clinical needs of the Rawicz County population, deliver both a measurable reduction in energy consumption and a high quality patient environment, and facilitate financing of the renovation programme.**

*"It is amazing what positive feedback we got from other healthcare units about the innovative procurement of hospital uniforms. Nine hospitals have declared they wanted to learn from us and use the know-how we will develop in their own procurement scheme."*

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