
Hospital Procurement and Stock Leadership: Tenders, Cold Chain and Shortage Risk Course

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Kuala Lumpur





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Programme Summary

Hospital procurement and stock leadership, covering tenders, cold chain and shortage risk, is the subject of this five-day training course for procurement, pharmacy and supply chain directors at a managerial level, ending in a procurement and stock resilience plan. Hospitals run short of medicines and devices when sourcing is fragmented, stock is held without ranking and temperature-sensitive goods leave controlled storage unnoticed. The programme moves from principles, through diagnosis of stock and supplier risk, to design of tenders and controls, then to application in one organisation. Mars Training Centre UK delivers this programme in hospital procurement and stock leadership.

The Business Case

When purchasing, pharmacy and stores work to separate targets, shortages are found at the ward rather than at the supplier, and emergency buying replaces planned sourcing. Leaders who rank stock, award tenders on defined criteria and monitor storage temperature can show why each order was placed and where supply is exposed to interruption.

- Stock-Outs: Fall as stock is ranked by spend and clinical criticality and reorder rules follow demand.
- Spoilage and Wastage: Decline as storage and transport temperatures are checked against agreed limits.
- Purchase Cost: Is held down as tenders compare total cost of ownership rather than unit price alone.

Principles and Evidence Base

- ABC and VED analysis: It ranks items by spend and by clinical criticality, and shapes the inventory control rules built in Session 3.
- Most economically advantageous tender evaluation: It frames the scoring model that weighs price, quality and delivery in Session 3.
- WHO good storage and distribution practices: They inform the cold chain checklist and the distribution control plan developed in Sessions 3 and 4.
- GS1 standards for product identification, including GTIN barcodes and unique device identification: They guide the traceability procedure designed in Session 4.

Intended Participants

- Procurement leaders who decide how hospital supplies are sourced, contracted and renewed.
- Pharmacy directors who are accountable for medicine availability and safe storage.
- Supply chain and materials managers who run stores, distribution and stock records.
- Ministry and health authority officials who oversee supply for several facilities.



The programme serves public hospitals, private hospital groups, health authorities and medical distributors.

Learning Outcomes

1. Participants will be able to evaluate a hospital's sourcing and stock practice against recognised storage, identification and tender principles.
2. Participants will be able to diagnose stock-outs, expiry losses and supplier concentration in purchasing and stores records.
3. Participants will be able to construct a tender specification and scoring model that compares total cost of ownership.
4. Participants will be able to prioritise items for stock rules, substitution and cold chain protection.
5. Participants will be able to appraise supplier performance and traceability against defined indicators.
6. Participants will be able to justify a procurement and stock resilience plan to a hospital executive team.

Programme Structure

Day 1: Hospital Procurement and Stock Leadership Principles

Who decides what a hospital buys and holds, and on which principles?

- ABC and VED Analysis Principles
- Total Cost of Ownership Model
- Tender Evaluation Principles
- Procurement Roles and Approval Authority Map
- Supply Risk Register Format

Day 2: Diagnosing Stock, Supplier and Cold Chain Risk

Where do shortages, expiry losses and temperature failures begin?

- Stock Ranking by Spend and Criticality
- Stock-Out and Expiry Record Review
- Supplier Concentration Analysis
- Cold Chain Excursion Audit
- Demand Variation Check

Day 3: Designing Tenders, Stock Rules and Cold Chain Controls

How are tenders scored, reorder points set and fragile goods protected?

- Tender Specification and Scoring Model
- Economic Order Quantity and Reorder Rule Sheet
- Shortage Substitution Protocol
- Cold Chain Storage and Transport Checklist
- Group Purchasing Option Appraisal



Day 4: Distribution, Traceability and Performance Reporting

How are goods tracked to the ward and supplier performance reported?

- Warehouse and Distribution Control Plan
- GTIN and Device Identification Mapping
- Recall and Traceability Procedure
- Supplier Performance Scorecard
- Procurement Indicator Report

Day 5: Applying Hospital Procurement and Stock Leadership in One Organisation

Is the resilience plan ready for a hospital executive team to adopt?

- Applying the Session 2 Risk Audit to the Chosen Hospital
- Testing the Session 3 Scoring Model on a Live Tender
- Checking the Session 4 Scorecard Against Supplier Data
- Setting Stock and Supply Targets
- Completing the Procurement and Stock Resilience Plan

Methodology

The programme uses structured exercises on anonymised purchasing, stores and pharmacy records from public hospitals, private groups and distributors. Participants work in small teams as procurement lead, pharmacy director and supplier, and carry one supply category from sourcing through storage to performance review.

- Suggested activity: Scoring three anonymised tender bids and defending the ranking.
- Suggested activity: Ranking a stock list by spend and criticality and setting reorder rules.
- Suggested activity: Reviewing a temperature log and deciding which stock to quarantine.

Capstone Output

Each participant completes a procurement and stock resilience plan for one hospital or health authority. It holds a ranked item list, a tender scoring model, reorder and substitution rules, a cold chain checklist and supplier indicators. The plan is used to brief an executive team and to review each tender and stock decision.



Frequently Asked Questions

Is hospital procurement and stock leadership suitable for pharmacists without a purchasing background?

Yes. Hospital procurement and stock leadership is set at managerial level and assumes you oversee supply decisions, not that you have run tenders before.

Which standards does hospital procurement and stock leadership rest on in this training?

Hospital procurement and stock leadership rests on ABC and VED analysis, tender evaluation by most economically advantageous criteria, WHO good storage and distribution practices and GS1 identification standards.

How is the plan from hospital procurement and stock leadership used at work?

You use the hospital procurement and stock resilience plan to brief executives, set tender and reorder rules and review supplier performance.

How does hospital procurement and stock leadership differ from a general supply chain programme?

Hospital procurement and stock leadership centres on medicines, devices, clinical criticality and temperature control, while a general supply chain programme centres on manufacturing and retail networks.