



Getting Need into Commissioning

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Presentation Outline

- Context
- Background
- What is commissioning?
- Public Health Specialist input?
- Public Health Specialist capacity



Context

“Our Health, Our Care, Our Say” goals:

1. Better prevention and early intervention
2. More choice and a louder voice for people
3. More to tackle inequalities and improve access to community services
4. More support for people with long-term needs



Background

- Policy:
 - “Securing Good Health for the Whole Population”
 - “Choosing Health”
 - “Our Health Our care Our Say”
 - Clear water between commissioning and provision
 - Payment by Results, Direct Payments and “individual budgets”
- Reality:
 - Progress but financial challenges in NHS and LAs



Background

Strategy – stronger commissioning:

- NHS partnership with LAs and PBC
 - Shifting resources to prevention
 - More care in or close to the home
 - Joined up services at local level
 - Plurality of providers and competition
 - Innovation



Background

Delivery:

- Streamline PCT/LA budgets and planning cycles
- Local Area Agreements
- Outcome based performance framework
 - “Best Value”
 - “Standards for Better Health”
 - Overview and Scrutiny Committees
- Close working between
 - Director of Children's Services
 - Director of Adult Social care
 - Director of Public Health

Primary Health Care Centres, PCTs and LAs have the main responsibility for developing services and improving health



Commissioning - A Definition

Commissioning represents the process whereby services are

- planned
- purchased under contract from suitable providers
- monitored to ensure compliance against agreed parameters
- revised to ensure future plans and contracts are robust in the light of demand



Commissioning - Core Principles

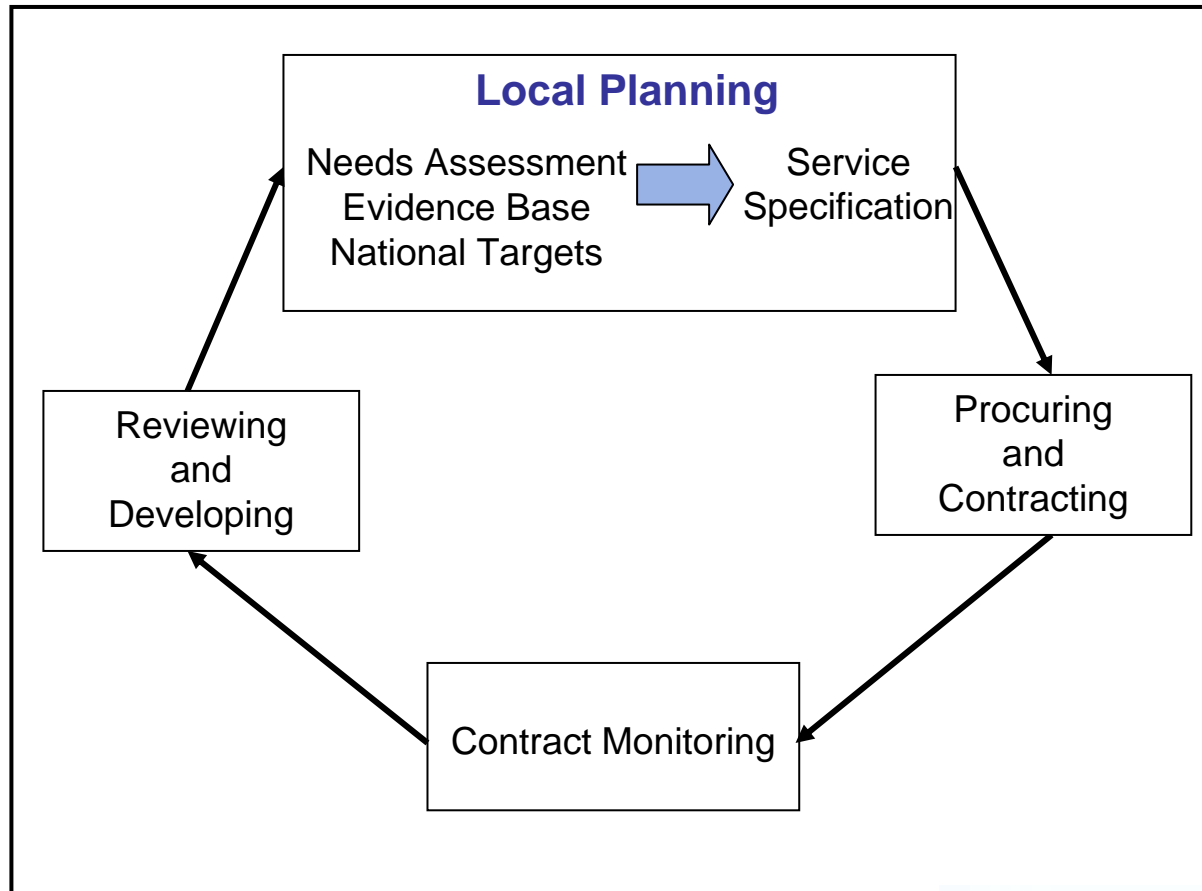
- Founded on local need
- Evidenced based
- User and public involvement
- Bottom up approach – operational input
- Multidisciplinary/multi-agency approaches
- Integrated care pathway development
- Transparent relationships
- Commitment to excellence and innovation



Commissioning - Objectives

- Improved health outcomes
- Faster access to appropriate and necessary services
- High quality integrated care
- Patient and public satisfaction
- Continuous improvement and development
- Delivery of national and local targets.

Commissioning Cycle



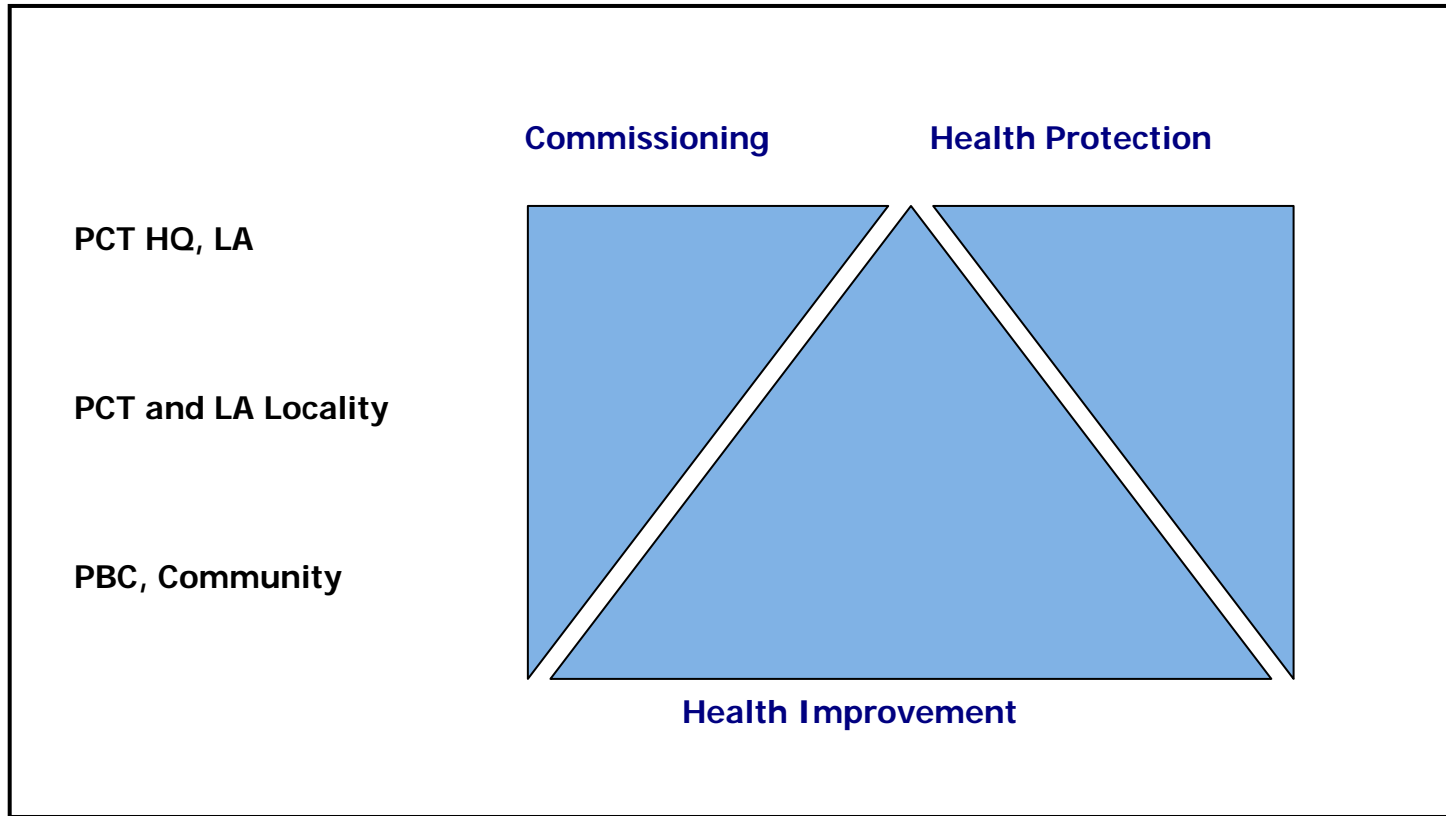
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Local Planning Needs

- Health and social care needs analysis
- Equity of access to services
- Agreed common quality standards across a geographical area
- Demonstrability
 - “Best Value”
 - “Standards for Better Health”
 - Local Area Agreements

PH Specialist Capacity



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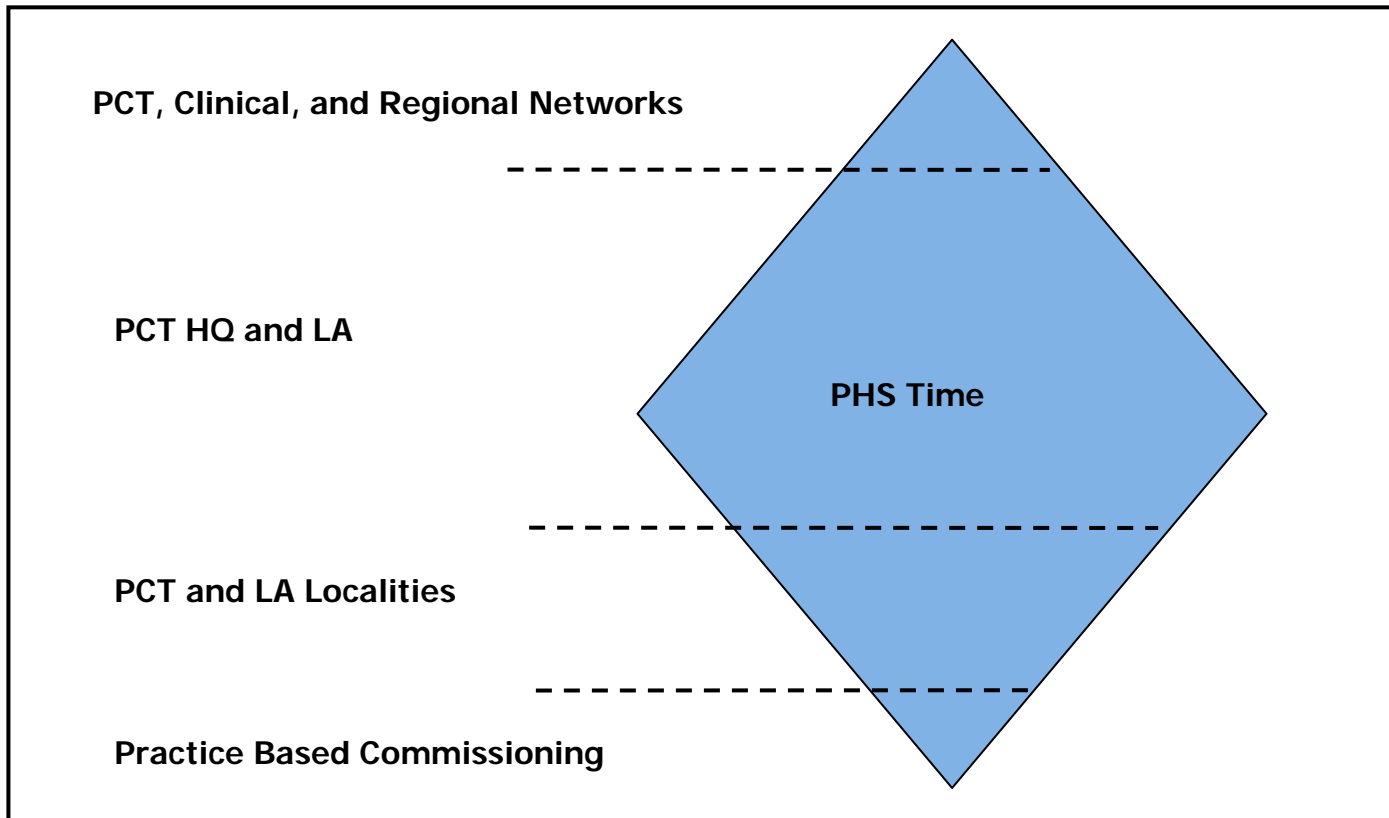


PH Specialist Role?

	Leading	Supporting
Planning	Needs analysis Evidence	Service spec Indicators
Contracting	None	None
Monitoring	None	Interpretation of data
Reviewing	Demonstrability of health improvement	Demonstrability of delivery

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PH Networks?



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