

Planning for Practice Based Commissioning

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Purpose of session

- Policy context
- Published and future planned guidance
- Respective roles of practices and PCTs in planning services
- What might a practice-based plan look like
- Putting plans into practice – group discussions

Practice based commissioning guidance

- PBC: Promoting clinical engagement (Dec 04)
- Operating Framework for 2006/07 (Jan 06)
- PBC – achieving universal coverage (Jan 06)

Priority - Universal coverage of PBC by December 2006:

- Clinical and financial comparative data
- Indicative practice budgets
- Incentive payments in place – DES or local
- Agreed governance and accountability arrangements

Perceived drawbacks of the current system

Structural inefficiency due to:

- Commissioning removed from clinical decision-making
- High transaction costs

Risk management insufficiently developed – particularly balancing of supply and demand

Perceived benefits of the new system (1)

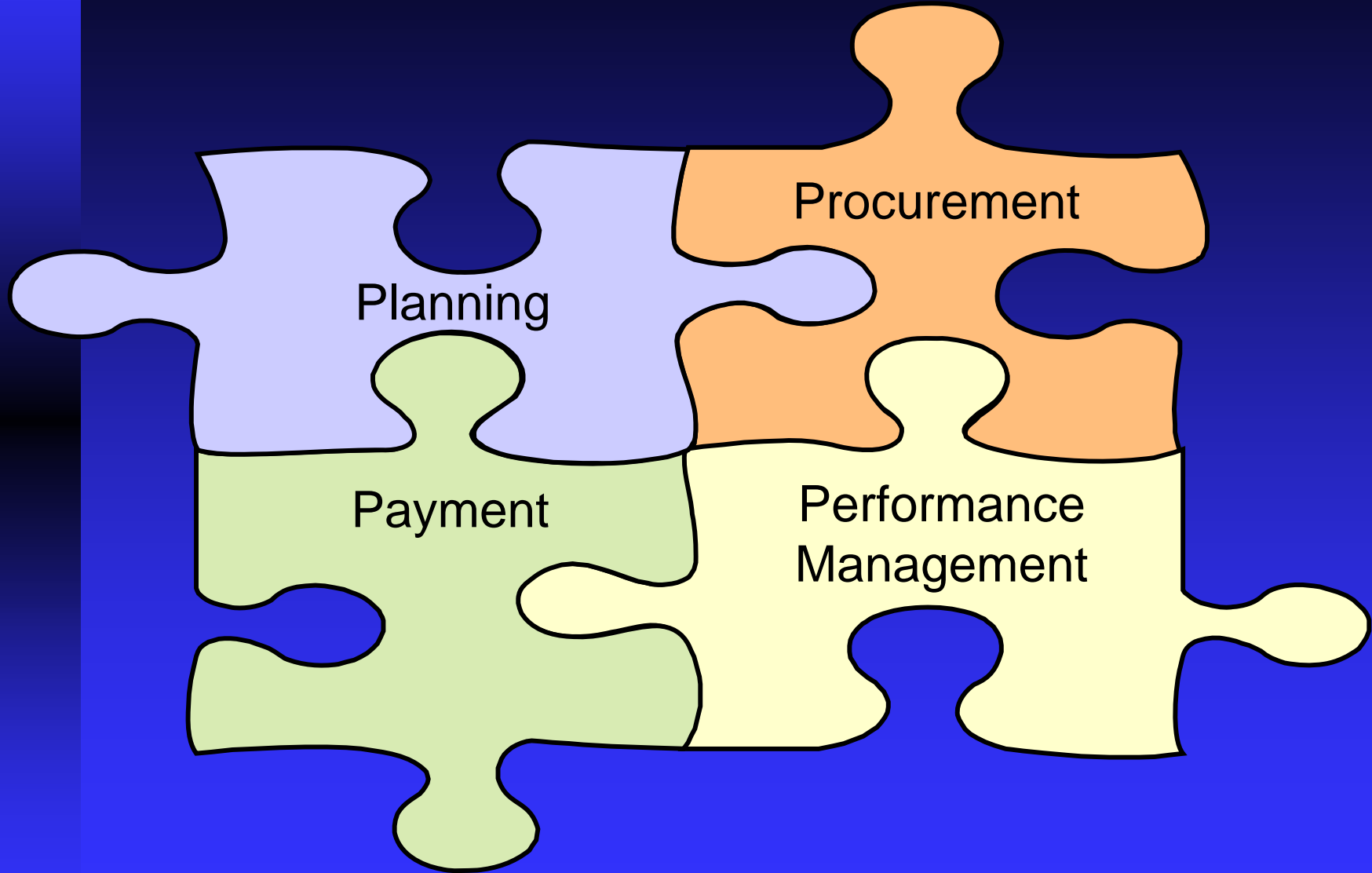
- Clinical decisions linked to financial accountability
- Clinical engagement in planning services
- Improved quality of services & innovation
- Lever to manage the risk of supply-induced demand through effective referral management
- Freedoms support ability to target services to local need

Perceived benefits of the new system (2)

PBC reflects change in emphasis towards patient empowerment and choice:

- Maximising health, healthy choices
- Improving primary care services, inc long term conditions
- Local service planning – managing the care pathway, enabling choice and delivering improved value for money

Commissioning



PCT Strategic planning

PCTs develop **strategic framework** based on:

- Health needs assessment
- Capacity plans
- Comparative benchmarking info
- National targets – 2006/07 framework
- Local Area Agreements
- Patient and Public Involvement
- Stakeholder engagement
- Market management

Priorities set **in partnership with localities**

Locality and practice planning

Locality and practice service planning and demand management

- Operational service plans
- Service & pathway redesign – creating alternative pathways
- Investment and reinvestment of resources
- Managing quality
- Monitoring delivery – including patient experience

Towards a practice-based plan (1)

Needs to encompass:

1) Population and practice overview

- Geography
- Demographics, health needs
- Practice overview & history

2) Practice vision for service improvement

- Aims, linked to community health needs
- Clinical engagement and administrative support
- Locality/consortia proposed arrangements

Towards a practice-based plan (2)

3) Commissioning Objectives

- Local strategic context, including access and quality targets
- Local targets and initiatives
- Financial targets

4) Financial strategy

- Budget setting approach
- Governance arrangements
- Risk management

Towards a practice-based plan (3)

5) Securing Delivery

- Clinical and stakeholder engagement
- Capacity planning and quality development
- Monitoring and patient feedback
- Reinvestment of savings

Completing the commissioning cycle

Contract **procurement** and **payment** responsibility of PCTs

Performance management

- Shared responsibility to include
 - Comprehensive information (PCT)
 - Patient experience and feedback (PCT and practices)
 - Contract monitoring, including datasets (PCT) with **sample monitoring** by practices

Finally.....

PBC plans likely to be effective if....

- Clear clinical engagement
- Strategic focus – but small no of priorities
- Accurate benchmarking information
- Fair resources, and agreed incentives
- Clear governance & accountability at PCT, locality and practice levels