

Clinical Services BAPN

AGM December 7th 2007

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Clinical Services

- PbR
- Commissioning
- The big picture
- Summary

**Paediatric Nephrology in England:
A proposal for informed specialist commissioning
A briefing paper by the
British Association for Paediatric Nephrology
April 2007**

- Shared widely
- Influenced Sheila Shribam
 - Paper for NSCG July 2007
 - Invited to the DH PbR working group for children's services October 2007

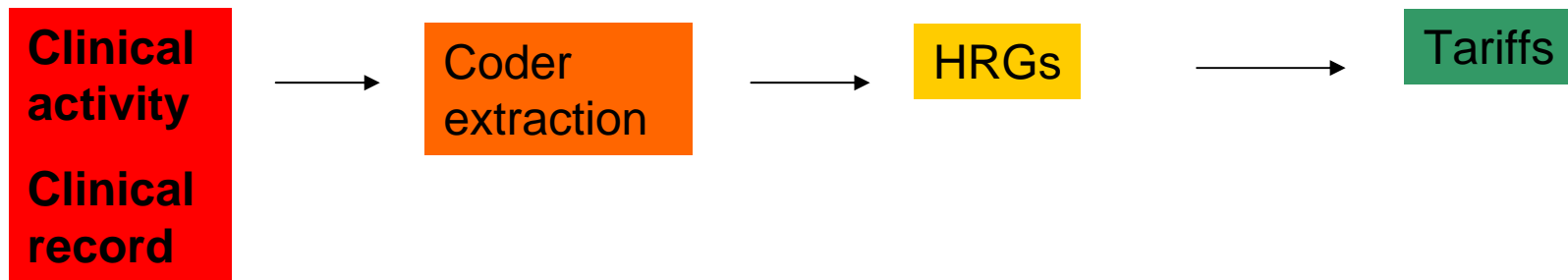
PbR

- Only game in town
- DH accepting flaws
- DH wants to respond & adjust
 - Uplifts (12%, 77%)
 - Fudges
- Year of care
 - Community services
 - Possibly other services
 - QOFs

PbR

- HRG 3.5 vs. 4?
- Action plan from DH
 - Commentary fed back
- Next meeting January 2008
 - Please email me with specifics

PbR



PbR

- Standard scenarios tested in Leeds
- Relatively simple
- Coders
- Determine variation in HRG and subsequent tariff calculations

- Ready to be distributed

PbR – the business reality

- ABC
- 20% of private sector
- Information
- Data quality
- Informs management decisions
- Barclays
- CPS
- NAO
 - BAPN question?

What is new?

- Service level accounting (SLA, SLC)
- Disabuses the concept of PbR
 - ‘winners and losers’ but ultimately a sustainable organisation
- Worked for the cardiac services for UCLH
- Clinician engagement
 - or disengage at your peril

Commissioning



Vision for world class commissioning

This vision was created in consultation with the wider NHS, and identifies what it means to be world class.

The vision

The vision document focuses on the importance of assessing and prioritising the needs of the population, strategic outcomes, procuring services, and managing providers to deliver the required outcomes. Central to successful commissioning will be an ability to work in close partnership with all local community stakeholders. The vision for world class commissioning will be one that is developed, articulated and owned by the local NHS, with a strong mandate from local people and other partners (such as local authorities).

PCTs should state what their vision for world class commissioning is locally, and what they will achieve through continually commissioning better services and delivering better outcomes based on their local priorities.

[World class commissioning: vision document and summary](#)

[Download world class commissioning Q&A \(PDF, 113K\)](#)

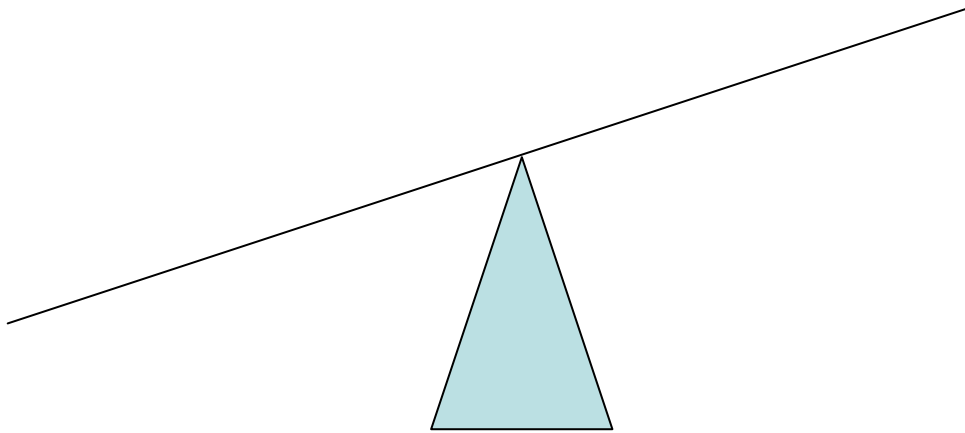


In summary world class commissioning will:

- lead the NHS at a local level
- work collaboratively with partners
- engage with the community
- work closely with clinicians
- manage knowledge and assess needs
- prioritise for improved outcomes
- influence and shape the market
- promote innovation and improvement
- procure robust contracts
- support and manage providers
- demonstrate sound financial management.

Commissioning

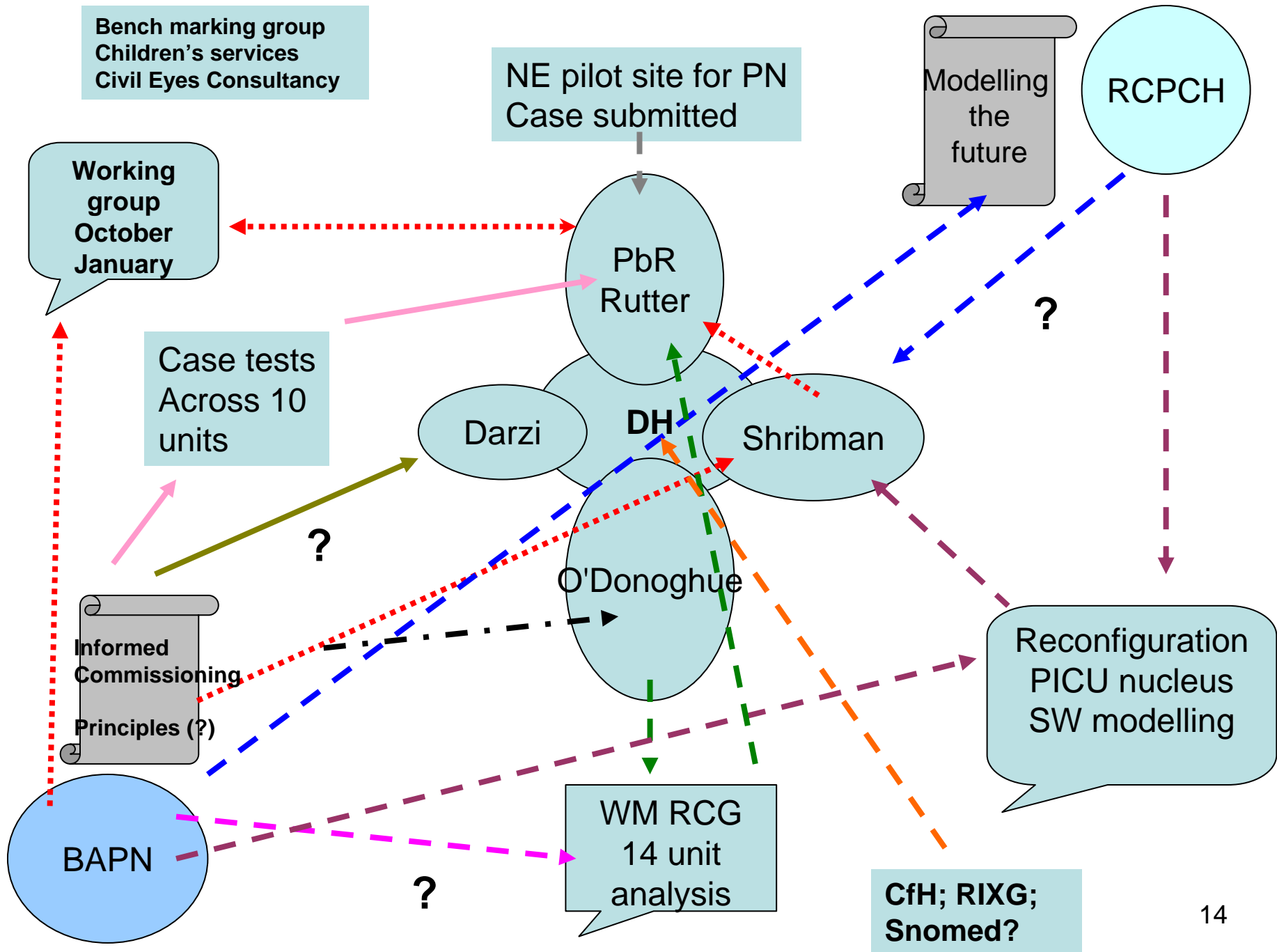
PbR



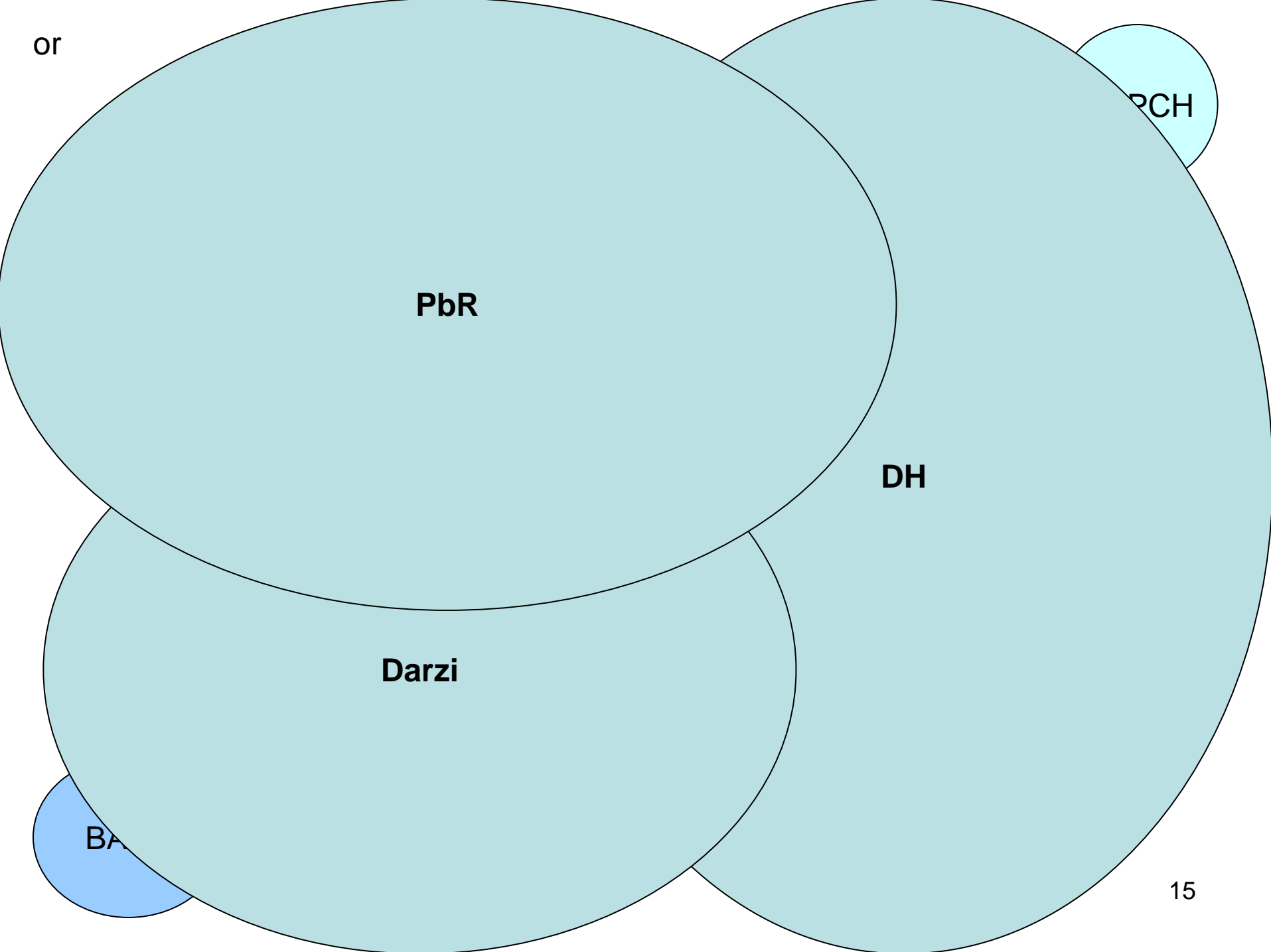
**Quality
Integrated care**

King's **Fund**
ncf

PbR planning blight



or



RCH

PbR

DH

Darzi

BA

Our weaknesses

- Not working closely with all the other specialities on that which is common
 - Time
- Variable understanding of the detail of the business
 - Training
- Clinician engagement at local level
 - Time & training

Where is the money?

- Darzi?
- National commissioning?
- Reconfiguration?
- PbR!

- Quality
 - BAPN leadership supporting regional activity
 - Metrics?

Diolch!

(Thank you, in Welch)