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

Clinical activity
Clinical record
Coder extraction
HRGs
Tariffs
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

PbR planning blight
Modelling the future

NE pilot site for PN
Case submitted

PbR
Rutter

DH

Darzi

Shribman

O'Donoghue

WM RCG
14 unit analysis

CfH; RIXG; Snomed?

Reconfiguration PICU nucleus SW modelling

BAPN

Working group
October January

Case tests Across 10 units

Informed Commissioning Principles (?)
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)