

# NIHR CLAHRC-LNR PCTs and Commissioning

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Chief Executive

- PCT Functions
- Commissioning
- Commissioning Cycle  
(Important if research findings need resources for full implementation in the local NHS)
- Why an active research environment is important to PCTs

## PCT Functions

- Engage with the local population to improve health and well being
- Commission a comprehensive and equitable range of high quality, responsive and equitable services within allocated resources

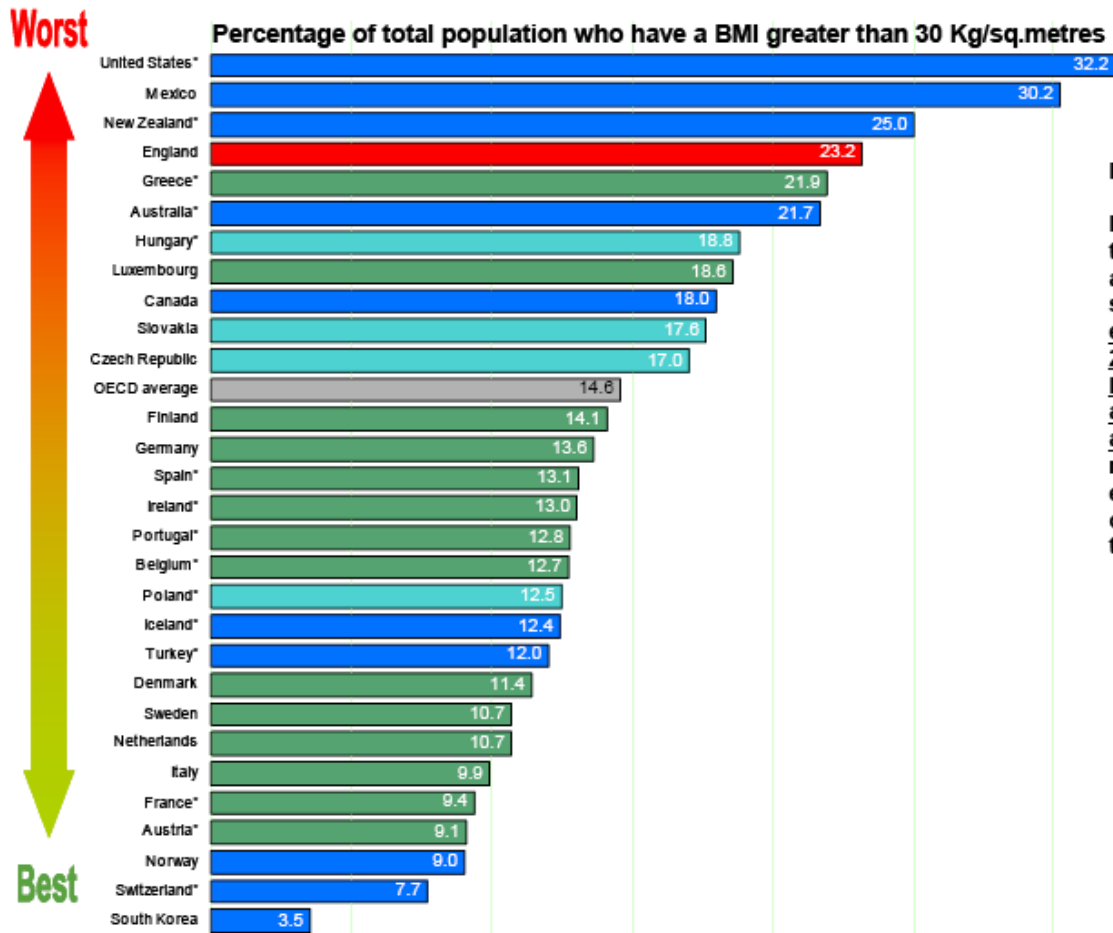


‘The poor and those who make poor choices are much beloved of god as they are given every opportunity to meet him sooner...’



[www.livingto100.com](http://www.livingto100.com)






# Adult Obesity: aged 16+ England & selected OECD countries



## DEFINITION:

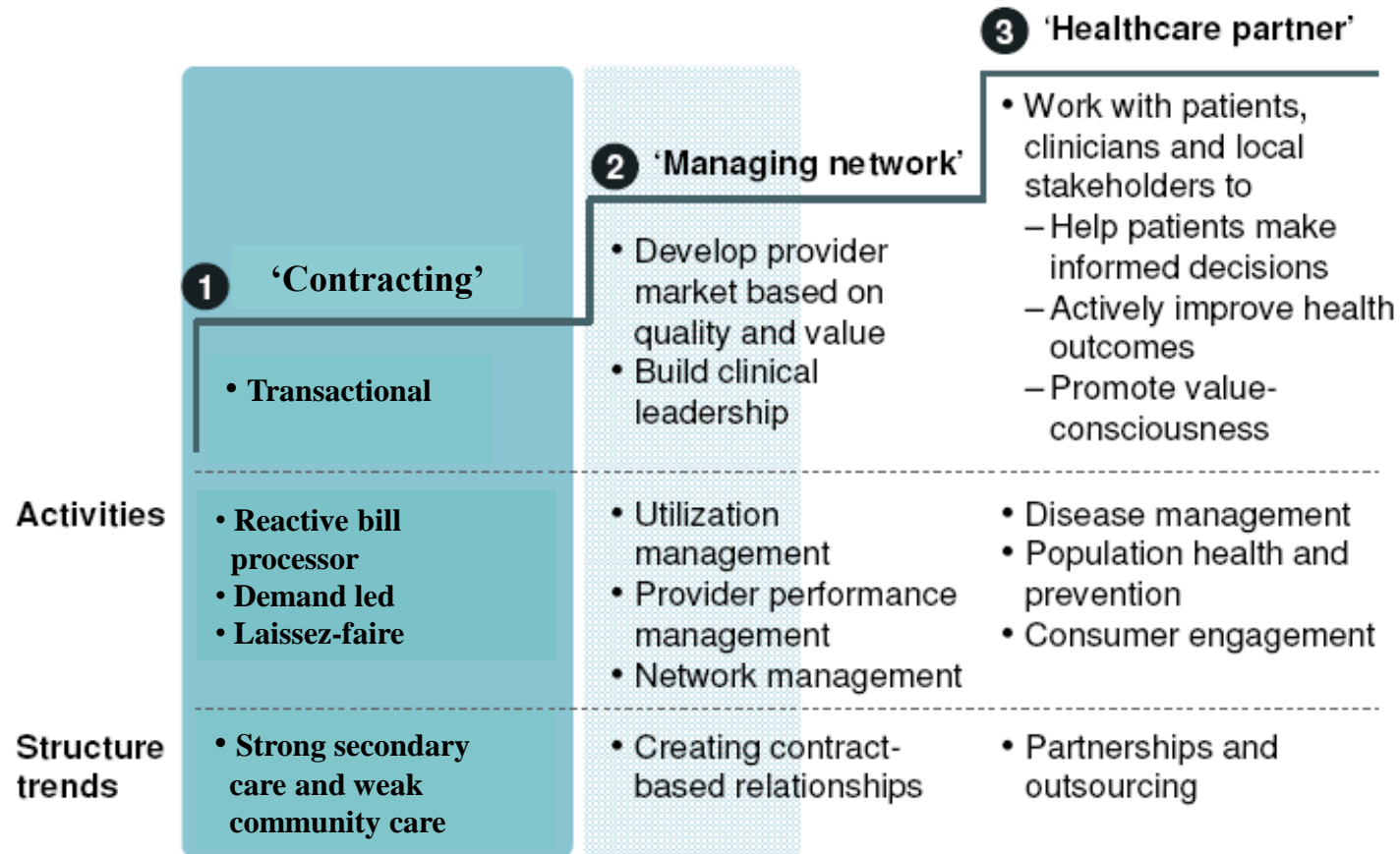
Estimates relate to the adult population (normally the population aged 15+ unless otherwise stated) and are based on national health interview surveys for most countries (self-reported data), except for Australia, the Czech Republic (since 2005), Luxembourg, New Zealand, the United Kingdom and the United States where estimates are based on the actual measurement of weight and height. This difference in survey methodologies limits data comparability, as estimates arising from the actual measurement of weight and height are significantly higher than those based on self-report.

Source: OECD Health Data 2008

-  OECD weighted average
-  EU-15 (member countries before 2004)
-  EU-12new (member countries from 2004)
-  Other OECD countries
-  England

# Commissioning - PCTs have traditionally focused on the lower part of the staircase

■ Focus



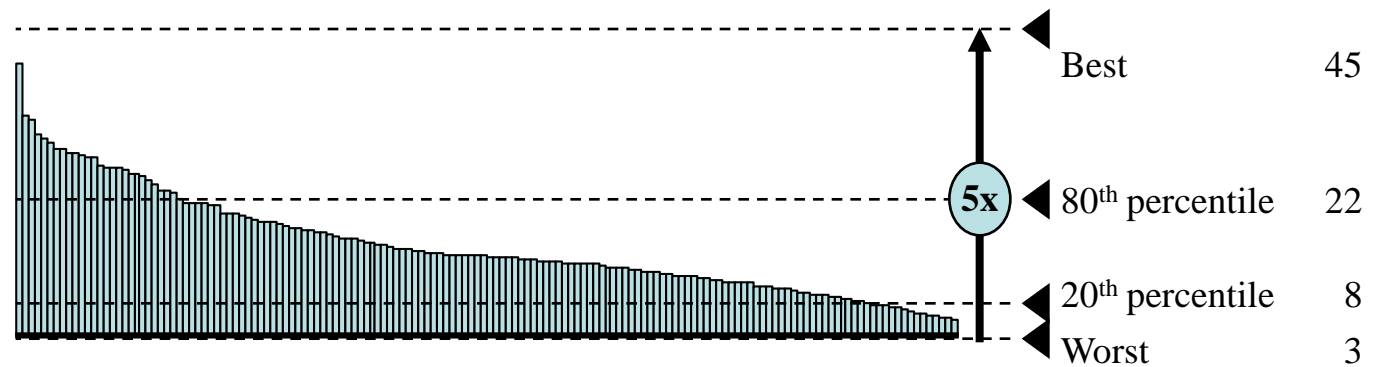
# Looking across evidence-based drivers of outcomes, there is also huge variation across PCTs

## Outcome Drivers

## Range across 152 PCTs

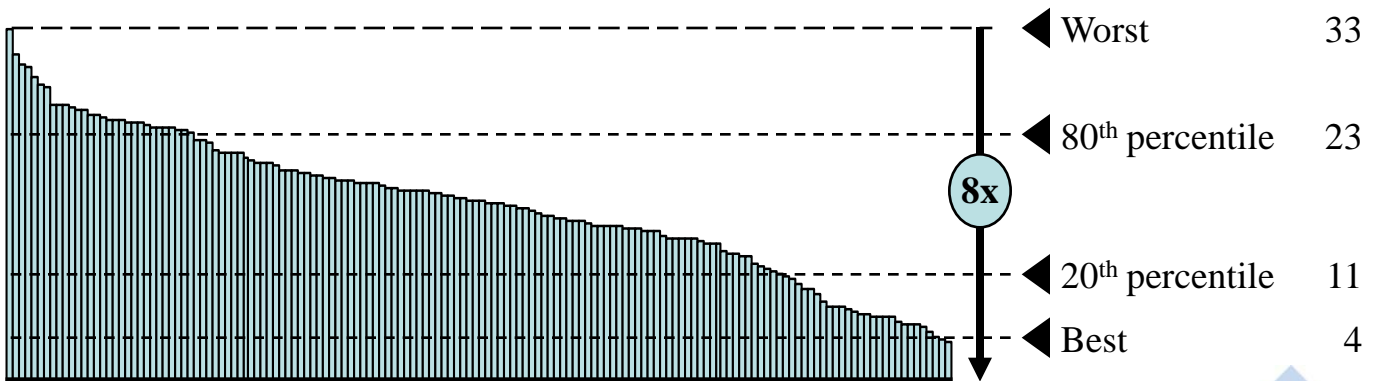
### Stroke treatment:

% receiving thrombolysis within 60 mins



### Infant mortality risk factors:

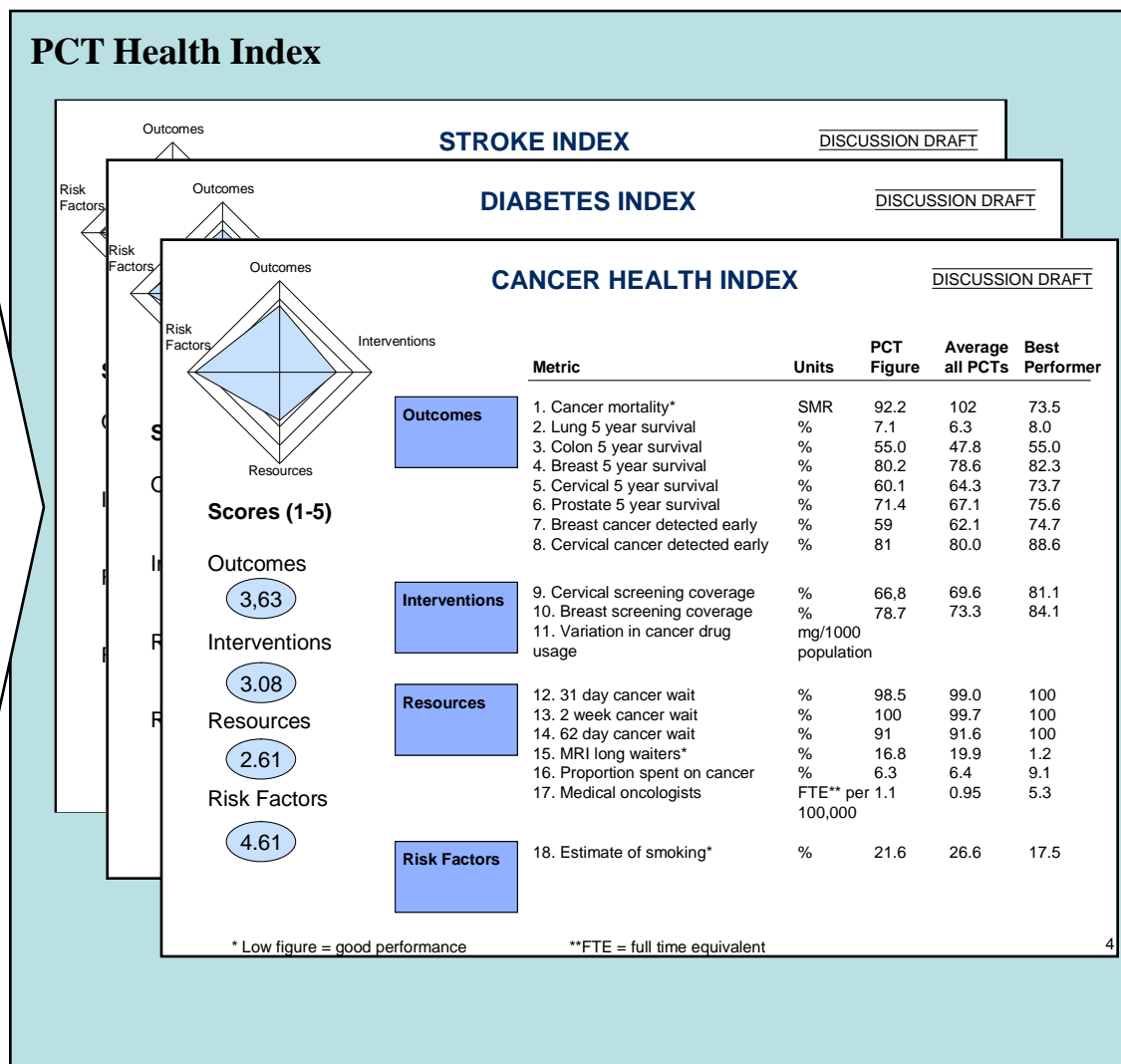
% smoking during pregnancy



# A framework for analysing Commissioner performance on outcomes and associated drivers

## Overview of our approach

- Exhaustive use of publicly available databases to gather information on 12 disease areas across all 152 PCTs in England
- For each PCT and for each disease area, outcomes and three classes of drivers of these outcomes identified, measured, and benchmarked:
  - Underlying population risk factors
  - Use of evidence-based interventions (e.g., screening, treatment)
  - Level of resourcing



# World Class Commissioning

Deciding Priorities

Reviewing Services

Assessing Needs

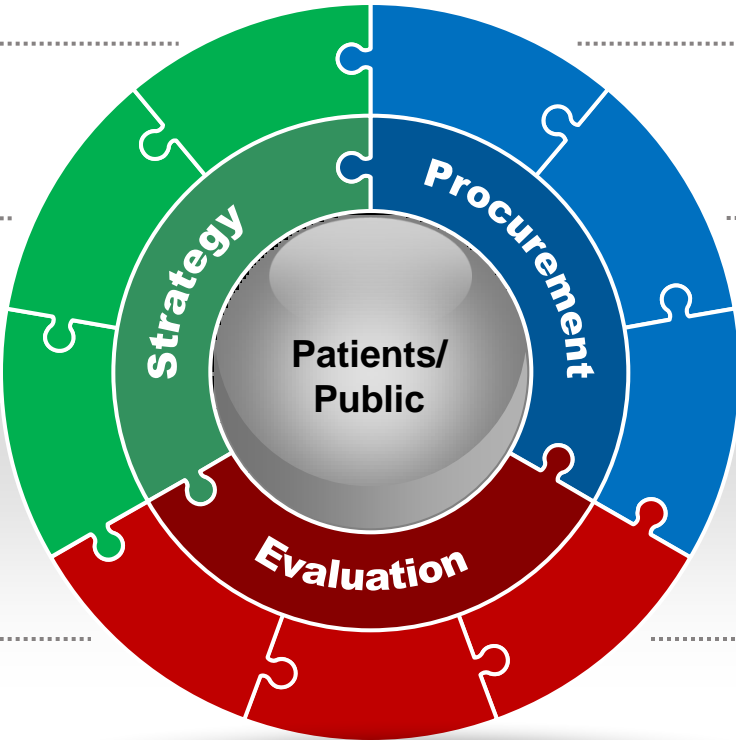
Seeking Patient and Public Views

Designing Services

Shaping Structure of Supply

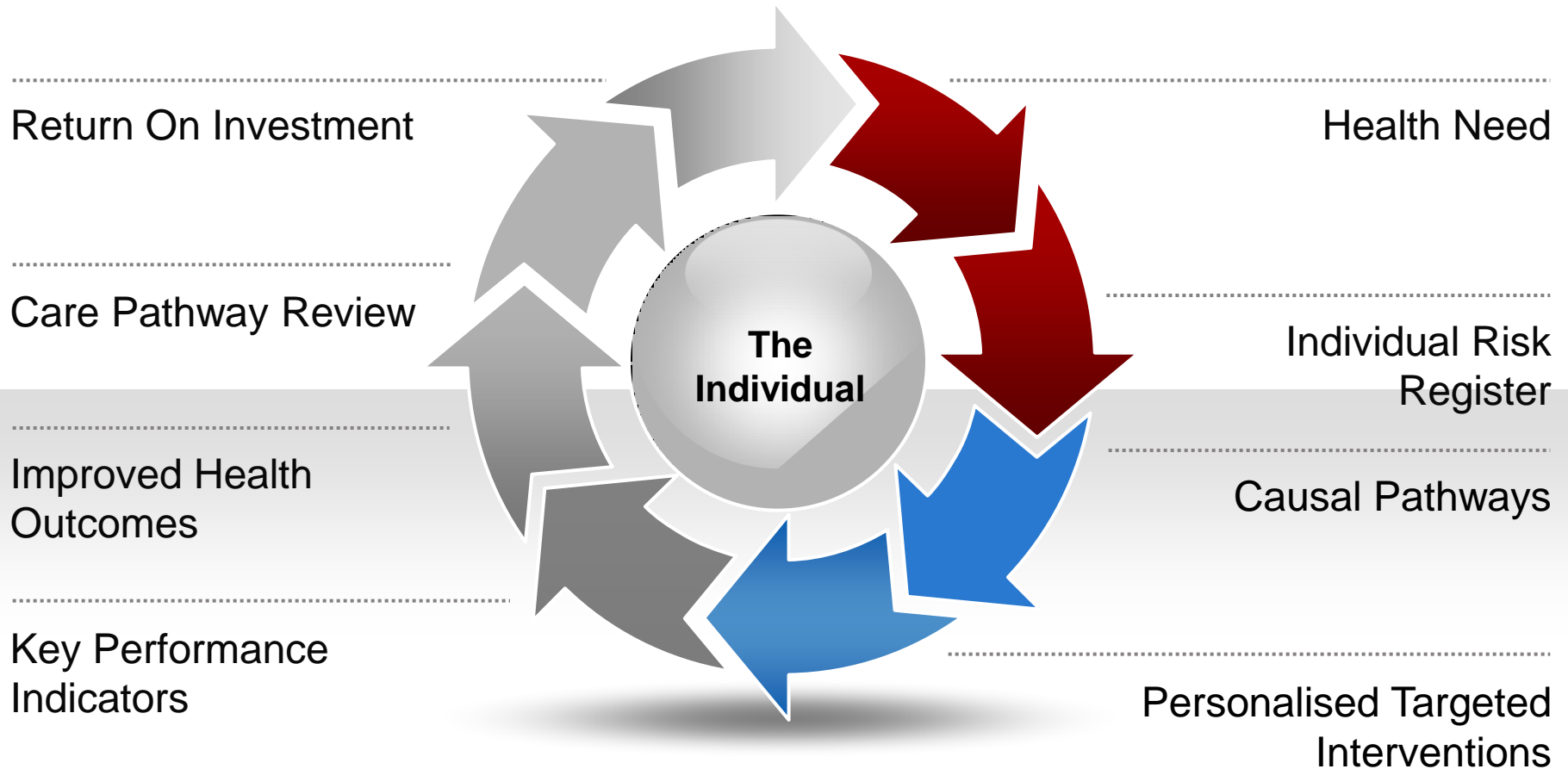
Planning Capacity and Managing Demand

Supporting Patient Choice

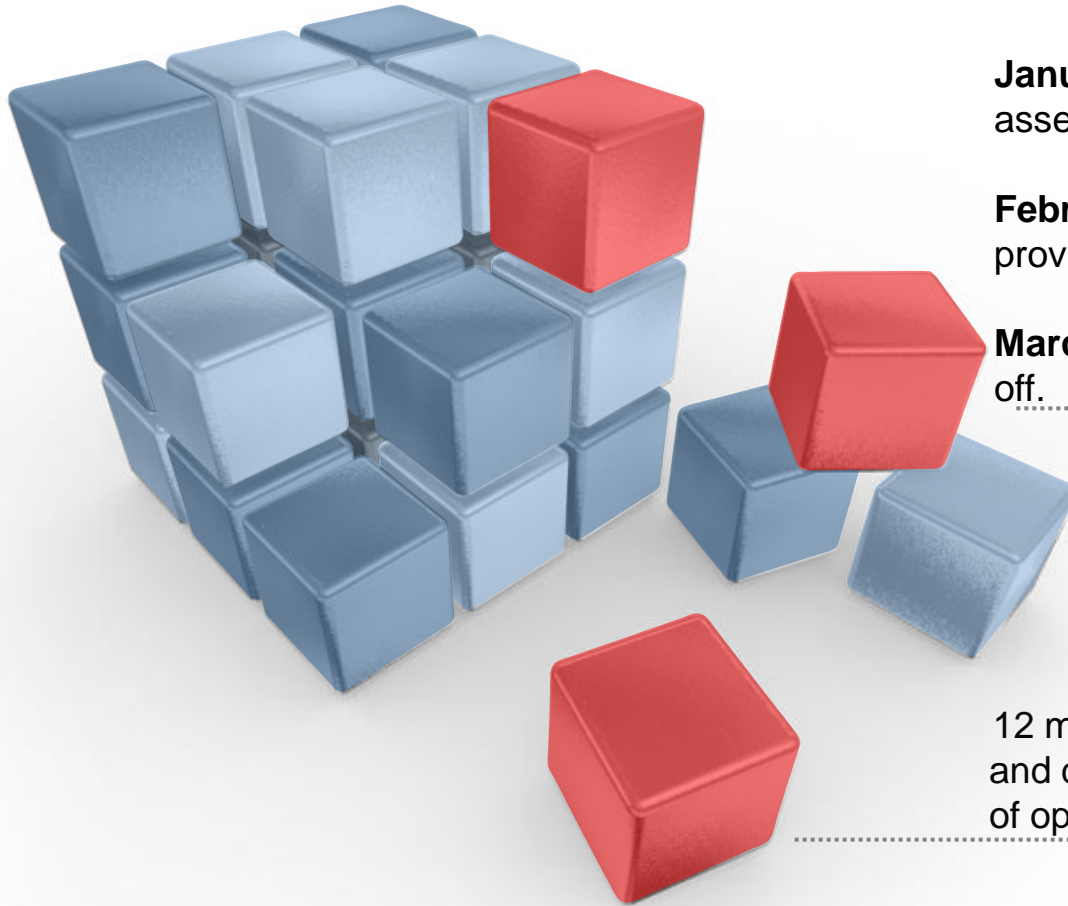


Managing Performance

# My definition of World Class Commissioning



# Key dates in the Commissioning Cycle



**December:** the NHS issues the operating framework for the coming financial year,

**January:** SHAs submit preliminary risk assessment to the DH

**February:** PCTs agree contracts with providers.

**March:** Contracts with providers are signed off.

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12 month cycle that looks at investment and disinvestment with a 3 month window of opportunity,

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## Research is Important because.....

- It stimulates PCT Commissioning staff to use more evidence in decision making.
- It improves quality of care in Northamptonshire.
- All Commissioning decisions are closely questioned for effectiveness.
- It ensures Patients in Northamptonshire get new evidence based improvements in treatment as soon as possible.
- It moves Commissioning away from being graffiti and more towards a science