

Better health and well-being for all

- People live healthier and longer lives
- Health inequalities are dramatically reduced

Better care for all

- Services are of the best quality which is evidence based
- People have choice and control over the services that they use so they become more personalised

Better value for all

- Investment decisions are made in an informed and considered way, ensuring that improvements are delivered within resources available
- PCTs work with others to optimise effective care

COMMISSIONING

What do we mean by 'commissioning'?

There are many definitions although all describe the achievement of high quality and value-for-money services for the NHS. Commissioning is a cycle of activities that includes assessing the needs of a population; analysing 'gaps'; setting priorities and developing commissioning strategies; influencing the market to best secure services and monitoring and evaluating outcomes. In other words, it involves buying in services from a range of health service providers (including GPs, dentists, community pharmacists, NHS and private hospitals, and voluntary sector organisations) to meet the health needs of local people, and monitoring how well they are being delivered. Commissioning is an on-going process that applies to all services, whether they are provided by the local authority, NHS, other public agencies, or by the independent sector.

Why is commissioning important?

Commissioning has been undertaken in the NHS for many years but has been relatively unsophisticated in its approach. Stronger PCTs and the acceleration of practice-based commissioning (PBC), together with incentives introduced by health reforms, provide the opportunity for more effective commissioning that will benefit patients and taxpayers alike.

What are the benefits of commissioning?

More effective commissioning over time will achieve improved quality effectiveness, efficiency of services and better access to a comprehensive range of services. Better quality of care and value for money will benefit PCTs, GPs and patients alike and fit in with existing programmes such as "Fitness for Purpose"¹.

¹http://www.dh.gov.uk/prod_consum_dh/idcplg?ldcService=GET_FILE&dID=129913&Rendition=Web

What are the roles of PCTs, PBCs and GP Practices in commissioning?

Every PCT is responsible for commissioning the full range of health services for its population, working in partnership with Practice-Based Commissioners (PBCs). Commissioners are expected to consult and involve a range of stakeholders, patients/service users and carers in the commissioning process.

What is practice based commissioning and what will it achieve?

At its simplest PBC is about engaging GP practices and other primary care professionals in the business of commissioning services. Through PBC, front-line clinicians are provided with the resources and support to become more involved in commissioning decisions. PBCs hold and manage a delegated, 'indicative', budget for health care. This budget covers prescribing, acute, community and emergency care. Participating GP practices share responsibility with their PCTs for commissioning services that meet the health needs of their local population.

What is the role of medicines management teams in PCTs and PBCs?

PCT medicines management teams will support the commissioning and performance management role of PCTs in all aspects of services that have a medicines-related component. This may include pathway re-design, budgetary management, implementation of NSF and NICE guidance, non-medical prescribing and medicines-related National Patient Safety Agency (NPSA) alerts, as well as managing the community pharmacy contractual framework.

Will PBCs commission medicines management services?

Medicines management teams will expect to see support for prescribing and medicines management in PBC consortia plans. Examples include advice on management and audit of repeat prescribing, cost efficiency, electronic transmission of prescriptions (ETP), support for patients discharged from secondary care, as well as generic and therapeutic drug switches. There are also opportunities for PBC consortia to commission additional medicines management support from PCTs or other service providers.

What are the opportunities for community pharmacy?

There are opportunities for PCTs and PBCs to commission additional enhanced services building upon the essential and advanced services already provided

through the new contractual framework. For example, changes in pathway design could involve the movement of one element of the patient's care to a community pharmacy setting. Community pharmacists can take on tasks previously undertaken in the GP surgery (such as blood glucose, cholesterol tests and blood pressure monitoring).

What is the relationship between medicines use and commissioning?

Poor compliance with medication increases the risk of admission or re-admission to hospital. Together with the increased incidence of long-term conditions such as diabetes, asthma, chronic obstructive pulmonary disease and dementia, medicines related issues present a huge challenge to demonstrating the impact of effective commissioning.

What additional services might be commissioned from community pharmacy?

Medicines Use Review (MUR), disposal of unwanted medication, support for self-care and repeat dispensing are already commissioned to support patients with long-term conditions and help reduce unnecessary hospital admissions. In the near future it is anticipated that PBCs may ask their PCTs to commission full medication reviews or a medicines assessment and compliance support, particularly for specified long-term conditions.

What are the future challenges and opportunities for commissioning?

The commissioning role has become increasingly challenging. The NHS today and in the future faces the rising expectations of the public, the demographic challenge of an ageing population and a revolution in medical technology. We work in a 24 hour culture where services need to fit the demands of day-to-day life. There are more healthcare providers - NHS Trusts, NHS Foundation Trusts, independent and third sector providers. All of this choice means that more can be achieved but there are finite resources and there is still the need to ensure value for money is delivered for the tax payer. To deliver this challenging agenda, PCTs need to make a radical change in the way they work and perform. "World class commissioning"² is a statement of intent to raise ambitions for a new form of commissioning that will "Add life to years and years to life". This ambition focuses on:

²<http://www.dh.gov.uk/en/Policyandguidance/Organisationpolicy/Commissioning/Worldclasscommissioning/Vision/index.htm>