



An Australian Government Initiative



SYDNEY NORTH

Primary Health Network

Achieving together - *better health, better care*

STRATEGIC COMMISSIONING OF INTEGRATED SUPPORT

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Chief Executive Officer

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STRATEGIC COMMISSIONING:

- ◆ **SET THE CONTEXT:** JOURNEY TOWARDS COMMISSIONING FOR HOLISTIC CARE AND IMPROVED OUTCOMES
- ◆ **OPPORTUNITIES:** UTILISING LEADERSHIP TO INSTALL CONTINUOUS IMPROVEMENT PRINCIPLES IN COMMISSIONING AND BUILD CAPACITY
- ◆ **FUTURE STATE:** MOVING FROM A CONCEPTUAL TO A PRACTICAL FRAMEWORK



NATIONAL HEALTH SERVICE, UK

World Class Commissioning

- ◆ 9 years working in NHS Commissioning including: Joint Executive Director of Strategy and Commissioning; NHS Islington and Islington Council North Central London.
- ◆ Led strategy and commissioning jointly for NHS Islington and Islington Local Authority across health and social services, holding a Budget of over £400million (\$800m) for a population of 195,600. Leading a direct team of 96 core office staff and community based teams including around 600 mental health workers, 300 social workers and over 500 community nurses and allied health staff. Role covered:
 - Strategic planning, service redesign and QIPP (Quality Innovation Prevention Program) efficiency program in health and social commissioned services;
 - Commissioning, contracting, procurement and performance of health and social services including:
 - leading the Council's transforming social services and supporting people agenda.
 - three major acute hospitals, ambulance services, two prison health services, mental health and learning disabilities **pooled budgets** across health and social care.
 - primary care independent contractors including GPs, dentists and pharmacists; Community health and social services (approx. 400 contracts and over 1,400 employed staff).
 - Practice based and GP commissioning in the establishment of a shadow GP Clinical Commissioning Group (CCG) during the transition period within the NHS.

SYDNEY NORTH HEALTH NETWORK

- ◆ **Sydney North Health Network** is a local not-for-profit primary health organisation, one of 31 PHNs, covering a population of **907,008**, with **38.9% born outside of Australia**.
- ◆ Aligned with *one* Local Health District and 9 Local Government areas, our PHN supports **291 General Practices** with **1,257 individual GPs** and over **2,800 Allied and Community Health providers**.
- ◆ Commenced operations in July 2015
- ◆ PHNs provide an unprecedented opportunity to **focus efforts at a regional level** to achieve impacts across the whole system of care. This is achieved by:
 - Building local capacity and establishing connections across the health system.
 - Leveraging through commissioning by working with partners to develop a better experience for health providers and better healthcare to the community.



PHN COMMISSIONING

Building capacity in commissioning across the PHN network

The Commonwealth Department of Health established a **PHN Commissioning Working Group** to work with them to support PHNs and the commissioning process

- ✓ Agreed PHN Commissioning principles
- ✓ Leading working groups to support ongoing capacity and capability building and knowledge sharing.

Working Groups:

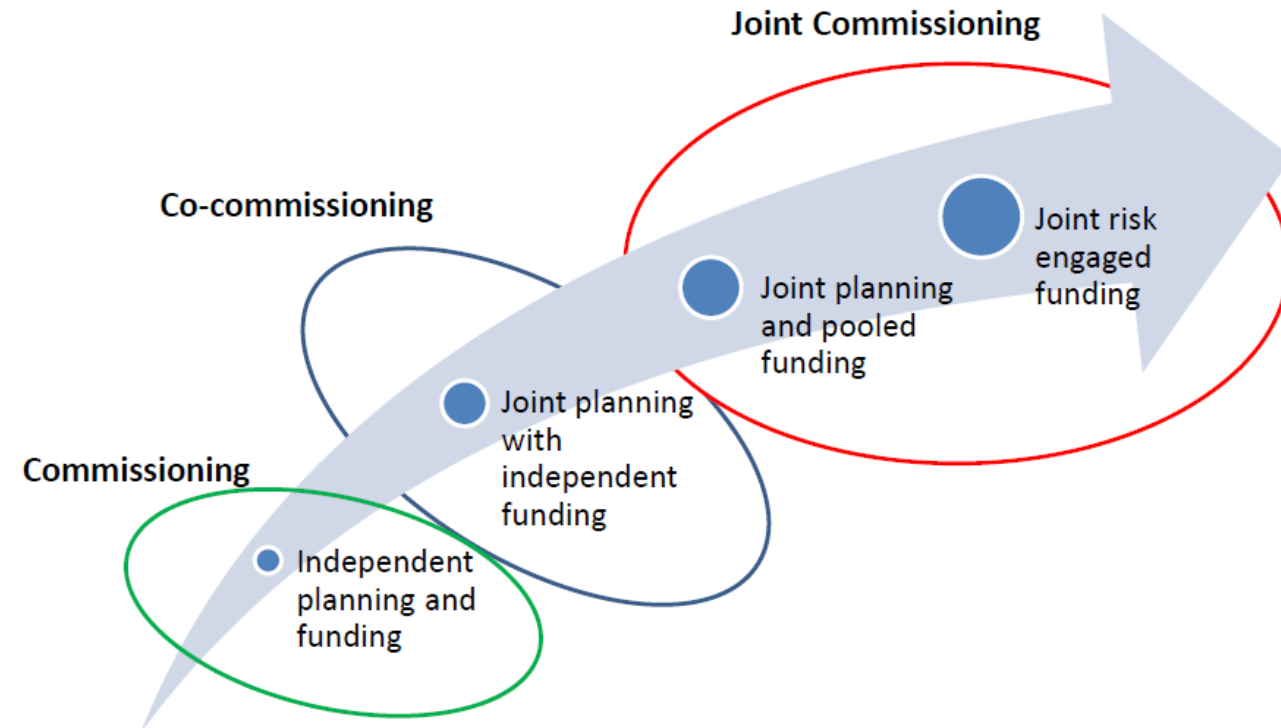
- ◆ **Market management:** market development, market making and market failure
- ◆ Change Management & **Stakeholder engagement**
- ◆ **Working with States and Territories** on commissioning/coordinated commissioning
- ◆ **Commissioning for outcomes**, including incentivising provider performance, through pricing and payments
- ◆ **Monitoring and evaluation**
- ◆ **Consistent messaging** – providers and stakeholders
- ◆ **Areas of risk** – promoting competition, avoiding conflicts of interest, providing a level playing field for providers
- ◆ **Knowledge sharing** – utilising sharepoint



TOWARDS JOINT COMMISSIONING

Ministry of Health Joint Working Group

- ◆ The aim of this workgroup is to bring together key bodies of work to ensure alignment and consistent advice for the system with regard to Co-Commissioning/ Collaborative commissioning/ Joint-commissioning.
- ◆ Co-Commissioning is a key piece of work that sits within the Care Coordination and Mental Health Bilateral Agreement Project Plans, alongside this is the key priorities outlined under **Joint Strategic Planning Report for PHN and LHDS**, which identified Sharing of data and data linkage, Connecting and integrating care and Collaborative Commissioning.
- ◆ Joint commissioning – two organisations coming together with shared governance, shared risk, co-contribution of funds to address a community need.



COMMON FEATURES OF STRATEGIC COMMISSIONING

NHS:

World Class Commissioning Principles

Competency

Measure

Are recognised as the local leader of the NHS

Work collaboratively with community partners to commission services that optimise health gains and reduce health inequalities

Proactively build continuous and meaningful engagement with the public and patients to shape services and improve health

Lead continuous and meaningful engagement of all clinicians to inform strategy and drive quality, service design and resource utilisation

Manage knowledge and undertake robust and regular needs assessments that establish a full understanding of current and future local health needs and requirements


- Reputation as the 'local leader of the NHS'
- Reputation as a change leader for local organisations
- Position as the local healthcare employer of choice
- Creation of Local Area Agreement based on joint needs
- Ability to conduct constructive partnerships
- Reputation as an active and effective partner
- Influence on local health opinions and aspirations
- Public and patient engagement
- Delivery of patient satisfaction
- Clinical engagement
- Dissemination of information to support clinical decision making
- Reputation as an active and effective partner
- Analytical skills and insights
- Understanding of health needs trends
- Use of health needs benchmarks

UK: World Class Commissioning Competencies continued

Competency	Measure
Prioritise investment according to local needs, service requirements and the values of the NHS	<ul style="list-style-type: none">• Predictive modelling skills and insights• Prioritisation of investment to improve population's health• Incorporation of priorities into strategic investment plan
Effectively stimulate the market to meet demand and secure required clinical and health and wellbeing outcomes	<ul style="list-style-type: none">• Knowledge of current and future provider capacity• Alignment of provider capacity with health needs projections• Creation of effective choices for patients
Promote and specify continuous improvements in quality and outcomes through clinical and provider innovation and configuration	<ul style="list-style-type: none">• Identification of improvement opportunities'• Implementation of improvement initiatives• Collection of real time quality and outcome information
Secure procurement skills that ensure robust and viable contracts	<ul style="list-style-type: none">• Understanding of providers economics• Negotiation of contracts around defined variables• Creation of robust contracts based on outcomes
Effectively manage systems and work in partnership with providers to ensure contract compliance and continuous improvement in quality and outcomes and value for money	<ul style="list-style-type: none">• Use of real time performance information• Implementation of regular provider performance discussions• Resolution of ongoing contractual issues

COMMISSIONING WORKING GROUP

Agreed PHN Commissioning Principles

- 
- ✓ **Understand** the needs of the community ✓
 - ✓ **Engage** potential service providers in advance of commissioning ✓
 - ✓ **Focus on outcomes** rather than service models or types of intervention ✓
 - ✓ Adopt a **whole of system** approach to delivery improved health outcomes
 - ✓ Understand the fullest practical range or providers **looking at contribution** they could make to delivering outcomes ✓
 - ✓ **Co-design solutions**, engage with stakeholders to develop outcome focused solutions
 - ✓ Consider investing in the **capacity** of providers and consumers
 - Ensure procurement and contracting processes are **transparent and fair**
 - ✓ **Manage through relationships**
 - Develop environments high in trust through **collaborative governance**, shared decision making and collective performance management.
 - ✓ **Ensure efficiency** and value for money whilst delivering service enhancement
 - ✓ Monitor and evaluate – using **active management** of today's services to plan future service transformation

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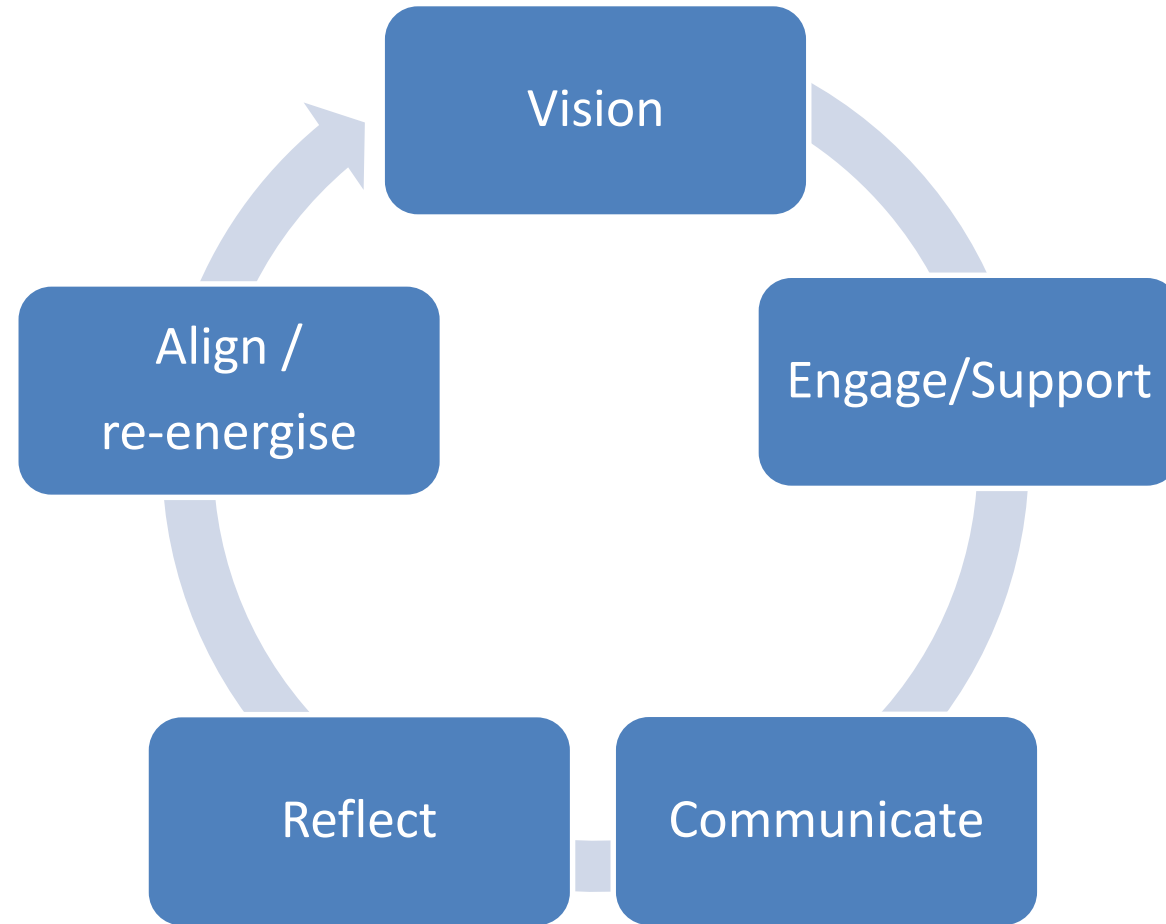
“The task of leadership is to create an alignment of strengths making our weaknesses irrelevant”

Peter Drucker

NHS Leadership Qualities Framework



Leading and cultivating high performing teams: continuous cycle



Problem Solving

Identify problem



Conduct root cause analysis



Brainstorm solutions and
analyse



Develop action plans

Metaphor:
Organisations are problems
to be solved

Appreciative Inquiry

Appreciate “what is” (what
gives life?)



Imagine “what might be”



Determine “what should
be”



Create “what will be”

Metaphor:
Organisations are centres
of relationship connected
to infinite capacity and
strengths

COMMISSIONING PLANNING AND PARTNERSHIPS



Analysis



Health needs analysis

- ◆ Geography
- ◆ Demography
- ◆ Health determinants
- ◆ Health status and behaviours
- ◆ Population with special needs
- ◆ Individuals and populations at risk of poor health outcomes



Service needs analysis

- ◆ Geography
- ◆ Workforce mapping
- ◆ Service mapping
- ◆ Market analysis
- ◆ Efficiency and effectiveness
- ◆ Coordination and integration
- ◆ Opportunities for improvement



Priorities and options

- ◆ Synthesis and triangulation
- ◆ Option development
- ◆ Priority setting
- ◆ Approval and feedback



Assessment

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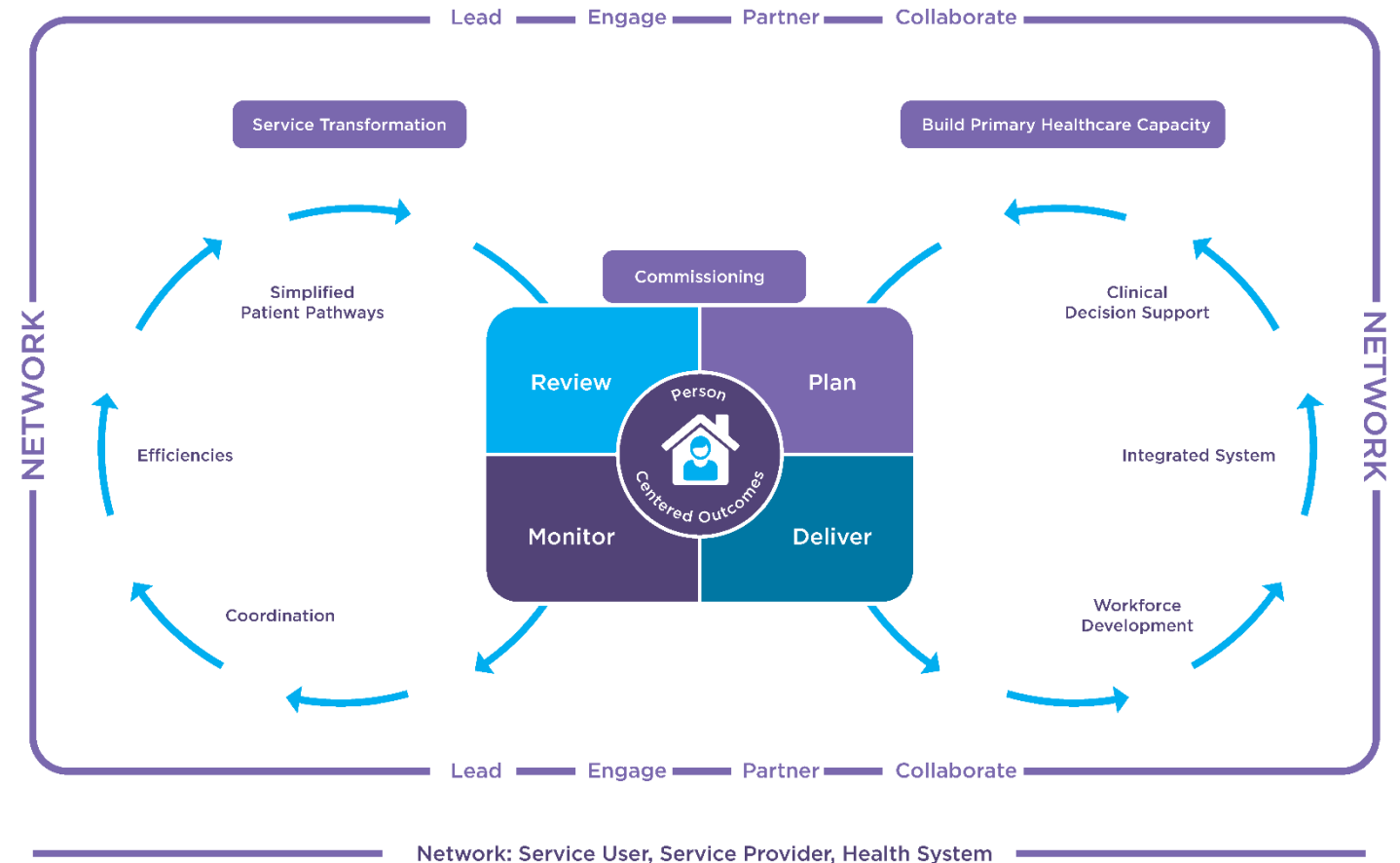
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PHN COMMISSIONING

*Working with the market to **co-design, co-deliver** and **actively manage services** to most effectively and efficiently meet the needs and improve outcomes of a defined population within the resources available.*

Sydney North Health Network Primary Health Care Integrated Commissioning



1. PLAN

- Stakeholder Engagement
- Identify Need
- Service Co-Design

2. DELIVER

- Co-Delivery
- Build Capacity
- Support

3. MONITOR

- Informatics
- Challenge Quality
- Drive Improvement

4. REVIEW

- Outcomes
- Impact
- Inform Re-Design

USING THE QUADRUPLE AIM TO MEASURE COMMISSIONING VALUE AND OUTCOMES

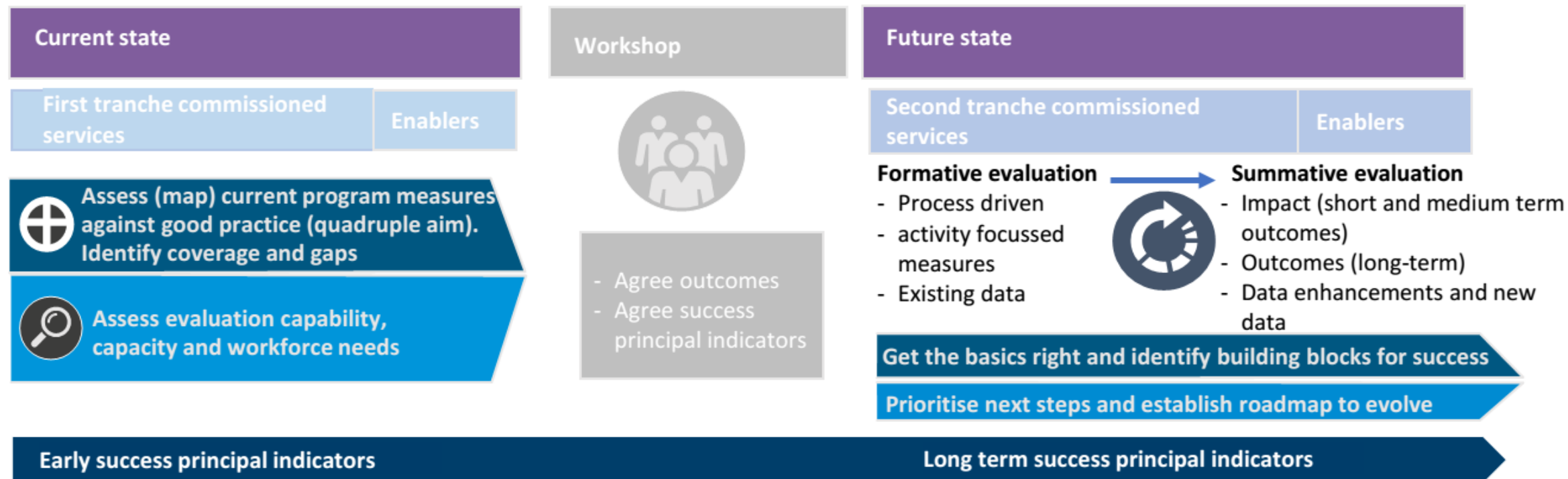
Using the quadruple aim as a guide to help **optimise impact** from commissioning processes through by – considering all four quadrants – ensures that commissioning is both comprehensive and balanced and provides a platform for continuous improvement

Quadruple Aim



Quadruple Aim:	Potential Outcome Domains:
Improved population health	Effectiveness of services
	Accessibility of services
	System-wide integration / continuity of care
Improved patient experience	Appropriateness of services
	Accessibility of services
	Effectiveness of services
Provider impact	System-wide integration / continuity of care
	Sustainability of workforce
	Capacity building
Reduced care costs	Effectiveness of services
	Efficiency of services
	Sustainability of services

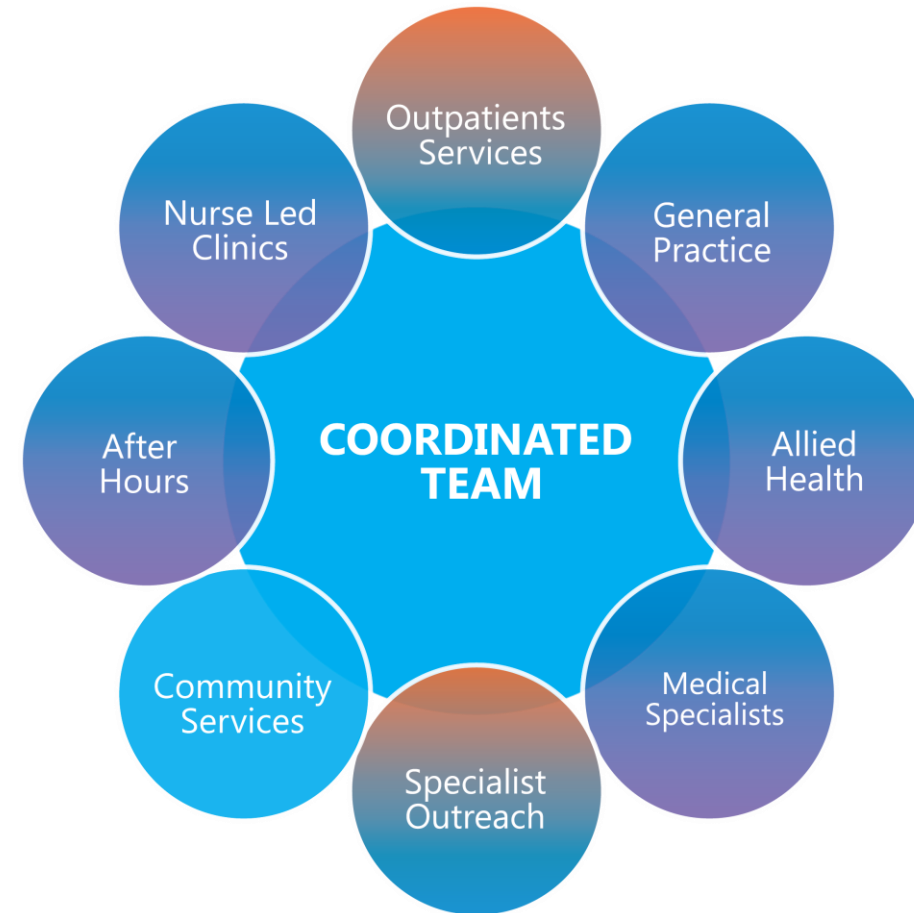
JOURNEY TOWARDS MEASURING IMPACT AND OUTCOMES



SERVICE TRANSFORMATION

WORKING TOGETHER TO SIMPLIFY **ACCESS** AND **NAVIGATION** ACROSS THE WHOLE SYSTEM

- ◆ Creating an environment that enables innovative ways of delivering services in the community
- ◆ Commissioning based on population needs to strengthen access to services locally.
- ◆ Working in partnership for improved delivery of person-centred services to individuals and their carers through a coordinated set of care interventions that ensure the right care is provided in the right place at the right time.



DIRECTION OF TRAVEL

COLLABORATION - WORKING TOGETHER TO FACILITATE IMPROVED OUTCOMES FOR OUR COMMUNITY

- ◆ Strategic commissioning provides unprecedented opportunity to focus efforts at a regional level to achieve better **whole of system integration**.
- ◆ **Create the Vision** - Work **with** community, providers and clinicians to agree the vision to align our commissioning approach and outcomes
- ◆ Understanding of current provision of services and evidence base – **challenging the norm**
- ◆ Moving towards **outcomes** and developing the market to respond
- ◆ Maximise the **innovation and delivery** of solutions – being creative about gaps

“Deliberate strategies are complemented with emergent strategies seeking to implement and normalise a complex intervention in everyday practice” Minzberg and Walter; 1985

