

Commissioning of Health and Social Care Services in NI

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Director of Commissioning

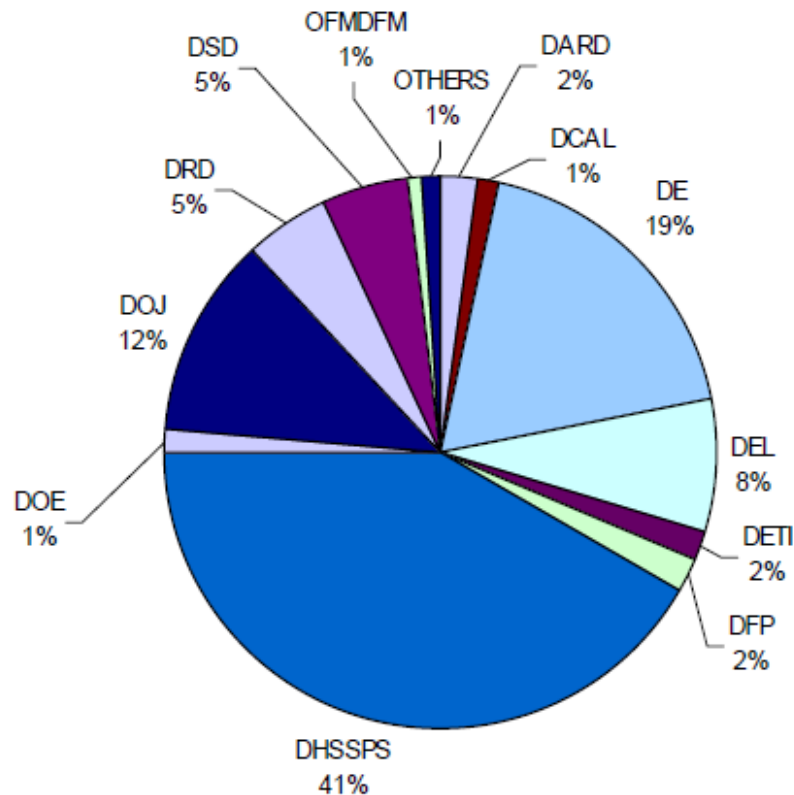
24th April 2015

- Context
- Commissioning Structures and Processes
- Involvement of third sector organisations in commissioning

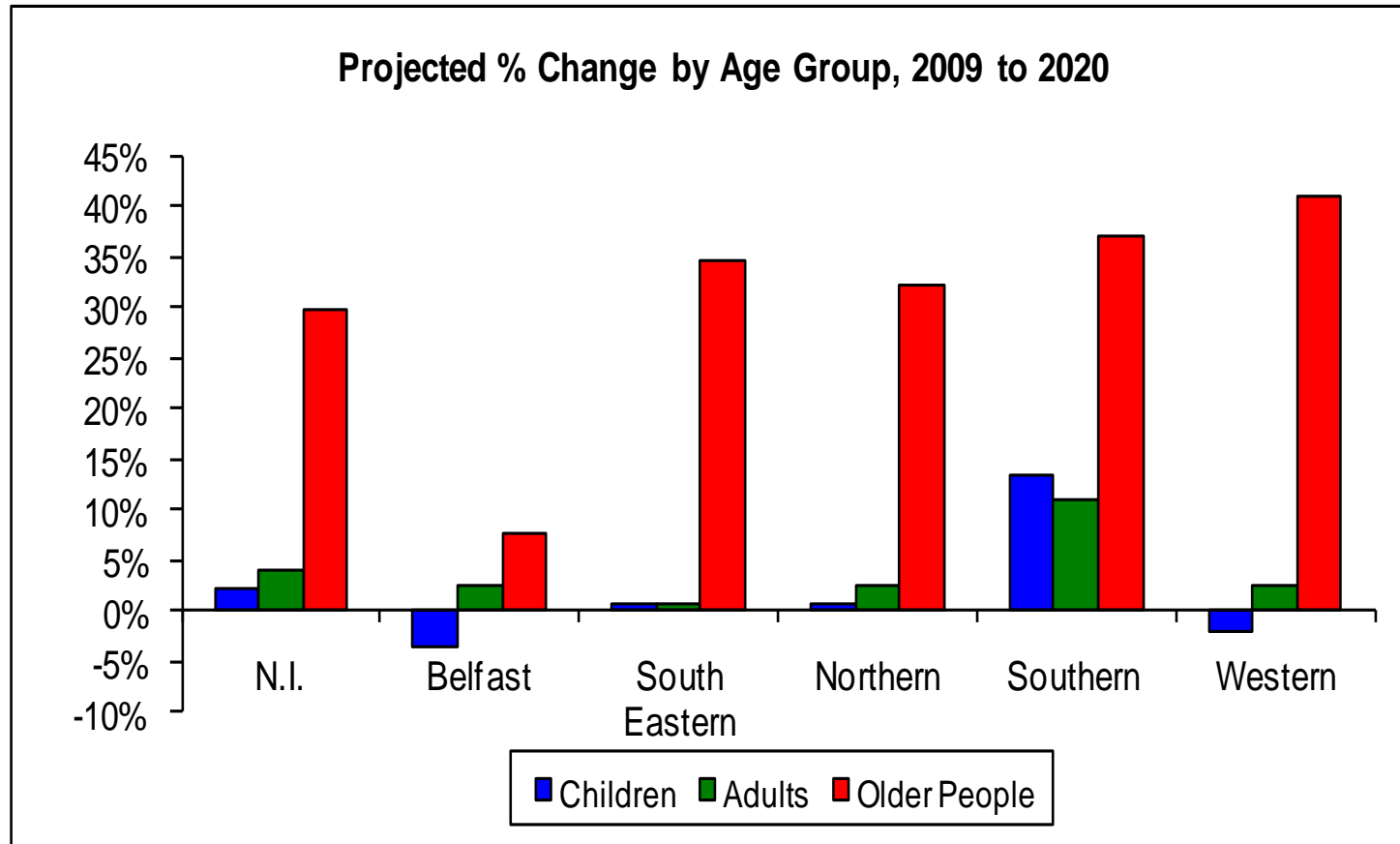
Context: Levels of Spending

41% of the total NI Budget
£4.6 billion pa

Chart 3.3: Breakdown of Current Expenditure by Department 2010-11



Context: Population Projections



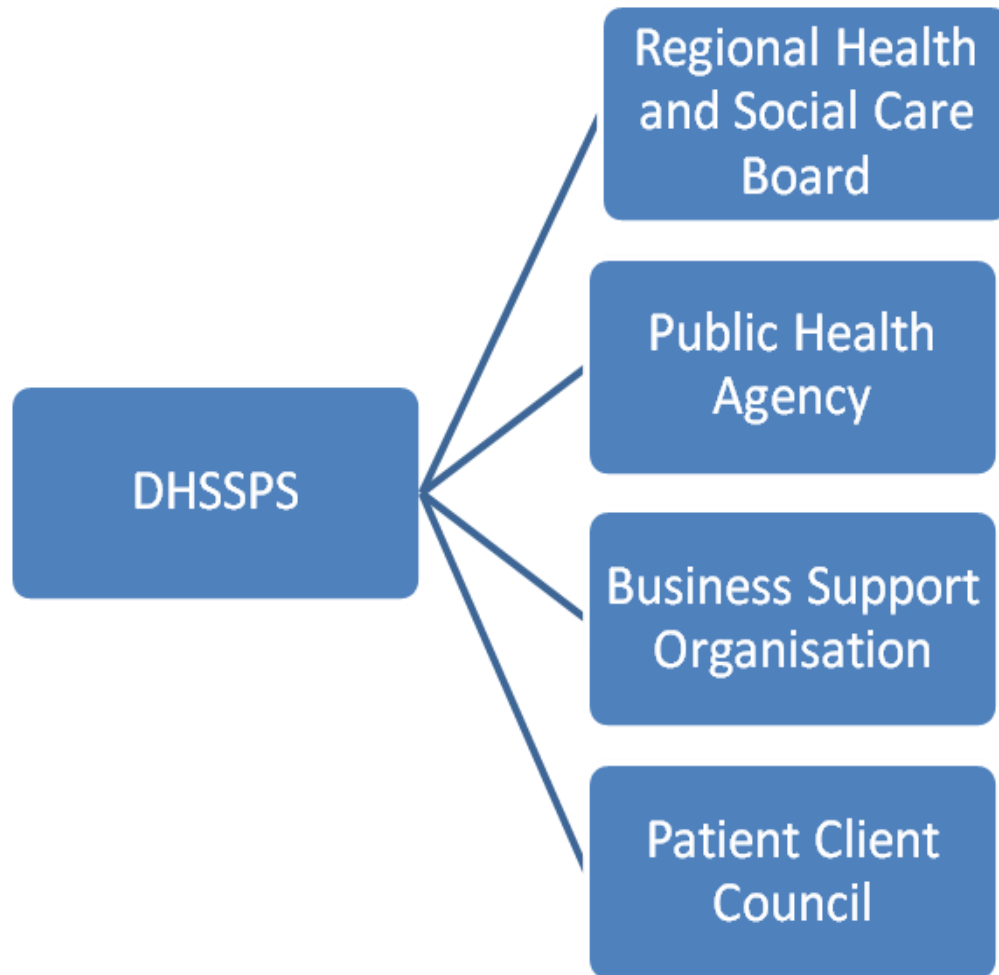
NISRA

HSC Financial Position

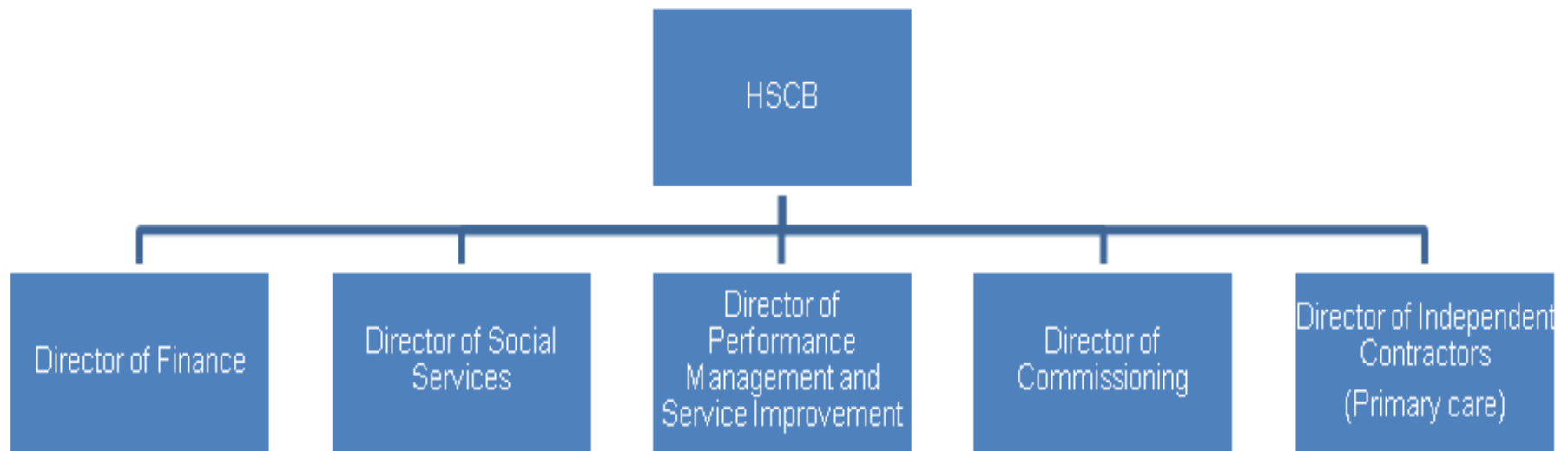
- Significant financial challenges in 2015/16
- No realistic prospect of material increase in HSC funding in future years
- Cost pressures will continue to outstrip income in 2015/16 and beyond (6% vs 2%)

Commissioning Structures and Processes

Overview of regional structures



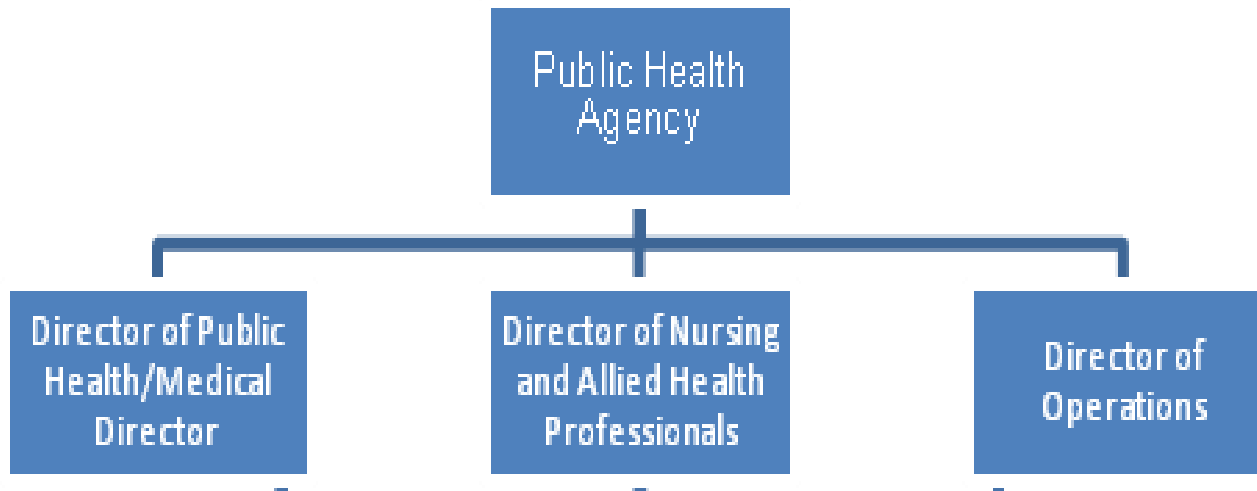
Health and Social Care Board Structure



HSCB Functions

- Commissioning
- Resource Management
- Performance Management

Public Health Agency Structure



PHA Functions

- Improve health and wellbeing
- Protect health
- Commissioning for health improvement and reduction in inequalities
- Patient safety
- Patient experience
- Delivery and quality assurance of screening programmes

Local Commissioning Groups x5

➤ Belfast

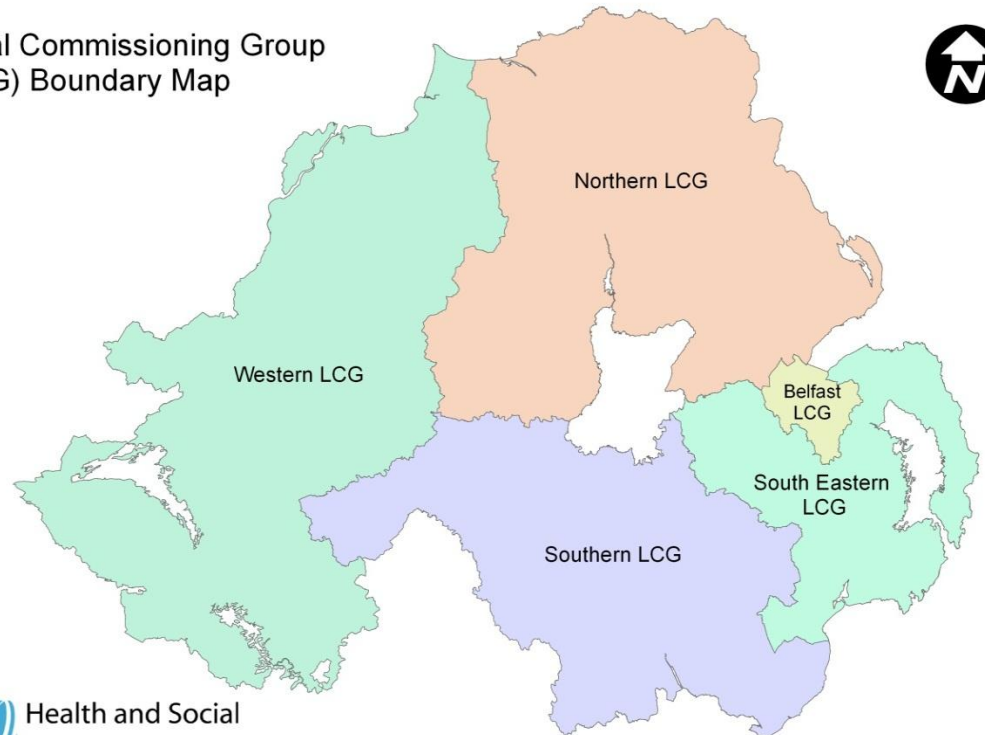
➤ South Eastern


➤ Southern

➤ Northern

➤ Western

Local Commissioning Group
(LCG) Boundary Map



 Health and Social
Care Board

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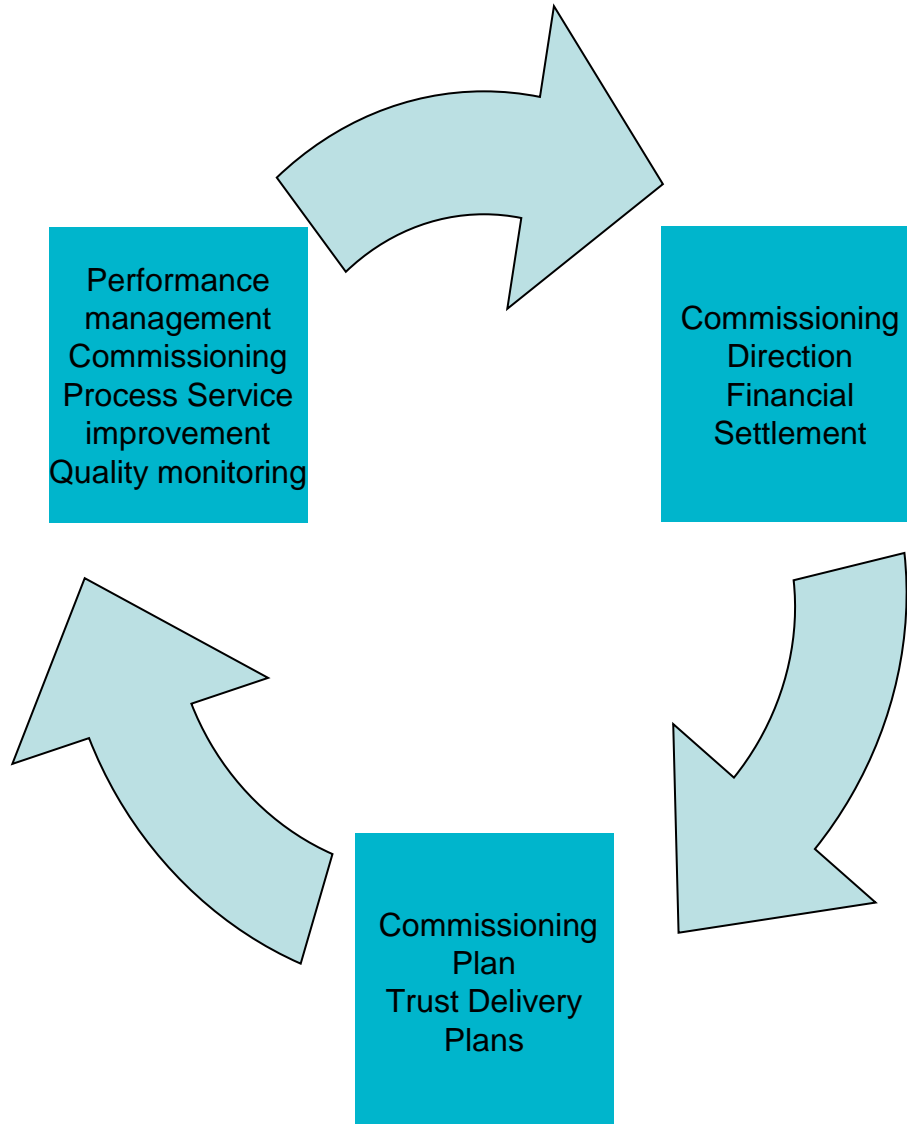
(Regional) Commissioning Leads

- Specialist Services
- Hospital Services
- Palliative Care
- Prison services
- Maternity, gynae, paed, child health
- Statutory Children's Services
- Mental health, learning disability
- Community care, elderly and physical disability
- Screening/ health improvement/health protection
- Medicines Management

Commissioning Tasks

- Identify population needs
- Develop appropriate service models
- Commission required services from providers:
 - Volumes of activity
 - Outcomes
 - Resources
- Monitor and evaluate

Annual Commissioning Cycle



Factors influencing services

- Patient need, inequalities, gaps
- Commissioning Direction
- Commissioning Plan
- Commissioning Specifications
- Service frameworks
- Resources
- Service reviews
- NICE
- Evidence base
- Transforming Your Care, QICR

Arrangements for Involving 3rd Sector Organisations in Commissioning

Drivers

- Policy Drivers
 - Transforming Your Care
 - Bamford
 - Living with long terms conditions
 - Living matters; Dying matters Strategy
- Shift Left
- Self Management / Holistic Needs Approach
- Value for Money

Opportunities for involvement

- Public Consultations (e.g Commissioning Plan)
- Engagement on specific service issues at regional and local level (e.g. Paediatric Congenital Cardiac Surgery).
- Health Alliances (HSCB Clinical Networks, Rare Disease Partnership, Long Term Conditions Alliance)
- Service Delivery
- Local Commissioning Groups
- Integrated Care Partnerships

Current 3rd Sector Partnerships

- Specialist Palliative Care and End of Life
 - Transforming your palliative and end of life care programme – HSCB/ PHA/Marie Curie
 - NI Hospice / Foyle Hospice / Southern Area Hospice & Marie Curie
- Long Term Conditions
 - British Heart Foundation/ HSC Trust Heart Failure Nurses
 - CHS and Stroke Association provide contracted family and survivor support services to Trusts.
 - CHS / Arthritis Care UK and SHSCT self management programmes

continued..

- Cancer Services
 - Transforming Cancer Follow Up – HSCB/PHA/Trusts/Macmillan Cancer Support
 - Friend of Cancer Centre – Research, Nursing, Radiography
 - Cancer Focus NI – counselling services & PHA/HSCB Skin Cancer Strategy
 - Action Cancer – Screening
- Children & Young People's Strategic Partnership Board

Next Steps and Discussion