

## 8. Guidance for Commissioners

[World Class Commissioning](#) encourages patient engagement and greater clinical involvement throughout the commissioning process. Increased clinical and patient input, combined with a more accurate assessment of long-term local requirements, will ensure services are more closely designed to meet evolving patient needs. By strengthening relationships between key local partners such as PCTs and local authorities, world class commissioning will ensure better links between different aspects of patient care – ensuring overall care solutions are highly personalised and effective.

[The support and development framework](#) will give commissioners access to the tools they need to drive improvements, either by sharing services and good practice, developing internal resources, or buying in external expertise, for example through the Framework for Securing External Support for Commissioners (FESC).

Although the majority of support and development available to PCTs will be managed at a local level, there are some areas that would benefit from a nationally consistent approach. For example, the DH has commissioned and published a [national PCT board development framework](#).

The competencies and characteristics of PCT boards in their role as world-class commissioners are set out in detail in this 33-point guide. This guide emphasises the vital role of the board in managing the strategic agenda to deliver better health outcomes, new partnership based models of commissioning and the right balance between co-operation and contestability for the benefit both of patients and taxpayers.

[Primary Care Contracting](#) have produced [8 primary care service frameworks](#). Each framework is a generic, comprehensive and enhanced service specification for PCT commissioners and Practice Based Commissioners for 2007/08. These Frameworks:

- Help commissioners and providers consider, as a starting point, an integrated approach to enhanced service provision in primary care.
- Describe the key requirements for a holistic, enhanced service – for example, appropriate processes, improvements in health outcomes, service inputs and outputs, staffing competencies, integrated governance, information etc.
- Give an opportunity to consider which level of this enhanced service provision and contractual route(s) would be most appropriate to adopt locally, such as GMS, PMS, APMS or PCTMS, with the most appropriate providers available.

A primary care service framework has been produced for both long-term conditions and support for self care.

[NICE have produced a range of commissioning guides](#). Each guide comprises a series of text-based web pages that signpost and provide topic-specific information on key clinical and service-related issues to consider during the commissioning process as well as an interactive commissioning tool.

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## National programmes linked to information prescriptions

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[The NHS Information Centre](#) has produced a useful [online commissioning guide](#) that highlights products such as NHS Comparators, Compendium of Public Health Indicators and the Health Poverty Index, which are each able to provide commissioners with important information they need during the commissioning process. Included within the guide is a promotional film showcasing the support available to commissioners.

[The Generic Choice Model for Long Term Conditions](#), published by the DH in December 2007, helps commissioners understand the process and range of services needed to be commissioned, to improve and personalise services and support people with long term conditions. The model, developed in conjunction with a number of patient organisations, provides good practice examples, and aims to reduce inequalities.

Earlier work has very clearly indicated that for there to be meaningful choice, there needs to be:

- Appropriate timely information for both individuals and clinicians to enable shared decision-making
- Information, advocacy and support services, available in a variety of formats so that everyone can understand the choices available
- Information on the benefits and risks of treatments.

The public want to be supported to live more independently, have greater choice in their treatment, and be empowered to take control of their long-term conditions through properly supported self-care. [The DH has produced a range of guidance and support to commissioners and providers of services so they are able to develop more effective self-care services.](#)

This guidance highlights that information to support self care should be at the centre of the choices that are offered to people with long-term conditions. Information should be easily accessible, appropriate and up to date. By directing people to the right information about their long term conditions and giving them the confidence to use it, we can help them to feel more in control of their condition and empower them to live independently.

The DH states that providers and commissioners need to work with local authorities and other organisations and build an appropriate infrastructure to allow patients and professionals to access relevant, trustworthy & timely information. This can include advice on how best to access health and social care services as well as broader advice on voluntary services, housing, education etc.

[Supporting people with long term conditions: commissioning personalised care planning - a guide for commissioners](#) is the latest guidance published by the Department of Health in February 2009. This guide provides commissioners of health and social care services with information and support they need to embed personalised care planning in their localities.