

Reading list

Integrated care - commissioning and contracting

March 2014

Further copies

For further copies of this reading list, call the Information and Library Service on 020 7307 2568 or download from <http://www.kingsfund.org.uk/readinglists>

This reading list is produced by The King's Fund Information and Library Service. The items on this list are selected only from items held by the Information and Library Service or are freely available on the Internet. It does not aim to be comprehensive, or to be a 'recommended reading list' – but to give an indication of the sorts of resources The King's Fund can make available on this topic.

About the Information and Library Service

We run the only public reference library in the country specialising in health and social care resources, staffed by a team of information experts who provide tailored support to callers and visitors without appointment. Most of our services are free of charge, from searches of our database to reading lists on health and social care topics.

The Information & Library service:

- handles some 6,000 enquiries a year from NHS and local government staff, researchers, students and the voluntary sector
- holds a database of over 100,000 bibliographic records, catalogued using an authoritative thesaurus of over 11,000 indexing terms
- contributes health policy and management content to NHS Evidence
Go to: <http://www.evidence.nhs.uk/>

Our services include:

- free tailored literature searches of our own database
- free reading lists on our web pages at www.kingsfund.org.uk/readinglists on a wide range of health and social care topics
- free sign-up to our regular policy and news alerts: www.kingsfund.org.uk/alerts
- A number of Reading Rooms for each of The King's Fund's areas of work: <http://www.kingsfund.org.uk/library/reading-rooms>
- photocopies of journal articles (for a small fee).
- Internet access to our database from <http://www.kingsfund.org.uk/library>.

Opening hours

Mon- Fri: 9.30am–5.30pm

Contact details

Information Centre
The King's Fund
11-13 Cavendish Square
LONDON
W1G 0AN

Tel: 020 7307 2568

Email: library@kingsfund.org.uk

Twitter: https://twitter.com/kingsfund_lib

Website: <http://www.kingsfund.org.uk/library>

BOOKS/REPORTS

ISBN: 9781909029255

Addicott, Rachael and Ham, Chris
The King's Fund

Commissioning and funding general practice : making the case for family care networks.

London : King's Fund, 2014

HMP:HCC (Kin)

As England's population both expands and ages, so the demands on primary care will grow. Within the current commissioning and funding system innovative models of primary care provision are already being used. This report describes examples of these through four case studies in different areas of England. It also highlights how the existing system is imperfectly understood, particularly regarding contracts.

<http://www.kingsfund.org.uk/publications/commissioning-and-funding-general-practice>

NHS England

Safe, compassionate care for frail older people using an integrated care pathway : practical guidance for commissioners, providers and nursing, medical and allied health professional leaders.

London : NHS England, 2014

Web publication

If frail older people are supported in living independently and understanding their long-term conditions, and educated to manage them effectively, they are less likely to reach crisis, require urgent care support and experience harm. This practical guidance document summarises the evidence of the effects of an integrated pathway of care for older people and suggests how a pathway can be commissioned effectively using levers and incentives across providers.

<http://www.england.nhs.uk/wp-content/uploads/2014/02/safe-comp-care.pdf>

NHS Clinical Commissioners

Commissioning primary care : transforming healthcare in the community.

Briefing ; February 2014

Web publication

London : NHS Clinical Commissioners, 2014

This publication explores the challenges to local reforms in primary care commissioning as well as offering clear and practical solutions. It also looks at examples of good, working partnerships and explains why integrated services must always start with a "whole system" strategy if they are to bring the best care to patients and local communities.

<http://www.nhscc.org/wp-content/uploads/2014/02/Commissioning-primary-care-final-pdf-for-website.pdf>

ISBN: 9781909505100

Reform

Delivering integration at pace and scale : roundtable seminar with Bill McCarthy, National Director: Policy, NHS England.

London : Reform, 2014

Web publication

This report contains the transcript of the Reform-Novo Nordisk seminar on "Delivering integration at pace and scale" with Bill McCarthy, National Director of Policy at NHS England, in October 2013. The aim of the seminar was to explore how policymakers can facilitate integration that benefits patients.

http://www.reform.co.uk/resources/0000/1120/Delivering_Integration.pdf

Associated documentation:

http://www.reform.co.uk/content/31793/research/health/delivering_integration_at_pace_and_scale

Kasteridis, Panos, et al.

University of York. Centre for Health Economics

The importance of multimorbidity in explaining utilisation and costs across health and social care settings : evidence from South Somerset's Symphony Project.

CHE Research paper ; 96

York : University of York, 2014

Web publication

This work forms a basis for identifying groups that would most benefit from improved integrated care, which might be facilitated by integrated financial arrangements and better pathway management. The more co-morbidities that a person has, the more likely they are to require care across diverse settings, and the higher their costs. Our analysis identifies those groups of the population which are the highest users of services by activity and cost and provides baseline information to allow budgetary arrangements to be developed for these targeted groups.

http://www.york.ac.uk/media/che/documents/papers/researchpapers/CHERP96_multimorbidity_utilisation_costs_health_social%20care.pdf

Mason, Anne, et al.

University of York. Centre for Health Economics

Financial mechanisms for integrating funds for health and social care : an evidence review.

CHE Research paper ; 97

York : University of York, 2014

Web publication

This study found that compared with "usual care", schemes that integrated funds and resources to support integrated care seldom led to improved health outcomes. Although some schemes succeeded in shifting care closer to home, and some achieved short term reductions in acute care utilisation, no scheme demonstrated a sustained and long term reduction in hospital use. Moreover, if schemes improve co-ordination and focus greater attention on patient needs, there is a good chance that co-ordinated care "reveals rather than resolves" unmet need. Overall, although this may be a beneficial outcome for society, it may increase, rather than reduce, total costs. Therefore, decision makers would need to recognise that there may be trade-offs between different objectives, both in the short and longer term.

http://www.york.ac.uk/media/che/documents/papers/researchpapers/CHERP97_Financial_mechanisms_integrating_funds_healthcare_social_care_.pdf

Grafton Group

Clinical contracting considerations.

[London] : [PwC], 2013

Web publication

Commissioning is a complex process involving a number of stages. At its simplest, it is the process of planning, agreeing and monitoring services; however, this simple definition conceals the complexity involved. A key task within commissioning is the actual procurement of clinical services. This involves the commissioner negotiating and agreeing a contract for the clinical services to be delivered with the provider. There are a range of different forms of contracts that can be used, ranging from a single provider contract to an alliance agreement involving a number of providers working collaboratively in the delivery of clinical services. The Grafton Group has identified contracting and choosing the appropriate contract mechanism as an area of concern, and an area requiring further guidance. This paper seeks to identify the main contracting mechanisms for use when procuring clinical services and to provide a "road map" as to when the differing contracting mechanisms may be best applied. It also considers some of the procurement issues that CCGs will need to consider as part of this process.

http://www.pwc.co.uk/en_UK/uk/government-public-sector/healthcare/assets/pwc-grafton-group-contracting.pdf

Bennett, Laura and Humphries, Richard
The King's Fund

Making best use of the Better Care Fund : spending to save?

London : The King's Fund, 2013

Web publication

The creation of the £3.8 billion Better Care Fund offers a real opportunity to lay the foundations for a much more integrated system of health and care. This paper summarises the evidence from work by The King's Fund and other research about which approaches are likely to offer commissioners maximum impact in a way that will benefit both the NHS and social care.

http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/making-best-use-of-the-better-care-fund-kingsfund-jan14.pdf

Associated documentation: <http://www.kingsfund.org.uk/Node/4323>

Ham, Chris and Walsh, Nicola
The King's Fund

Lessons from experience : making integrated care happen at scale and pace.

London : The King's Fund, 2013

Web publication

The aim of this paper is to support the process of "making it happen" by summarising the steps that need to be taken to make integrated care a reality; we have drawn on our own work and that of others in areas where local leaders have identified integrated care as a core strategy. At the end of the paper we acknowledge that changes to national policy and to the regulatory and financial frameworks are needed for local leaders to fully realise a vision of integration.

<http://www.kingsfund.org.uk/publications/making-integrated-care-happen-scale-and-pace>

National Collaboration for Integrated Care and Support

Integrated care and support : our shared commitment.

[London] : DH, 2013

Web publication

This framework document on integration, signed by 12 national partners, sets out how local areas can use existing structures such as Health and Wellbeing Boards to bring together local authorities, the NHS, care and support providers, education, housing services, public health and others to make further steps towards integration.

<https://www.gov.uk/government/publications/integrated-care>

ISBN: 9781909890039

Glasby, Jon, et al.

National Institute for Health Research. School for Social Care Research

New conversations between old players? : the relationship between general practice and social care in an era of clinical commissioning.

SSCR Scoping Review

London : SSCR, 2013

Web publication

This review finds that general practice and adult social care will have to overcome a number of challenges to forge the type of strategic relationships that are needed now that GPs have taken over the lead role in commissioning local NHS services through Clinical Commissioning Groups. This review of the evidence on joint working has highlighted some key issues to be addressed, including the practical difficulties of engaging GPs in inter-agency collaborations; a lack of mutual understanding; different priorities and geographical boundaries; and turbulent policy contexts in both sectors.

http://sscr.nihr.ac.uk/PDF/SSCRRResearchFindings_11_.pdf

Dickinson, Helen, et al.
University of Birmingham

Joint commissioning in health and social care : a exploration of definitions, processes, services and outcomes.

SDO project ; 08/1806/260 (January 2013)

Southampton : National Institute for Health Research, 2013

Web publication

This report looks at examples of joint commissioning across five case study sites which all have different types of joint commissioning arrangements in place. It is based on a study that aimed to use practical examples in order to develop a definition of joint commissioning and to scope out the ways in which integrated commissioning can be implemented.

Full report:

http://www.netscc.ac.uk/hsdr/files/project/SDO_FR_08-1806-260_V02.pdf

Executive summary:

http://www.netscc.ac.uk/hsdr/files/project/SDO_ES_08-1806-260_V01.pdf

Associated documentation:

<http://www.netscc.ac.uk/hsdr/projdetails.php?ref=08-1806-260>

London Councils

Improving health and social care in London : supporting integrated commissioning.

London : London Councils, 2012

Web publication

This report finds that joining up support services for health and social care services could mean that there is as much as £50 per head available which can be used to support local planning and decision making. It would also mean that the boroughs and newly formed clinical commissioning groups would not waste public money and time replicating work.

<http://www.londoncouncils.gov.uk/London%20Councils/1480Integratedcommissioning5.pdf>

Associated documentation:

<http://www.londoncouncils.gov.uk/policylobbying/healthadultservices/socialcare/integratedcommissioningreport.htm>

NHS Confederation

Encouraging integrated working to improve services for adults and older people.

London : NHS Confederation, 2012

Web publication

A key duty on health and wellbeing boards is to promote integration and partnership across local government, public health, the local NHS and the third sector, with the ambition of improving local services and tackling health inequalities. Integrated working involves a crosscutting, wide-ranging and holistic approach. It is as much about joint working and relationship building as about joint commissioning. It means looking beyond the provision of health and social care services and considering the wider spectrum of issues that impact on people's health, independence and wellbeing outcomes.

<http://www.nhsconfed.org/Publications/Documents/encouraging-integrated-working.PDF>

Resources for health and wellbeing boards:

<http://www.nhsconfed.org/Publications/Pages/lresources-health-wellbeing-boards.aspx>

NHS Confederation, et al.

Working with local government : a guide for GP commissioners.

London : NHS Confederation, 2012

Web publication

This short guide summarises some of the need-to-know structural and operational features of local government and presents advice from GPs, NHS managers and local councillors on the important cultural stumbling blocks that often occur when working across the NHS-local government divide.

<http://www.nhsconfed.org/Publications/Documents/government-guide-commissioners.pdf>

NHS Confederation, et al.

Working with GP commissioners : a guide for local councillors and officers.

London : NHS Confederation, 2012

Web publication

This short guide summarises some of the major changes in NHS commissioning and what this means for partners in local government. It presents advice from GPs, NHS managers, local councillors and officers on how to handle some the differences that often arise when working across the NHS-local government divide.

<http://www.nhsconfed.org/Publications/Documents/gp-commissioners-councillors-officers.pdf>

Corrigan, Paul and Hicks, Paul

NHS Right Care

What organisation is necessary for commissioners to develop outcomes based contracts? : the COBIC case study.

The Right Care casebook series ; (October 2012)

[London] : Right Care, 2012

Web publication

This case study is a specific example of how commissioners can catalyse the creation of integrated care by introducing incentives into the market in new and innovative ways and using contractual forms that are new to the NHS. In this case study COBIC contracting replaces a variety of fragmented individually negotiated contracts with a single integrated tender, forcing providers to respond differently. Existing suppliers have either to radically change the way in which they work with each other or forgo applying for the contract. The COBIC contractual form ensures that the organisation that wins the contract becomes responsible for delivering integrated services and improving outcomes for services users. The contract creates a single organisation that has the responsibility for integrating what are very fragmented services, often delivered by multiple NHS organisations whose work is poorly and inefficiently coordinated.

http://www.rightcare.nhs.uk/downloads/RC_Casebook_cobic_final.pdf

ISBN: 9781905030484

Ham, Chris, et al.

Nuffield Trust

Commissioning integrated care in a liberated NHS.

London : Nuffield Trust, 2011

Web publication

This report sets out the findings of research that sought to understand how NHS commissioners – those organisations charged with planning, funding and purchasing care – use their leverage to develop services that are better integrated for patients, and hence capable of delivering much-needed efficiencies for the NHS.

<http://www.nuffieldtrust.org.uk/sites/files/nuffield/commissioning-integrated-care-in-a-liberated-nhs-report-sep11.pdf>

JOURNAL ARTICLES

McGough, Robert and Dunbar-Rees, Rupert

Everyone's a winner.

Health Service Journal 2013; 123 (6376): 26-27 (22 November 2013)

An emerging type of contract is changing the way healthcare does business. There is a growing acceptance that existing NHS contracts are not going to deliver the level of integration, outcomes and efficiency savings we desperately need. The phrase on everyone's lips right now is "alliance contracting". But are alliance contracts the solution? What are the basics every commissioner and provider should know before going down this route? [Introduction]

Shaw, Sara E., et al.

The work of commissioning : a multisite case study of healthcare commissioning in England's NHS.

BMJ Open 2013; 3 (9): (5 September 2013)

OBJECTIVE: To examine the work of commissioning care for people with long-term conditions and the factors inhibiting or facilitating commissioners making service change. **DESIGN:** Multisite mixed methods case study research, combining qualitative analysis of interviews, documents and observation of meetings. **PARTICIPANTS:** Primary care trust managers and clinicians, general practice-based commissioners, National Health Service trust and foundation trust senior managers and clinicians, voluntary sector and local government representatives. **SETTING:** Three "commissioning communities" (areas covered by a primary care trust) in England, 2010-2012. **RESULTS:** Commissioning services for people with long-term conditions was a long drawn-out process involving a range of activities and partners. Only some of the activities undertaken by commissioners, such as assessment of local health needs, coordination of healthcare planning and service specification, appeared in the official "commissioning cycle" promoted by the Department of Health. Commissioners undertook a significant range of additional activities focused on reviewing and redesigning services and providing support for implementation of new services. These activities often involved partnership working with providers and other stakeholders and appeared to be largely divorced from contracting and financial negotiations. At least for long-term condition services, the time and effort involved in such work appeared to be disproportionate to the anticipated or likely service gains. Commissioners adopting an incremental approach to service change in defined and manageable areas of work appeared to be more successful in terms of delivering planned changes in service delivery than those attempting to bring about wide-scale change across complex systems. **CONCLUSIONS:** Commissioning for long-term condition services challenges the conventional distinction between commissioners and providers with a significant amount of work focused on redesigning services in partnership with providers. Such work is labour-intensive and potentially unsustainable at a time of reduced finances. New clinical commissioning groups will need to determine how best to balance the relational and transactional elements of commissioning. [Abstract]

<http://bmjopen.bmj.com/content/3/9/e003341.full>

Chandok, Raj, et al.

How Ealing Health Networks can contribute to efficient and quality healthcare.

London Journal of Primary Care 2013; 5 (2): 62-64

We describe how the formation of Health Networks in Ealing leads to improved outcomes for patients by the coordination of the care they receive by health and social care professionals. [Abstract]

<http://www.radcliffehealth.com/ljpc/article/how-ealing-health-networks-can-contribute-efficient-and-quality-healthcare>

Dickinson, Helen, et al.

How effective is joint commissioning? : a study of five English localities.

Journal of Integrated Care 2013; 21 (4): 221-232

PURPOSE: This paper reports research undertaken into the practices, processes and outcomes of joint commissioning at five English localities. This paper reflects on the implications of this study for the practice of joint commissioning. **DESIGN/METHODOLOGY/APPROACH:** A case study approach to the research was adopted where the assumptions about what joint commissioning should deliver in five "best practice" sites. These hypothesised relationships about organisational processes, services and outcomes were then tested through the collection of primary and secondary data. Methods of data collection included an online tool based on Q methodology, documentary analysis, interviews and focus groups. **FINDINGS:** Very little of what we found seemed to relate directly to issues of joint commissioning. Respondents often spoke of joint commissioning conflating it with issues of commissioning or joint working more generally. We found a variety of different definitions and meanings of joint commissioning in practice suggesting that this is not a coherent model but varies across localities. Little evidence of improved outcomes was found, due to practical and technical difficulties. **RESEARCH LIMITATIONS/IMPLICATIONS:** Joint commissioning is not a coherent model and is applied in different ways across different contexts. As such we may need to ask very different questions of joint commissioning to those typically asked. **PRACTICAL IMPLICATIONS:** It is important that local sites are clear about what they are trying to deliver through joint commissioning or else risk that it becomes an end in itself. Some of the current reforms taking place in health and social care risk pulling apart existing relationships that have taken significant time and resource to develop. **ORIGINALITY/VALUE:** This is one of the first large-scale studies of joint commissioning conducted in England. [Abstract]

Saeed, Maha

Improving public health/primary care partnership : a perspective from NHS Hounslow.

London Journal of Primary Care 2012; 4 (2): 100-103

The purpose of this paper is to set out the importance of public health role for clinical commissioning groups as they develop their role as commissioners and work to improve health and reduce inequalities. The paper describes the experience of Public Health Hounslow that supports the local authority (Local Borough of Hounslow) and the emerging Hounslow Clinical Commissioning Group (HCCG). I review the roles of public health and primary care within the context of the current NHS reforms, and set out the rationale for the best ways to facilitate public health / primary care partnerships. [Abstract]

<http://www.radcliffehealth.com/ljpc/article/improving-public-health-primary-care-partnership-perspective-mhs-hounslow>

WEB RESOURCES

Integrated Clinical Commissioning Network

<http://www.networks.nhs.uk/nhs-networks/clinical-commissioning-community/iccn>

The King's Fund

- **Commissioning**
<http://www.kingsfund.org.uk/topics/commissioning>
- **Integrated care**
<http://www.kingsfund.org.uk/topics/integrated-care>
- **Presentations from the 27 March 2014 conference, Commissioning and Contracting for Integrated Care**
<http://www.kingsfund.org.uk/events/commissioning-and-contracting-integrated-care>

Monitor – Enabling integrated care

<http://www.monitor.gov.uk/regulating-health-care-providers-commissioners/enabling-integrated-care>

NHS Clinical Commissioners

<http://www.nhscc.org/>

NHS Confederation and PWC - Developing new approaches to contracting for integrated care

Documents from a workshop held 20 February 2014

<http://www.nhsconfed.org/Networks/communityhealth/events/Pages/Developingnewapproachestcontractingforintegratedcare.aspx>

NHS England

- **Commissioning**
<http://www.england.nhs.uk/ourwork/commissioning/>
- **Integrated care and support**
<http://www.england.nhs.uk/ourwork/part-rel/transformation-fund/>

Nuffield Trust

- **Commissioning**
<http://www.nuffieldtrust.org.uk/our-work/commissioning>
- **Integrated care**
<http://www.nuffieldtrust.org.uk/our-work/integrated-care>

Royal College of General Practitioners – Centre for Commissioning

<http://www.rcgp.org.uk/revalidation-and-cpd/centre-for-commissioning.aspx/>

The Symphony Project – South Somerset Healthcare Federation

http://www.sshf.org.uk/clinical_commissioning.php