

# *PHN webinar training program*

Prepared for the Australian Government  
Department of Health

*Screen version*

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An abridged version for North Coast Clinical Councils, edited by Dan Ewald. 18-5-16

# 1.1 PHN commissioning framework overview

Primary Health Networks (PHNs) have been established with the key objectives of: increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes; and improving coordination of care to ensure patients receive the right care in the right place at the right time. The commissioning framework has been developed so that PHNs can ensure that their commissioning approach is consistent, comparable and measurable outputs and outcomes.

## Evaluation

Understand and evaluate the quality of delivery and the impact that it is having against agreed standards and PHN goals

## Managing performance

Acquire and analyse information about provider performance (including the broader relationship) to monitor, assess and deliver quality

## Shaping the structure of supply

Stimulate a thriving and sustainable market to meet the ongoing health needs of the population and respond to top commissioners' requirements.



## 1.1 Needs assessment overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>A needs assessment is undertaken to identify <b>characteristics, health and healthcare needs of a population through epidemiological and qualitative approaches.</b></p> <p>It will identify and prioritise <b>health and service needs (current and gaps)</b> and opportunities for activity and establish the basis upon which Annual Planning can be conducted.</p>	<ul style="list-style-type: none"> <li>• Understanding the population through:           <ul style="list-style-type: none"> <li>- <b>Quantitative</b> approaches</li> <li>- <b>Qualitative</b> engagement ...to assess the health care needs</li> <li>- Understand <b>overall population characteristics and health needs</b></li> <li>- Understand <b>existing service provision</b></li> <li>- Assess <b>gaps, over supply or inadequate service delivery.</b></li> </ul> </li> <li>• <b>Prioritising</b> the unmet needs</li> <li>• <b>Developing options</b> to best address health care need ...particularly for ATSI populations.</li> </ul>	<ul style="list-style-type: none"> <li>• A thorough <b>understanding</b> of           <ul style="list-style-type: none"> <li>- your population and its needs</li> <li>- existing provision and how this compares with need</li> </ul> </li> <li>• <b>Buy in</b></li> <li>• <b>Engaged and empowered community</b> through consultation to understand health needs</li> <li>• <b>Options and priorities</b>, supported by the underpinning health and service needs.</li> </ul>

# 1.2 Needs assessment activities and outcomes

 **Analysis**

 **Health needs analysis**

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

 **Service needs analysis**

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

 **Priorities and options**

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

 **Assessment**

**Understand the PHN population**

Understanding the population through quantitative data analysis and qualitative engagement with the community and clinicians

**Analyse health and service needs**

Analyse health and service needs, assess gaps, over supply or inadequate service delivery to inform options

**Analyse health and service needs**

Develop options and priorities based on analysis of health and service needs and priority setting processes

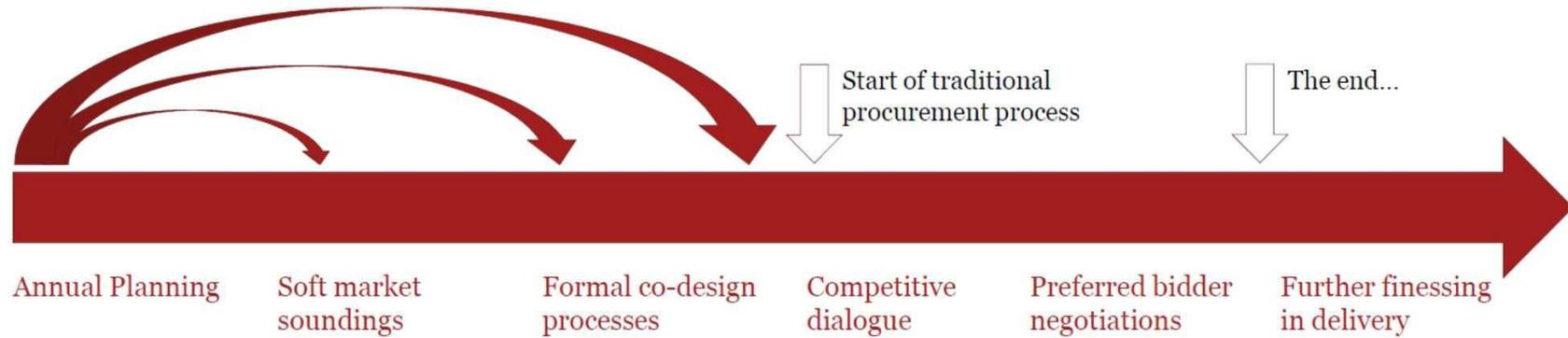
## 2.1 Annual planning overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>The Plan accounts for:</p> <ul style="list-style-type: none"> <li>• Impact</li> <li>• Evidence of similar activities elsewhere</li> <li>• Market</li> <li>• Cost</li> <li>• Available funding</li> <li>• Value for money (including impact)</li> <li>• Timing</li> <li>• Synergies and dependencies</li> <li>• High level objectives</li> <li>• Alignment with local PHN priorities, agreed national priorities and key performance indicators.</li> </ul> <p><b>Maximise impact</b> for the \$ Secure <b>alignment / congruence</b></p>	<ul style="list-style-type: none"> <li>• Developing the <b>candidates</b> for addressing the gaps identified through the needs assessment</li> <li>• <b>Prioritising</b> the candidates for investment based on objective criteria</li> <li>• Ensuring that the plan is <b>coherent</b> and addresses the appropriate <b>dependencies</b>, including of and on the market</li> <li>• Establishing the <b>appropriate governance</b> to support commissioning in the PHN.</li> <li>• Preparing the <b>Annual Plan and the Activity Work Plan 2016-18</b></li> </ul>	<ul style="list-style-type: none"> <li>• A <b>planned</b> approach to <b>prioritised activities</b> that meet the needs of the population including addressing factors like resources, cost, location</li> <li>• An Annual Plan that is <b>affordable, maximises potential impact and that will inform the design and contracting of services.</b></li> </ul>

## 3.1 Designing & contracting services overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>The purpose of this phase is to:</p> <ul style="list-style-type: none"> <li>• Identify the <b>required outcomes/services</b> to be specified</li> <li>• Include <b>design</b> at the appropriate stage</li> <li>• <b>Working with markets</b></li> <li>• <b>Procure solutions</b> from appropriate providers</li> <li>• Effect the supporting <b>contracts</b>.</li> </ul> <p>To <b>commission</b> rather than deliver.</p>	<ul style="list-style-type: none"> <li>• <b>Commissioning strategy</b> in place</li> <li>• <b>Co-create or co-design</b></li> <li>• Maximise the <b>innovation and deliverability</b> of solutions.</li> <li>• Develop <b>market capacity</b> if required, and if possible, as a precursor to broader market making</li> <li>• <b>Contract for, or procure</b>, the desired services/interventions/solutions using appropriate methods</li> <li>• <b>Decommissioning</b> of existing services where they are unwarranted</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Commissioning strategy</b></li> <li>• Clarity of <b>delivery requirements</b> – expressed as specifications</li> <li>• Understanding and development of <b>markets</b></li> <li>• <b>Co-created solutions</b>, where that is appropriate</li> <li>• Appropriate <b>procurement or contracting approaches</b> being utilised</li> <li>• <b>Contracts effected</b> with providers to secure the specified needs</li> <li>• Management of issues such as <b>probity and conflicts of interest</b>.</li> </ul>

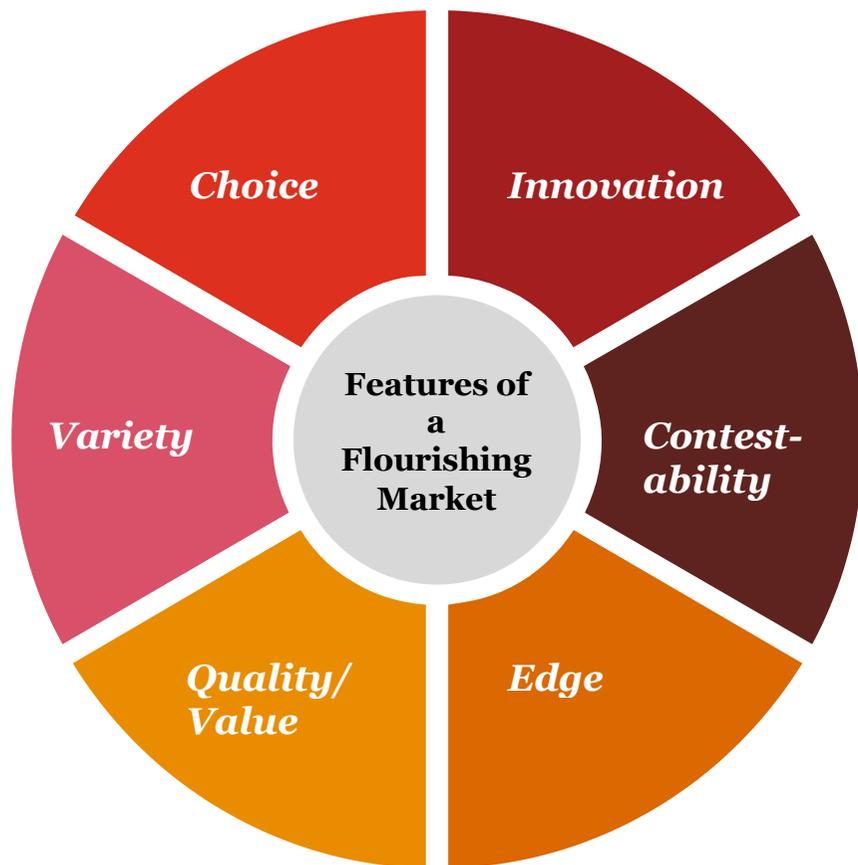
## 3.2 *Designing continuum*



## 4.1 Shaping the structure of supply overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>A <b>key phase</b> of the commissioning framework.</p> <p>Without a <b>flourishing supplier community</b>, PHNs will not maximise the <b>innovation</b> or <b>delivery</b> of interventions or services that meet needs; nor <b>contestability</b>.</p> <p><b>Relationships.</b></p> <p>Market understanding informs so much!</p> <p><b>An effective market will lead to effective commissioning, delivery and outcomes.</b></p> <p>The opposite is equally true.</p>	<ul style="list-style-type: none"> <li>• Understanding and assessing the market</li> <li>• Constant ‘scanning’</li> <li>• Using care design &amp; co-creation to work with markets to derive better solutions</li> <li>• Understanding and overcoming barriers to market entry</li> <li>• Making markets and capacity building</li> <li>• Maintaining markets – supplier management</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Markets assessed</b> based on what matters.</li> <li>• <b>Identifying and overcoming barriers</b> to market entry to support successful markets.</li> <li>• An <b>established and flourishing market.</b></li> <li>• Improved             <ul style="list-style-type: none"> <li>- <b>value for money</b></li> <li>- <b>choice</b></li> <li>- <b>innovation</b></li> <li>- <b>disruption</b></li> </ul> </li> </ul>

## 4.2 Shaping the structure of supply activities and outcomes



### *Developing a flourishing market*

- **Taking responsibility!**
- **Selling the PHN**
- **Embracing and welcoming in**
- **Challenging the norm**
- Moving to **outcomes** and developing the market to respond
- Being **creative about gaps** – other sectors/industries?
- Taking **leading practice** and **provider-thinking** from elsewhere (Australia and globally – many successful health organisations are open to providing mentoring)
- Understanding and responding to the **barriers to entry**
- Determining and delivering the necessary **support to overcome** barriers
- Making it **‘worth their while’**

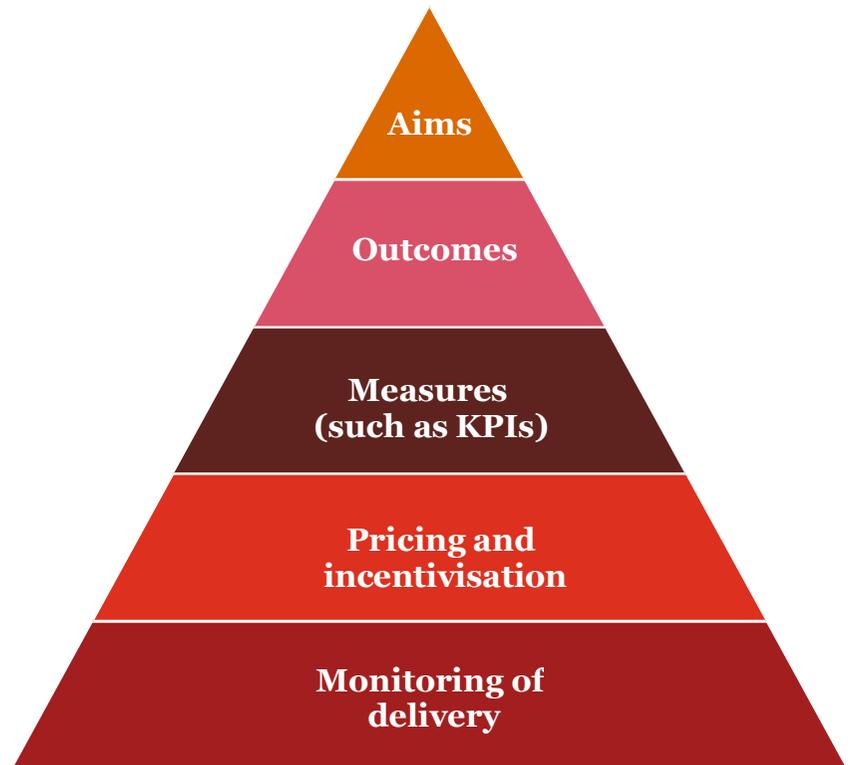
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## 5.1 Managing performance overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>To ensure the PHN:</p> <ul style="list-style-type: none"> <li>• Has <b>delivered</b> what was <b>contracted</b></li> <li>• Is alive and able to respond to <b>'partnership health'</b></li> <li>• Can <b>manage change</b> effectively</li> <li>• Gets what it is <b>contracting and paying</b> for...</li> </ul> <p>To go beyond traditional contract management – the <b>'social contract'</b> between providers and commissioners.</p>	<ul style="list-style-type: none"> <li>• Acquiring and analysing <b>information</b> about provider performance</li> <li>• Building and maintaining <b>relationships</b></li> <li>• <b>Continuous improvement</b></li> <li>• Building <b>relationships, trust and mutual goals</b></li> <li>• Developing key performance indicators (<b>KPIs</b>)</li> <li>• Understanding the role of <b>patient advocates and clinicians</b></li> <li>• Supplier <b>relationship 'management'</b> – and reacting accordingly</li> <li>• <b>Contingency planning</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Sustainable relationships and delivery</b> with the service provider to achieve or meet the desired outcomes and identified needs</li> <li>• <b>Genuine, accurate and real time monitoring of performance</b> through formal reporting mechanisms and soft intelligence gathered through clinician and community engagement</li> <li>• <b>Better and more sustainable markets and commissioned solutions.</b></li> </ul>

## 5.2 Managing performance activities & outcomes

*Successful contract management stems from getting the early steps right and securing goal congruence*



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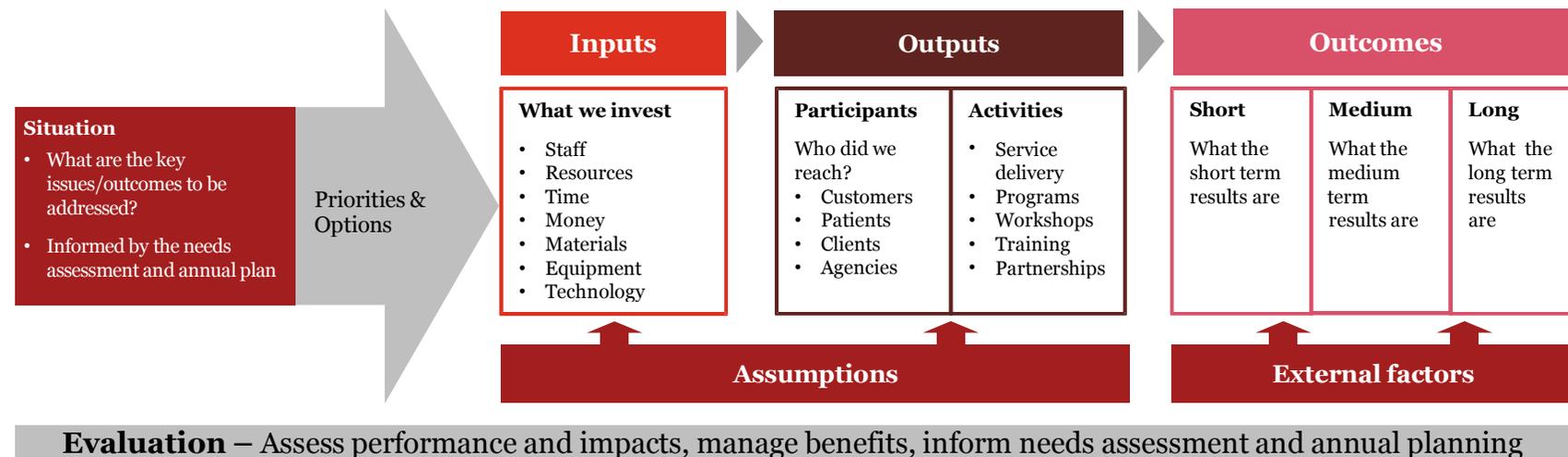
### *Developing a partnership approach*

- Manage **supplier relationships** utilising appropriate partnership assessment approaches
- **Manage contracts** so they are in line with contract objectives and customer (end user) requirements
- Monitor **contract performance and compliance** in accordance with the contract, contract management plan, risk management plan and organisational policies and procedures (onus on the provider to do this)
- **Change request** management
- **Fostering 'self-management'**
- **Skills and capacity** required for: contract management; relationship management; brokerage; working through alternatives and finding solutions focusing on the big picture

## 6.1 Evaluation overview

 <b>Why we do it</b>	 <b>What is involved</b>	 <b>What you will achieve</b>
<p>To understand and <b>evaluate the quality of delivery and the impact</b> it is having against agreed standards.</p> <p>To <b>inform ongoing or future needs assessment, planning and procurement/contracting as part of a continuous commissioning</b> approach, designed to meet the PHN objectives and agreed national priorities.</p>	<ul style="list-style-type: none"> <li>• Developing an <b>evaluation framework</b> that is robust and appropriate</li> <li>• <b>Using the evaluation framework</b> to assess performance and impacts</li> <li>• Managing <b>benefits realisation</b> to ensure real delivery of what is required</li> <li>• <b>Impact, causality, timeframes</b></li> <li>• <b>Consultation</b> – engagement and involvement of stakeholders.</li> <li>• Remember, it's an <b>iterative process...</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Evaluation of services/interventions</b> provided and their impacts</li> <li>• A better <b>understanding of determinants</b></li> <li>• Informing your <b>broader PHN performance and evaluation</b></li> <li>• A quantified assessment of benefits of your <b>return on investment</b></li> <li>• <b>The ability to iterate</b> – to use the evaluation outputs to inform the needs assessment and annual planning phase for continuous improvement.</li> </ul>

## 6.2 Evaluation activities and outcomes



### Considerations for evaluation

- **Having the end in mind** – having clearly established outcomes enables the commissioner to measure success
- Good evaluation is **resource intensive**
- **Program Logic** approaches gaining traction
- Consider **short, medium and long term** measurement
- **External or exogenous factors** and **causality**
- Build in strong **community and clinical engagement** to obtain qualitative results
- Consider the IHI **Triple or Quadruple Aims** in defining evaluation criteria and measurement

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