

Hospices working with commissioners – mutually beneficial or a necessary evil?

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Background

This is an example of how, through effective partnership working with commissioners, one hospice demonstrated its unique organisational capabilities to influence commissioning and secure investment in end-of-life care services. Following the scoping of gaps in services, one hospice ran a 'proof of concept' initiative to evidence the need for daytime spells of hospice care at home. The hospice subsequently produced an investment proposal that was accepted by two local CCGs.

Aim

To demonstrate the value of partnership working and the unique organisational capabilities of hospices that afforded the freedom to test concepts and to challenge and influence future commissioning.

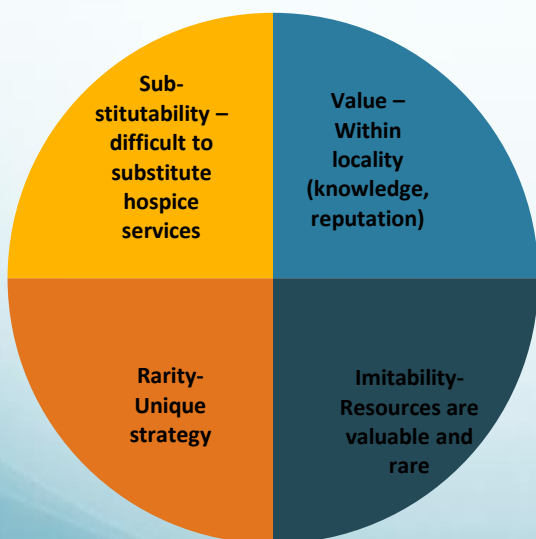
Methodology to scope gaps in care

Semi structured interviews with:

- GPs, DNs, community matrons
- CCG leads and commissioners (6)
- Survey Monkey questionnaire to hospice directors (8)

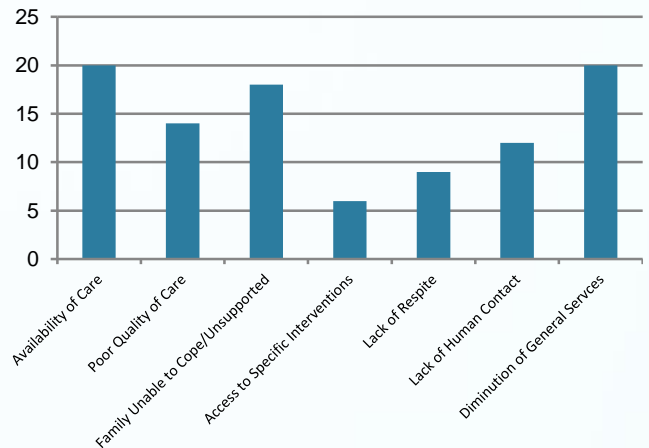
Specific organisational capabilities of hospices

As described in the VRIN model (Johnson et al 2014)



Results

Interviews with 20 GPs, District Nurses and community matrons identified the following reasons for the breakdown in care at home and incidence of avoidable hospital admissions:-



Interviews with CCG leads and commissioners (6) identified the themes to the challenges with current commissioning processes:

The following challenges were identified:

- 'Commissioning intentions' too prescriptive
- Economically driven
- Potential for hubris behaviour;
- Pressure to make savings
- Developments require decommissioning in other areas
- Hospices do not fit the NHS contractual framework

Commissioner understanding of hospices within the Third Sector:

- Limited experience in commissioning hospice services
- Limited awareness of scope of services or strategy
- Confusion over funding arrangements and independent status

"The hospice is very valuable to the CCGs in their financial contribution and quality of service"

Conclusions

- Through effective partnerships, hospices can influence the development and investment in palliative and EOL services.
- The hospice's unique organisational capabilities are difficult to replicate and place it in a strong position to influence commissioning.
- The hospice may not be fully understood but is well respected locally.