



Healthcare Solutions Overview Brochure

Our solutions fuel transformation by enabling you to increase value and improve patient outcomes

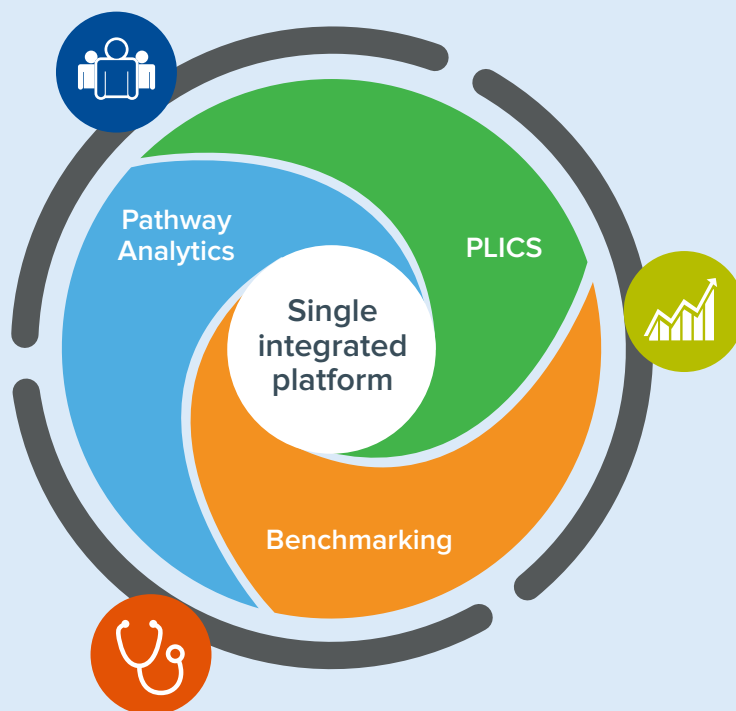
Introduction

Thank you for taking the time to review this brochure. We have produced it to provide you with a high level overview of key solutions that will help you **drive efficiencies, reduce cost and clinical variation and improve patient outcomes** for your organisation.

Our primary goal is to provide you with actionable insight designed to support value-based decision-making to enable positive change. We recognise that every NHS Trust in the country has the very tough task of reducing cost and achieving efficiency targets whilst improving patient care.

Our dedicated & experienced team will work with you to integrate real-world evidence, analytics, accurate financial and patient activity reporting supported by strategic consulting. This powerful combination is designed to provide you with **actionable insight** designed to support value-based decision-making. This approach speeds up your decision-making process and provides a common language for clinicians and managers to improve the healthcare outcomes of your patients.

The NHS Solutions Team



Contents

02 Analytics and Provision of Actionable Insight

Partnering with you, we analyse your operational, financial, quality and strategic data assets to identify opportunities for service transformation. In addition to delivering deep dive analytics, our team of experts engages with your Clinical and Operational teams to uncover unwanted variation and overspend and share with you what needs to be achieved to realise efficiencies and improvements. Furthermore we will deliver powerful predictive analytics to help you avoid future chances of overspend. We are so confident in our capabilities that we will **guarantee** that savings will be achieved.

02 PCB Analytics' Bureau (PAB)

04 Care Pathway Analytics (CPA)

05 Benchmarking

We provide you with the ability to compare your financial and operational activity **performance** with peers across the country. This is a superb opportunity for you to identify and share clinical and financial best practice with other NHS organisations. Our benchmarking capabilities span Acute and Mental Health providers and you can also benchmark your drugs utilisation to compare clinical prescribing behaviour across the NHS and again identify and share best practise. We continue to develop other Benchmarking services and would be delighted to share these with you.

05 Acute and Mental Health Patient Cost Benchmarking (PCB)

06 Drugs Utilisation Benchmarking (DUB)

07 Costing and Service Line Reporting

We have integrated the power houses of Albatross and Healthcost to provide you with the very best Patient Level Information Costing Solution (PLICS) in the market today: market leading customer support, easy to use applications and most importantly powerful end user reporting supporting key stakeholders: clinicians, executives and finance. Our costing solution is designed to allow key stakeholders to quickly and easily identify unwarranted clinical variation and identify where changes should be made to ensure you achieve maximum cost efficiency combined with optimal patient outcomes. We **guarantee** we will identify significant clinical variation opportunities or **your money back!**

07 Patient Level Information Costing (PLICS)

09 Integrated Service Line Reporting (iSLR)

Analytics and Provision of Actionable Insight

We analyse your operational, financial, quality and strategic data assets to identify opportunities for service transformation.

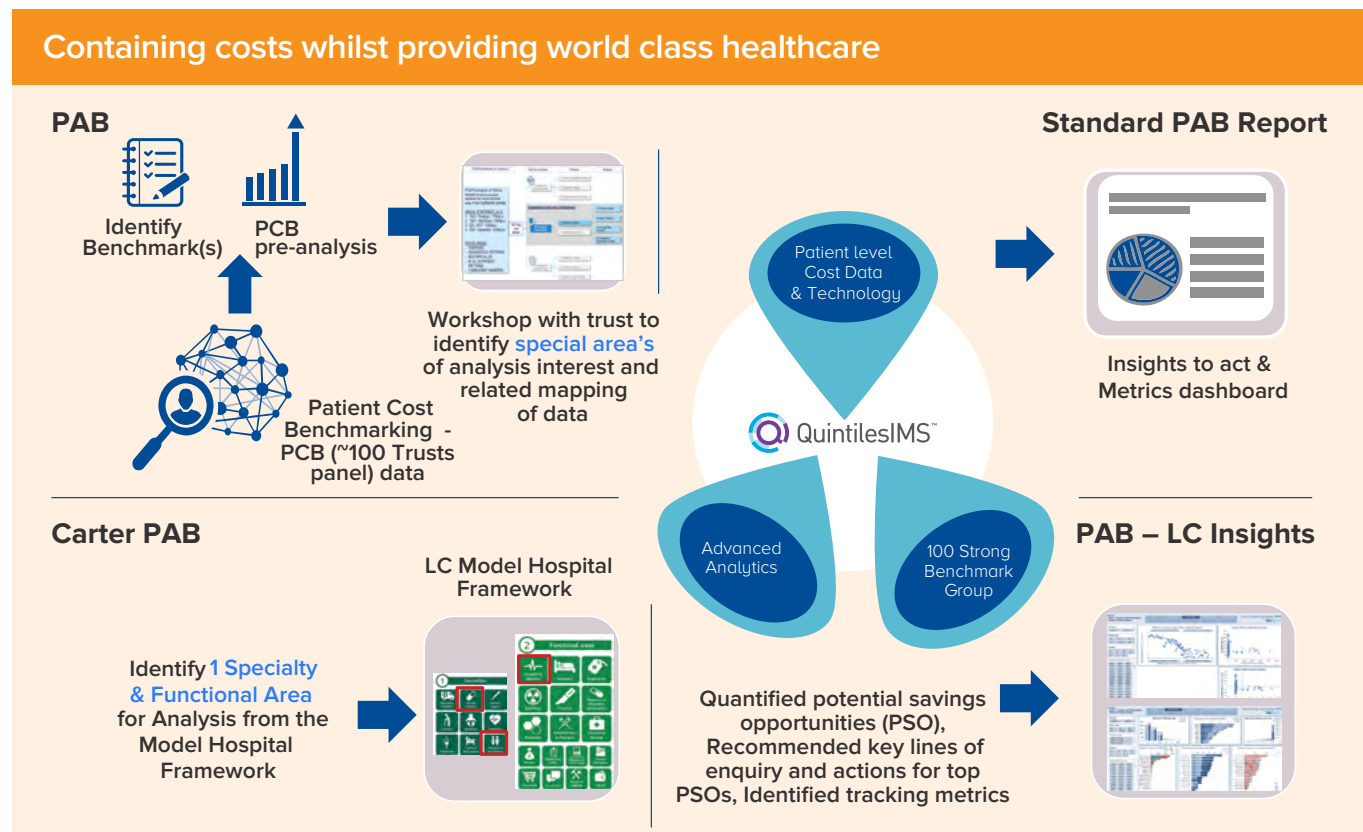
In addition to delivering deep dive analytics, our team of experts engages with your Clinical and Operational teams to uncover unwarranted variation and overspend and share with you what needs to be achieved to realise efficiencies and improvements. Furthermore we deliver powerful predictive analytics to help you avoid future chances of overspend. We are so confident in our capabilities that we **guarantee** that savings will be achieved.

PCB Analytics Bureau (PAB)

Identify cost saving and efficiency improvement opportunities from actionable insights specific to your Trust, based on national standards for service transformation

The burden of making substantial cost savings and improving efficiencies whilst providing effective and quality care services is an ongoing challenge for NHS Trusts. The will is there, but many Trusts face constraints in time and resources in applying the rigorous analytics required to produce intelligence to support effective and safe service transformation. When you subscribe to PCB – Patient Cost Benchmarking, you join a community of over 100 Trusts who share nationally standardised patient cost information and activity in the UK and a growing number abroad.

PCB Analytics Bureau (PAB) uncovers overspend and variation in clinical practices using national PCB data and internal data aligned to specific imperatives (such as - NHS England, Lord Carter, NHSI, SIP, QUIPP).



PAB Services

PAB delivers actionable recommendations that:

1. Identify drivers of cost and inefficiencies
2. Improve service performance
3. Improve care pathways (ED, referral, chronic)

During a PAB engagement, data collected throughout the patient journey is brought together with patient level activity cost data as well as medicines' usage and other trust system data to develop targeted insights. At each stage PAB is keenly focussed on identifying savings and efficiency opportunities.

Benchmarking provides a horizon scan for variation against best practice, while drill downs analyse and draw out recommendations that aim to feed directly into your Trust's strategic and tactical goals.

PAB Final Report

PAB is designed to provide actionable insights such as:

- **Re-admissions:** Effect 10% drop in readmissions by recruiting 2 haematology ED nurses
- **DNA:** Reduce DNA by up to 5% with mail reminders and up to 10% with phone calls to contain costs of £500k/year

Final PAB recommendations and a report is co-developed and thoroughly validated with clinical and non-clinical stakeholders for relevance, alignment to priorities and qualified for service transformation.

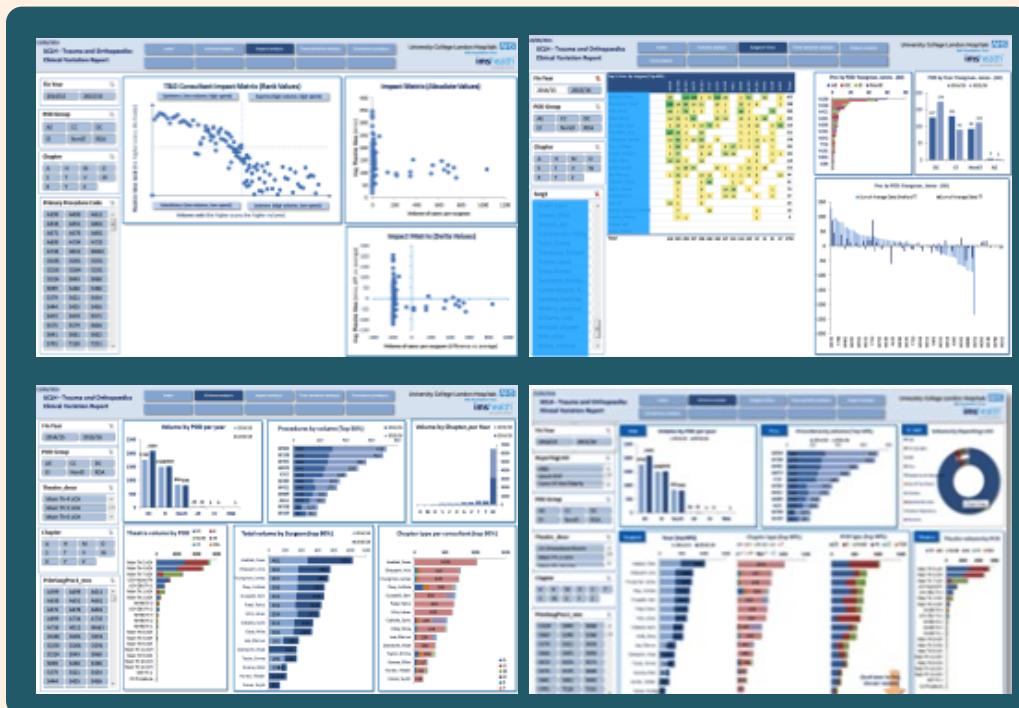
PAB Reports

PAB: A 6-7 week deep dive advanced analysis of a speciality area led by a comprehensive stakeholder engagement in the form of a PAB workshop

Carter recommendations PAB:

A 3-4 week advanced analysis of PCB data to uncover potential saving opportunities related to Lord Carter recommendations

Insights from patient level cost data and benchmarks



Care Pathway Analytics (CPA)

Reducing unwarranted variation in treatment pathways

How Cambridgeshire & Peterborough CCG consulted Care Pathway Analyser (CPA) to provide insight into the wide variation in care pathways

Cambridge & Peterborough CCG

4 x providers, high patient throughput, wide treatment variations
= unstructured and unprocessed data

With the support of **Care Pathway Analyser (CPA)**

Local & National Data

+

Visual Information

=

Actionable Insights

=

Better Care

+

£500K Savings

!

Variation in treatment brings challenges of cost containment, adherence to NHS best practice service provision and discrepancy across clinicians and providers. It is critical for CCGs and providers to tackle this variation, and thus reduce spend to provide a better, quicker care service that offers good value.

C&P CCG encompasses four providers with very high patient throughput for orthopaedics and a wide variation in treatment. As hip and knee surgery accounted for the highest spend it was crucial to reduce variation in treatment.

Although C&P CCG had a wealth of data, it was impossible to present it in a meaningful and actionable way. Care Pathway Analyser (CPA) helped process the data and turn it into valuable insights. By redressing the imbalance between the commissioning group and providers, the aim was to facilitate a more collaborative approach and win-win outcome in terms of delivering quality treatment whilst achieving cost savings.



“QuintilesIMS provided me with the insight to see where CIP and QIPP could be delivered by commissioning shorter pathways in line with best practice.

“The benchmark capabilities, relying both on national HES (hospital episode statistics) and local data, provide the insights to achieve high quality affordable care”

Debbie Oades Wells
NHS Cambridgeshire and Peterborough CCG

Benchmarking

Comparing your financial and operational activity performance with peers across the country to identify and share clinical and financial best practice with other likeminded NHS organisations.


Our benchmarking capabilities span Acute and Mental Health providers and you can also benchmark your drugs utilisation to compare clinical prescribing behaviour and again identify and share best practice.

Acute and Mental Health Patient Cost Benchmarking (PCB)

Identifying cost and efficiency to save opportunities from actionable insights specific to your Trust, based on national standards for service transformation

Results speak volumes so we have included two powerful examples of how Trusts have used the Benchmarking solution to win national awards in the category *Use of PCB to increase efficiency and reduce cost*.

1. Maidstone and Tunbridge Wells NHS Trust

Maidstone and 
Tunbridge Wells
NHS Foundation Trust

Following their Carter report, Trust board requested a deep dive in to 10 specialties identified. Ophthalmology chosen first and PCB data used as the main data asset.

Major actioned results include:

- ✓ Changed Consultant job plans to ensure 8:30 start to **increase throughput**
- ✓ Reviewed Ophthalmology space utilisation **reducing overheads by more than 10%**
- ✓ Changed clinics/sessions that junior doctors support and moved from only **having 1 Jnr in each clinic to more than one to increase productivity**
- ✓ Reviewed OP usage at low volume sites and transferred activity to **minimise fixed costs**
- ✓ Reduced number of Saturday waiting lists for cataracts to reduce working list initiative payments while still delivering contract levels in the working week

2. Plymouth Hospital NHS Trust

Plymouth Hospitals 
NHS Trust

- ✓ Production of Service Line Viability (SLV) packs using various data assets including reference costs, **PCB data and quality and outcomes data**
- ✓ Costing team engaged with **Key Stakeholders** at viability meetings – Clinical leads, Business Advisor, Ops Director and operational managers
- ✓ Following a **successful pilot across one service line the SLV packs were rolled out** to the 10 most financially challenged in Dec 2013 and a full roll out took place in 2014

Results very well received at the Trust and Lord Carter team also very interested:

- ✓ Identified improvements with Fast Track Tonsillectomy Lists: result led to **increased day case percentages** (100% for one surgeon) and significant increase in theatre throughput. Contribution to overheads increased from 5.3% to 45.1%
- ✓ Identified Trust was more costly than peers with Fast Track Cataract Lists: result led to **increased throughput and numbers per list** and in doing so increased contribution from 14.9% to 36% where numbers per list increased from 6 to 1

Drugs Utilisation Benchmarking (DUB)

Understanding and comparing prescribing behaviour

Benchmarking the drugs you prescribe could realise savings of millions of pounds. Unwarranted clinical variation can have a significant impact on clinical efficiency & outcomes and the variation in the prescribing of drugs nationally is a major contributor to this. The variation in clinical prescribing for the same or similar treatments or conditions accounts for millions of pounds of potential savings opportunities across the NHS each year.

For the first time it is now possible to compare in detail how your Trusts clinical prescribing behaviour varies with your peers. DUB offers you and your clinical colleagues a platform to investigate the detail behind what you prescribe, how much it costs and how this compares with your peers across the country.

Due to improvements in NHS drugs procurement, unit costs tend not to vary, if at all. The question therefore should not be “what do you pay for your drugs”? It should be “what drugs do you prescribe for the same or similar treatments or conditions”?

For example there is one NHS Trust in the country prescribing a high cost drug to a cohort of patients for the same treatment/condition as their peers. However, all of their peers choose not to issue this particular drug. The impact that this has from a financial perspective is £350K per annum for one particular drug and one particular cohort of patients. **DUB has enabled this Trust to quickly identify this variance and question their prescribing behaviour, communicate with their peers and establish the reasons for this variation in treatment.**

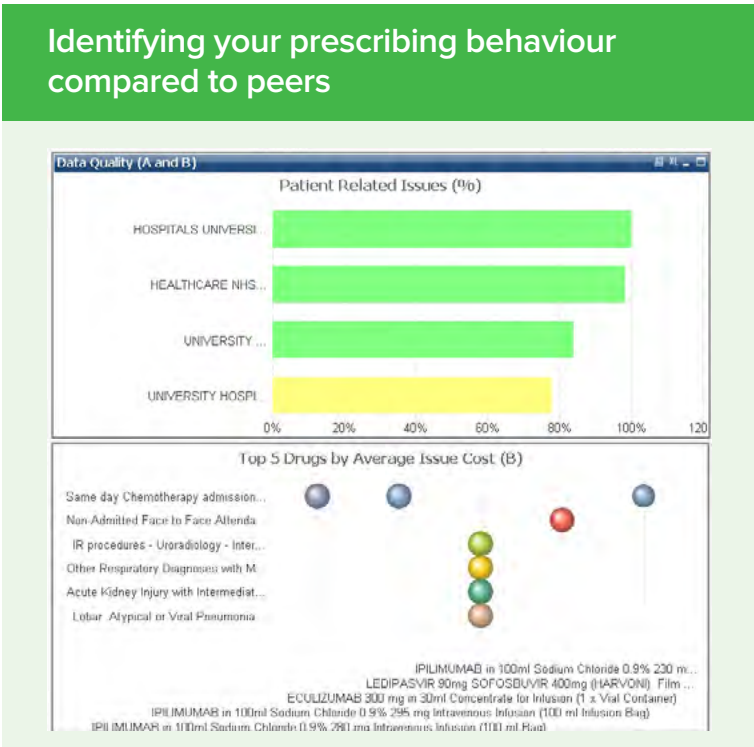
One question that will be asked is what the peer group’s quality and outcome measures look like. If the answer ends up being that there is no material difference then the service should seriously review their prescribing choice. However, if their quality and outcomes are better they have evidence that the higher investment is worth it.

Following the release of Lord Carter’s recommendation for an increased role for hospital pharmacists within clinical teams. **The Royal Pharmaceutical Society has stated that they support the sharing of best practice but warns that chief pharmacists will need access to high quality comparative data to allow its spread.**



“We agree completely that increased input from hospital pharmacists, working in teams with doctors, nurses and all other healthcare professionals, will improve patient outcomes, reduce waste, improve prescribing decisions and reduce avoidable harm.”

Sandra Gidley
Chair of the Royal Pharmaceutical Society
English Pharmacy Board



Costing and Service Line Reporting

Patient Level Information Costing (PLICS)

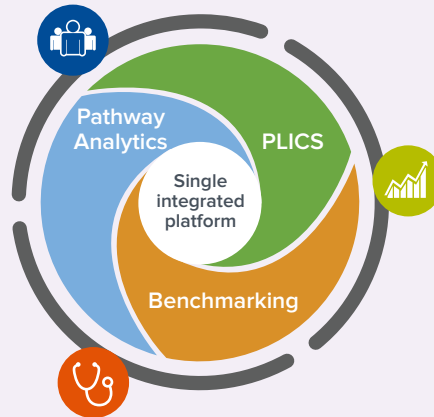
Producing Patient Level Costing Information that is compliant with the guidance set out by NHS Improvements Costing Transformation Programme (CTP)

In 2018/19 all NHS Trusts will be required to do so. Following the recent acquisitions of Albatross Financial Solutions and Healthcost, QuintilesIMS now offer a very powerful and attractive proposition. The integration of our experienced teams and combination of market leading solutions allows us to deliver actionable results for your organisation.

Our Single Integrated Platform delivers actionable insight to over 120 NHS Trusts



- A market leading PLICS supplier
- 28 PLICS clients
- QlikView partners and experts
- Industry leading costing consultants
- Close relationships with customers
- Highly regarded client centric support
- Clinically focussed solutions
- Industry leading reporting



- A market leading PLICS supplier
- 15 PLICS clients
- NHS de-facto cost benchmarking supplier
- 90+ Patient Cost Benchmarking clients
- Industry leading costing consultants
- Close relationships with customers
- Highly regarded client centric support
- Clinically focussed solutions



“We definitely feel we made the right decision... with QuintilesIMS combining Healthcost and Albatross, I feel they are going to become the market leaders as they are so forward looking and seem passionate about NHS Costing. There is also a great user group consisting of some very knowledgeable costing practitioners from leading NHS Trusts”

Samantha Russell

Finance Manager, University Hospital Southampton NHS Foundation Trust



“We will stand by our promise: our solution will identify £150,000 of clinical variation for you or your money back!”

Dmitry Dorsky

Director of Strategy, QuintilesIMS Healthcare Solutions, UK & Ireland



“Not only do we now offer the best combined solution set in the market supported by the largest and most experienced costing consulting team but we now have the capability to transform your information in to intelligence that you can use to transform your business.”

Gavin Mowling

Director of Costing & Transformation, Healthcare Solutions, UK & Ireland

We transform your data in to actionable intelligence to support your CIP and STP initiatives

QuintilesIMS is a leading authority in costing, benchmarking and analytics in the NHS.

- ✓ Our priority is to turn your data in to actionable insight that can help **transform your business** by identifying inefficiencies and enabling best practice
- ✓ We guarantee to identify at least **£150,000 of clinical variation or your money back!**
- ✓ Our combined team has **150 years** combined NHS experience. We have supported more than 120 Trusts with the development of innovative solutions and services
- ✓ As an integrated organisation we work with over **45 PLICS customers**
- ✓ The combination of our solutions ensures that our customers are delivered **the best of breed**
- ✓ Integration continues a long standing reputation for close personal relationships with customers and **unparalleled personal support**
- ✓ A combination of the **most experienced and highest quality costing experts** in the market
- ✓ Clinically, financially and operationally **focussed solutions**
- ✓ We **guarantee CTP compliance** at ALL TIMES!
- ✓ We offer **the most advanced end user PLICS reporting** on the market supporting your clinicians, operational management and finance
- ✓ **Flexible deployment** - offering both on premise and managed service options to suit individual requirements



“On reflection looking back over the past 10 months, the Trust has definitely made the right decision to purchase the PLICS provided by QuintilesIMS for the following reasons:

- *Value for money with no hidden additional costs*
- *Clinician friendly*
- *Quick and easy to upload data*
- *QuintilesIMS team are experts in their field*
- *Quick turnaround times to resolve or response to queries”*

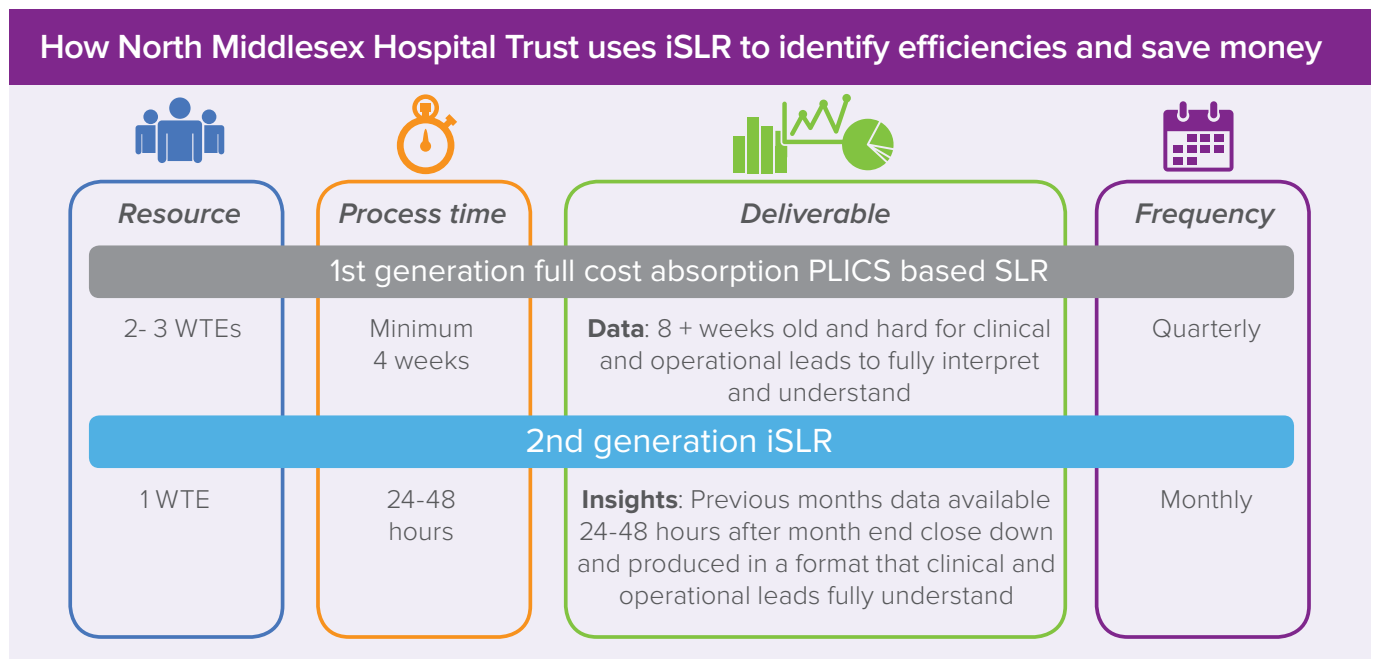
Karen Hansed

Divisional Director of Cancer and Diagnostic Services

The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

Integrated Service Line Reporting (iSLR)

Monitoring the financial efficiency of clinical decisions



For NHS Trusts to meet the demands of high-level care provision and efficient use of resource and funding, it is crucial that clinicians gain visibility of the financial implications of their clinical decisions.

North Middlesex Hospital Trust discovered that full cost absorption Service Line Reporting required vast amounts of resource to produce and was not being used by clinicians in the manner intended. In order to gain cost efficiencies from a more holistic use of SLR, the finance team needed to produce profit and loss reports in a more timely and manageable manner using data that clinicians understood. They also needed to gain buy-in from clinicians and consultants.

The Trust approached QuintilesIMS to help them reduce the burden and engage with clinicians by using internal trading methodology that would be quick and easy to use. They needed to separate volume/case mix issues from efficiency issues to clarify why a particular service is more or less profitable than another. The iSLR system integrated with their existing BI platform to provide actionable insights in a timely manner. This allowed clinicians to access the data relevant to their own budgets, and to see where more efficient use of services could be made across departments. Identifying champions among the clinicians facilitated a successful roll out and guaranteed support from colleagues.



“iSLR supports managers and clinical leaders to drive evidence-based and efficient changes on the frontline. iSLR transparently shows you what the income and costs of the service are and gives you the ability to drill down into the data to see, for example, which consultant ordered which pathology test and how many per month.

“With this system we are able to devolve budgetary ownership to frontline staff so ultimately we get them to identify potential efficiencies and save money for the Trust.”

David Paris

Deputy Director of Finance (Financial Planning), North Middlesex University Hospital NHS Trust



Find out more

Thank you for taking the time to review this brochure. We believe we have a great set of solutions that will help you **drive efficiencies, reduce cost and clinical variation as well as improve patient outcomes** for your organisation.

Our primary goal is to provide you with **actionable insight** designed to support value-based decision-making to enable positive change. We recognise that every NHS Trust in the country has the very tough task of reducing cost and achieving efficiency targets whilst improving patient care.

If you are interested in hearing more our solutions, please do get in touch. We really look forward to hearing from you.

Learn more – please contact +44 (0) 1785 238 009 or nhssolutions@QuintilesIMS.com