



**Business Services Authority**



**THE PACIFIC PROGRAMME**

We have established a Programme Board that meets monthly to review progress, challenge and steer the programme. It has representation from NHS England, Health Education England and the Department of Health.

Our initial core team, created by allocating resources from across the NHSBSA, has grown to include a broad range of change, improvement and project delivery skills. The scope of the programme is deliberately broad, to maximise its potential benefit – essentially, any initiative where the NHSBSA is well placed to make a positive contribution can be considered for inclusion.

The programme is going well and with the support of colleagues from across the NHSBSA, it is on track to deliver

over £250 million of savings by the end of 2015-16, with a pipeline of future opportunities that totals to well over our £1 billion target. However, there's still a lot to do and our focus for the rest of this year is to validate current proposals, particularly in light of the work taking shape to deliver the *Five Year Forward View*.

My passion for the programme is that we are able to identify and deliver projects that will release real savings to reduce the burden on front-line colleagues, given the financial changes facing the system. Working in partnership with colleagues from across the system will be key to achieving this and we are always looking for new ideas and suggestions.

By **Mike Turner**, Head of Commercial Strategy and Business Lead for Pacific

The NHS Business Services Authority (NHSBSA) was formed in 2006 from five previously separate NHS organisations into a single Special Health Authority. Our predecessor organisations included the Prescription Pricing Authority, Pensions Agency, Dental Practice Board and NHS Logistics. In total the BSA is involved with the management of £32 billion of the NHS's annual expenditure.

I joined in 2013 as Head of Commercial Strategy, with a remit to work with colleagues across the NHSBSA to look at the way our services are delivered and develop strategies that will maximise the contribution we make to the healthcare system. Given this, on arrival I was asked to lead the newly launched Pacific Programme.

Pacific was created in response to a challenge from the Department of Health that the NHSBSA should exploit its expertise, data and capacity to identify and deliver initiatives that would reduce waste in the financial flows it manages. It is now a key part of the BSA's business strategy, being tasked with delivering one of our core strategic objectives: we will collaborate to create £1 billion for patients.

In practice this means working with colleagues across the NHSBSA, the Department, our peer arm's length bodies, Clinical Commissioning Groups (CCGs) and others, to identify, design and deliver changes that will reduce cost whilst maintaining or improving patient experience. The programme is ambitious and challenging, but our experience to date suggests that it is achievable – we have delivered over £130 million of savings to date.

The Programme benefits from being built upon the core capabilities of the NHSBSA, our national reach and track record of delivering scalable services to multiple customers across the NHS. It also provides an opportunity to enhance the role we play by further exploiting the huge volumes of data we hold – for example, information held about drugs dispensed in primary care, which enables us to extract insight that will allow us implement changes that will make a real difference.

“ It is on track to deliver over £250 million of savings by the end of 2015-16 with a pipeline of future opportunities that totals to well over our £1 billion target ”

Figure 1 summarises the key areas of exploration for the Programme to date. We identify project opportunities from a range of sources including:

- ▶ Ideas suggested by colleagues across the BSA based upon their experience of running our services and the insight into the financial flows that this provides
- ▶ Analysis of our data, supported by a dedicated Data Analytics Learning Lab in the NHSBSA which uses state-of-the-art tools to identify trends, anomalies, outliers and savings opportunities, deriving insight from data to drive change and deliver improvements that matter
- ▶ Engagement with health care partners to identify issues they face where the NHSBSA might be well placed to offer a solution

Each idea then goes through a formally governed process to:

- ▶ Scope the opportunity and seek support from key stakeholders
- ▶ Baseline current costs and outputs and estimate the potential benefits and the feasibility of delivery
- ▶ Design and implement an agreed solution



**FIGURE 1**

## PACIFIC CASE STUDIES:

### PRESCRIPTION EXEMPTION CHECKING SERVICE



It is estimated that the current level of loss in relation to prescription checking through fraud is approximately £237 million per annum. The NHSBSA proposed a solution to change patient behaviour and recover charges in order to reduce this loss. Phase one of the Prescription Exemption Checking Service (PECS) solution was implemented in September 2014. The service is being delivered by the NHSBSA on behalf of NHS England as a key component of a broader strategy to reduce loss through fraud or error in relation to inappropriate claims for prescription exemption. Funding for this service is supported until the end of the 2015-16. The project focuses mainly on recovery but also aims to act as a deterrent, an important element of the behavioural change aspect. This first phase is proving successful, with recovery rates higher than anticipated and early indications of behavioural change worth almost £20 million per annum. It is paramount that this work continues in conjunction with the

development of other fraud prevention initiatives being planned at present. Collaboration and commitment from the right people at the right time was a key element that contributed to the successful delivery of phase one of PECS. The project was structured from the start in a way that promoted and supported this principle. A steering group was created and made up of key stakeholders from NHS England, Department of Health, NHS Protect as well as internal NHSBSA stakeholders. This group met regularly, ensuring focus, pace and timely attention to decisions, actions and issues. We also engaged with other organisations such as the Health and Social Care Information Centre and the Department for Work and Pensions, developing and building relationships that have continued beyond phase one. Phase two of the project is a key element of the current Pacific Programme roadmap, contributing to the achievement of the NHSBSA's strategic goal: "We will create up to £1 billion of value for the NHS through waste elimination." Going forward the NHSBSA will continue to deliver PECS on behalf of NHS England. The service and supporting solution implemented in September 2014 will continue to operate with a series of improvements and refinements, which will allow an increased volume of checks to be delivered as a result. In the longer-term, a more automated approach to support "100%" checking will be delivered in phase three, subject to a further business case, due to the scale of system and process improvement that will be involved.

### DENTAL ACTIVITY REVIEW – UNUSUAL PATTERNS OF CLAIMING



NHSBSA Dental Services (NHSBSA DS) has historically undertaken dental activity reviews to assess and understand the reasons for unusual patterns of claiming. Working in partnership with NHS England we have explored how to centralise more of this work while retaining local insight. From June 2015, NHSBSA DS will be scaling up this activity and undertaking a national exercise to look at rates of patient re-attendance within a short period. The work falls under existing NHSBSA DS processes and the programme of risk assessment and challenge work delivered through the Clinical Services team. A new team of caseworkers has been established to facilitate the increase in this activity. This team will work closely with the Clinical Services team,

conducting initial reviews and providing the results to the Clinical Advisors for further investigation. A working group has been established, with representatives from NHS England regions to develop processes and policy around this part of the review and how NHSBSA DS will collaborate with NHS England colleagues and vice versa. Full and regular updates on the progress of cases will be communicated via NHSBSA DS' Clinical Advisors. This working group will also assist in providing a forum for continuous improvements to the process and a consistent message regarding the activity. The working group will continue to review progress and will also consider other areas of Dental Activity Reviews. This programme of work was agreed following ministerial interest in the NHS Protect loss analysis and subsequent analyses. The business case was delivered jointly by NHSBSA, NHS Protect and NHS England and is supported by the Department of Health. The aim of the exercise is to understand the reasons for these unusual patterns and to educate providers where necessary. In some cases recovery of monies and/or referral for consideration of breach or remedial notices will be necessary. Overall, the objective is to improve access to NHS dentistry for patients and the dentistry services they receive.