

# BETTER MANAGEMENT INFORMATION



supports Liverpool Primary Care Trust in improving services to patients

*“Through the introduction of CSC’s iPM system we now have a single source of management information that is helping us deliver more efficient, patient focused services. We have been able to secure more funding from our commissioners by providing hard evidence of increases in the take-up of certain services: this is helping us deliver services that are driven by patient need.*

**Bernie Cuthel, Director of Patient Services, Liverpool PCT**

Over the past 12 months, Liverpool Primary Care Trust has been intent on meeting the challenge of new NHS reforms set to create a contestable healthcare marketplace where both NHS and independent sector service providers compete to provide services.

This case study highlights how Liverpool Primary Care Trust (PCT), as the provider of services to the Liverpool area, has made the introduction of a new, integrated patient administration system – CSC’s iPM system – central to the changes they have made to meet these challenges.

From an initial deployment of iPM in December 2005 within podiatry services, the system is being rolled-out across community services by the North Mersey Health Informatics Service: services already on iPM include community matrons, district nursing, treatment rooms, intravenous therapy, intermediate care services, emergency response teams, continence services and electrocardiogram services. This roll out is supporting an integrated approach to the management and delivery of care services across Liverpool.

## LIVERPOOL PCT’S PROVIDER ARM

The provider arm of Liverpool PCT is commissioned to provide a range of community and primary care services to the Liverpool area. These services are delivered by approximately 2,360 staff operating within a current budget of £75 million.

Liverpool PCT’s Director of Patient Services, Bernie Cuthel, has been a driving force in ensuring that the new system delivers the high quality management information required by the Trust. “We see the roll-out of iPM as a great opportunity to introduce a single information system to help us address the challenges of this new environment in

which our services now exist – and ultimately it will be key to supporting our position as one of the NHS pilot organisations for the creation of community foundation trusts” says Bernie.

## TRANSFORMING SERVICES THROUGH IMPROVED MANAGEMENT INFORMATION

Improved management information is seen as critical to placing services on a strong commercial footing. The ability to track the key performance measures of services allows Liverpool PCT’s provider arm to channel resources and investment where they best meet the needs of their patients.

Management reports detailing attendance levels within clinics, the number of patients seen by services, clinic non-attendance rates, the number of unfilled appointment slots and the rate of follow up appointments have allowed the management team to make informed decisions over where new clinic treatment rooms should be located, the size of clinics and the services to be offered. Improved forecasting of staffing levels and the demand for consumables e.g swabs, syringes etc. is also improving the running of services.

And it is not just the senior management team who are using this information to good effect. Clinicians now more fully understand the consequences of the decisions they are making on the staff and resources within their service. “A Nurse Manager in one of our clinics was discussing a change in service with a colleague – using iPM information on clinic capacity levels and staffing numbers to back her argument. With clinicians on the ground making more informed decisions this has got to be good news for the quality of the service we can deliver” says Bernie.

# RESULTS

BEYOND EXPECTATIONS

## IMPROVING THE COMMISSIONING OF SERVICES

Improvements in management information are proving particularly valuable in supporting the new relationship the provider arm is building with their commissioners (the buyers of their services). Proposals put to commissioners for new services are being backed with business cases and detailed analysis. The provider arm has already been successful in securing more money to develop and expand their ear syringing clinics because of the information they could provide on existing and forecast take-up of the service.

Improved information is not just confined to their work with commissioners, the provider arm also reports to the PCT's Provider Committee. The committee's understanding and confidence in the provider arm has grown significantly through the improved quality of the performance reports now being delivered.

In future, with the advent of community foundation trusts, there will be far more tariff based community services – where trusts will get paid for the volume of services delivered. Successful services will be able to grow and prosper to meet patient needs: good management information will be crucial to make this new business model work.

## IMPROVING DECISION MAKING

The provider arm is now using management information from iPM to build analytical models to explore how services might look in the future. The management team is able to consider the impact of various service changes through these models without directly altering the service itself. The production of more accurate forecasts through access to more complete historical data is also now central to the planning process for the organisation.

The future of the provider arm is truly being shaped by the information held on iPM.



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