Index

accountability for rationality structure 41 cost-utility analysis (CUA) 90 reasonableness 94-95 clinical senates 30 application 91-92 co-production 109 Quality Adjusted Life Years appeals 94 publicity 94 Coalition, political attitudes 44 (QALYS) 91-92 reasonableness 94 commissioning 1 Creating Strong, Safe and ADL, and well-being 70 clinician-led 3 Prosperous Communities Adult Social Care Outcomes cycle of 31 Toolkit (ASCOT) 108 eight principles 128-129 customer-driven innovation aesthetic values 5 and epidemiology 11 Aristotle, formal principle of social care 11 equality 87, 92 for value 31-41 Data Protection Act 15 for well-being 36 rights 15 barriers to entry and exit from see also values-based decision-making, service care 120 commissioning pathways 43-44 Bevan, A, quoted 116 Commissioning for Quality and dementia care 78-79 'Big Society' 44 Innovation (CQUIN) 104 principles 79 'blue ocean' strategy 131 Community Budget Pilots 73 depression, risk of CHD 36 community budgets, choice 76 boundaryless organisation 134 DH Right Care see Quality, community engagement 43-53 Innovation, Productivity cancer networks 29 definitions 48 and Prevention (QIPP) capabilities approach 107 factors preventing 'Right Care' digital systems 20-21 capacity for benefit 107 effectiveness 47 care pathways, and service users methodological problems 48 disability 74 - 75minority and ethnic groups HAQ-DI 38 Care Quality Commission 51-53 measures of 39 (CQC) 127 NICE guidelines 48 Disability Adjusted Life Years approach to assessing project setting-up 48 (DALYs) 92 real people 45 restrictions 116 disability-free life expectancy 60 catastrophe theory 50-51 service users 45 discrimination 12 cusp catastrophe 51 standard processes 46 disease, vs. illness 8-9 'cherry picking', by providers step change and dissensus 8 diversity of values 2, 12 122 discontinuity 49-51 choice 11, 76-80 'Community Right to doctors citizens and 77 Challenge' 44 GP commissioning consortia infrastructure for assisting compact agreements 129 117 competing values 134-135 and reforms 29 and related aspects 116-117 conduct disorders 36 remuneration 26 right of patient 115 consumerism 61, 78 Cooperation and Competition economic evaluation 90 citizens 77 Citizens' juries 46 Panel (CCP) 30, 116 ethically relevant principles Cooperative Councils Network climate change 66-67 Clinical Commissioning principles, maximising Groups (CCGs) 27, 29, corollary of evidence-based overall benefit 92 56, 83 medicine 38 end-of-life care 110-113 distributed leadership 136 cost-benefit analysis (CBA) 90 % of whole lifetime costs 111 group values 46 calculations 17 cost-benefit trade-off 111 clinical decision-making cost-effectiveness analysis example 112-113 process 40-41 (CEA) 90, 97 futility of treatment 111-112 and E-BP 40-41 cost-quality trade-off 124 endnote 141 150

Index

QIPP 'Right Care' 22, 25, 55, engaging all stakeholders 95 evidence-based practice (E-BP) vii, 10, 39-41 epidemiology 11 epistemic values 5 and clinical decision-making health and well-being 34-36 Health and Well-being Boards Equalities Act (2010) 14, 52 process 40-41 Equity and Excellence: and E-BM 10 10, 14, 29, 55 Liberating the NHS (2010) 'noughties' 17 alternative service elements 27 - 28reforms 25 45 and V-BP 40 300 amendments to Bill in and CCGs 136 House of Lords 28 values proposition and Conservatives 29 Facebook 20 discipline 131 fact-value distinction 5-6 further changes 29-30 Healthy Lives, Healthy People Liberal Democrats 29 individual/population 10 101 uncertainty 34, 101 facts key changes 65-66 ethical alertness 135 fact-value distinction 5-6, 10 heart surgery, vertical equity ethical principles 89–90 facts and values 8-11, 9 benificence 89 Fair Society, Healthy Lives see Herfindahl-Hirschman Index due process, reasonable, Marmot Review 121 justifiable and acceptable fairness, as a value 108 hip replacement focus groups 46 procedures 93–95 as output 103 equity 92-93 freedom, as a value 108 value 38 justice 90 Freedom of Information Act human rights 88-89 non-malfeasance 90 (FOIA) 15 Hume, D, on facts and values respect for autonomy 89-90 human rights organisation 8 - 11values 5, 8 (Article 19) 15 vs. values 3 protection for whistleillness ethical resource allocation no disease 9 blowers 15 vs. disease 8-9 88-90 fundholding 25-26 ethically relevant economic abolition of 26 immunisation programmes 59, principles 90 funding, renegotiated 129 ethnic minorities see minority futility of treatment, end-of-life indicators 64 and ethnic groups care 111-112 inequalities see health EU competition panel rules inequalities 30 geographical scope 120, 121 infant mortality (IM) 61 EU legislation 15 government, unprecedented information, shared decisionprocurement for sustainable 'pause' 27 making 4 GP commissioning consortia development 15 innovation subsidiarity 15 customer-driven 137 eudaimonic models 106-107 GPs and social care 70 harnessed 137 evidence and outcomes 37-38 growth, economic 33-34 and transformation, evidence-based facts, medicine values-based leadership vs. social care 17 happiness/hedonistic systems 137 - 138evidence-based medicine integrated commissioning, harnessed innovation 137 (E-BM) 17, 38-39 defined 71 defining vii, 39 Health Assessment integration, laws 71-72 and E-BP 10 Questionnaire Disability integrative commissioning E-BP element shortcomings Index (HAQ-DI) 38 69 - 8016 health inequalities 12, 58 defined 69, 70, 71 'health' money 18 discrimination 12 and E-BM 69 and integrated or 'health' money 18 GPs and social care 70 commissioning 69 Vs. local authority money whole systems 72-74 interventions 37-38 (failed prevention) 18 interventions 61 mental illness 39-41 health promotion 35-36 cumulative difference 37 Health and Social Care Bill ethical and values-based and preferences 40 rational discourse 39 (2011) 14and V-BP 69 health and social care reforms evidence-based 36-37

in England 25-30

values-based view 10

outcomes 37-38

151

152

Index

joint strategic needs assessment Measuring Outcomes for Public Service Users (JSNA) 48, 64, 69 justice, relevant to health care (MOPSU) 108 93 Mental Capacity Act (2005) capacity 14 Kings Fund/Institute for Fiscal decisions 14 Studies (IFS) 33-34 minimum data set (MDS) potential gap in NHS 14 funding 34 principles 14 three scenarios 33-34 religion 14 Mental Health Act (2007) leadership see values-based 13-14 leadership age, disability, gender or Leutz W., five (now six) laws of ethnicity 14 integration 71–72 decisions under this Act 13 discrimination 13-14 life expectancy 60, 61 female 63 religion, culture and sexual local authorities 29 orientation 14 delivery of public health mental health services services 65, 66 mental well-being 35-36 London riots 31 recovery (values-driven withdrawal of funds from outcome) 138 'Thin' and 'Thick' systems of youth work 31 Local Strategic Partnerships 71 V-BP 19 Localism Bill/Act (2011) 44, 45 mental illness and EBP 39-41 housing 45 London Health Observatory 59 prevention 36-37 London School of Economics treatment consent/refusal 9 (LSE), Decision mental models 136 Conference 96 Middle Level Super Output long-term care 22, 131 Areas (MSOAs) 64 care package reduction/ minority and ethnic groups addition 132 48-49, 93, 119 concerns 17 mandated welfare models 106 Equalities Act (2010) 52 marginal analysis calculations fear of mental health services 99 52 see also Programme PCTs and 52 Social Enterprises 130 **Budgeting and Marginal** Analysis (PBMA) MMR (measles, mumps and rubella vaccine) 65, 66 managing the market model markets 117-120 123-124 segmentation 117 model markets 117-120 Monitor market culture 115 changes to role 30 market evolution 124-125 core functions 127 five forces 124 EU competition law 123 market shares 123 regulator for foundation market stimulation and market trusts 121 role 29-30, 127 shaping 115-130 third sector 127-128 as separate function 116 Marmot Review: Fair Society, multi-criteria decision analysis Healthy Lives 35, 36, 55, 57 (MCDA) 97 emphasis on proportionate values matrix 97 universalism 58

national contracts, norm with **PBR 31** National Institute for Mental Health, England (NIMHE), values framework 7 national tariffs 86 needs felt/expressed 2 long-term 133 neighbourhood care teams 22 neural networks 19-20 New Horizons (2009) 66-67 NHS, underlying values 28 NHS commissioning 27–28 NHS and Community Care Act (1990)25NHS Constitution 16, 23-24 access to health services 23 commitment 24 community values 16 complaint and redress 24 information 24 informed choice 24 involvement in your healthcare 24 quality of care and environment 23 respect, consent and confidentiality 23 treatments, drugs and programmes 23 NHS funding 5% take year on year 34 potential gap 34 NHS Outcomes Framework (2011-12) 101, 102, 110 5 domains 109 NICE guidelines 16 community engagement 48 functions 56 gold standard 16 one offer 17 over-riding 10 Patient and Public Involvement Programme Quality and Outcomes Framework (QOF) 104 range of options 16 nuclear power stations 44 obesity 61 ontological values 5 Oregon, resource allocation 96,

NAO Report (2010) 35

report 59, 63-65

Index

153

organisation	historical precedents 25–27	Disability Adjusted Life
boundaryless 134	primary care trusts (PCTs) 26,	Years (DALYs) 92
process-outcome distinction	116	Quality, Innovation,
134	clusters 46, 83	Productivity and
outcome measures 103,	community engagement	Prevention (QIPP) 'Right
104–105	45-48	Care' 104
outcomes	end of 29	agenda 55
4 levels 102	loss of 27	health and social care
aggregating 103	unable to function 28	reforms in England 25
defining 107	Principles and Rules of	increasing value in three
designing 103	Cooperation and	ways 72
focusing on, vs. inputs 101	Competition (PRCC) 115	model 115
measuring 107	priority-setting 8, 88	programme 131
shared decision-making 4	in health and social care 84	value increase 138
and values 81	process 85	workstream 22, 25, 72
outcomes-led commissioning	and resource allocation 8,	Quality and Outcomes
101–113	83–99	Framework (QOF)
3 sets of factors 102	private sector 1, 119	104–105
4-level population	privatisation of NHS 28	NICE indicators 104
perspective 102	programme budgeting and	Titoe maioatoro 101
attention to patient 103	marginal analysis (PBMA)	randomised controlled trials
'outcomes turn' 101	17, 72, 85, 92, 97	(RCTs) 40
performance management	DH Right care 131	rationality structure, clinical
credibility 103	marginal analysis	decision-making process
see also values-based	calculations 99	41
commissioning	programme budgeting 97	Rawls J., Theory of Justice 93
output, vs. outcome measure	prosperity-austerity cycle 31	resource allocation 8
103	public see community	budget spent by GPs 87
103	= -	cost-benefit or cost-utility
parallal processing system	engagement Public Health, 'new' 55–67	96
parallel processing system 19–20	initiatives 59	
		critical concerns 87–88
patients	new responsibilities 55	enforcement 94
change of behaviours 33–34	tasks for health authorities 55	ethical concerns 88–90
and service users, care	Public Service Agreement	ethical robustness 86–87
pathways 74–75	(PSA), targets 35	framework for priority-
see also service users	public values 28–29	setting 8, 83–99
pause or 'listening exercise' 29	0.40	good 84–86
Personal Health and Social Care	Q4C	limited list 95
budgets 81–82	choice, patient and service	marginal investment
personalisation 76–77	user options 121–122	possibilities 96
physical illness, risk of	competition 122	marginal list system 96
depression 36	concentration 121	maximum saving from a cost
policy and practice 13-22	cooperation 122	improvement programme
population approaches, three	model of markets in health	87
groups 21	and social care 120-122	Oregon 96, 99
population and individual	quality 117–119	practical procedures 95–99
factors 22	dependent on range of values	process 84–86
Porter M.E., value chain	117–118	single point interventions 96
analysis model 131, 138	without informing service	responsibility, as a value 109
power and control 70	user 124	rheumatoid arthritis 38–39
practice-based commissioning	quality of care, policy	right to life 4
(P-BC) 26	statements 123	risk profiles 22
preferences 4	quality of daily life (QALY)	
and E-BM 40	107	segmentation of market 119
primary care commissioning	determination by evidence	self-care and shared decision-
25–27	and values 92	making 22

154

Index

service pathways	Spearhead group 35, 44, 58	public involvement 47
decision-making 43-44	15 elements 61–63	public values 28–29
model 34	five factors 61	spiritual 6
to health improvement	spiritual values/spirituality 6,	'thick' 5
48–49	11–12	universal 4
service specifications 78	stock market crash (2011) 33	utilitarian 5
free at the point of delivery	Strategic Health Authorities 26	vs. ethical principles 3
17	systems thinking 135–136	values base of government's
service users		reforms 27
and care pathways 74–75	team learning 136-137	values space 132-133
leadership and management	third sector 1, 119, 127-128	values-based commissioning
of services 17	total purchasing pilots (TPPs)	(V-BC) vii–ix, 2–3, 141
see also patients	26	balanced decision-making 6
shared decision-making 4–5, 77	tribal nature of society 6	defining vii, 2, 6
information 4	Twitter 20	diversity and difference 4
outcomes 4		fourfold challenge viii
shared vision 136-137	US Declaration of	framework for
smoking 61	Independence 88–89	commissioners 3
-related deaths 36	US primary care physician	insights of V-BP 3
social care 78	practice 124	see also outcomes-led
espoused values 35	USA health care costs 26	commissioning
integrative commissioning	Oregon resource allocation	values-based decision-making
70	96, 99	see values-based practice
neighbourhood care teams	utilitarian values 5	values-based leadership
22	utility definitions 91	131–139
values 10		competing values 134–135
values-based leadership	vaccines	health and social care
136–137	immunisation programmes	136–137
social care commissioning	59, 65, 66	innovation and
vii–ix, 11	MMR 65, 66	transformation 137–138
social care outcomes 105–109	'value'	systems thinking 135–136
7 models 105	absolute/individual 139	values space 132–133
Adult Social Care Outcomes	and 'values' 138-139	values-based practice (V-BP)
Toolkit (ASCOT) 108	value chain 131	1–12, 41, 43–44, 136
capabilities approach 107	value chain analysis model 131	10 principles 6–8
capacity for benefit 107	value stream 131	achieving 139
eudaimonic models 106–107	values 115	balanced decision-making
happiness/hedonistic	aesthetic 5	13
systems 106 mandated welfare models	competing 134–135	community level 43
	defining vii, 2, 5, 11	corollary of evidence-based
106	differences 3–4	medicine 38
Measuring Outcomes for	diversity of 2	data interplay 9
Public Service Users	drive of health system change	defining vii dissensus 8
(MOPSU) 108 quality of daily life 107	125	and E-BP 7-8
Vision for Adult Social Care	epistemic 5 ethical 5	and E-BS 16
108	extent, variety 13	emphasis on personalisation
social contract 116	fact–value distinction 5–6	6
social enterprises 1, 129–130	facts and values 8–11	and evidence-based practice
examples 129	freedom, fairness,	(E-BP) 40
society	responsibility 109	group level 43–44
'Big Society' 44	of health vs. health care 6	guidelines, balancing with
tribal nature 6	informing evidence 39	values and innovation
Southern Cross 28	ontological 5, 6	16–18
Spearhead areas, health related	and outcomes 81	illness vs. disease 9
behaviour 61	and preferences 4	individual level 43



Index

155

levels of action and understanding 43–44, 49 mental health services example 19 mental models 136 outcomes 10 population level 43 resource allocation 85 resources 3 squeaky-wheel principle 8 'Thin' and 'Thick' systems 22, 22 two-feet principle 7 Vision for Adult Social Care 108

Wanless Reports 32–33 link with 'full public engagement' 36–37 three scenarios 32–33 welfare systems 106 mandated models 106 well-being, and ADL 70 WHO, Commission on the Social Determinants of Health 58 World Class Commissioning (WCC) competencis 83–84

youth work budget cut, Haringey 55 London riots 31 withdrawal of funds 31