

Making sense of the data

Data are nothing on their own, says Oberoi Consulting's managing director Kavita Oberoi. Instead they should feed the improvement of care pathways and patient outcomes to effect real change. Photo by Magnus Rew

Edited by **Claire Bowie/Jenny Hone**

None would dispute the importance of data to a National Health Service whose future is pegged to improved quality, efficiency and outcomes – and all at lower cost. But data per se are no panacea: they need to mean something and they need to be capable of effecting real change.

Plenty of companies supply health data, notes Kavita Oberoi, founder and managing director of Oberoi Consulting. But unless those data can modify practices within the health system they are “a waste of time”. In addition, achieving change that enhances patient outcomes or optimises treatment pathways is pivotal to industry if it is to forge the kind of partnerships with NHS professionals, managers and budget holders that will work to everyone's benefit.

Clinical audit coupled with a deep understanding of clinical systems and the tools – such as a protocol integration – within them to drive guideline implementation form the core of Oberoi's offering. All of these interests are brought into alignment, feeding a continuous cycle of health improvement and patient-centred value across the spectrum of NHS stakeholders.

Certainly, The Kings Fund's recent publication, *Priorities for commissioning boards*, highlights perfectly exactly this medicines management best practice, which Oberoi has been practicing for years.

Kavita brings to that equation both a thorough understanding of how the NHS operates and industry insights gleaned from working with and in pharma. Added to this is knowledge that the crucial role that guidelines and targets in the NHS is being diluted by the problems healthcare professionals face in delivering on these goals.



Tim Langran, lead pharmacist for Slough CCG, and Jo Crossan, regional account manager, Oberoi Consulting

Clinicians need help understanding where the gaps are in guideline implementation that prevent the NHS from making the best of its resources, and how best to address them efficiently to affect outcomes. As with any successful business, “prioritisation and focused effort in areas of weakness is the key to impacting productivity”.

The solution may lie in redesigning a patient pathway, for example. First, though, there must be an analysis of where the NHS is falling short and what motivating factors will encourage the Service to embrace change.

CCGs have now defined key priorities that will drive change in terms of new pathways and treatment options. Data are critical to this process in order to analyse costs of the current service provision and what new service provision closer to home may look like. Indeed, many sources need to

be combined to produce a compelling business case. Oberoi is currently working with a number of CCGs to review more cost-effective service provision.

Such projects create partnership opportunities for both the NHS and pharmaceutical companies and, as a by-product, can support brand uptake in appropriate patients. Better relationships, access and trust is always an outcome of such co-working.

Moreover, auditing generates real-life data that can be used in case studies of health outcomes, followed by re-audits to assess the longer-term impact of new interventions.

As Kavita stresses, follow-up is crucial. “You can't just give them the data and let them get on with it,” she comments. When clinicians work with Oberoi they get the full package that delivers change and training to optimise

Case Study 1

► Redbridge Primary Care Trust

Objective: Improve coverage of MMR vaccine and childhood immunisations

Solutions deployed:

- Data extraction tool
- Clinical templates to capture accurate data
- Onsite healthcare professional training
- Web interface for the PCT showing real-time data at practice level
- Integrated child health database

Outcomes:

Marked increase in uptake of MMR vaccine and other childhood immunisations, while the disease incidence showed a decline in the outbreak of mumps and rubella and a flat line for measles.

Case Study 2

► Fleetwood Community Commissioning Group

Objective: Analysis of data and secondary care datasets to support a business case for redesign of a urology service closer to home for patients

Solutions deployed:

- Onsite analysis of all datasets on current pathway
- Training of the local teams on using secondary care datasets

Outcomes:

- Business case signed off
- New efficient pathway now in place

Feedback from the CCG: “The expert auditing of both primary and secondary care systems is critical for commissioning and supporting the provision of alternative services.”

efficiency and value in service delivery. In addition, they can earn points for continuing professional development, which are vital for revalidation, and, most importantly, patients see the benefit in terms of better health outcomes. One GP working with Oberoi revealed how a cardiovascular audit had helped him identify a patient who may have needed a stent fitted earlier, saving on more costly and invasive treatment further down the line.

In a nutshell, says Kavita, CCGs need to develop a business case in a cost-constrained environment. To be more efficient they need to improve service

delivery through expertly designed clinical audits that pull together disparate data and integrate guidelines within GP systems, ensuring consistency and supporting clinical governance. Here, pharma can capitalise by deploying its own expertise in new business models alongside implementation partners such as Oberoi, which understands the data needs and key implementation tools within GP systems that drive change, Kavita states.

“CCGs want to work with pharma on projects that align with their key objectives. One CCG's prescribing lead recently told me: “I will not and do not

“The route to better outcomes is to ensure we give the highest quality evidenced-based care consistently to all our patients. Oberoi Consulting has a track record of detailed audits of clinical data and reflecting this back to clinicians in such a way to ensure the most appropriate care is discussed and recommended to patients, and to improve consistency of intervention. Oberoi audits and decision systems allow this information to easily be at the clinicians' disposal and the empowered clinician makes the best decision for the patient.” Dr Matthew Fay, GP Principal Westcliffe Medical Practice. GP Executive Bradford Districts CCG

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want to see pharma sales representatives but I will see account managers to discuss project working.”

While partnerships between industry and the NHS are still hampered by negative perceptions, once each party understands the output of benefits projects such as these it can “put pharma in a different light”.

“Our clients are ahead with a number of partnerships achieved with CCGs since 1 April this year.” Kavita says Oberoi has the ability to join the dots together. “This is about making it real and making it happen.”

Once all the stakeholders are engaged and they see how these projects can really deliver on NHS objectives, she says, the partnership becomes a vehicle for “both value and access”. This is where Oberoi delivers.

► For more information about Oberoi Consulting:

Oberoi Consulting,
20 St Christopher's Way, Pride
Park, Derby DE24 8JY

T: 01332 224 251

E: sales@oberoi-consulting.com

W: www.oberoi-consulting.com