

Reducing Multiple Births The Role of the Commissioner

Sally Nelson and Claire O'Donnell
Public Health Advisors to
NHS Specialised Services Commissioning Teams

How could commissioners help?

- Determine the health needs of population across all areas of health
- Match service provision to the needs of a community
- Ensure quality of services

Why reducing ART multiple births is important to commissioners

- Increases the safety of mothers and babies
- Improves access to neonatal services for naturally conceived infants
- Improves access to services for children with complex needs and their families

The impact of the NHS commissioner

- Significant contribution to the total ART 'business' nationally
- Driver for improvement
- Supports clinical drive for change by considering multiples as adverse outcome

Achieving the change – The commissioning options

- Change the service requirements unilaterally
- Wait for professional/regulatory guidance to emerge
- Discuss strategy for reduction with current providers

The Commissioning Tools

- Service specifications
- Procurement
- Contracts
- Performance monitoring

Service specifications

- Specifications contain the detail of
 - Who? What? Where? When? How?
 - Expected outcomes
 - Monitoring and reporting required
 - Sanctions if outcomes are not achieved
- *Most robust have clinical support*

Multiple births and the service specification

- Patient selection criteria for eSET
- Standards of service – clinical and laboratory
- Agreement on target % multiples with phased reduction
- Outcomes of 'package of care' i.e. fresh plus frozen
- Support clinics in 'league table' disputes
- Change provider if little movement to reduce multiples

Key Points for Commissioners

- Engage early with clinicians to devise outcome focussed local strategies.
- Ensure multiple births are addressed in service specifications and contracts for 09/10
- FET significant factor in acceptance of selective eSET.
- In absence of tariff negotiate local NHS package