

## **Main Survey: Patient Level Information and Costing Systems (PLICs)**

This survey explores the uses of Patient Level Information and Costing Systems (PLICs). The full survey should take no longer than 10 minutes to complete.

### **Q1 Please could you indicate which of the following best describes your service**

- Acute Provider
- Mental Health Provider
- Community Trust
- Ambulance Trust
- Integrated Provider (e.g. Acute / Community - use space below to include details)
- \_\_\_\_\_
- Other (please specify) \_\_\_\_\_

### **Q2 Which region (previously SHA) does your Trust currently fall within?**

- East Midlands
- East Of England
- London
- North East
- North West
- South Central
- South East Coast
- South West
- West Midlands
- Yorkshire and The Humber
- Wales

### **Q3 Is your organisation a Foundation Trust?**

- Yes
- No
- Under consideration (within the next 12 months)

**Q4 Does your organisation use a Patient Level Information and Costing System (PLICS)?**

- Yes
- No

*Answer if Q4... 'Yes' is selected*

**Q5 How long has your organisation been using a PLICS?**

- 1 - 6 months
- 7 - 12 months
- 13 - 24 months
- Over 24 months

*Answer if Q4... 'Yes' is selected*

**Q6 Which of the below statements best describes where your organisation is currently at, in the implementation of a PLICS?**

- Early stages (e.g. pilot reports)
- Moderate implementation (e.g. local use within some areas)
- Intermediate implementation (e.g. widespread use without full application)
- Fully implemented in clinical costing and reporting schedules
- Other (please describe) \_\_\_\_\_

*Answer if Q4... 'Yes' is selected*

**Q7 How frequently is PLICS information currently reported within your organisation?**

- Monthly
- Bi-monthly
- Quarterly
- Bi-annually
- Yearly
- Other (please describe) \_\_\_\_\_

*Answer if Q4... 'Yes' is selected*

**Q8 Are the following activities and costs identified in your organisation's PLICS? Tick all that apply**

	Activity	Cost classification included in PLICS		
	Tick all that apply	Direct	Indirect	Overhead
Wards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operating theatres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pathology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy/drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please list below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Answer if Q4... 'Yes' is selected*

**Q9 Does your organisation use its PLICS for reference cost returns?**

- Yes
- No
- Under consideration (within next 12 months)

***Answer if Q4... 'No' is selected***

**Q10 In your opinion, how likely is it that a PLICS will be implemented within the next 12 months?**

- Very Unlikely
- Unlikely
- Undecided
- Likely
- Very Likely

**Q11 Does your organisation produce Service Line Reporting information?**

- Yes
- No
- Under consideration (within next 12 months)

***Answer if Q11... 'No' or 'Under Consideration' is selected***

**Q12 Does your organisation use a traditional directorate budget?**

- Yes
- No
- Other (please comment) \_\_\_\_\_

***Answer if Q4... 'Yes' is selected***

**Q13 Does your organisation share PLICS data with any of the following?**

- Directly with clinicians
- Senior management / directors
- Patient groups (as part of service consultation, for example)
- Commissioners
- Governors
- Department of health
- Monitor
- Other organisations (please detail) \_\_\_\_\_

*Answer if Q13... 'Senior management / directors' is selected*

**Q14 Do senior management / the board of directors use PLICS data to look at the relationship between cost and quality (i.e. clinical outcomes)?**

- Yes
- No
- Please describe this process: \_\_\_\_\_

**Q15 Does your organisation collect data or produce reports in a way that would allow costing a patient on the basis of a 'year of care'?**

- Yes
- No
- Please describe what allows / prevents this: \_\_\_\_\_

Answer if Q4... 'Yes' is selected

**Q16 Does your Trust regard PLICS data as commercially sensitive?**

- Yes
- No
- Unsure (please comment) \_\_\_\_\_

Answer if Q4... 'Yes' is selected

**Q17 Do you use PLICS for any of the following?**

	Yes	No	Under consideration (within next 12 months)
To identify how much a particular patient costs using direct and attributed costs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To ascertain whether that cost was more or less than income received under tariff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To lobby for exemption from the tariff (or flexibilities under tariff)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To identify how length of stay impacts upon cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To understand the benefit achieved through best practice tariff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To prepare for the newer environment encompassing 'any qualified provider'	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To compare specialties under service line reporting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

To prepare a business case for investment in a specialty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To engage clinicians with costing issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To inform consultants as to how their decisions impact on cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To identify resource variation and, hence, cost between consultants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To understand the relationship between cost and quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To provide services across more than one Trust e.g. network of providers, joint venture or similar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To benchmark services against other providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q18 The recent Department of Health reference costs guide 2012 defined 4 levels of engagement between finance professionals and clinical colleagues. Please select the level that best describes clinical engagement in costing for your organisation:**

- Level 1: Engagement is only at board/strategic level. For example, dialogue takes place between the medical director and finance director, but there is no real joined-up, collaborative work between the wider clinical and finance teams
- Level 2: There is some joined-up, collaborative work between clinical and finance teams but only on an ad hoc basis when required, for example for a specific Commissioning for Quality and Innovation [CQUIN) project
- Level 3: Joined-up collaborative working between clinical and finance teams is the norm in at least one clinical specialty/directorate. For example, a finance manager works as an integral part of a clinically led quality improvement team. There is also a plan to roll this out across other directorates
- Level 4: Joined-up collaborative working between clinical and finance teams is the norm across all clinical specialties/departments. Finance managers routinely work as integral members of clinically led quality improvement teams and both professional groups share cost and quality data to improve outcomes.
- Other (please describe) \_\_\_\_\_

**Q19 The following statements relate to membership of either (a) a group within your Trust that discusses PLICS data or (b) a local health economy group** Are you a member of a group within your Trust that discusses PLICS? data (e.g. Cost Improvement Initiative, Trust Cost Efficiency Programme etc)

- Yes (please give details) \_\_\_\_\_
- No
- Under consideration (within next 12 months)



**Q20 Are you a member of a local health economy group? (e.g. a group that includes commissioner and provider representatives and/or multiple other partner relationships, within a specific locality, either as part of a one-off project or longer term initiative)**

- Yes (please give details of project or group) \_\_\_\_\_
- No
- Under consideration (within next 12 months)

**Q21 Please read the following statements and tick all that apply**

	a Trust group / initiative / programme	a local health economy group	a group covering a wider geographical footprint	PLICS data has informed this decision / choice / outcome
Our organisation has been involved with redesigning services (in response to estimated/calculated savings) as part of ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services have been moved to a different care setting (e.g. primary care) in discussions as part of ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services have been terminated or moved to a different provider in discussions as part of ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unnecessary admissions and referrals (false positives) to acute care have been reduced through involvement with ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unnecessary diagnostics, interventions and treatments have	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>been reduced through involvement with ...</p> <p>The length of patient service contact has been reduced through involvement with ...</p> <p>Patient preferences have influenced service redesign in discussions as part of ...</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**Q22 For the purposes of analysis could you please provide: (All data will be fully anonymised before publication)**

Name of Trust / Organisation:

Job Title:

Trust code (if known):

**Q23 Please use the following space to add any further comments**

**Thank you for your time**