Knowledge exchange in health-care commissioning: case studies of the use of commercial, not-for-profit and public sector agencies, 2011–14

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

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Health-care commissioners purchase health services for local populations, so they need good-quality information. The aim of this study was to explore how commissioners obtained, modified and used information to inform their decisions. We were specifically interested in the knowledge obtained from external organisations such as management consultancies, Public Health and commissioning support units.

In eight case studies, we interviewed 92 external consultants and their clients, observed 25 meetings and training sessions, and analysed documents such as meeting minutes and reports. Data were analysed within each case study and then across all case studies.

Commissioners used many types of information from multiple sources to try to build a cohesive, persuasive case. They obtained information through five channels:

- interpersonal relationships
- people placement (e.g. embedding external staff within client teams)
- governance (e.g. national directives)
- copy, adapt and paste (e.g. best practice guidance)
- product deployment (e.g. software tools).

Furthermore, commissioners constantly interpreted (and reinterpreted) the knowledge to fit local circumstances (contextualisation) and involved others in this refinement process (engagement). External organisations that drew on these multiple channels and facilitated contextualisation and engagement were more likely to meet clients’ expectations. Sometimes there was little impact on commissioning decisions because the work of external organisations targeted and benefited the commissioning decision-makers less than the health-care analysts.

The long-standing split between health-care analysts and commissioners sometimes limited the impact of external organisations. Contracts should include explicit ways to transfer knowledge from external organisations to commissioners drawing on multiple channels to maximise benefit.
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This report

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