

The NHS at 70

The NHS...

- employs 1.2m people ¹
- has a budget of £114 billion in 2018/19 ²
- treats more than 1.4 million patients and service users every 24 hours³
- manages 23.8million A&E attendances per year and over 6 million emergency admissions ⁴
- responds to an average of 675,000 incidents per month through the ambulance service ⁵
- provides mental health care to over 1 million adults at any one point in time ⁶
- around 100 million contacts in community services per year⁷

The state of the NHS provider sector

Demand is growing and trusts are seeing more people than ever before, but existing care models don't meet today's needs

NHS trusts are racing to keep up with demand

- The 95% 4-hour A&E target was last met in July 2015⁸
 - July 2018 saw the highest number of A&E attendances since records began - a 5% increase on the previous year ⁹
- The 92% 18-week referral to treatment (RTT) target was last met in February 2016¹⁰
 - The NHS waiting list stands at 4.1million, an increase of 200,000 on the previous year ¹¹
- The 85% 62 day cancer referral to treatment target was last met in December 2015.¹²
 - GPs refer over 5,000 patients a day for suspected cancer, an increase of 60% in the last 5 years (2012/13).¹³

Productivity levels are high, but serious financial pressures persist

The NHS continues to outstrip UK levels of productivity, delivering improvements of 1.2% for the year ending 31 March 2018¹⁴, however:

- The trust sector ended 2017/18 with a deficit of nearly £1 billion¹⁵
- In 2016/17 the NHS in England had a total of £5.5bn in backlog maintenance ¹⁶
- The NHS would need to spend £1.8bn over three years to clear the waiting list and £350m extra a year to keep up with additional demand¹⁷

Workforce is a major concern

- 66% of trust leaders say workforce is the most pressing challenge to delivering high-quality care for patients¹⁸
- 42% of trust leaders feel Brexit will have a negative impact on their workforce¹⁹
- Nationally, the vacancy rate is nearly 12% for nurses and over 9% for doctors²⁰
- In 2017, 38% of the workforce have felt unwell in the last 12 months due to work related stress²¹

The NHS response

NHS trusts are working hard to increase productivity and transform services as the NHS moves towards integrated health and care systems.

- **Changing lives** by improving care for patients and service users
- **Changing times** by innovating through using new technology and other approaches to improving care quality and efficiency
- **Changing places** by taking up the opportunities presented by local system working and by changing how care is delivered through closer integration and collaboration

The ten-year plan for the NHS, underpinned by the new financial settlement and aligned with the social care green paper, provides a pivotal opportunity for local and national health and care organisations to come together and develop a shared, patient-focused ambition for the future .

The NHS long-term plan

The new funding settlement provides the NHS with a 3.4% average annual real terms increase over the next five years. The NHS has been tasked with producing a long term plan in return for the increase in funding, outlining how the service intends to deliver major improvements. This is a significant opportunity for the health service.

Our view

- The need for a renewed long-term plan for the NHS is a helpful recognition that the NHS needs significantly more money. But we need to be realistic about what that uplift can deliver given the challenges facing the service.
- Despite being under pressure on all fronts over the last few years, NHS trusts have maintained or improved quality of care, become significantly more efficient and pioneered new models of care in local systems. Even so, the last four years have shown that setting trusts an unrealistic task locks them into a debilitating cycle of failure where they can't meet financial and operational targets, irrespective of how hard their frontline staff work.
- The plan offers the potential to set a day-to-day operational and financial task that the vast majority of trusts can actually deliver so the sector as a whole can return to being successful.
- Given that the 3.4% average annual increase to the NHS budget falls short of what independent experts say is needed, there will still be hard choices to make about priorities. Funding for public health, social care and training are not included in the uplift and have not been confirmed.

NHS Providers' five tests for the plan²²

1 The plan is centred around patients, service users, carers and families

The plan is designed and developed in partnership with people who use the NHS and staff delivering care. The plan is focused on the outcomes that matter to people and tailors care to their needs and goals, seeking to improve the way people experience and interact with health and care services.

2 The plan is realistic and deliverable

The expectations set out in the plan reflect the comprehensive and high-quality care the NHS should deliver to patients and service users every day. A holistic view of care is taken across the primary, community, secondary and social care sectors. Performance standards are fully funded, take account of workforce challenges, and are deliverable within the timeframe required. The vast majority of trusts, performing well, can sustainably deliver what is asked of them.

3 The plan is underpinned by a credible workforce strategy

The plan needs to help make the NHS a great place to work. Demands on staff should be reasonable, with NHS staff given an achievable service delivery and performance task in their day-to-day jobs. We need to ensure that we have the right staff, in number and skill mix, in the right place at the right time, with staff appropriately rewarded, valued and supported.

4 The plan lays the groundwork for a transformed, sustainable high-performing service

The plan strikes the right balance between recovering short-term performance and long-term transformation, recognising that the existing model of providing services is no longer sustainable. The NHS is supported to make long-term investment decisions which balance the need to transform, deliver high quality services and achieve appropriate productivity and efficiency gains.

5 The plan supports local good governance, autonomy and accountability

The plan recognises that NHS delivery takes place at the frontline, and cannot be dictated from the centre. From this flows recognition of the importance of NHS trust boards working within strong local health and care systems, coupled with responsiveness to the views and needs of staff and communities, respect for good governance, and legal decision making.

¹ Latest NHS digital monthly workforce statistics (April 2018) <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/nhs-workforce-statistics---april-2018>

² <https://www.england.nhs.uk/wp-content/uploads/2018/03/Business-plan-2018-19-Annex-Update.pdf>

³ NHS Choices, <https://www.nhs.uk/about/nhs-facts>

⁴ <https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/ae-attendances-and-emergency-admissions-2018-19/>

⁵ Source: This information is based on the new set of ambulance quality indicators between April 2018 and June 2018. <https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/>

⁶ <https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/mental-health-data-hub/mental-health-services-monthly-statistics>

⁷ Department of Health (DH). NHS reference costs 2015 to 2016. London: DH; December 2016. Available from: www.gov.uk/government/publications/nhs-reference-costs-2015-to-2016

⁸ <https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/>

⁹ <https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/>

¹⁰ <https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/>

¹¹ <https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/> This figure is considered to be an underestimate as data from some trusts is missing.

¹² <https://www.england.nhs.uk/statistics/statistical-work-areas/cancer-waiting-times/>

¹³ <https://www.england.nhs.uk/statistics/statistical-work-areas/cancer-waiting-times/>

¹⁴ https://improvement.nhs.uk/documents/2852/Quarter_4_2017-18_performance_report.pdf

¹⁵ https://improvement.nhs.uk/documents/2852/Quarter_4_2017-18_performance_report.pdf#page=13

¹⁶ <http://nhsproviders.org/the-nhs-funding-settlement-recovering-lost-ground/finance>

¹⁷ <http://nhsproviders.org/the-nhs-funding-settlement-recovering-lost-ground/performance>

¹⁸ <http://nhsproviders.org/a-better-future-for-the-nhs-workforce>

¹⁹ In Q4 2017/18, 42% of respondents felt that the impact of the UK leaving the EU would be negative; an increase from 37% since the previous quarter but down from 50% in Q2 2017/18.

²⁰

https://improvement.nhs.uk/documents/3209/Performance_of_the_NHS_provider_sector_for_the_month_ended_30_June_18_FINAL.pdf

²¹ <http://www.nhsstaffsurveys.com/Page/1064/Latest-Results/2017-Results/>

²² <http://nhsproviders.org/five-tests-for-the-nhs-longterm-plan>