



Voice, influence
and support
to join up health and care

THE FUTURE OF NHS PROVIDERS

**in a world of
system working**



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Feedback from recent NHS Providers member and stakeholder surveys has been overwhelmingly positive, with NHS Providers consistently described as a highly effective, articulate and influential organisation on behalf of its members. However, in both surveys, members and stakeholders were keen to understand how NHS Providers, an organisation currently focused on trusts and foundation trusts, can continue to play an equally effective role as the NHS moves to greater system working and as health and care services integrate at a local level. This document outlines how NHS Providers sees its role evolving as system working develops.

A changing context

As the NHS long term plan makes clear, patients and service users rightly expect high-quality care, better outcomes and a joined-up experience. Services should evolve alongside patient and service user needs and they should be developed in collaboration and consultation with local communities.

Recognising this, health and care organisations are increasingly working in their local areas and regions in systems, bringing together primary, secondary and specialist healthcare, along with social care and a closer relationship with commissioner colleagues.

What does this mean for NHS Providers?

NHS Providers is the representative body for NHS trusts and foundation trusts – those organisations responsible for delivery of frontline care across the hospital, ambulance, community and mental health sectors. We are the voice of frontline secondary care providers.

Every one of England's NHS trusts and foundation trusts is now an NHS Providers member, with each organisation voluntarily paying a membership fee, in line with our member-led, subscription-based, business model.

Our mission is to support frontline secondary care providers to deliver high-quality, sustainable NHS care for patients and service users. In pursuing this, we will evolve alongside our members and adapt to their needs.

What lies ahead for local health and care systems, individual providers and NHS Providers?

How system working develops is not set in stone and there is no single pathway towards service integration.

The statutory organisations that deliver frontline secondary care may well change. Over time, we might see some consolidation of the trust sector through mergers. In some local areas, primary and secondary care services, and potentially social care too, might come together under a single organisation. Other local areas will continue to develop collaborative partnerships. New organisational forms (such as the proposal for integrated care trusts set out in the NHS long term plan, or the development of provider groups) might also emerge. As the commissioning landscape evolves to meet the aspiration in the long term plan of one clinical commissioning group (CCG) per integrated care system (ICS), it might become more common for certain activities currently undertaken by CCGs to transfer to a provider, or a partnership of providers.

As sustainability and transformation partnerships (STPs) are expected to develop into ICSs over the next two years, collaborative working arrangements at a system level may become a vehicle for local health and care organisations to choose to take more collective responsibility for population health, planning and delivering care together. NHS foundation trusts and trusts are active partners in STPs and ICSs, and often a key driving force in closer working across health and social care. It is already clear that substantial progress is being made in communities with strong providers and provider leadership. As system working develops, we can expect the roles and responsibilities, and potentially the form, of NHS foundation trusts and trusts to change too.

It is impossible to tell at this point exactly how the NHS landscape will develop. Two things are clear though. There will always be a need for statutory organisations to deliver front line secondary care services – and those organisations will always need a strong, effective, powerful membership organisation representing their interests. An organisation that shapes the environment in which they operate, champions their interests in the media, government, the NHS and wider healthcare community and helps them drive improvement and innovation. NHS Providers currently plays that role and, however the statutory landscape evolves, we will seek to continue doing so in the future.

Adapting NHS Providers' approach to an evolving environment

NHS Providers has already clearly demonstrated its ability to adapt to the changing landscape with a rapidly developed greater focus on system working. This new work has been strongly welcomed by members and stakeholders alike.

We have undertaken significant work to ensure our core influencing priorities, and our support for trust boards, is situated within the wider context of system working, drawing relevant links and connections for our membership, stakeholders and the media. We have also sought to support and shape the development of STPs and ICSs by publishing a series of briefings and commentary pieces on the evolution of system working (see page 6).

Most recently, we argued for the continued importance of the unitary board within a system context, and have established an integrated care design learning network.

Through our work in the Community Network, led jointly with the NHS Confederation, we have published a series of briefings and reports on local integration between community services and primary care. Through the Community Network we have also secured a major new contract from NHS England to share best practice on overcoming the operational barriers to neighbourhood-level integration of community, primary, social and community mental health care services. We are also an active member of the NHS Confederation-led coalition to campaign for a sustainable social care system, Health for Care.

Alongside our thought leadership and national influencing around the development of STPs and ICSs, over the past year we have worked in partnership with the Local Government Association, NHS Clinical Commissioners and the NHS Confederation to develop a [peer support programme](#) for local system leaders.

NHS Providers will continue to adapt to the needs of system working as these develop and evolve.

NHS Providers over the next three years and beyond

Our new [three-year strategy](#), which includes an enhanced focus on system working, was strongly endorsed by our members.

The strategy includes a clear commitment to supporting our members in developing local system working to integrate health and care, including the role of trusts in helping to develop their STP or ICS. Much of our work is and will be relevant to all STP/ICS leaders, not just provider leaders, and it therefore makes sense to share our work with the wider group of system leaders. It also makes sense for NHS Providers to develop new work to help providers on their journey to supporting effective system working, working closely with other national representative organisations such as the NHS Confederation, NHS Clinical Commissioners, the Local Government Association, the Association of Directors of Adult Social Services, and the National Association of Primary Care.

As the NHS landscape in which providers work changes, we will promote the importance of appropriate local board autonomy and local accountability, support the right journey to system working, and challenge any inappropriate move of power from local organisations to the national bodies. These key principles apply whatever statutory form is adopted for local secondary care delivery in the future.

We will work with NHS providers to improve their performance in system working, support board leadership of the digital agenda, promote diversity and inclusion, and support adoption of a formal approach to quality improvement. We will confront the need for rapid development of solutions to the health and care sector's workforce shortages, and NHS Providers also has a clear role to play in demonstrating that the provider sector is delivering on the government's extra £20.5bn investment. We will also help to better evidence the role that frontline secondary care providers can play, and currently play, in supporting a preventative approach to care.

A key part of transitioning to an integrated, sustainable health and care system is increasing focus on prevention, with a better interface between primary and secondary care and stronger links with social care. In support of this, we have developed a [prevention framework](#) with the Provider Public Health Network, setting out principles for a population health approach for trusts and ways for trusts to bolster their role in prevention through collaborative working. We are also particularly interested in exploring links and working with the growing number of large-scale primary care providers as it seems likely that the boundary between secondary and large scale primary care providers is likely to become significantly more fluid over time.

Next steps for NHS Providers

Our annual stakeholder survey showed strong support for our effectiveness as an influential membership organisation. At the same time, questions were raised about NHS Providers' role within a context where system working is increasingly seen, nationally and locally, as a key driver of change and improvement. One respondent commented: "It's really important that they're thinking about the totality and the role that this segment of the system might have in partnership with others."

The NHS Providers board is clear that while trusts and foundation trust remain the statutory organisations responsible for delivering frontline secondary care, our primary task is to represent their interests. In the current context, that task includes supporting trusts and foundation trusts to develop and work effectively within local systems. The board has also agreed that, as a secondary aim, we should also directly support the development of the emerging local system structures, where relevant and appropriate, not least because our members and their leaders are playing such a key role in their development. For example, if we are running events or producing briefings that would benefit local system, as well as provider, leaders, we should make these available to that wider system-level audience.

As well as expanding our areas of activity, we are therefore reviewing how NHS Providers works:

- 1 We want to establish what relationship we should have with the emerging STPs and ICSs and their leaders. Our working hypothesis is that we will want a close relationship which enables STP/ICS leaders to benefit from the work we do, while recognising that our primary aim is to support our secondary care provider members.
- 2 We are currently undertaking a governance review to ensure that our elected member board is fully equipped to lead the process of how we adapt to system working. We have already co-opted one of our existing elected board members who became an STP lead to ensure we retained that expertise and perspective.
- 3 In addition to our work as a standalone organisation, we will continue to work in partnership with other membership bodies, think tanks and national bodies where it adds value for our membership. We are exploring how we can best support the interface between primary and secondary care, as well as leading a partnership of four membership bodies to develop a peer support offer for systems.
- 4 We have regularly adapted our branding to reflect our mission and purpose – for example in 2014 we changed our name from the Foundation Trust Network to NHS Providers. While trusts and foundation trusts remain the formal statutory organisations responsible for frontline care delivery, we intend to retain the NHS Providers name and branding. However, we want to reflect the changing context and have therefore developed a new strapline – **Voice, influence and support to join up health and care** – which reflects that context. We will be using this strapline in relevant contexts, as we have done here, to make sure the role we are playing is clear.

As provider organisations pursue greater integration and work with their local partners to implement system working, NHS Providers will continue as their partner, adapting to meet their needs. Those organisations responsible for delivering frontline care will always need a clear, effective and influential voice. NHS Providers seeks to remain that voice, however the future NHS landscape develops.

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Systems-focused thought leadership



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(November 2018)



Driving forward system working: a snapshot of early progress in collaborative commissioning

(December 2018)



We still need to talk about boards

(May 2019)



What the long term plan means for system working

(May 2019)



Population health framework for healthcare providers

(June 2019)

NHS Providers is the membership organisation and trade association for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS foundation trusts and trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

NHS Providers has all trusts in membership, collectively accounting for £84bn of annual expenditure and employing more than one million staff.



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