

Summary of NHS England board meeting – 01 December 2022

Full papers found [here](#)

Chief executive's update

- The Autumn Statement sets out that the NHS budget will be £3.3 bn higher for the next two years compared to the previous spending review settlement. The announcement allows NHS England (NHSE) to recommit to the following objectives:
 - developing a strategic recovery plan for urgent emergency care (UEC) to be published in the new year with a focus on the ambulance service
 - improved access to primary care
 - ambitions set out in the elective recovery plan
 - mental health service expansion and early cancer diagnosis
- NHSE welcome the additional £2.7 bn that will be spent in social care over the next two years, as well as the funding of the Hewitt review
- In response to the industrial action announcements made this week, the chief executive highlighted NHSE's priority in supporting the NHS as effectively as possible to prepare and plan for strike action. This was reiterated in the financial update
- As announced in the Autumn Statement, NHSE is in the final stages of developing a workforce plan, that they believe has merit, which will be published in Spring 2023
- The chief executive also took time to spotlight a number of good practise examples from trusts across England to demonstrate improvements that have been made to services since the publication of their [two winter letters](#).

Operational performance update

Covid-19

- Since the last board meeting, we have come out of the fourth wave of Covid-19
- There have been increases in new diagnoses and admissions to hospitals week on week
- There is a new variant, BQ.1, which has become the dominant variant in the UK and is likely to drive increases in hospital admissions

- Over 80% of people over 70 have received an autumn booster, and all eligible people were invited to book a vaccination by the end of October.

Children and young people (CYP)

- Increasing numbers of children presenting with respiratory syncytial virus infection (RSV)
- Significant rises in flu cases have caused increased pressures in paediatrics services
- [Core20PLUS5 for Children and Young People](#), a national framework to support the reduction of health inequalities at both national and system level, has now been published.

Elective care

- Between August to September, 244,000 patient pathways were completed (diagnosed and treated) who would have breached 78 weeks by the end of March 2023
- For patients waiting to start treatment at the end of September 2022, the median waiting time was 14.0 weeks, an increase from 13.8 weeks in August 2022.

Urgent care

- Category one incidents were 2.3% higher this October compared to October 2021
- In England, for October 2022, the mean response time for category 1 calls was 9 minutes 56 seconds
- In October 2022 there were 2,172,615 patients seen across accident and emergency (A&E) departments in England, which is the highest volume on record for October.

Diagnostic tests

- In September almost two million of the key 15 diagnostic tests were done
- As of 30 October 2022, Community Diagnostic Centres (CDCs) have delivered over 2.29 million diagnostic tests since the first centres became operational in July 2021, of which 1.4 million were delivered this financial year.

Mental health services

- Pressures on mental health services remain high due to record demand
- Winter planning is underway, with £10m of funding being repurposed to ease seasonal pressures and systems are being asked to undertake demand and capacity planning to support this work
- In the twelve months to July 2022 689,379 CYP (0- 17s) have accessed support.

- CYP Eating Disorder (ED) services continue to experience high demand, which is in turn affecting waiting time standards
- Workforce remains the biggest risk to service delivery and to responding to current operational pressures, delivering the [Long Term Plan](#) (LTP) and expanding mental health services to meet the growing need.

Learning disabilities and autism

- Work to address the health inequalities experienced by people with a learning disability and autistic people and the reduction in reliance on mental health inpatient care remain priority areas for NHSE.
- NHSE continue to focus on investment, guidance and support to local integrated care boards (ICBs) to deliver community alternatives to inpatient care; working with social care, education and other strategic partners to jointly deliver [Building the Right Support](#) commitments.

Discharge

- There is now a £500m Adult Social Care Discharge Fund. ICBs are working through fund allocations with local authority colleagues to ensure the fund is spent to best effect
- ICBs are expected to have falls response services in place by 31 December 2022 and be available as a minimum 8am-8pm 7 days per week for levels 1 and 2 falls, which are non-injurious and minor injury falls.

Financial performance update

- The 23/24 budget is expected to grow by 2.6% in real terms to c. £160.4bn and in 24/25 this will grow by 2% to £165.8bn
- Systems have overspent against the financial plan by £651m for the first half of the year – this variance is largely caused by operational pressures which include higher levels of Covid-19 and staff sickness. Most systems are forecasting that these overspends will be recovered in the second half of the year to achieve the plan targets, however, there is risk given the impact of winter pressures
- Overall, NHSE remains confident that the NHS as a whole will live within the mandate it has been given for 22/23
- Efficiency savings across the NHS are currently around 17% behind on plan on aggregate. Roughly 25% of providers are delivering efficiency savings of 4% and above
- Based on the Autumn Statement inflation figures, NHSE expect that the additional £3.3 bn will allow them to comfortably focus on their objectives

- In terms of protecting services against industrial action, NHSE have issued guidance to all trusts where strike action is planned to take place to ensure that the primary focus is on safety. Service disruption will be localised and there is the expectation that local discussions and negotiations will need to take place within systems
- NHSE assured that planning has taken place at every level around different scenarios and possibilities and is confident about the degree of the planning for industrial action.

Maternity and neonatal services

- **'Reading the Signals'**, Bill Kirkup's report on maternity and neonatal services at East Kent University Hospital's Foundation Trust, was published on 19 October. The recommendations from this report are much more wide-ranging and extend beyond the scope of maternity and neonatal services
- Actions moving forward are focussing on the long term with particular attention being paid to the standards of clinical behaviour as standards are currently not being met - team working, organisational behaviours and reputation of honesty need to be improved
- NHSE highlighted the need for further investment in the clinical workforce
- NHSE want to streamline the maternity plan to bring together recommendations from reports and existing commitments from the LTP and Maternity Transformation Programme. This refreshed maternity delivery plan will be published in 2023
- NHSE have identified four key areas where maternity and neonatal services need to improve:
 - listening to women
 - workforce
 - culture and leadership
 - standards and infrastructure

Early diagnosis on cancer

- The NHS LTP set an ambition to diagnose 75% of cancers at an early stage by 2028, up from 55% in 2018. This will help to ensure that, from 2028, 55,000 more people each year survive their cancer for at least five years after diagnosis
- An increased 14% will be related to known interventions that are already underway and additional 6% related to innovation
- There is ambition that this plan will also help tackle health inequalities that surround cancer diagnoses and care for cancer patients

- Diagnostic and treatment capacity are steadily improving. The NHS plans to open up to 160 Community Diagnostic Centres, which will provide up to nine million tests per year by the end of 2025
- There are six core strands that are being used to help implement the diagnosis strategy:
 - Promoting public awareness
 - Proactively identifying and checking people at higher risk
 - Ensuring effective and timely primary care pathways
 - Streamlining diagnostic pathways
 - Harnessing innovation to transform cancer diagnostics
 - Modernising and expanding NHS cancer screening programmes
- However, there is an acknowledgement of the difficulties in delivering the strategy when the NHS is under large amounts of pressure.

Update on integration of NHS England, Health Education England and NHS Digital

- The Secretary of State for Health and Social Care, Steve Barclay, has requested an earlier time frame in which the merger will take place, so legal processes have now been accelerated
- A new organisation is currently being designed based on the size, scale, and intention of the organisation. Maximising expertise, simplifying how NHSE works, and getting behind system working are priorities
- NHSE is focussed on moving to a smaller scale, with 30% fewer posts and a further 10% of staff moving to ICBs to support system working
- As part of the change programme, in February 2023 consultations will start with staff ensuring that they will know how the merger affects them personally
- A voluntary redundancy scheme will be implemented for employees who choose to opt into the scheme
- The merger with NHS Digital has been accelerated and will now be effective from 31 January 2023.

NHS Prevention

NHSE received a paper for approval which set out proposed recommendations to start to embed a coherent and evidence-based approach to prevention across systems, with the NHS playing a much stronger role in this agenda than it has done historically.

- The recommendations outlined are as follows:

- NHS England should extensively engage ICSs to work out how best to prioritise secondary prevention, and the best ways of achieving improvements in health locally
- ICSs should be supported to prioritise secondary prevention as part of their strategic plans
- To support local planning NHSE should publish a tool summarising the highest impact interventions and supportive resources relating to the prevention and management of respiratory disease, cardiovascular disease, and diabetes.