HEALTH AND WELLBEING BOARD



TO:Health and Wellbeing BoardFROM:Claire Jackson
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SUBJECT: Summary of Next Steps for Delivering the Five Year Forward View

1. PURPOSE

The purpose of this briefing paper is to provide the Health and Wellbeing Board members with a summary on the Next Steps for delivering the NHS Five Year Forward View.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

Health and Wellbeing Board (HWBB) members are recommended to:

• Note the contents of the briefing paper.

3. BACKGROUND

On 31st March 2017 NHS England published the "Next Steps for Delivering the NHS Five Year Forward View". This sets out what needs to be achieved during 2017 – 2019 to deliver the improvements outlined in the original Five Year Forward View (5YFV) document in terms of delivering better health, better care and better value.

4. RATIONALE

As outlined in previous reports to the HWBB, the 5YFV sets out the triple aim of delivering better health, better care and better value. The priorities for the next 2 years are outlined below and provide more detail on how the 5YFV's goals will be implemented.

5. KEY ISSUES

National Priorities and the CCG's Role in Delivery

The government's mandate to the NHS set out the priorities for 2017/18 and 2018/19, these are summarised below:

Free up capacity within urgent and emergency care:

• the 95% A&E target will be lowered to 90% until 2018

- Every hospital to have front door clinical streaming in place by October 2017
- Addressing delayed transfers of care
- More specialist mental health care teams in A&E
- Enhancing and increasing utilisation of NHS 111
- Strengthen support to care homes
- Roll out of 150 new urgent treatment centres by Spring 2018
- Ending long waits for ambulances

Improving access to General Practice

- Roll out evening and weekend GP appointments to 50% of the public by March 2018 and 100% by March 2019
- Boost GP numbers through increasing trainees and improving GP retention
- Expanding multidisciplinary primary care by increasing number of clinical pharmacists working in GP surgeries, placing mental health therapists in primary care, incentivising physician associates and improving general practice nursing
- Modernising primary care premises through 800 infrastructure projects by 2019

Improving cancer outcomes through early diagnosis

- Expanded cancer screening to improve prevention/prevention
- Faster tests, faster results and treatments with the aim of giving a definitive diagnosis within 28 days by 2020
- Access to modern cancer treatment in all parts of the country through the largest radiotherapy upgrade programme in 15 years

Upgrading treatment for mental health

- Targeted national investment for expanded services and growth in mental health including Increasing Access to Psychological Therapies, supporting expectant and new mothers, transforming mental health services for children and young people and offering specialist mental health services in A&E Departments
- Clear performance goals for CCGs and mental health providers
- Expansion of mental health workforce

Sustainability and Transformation Partnerships (STP)

STPs are not new statutory bodies but they should support the integration of care across the country. STPs will require basic governance arrangements implementing for which all organisations will need to be part of, including the formation of an STP Board which has authority for decision making across organisations.

NHS England are expected to publish metrics at an STP level aligned to the CCG's Improvement and Assessment Framework in July 2017.

Accountable Care System (ACS)

It is expected that ACS will evolve as a version of the STP and work locally to deliver an integrated health system. Organisations will agree an accountable performance contract with NHS England and NHS Improvement. The system will manage funding for its defined population though shared performance goals and financial system "control total". Arrangements will be need to be in place for establishing mechanisms by which local residents within the defined population can still exercise patients choice.

New Models of Care

Findings from vanguard models have demonstrated significant improvement in emergency hospital admissions and emergency inpatient bed days. New models of integrated care will be developed which will focus on keeping people healthier for longer through service improvements not just administrative reorganisation

Maintaining financial balance

The "Next Steps" document identified 10 "large efficiency opportunities" for the NHS including:

- Freeing up 2000-3000 hospital beds through reduced delayed transfers of care
- Reducing agency and temporary staffing costs in 2017/18
- All trusts to participate in Nationally Contracted Products programme
- Getting best value out of medicines and pharmacy
- Reducing avoidable demand and meeting demand more appropriately
- Reducing unwarranted variation in clinical quality "Getting it Right First Time" methodology
- Release £2bn through sale of surplus assets with the establishment of new NHS Property organisation
- Reducing costs of corporate services and administration with CCGs to deliver running cost savings of £150m in real terms by end of 2019/20
- Improve collection of income through cost recovery for overseas patients
- Financial accountability and discipline for all trusts; CCGs in special measures subject to legal directions and possible dissolution

Supporting Staff

- Expansion of education and training for nursing, improved return to practice, more effective rostering.
- Increasing undergraduate medical school places, expanding GP numbers and junior doctors
- Addressing specific staff shortages, developing new professional roles e.g. nurse associates, supporting staff health and wellbeing

Delivering High Quality Care

- Reducing health care acquired infections
- Improving maternity safety
- Learning from deaths
- Improving inspections, investigations and reducing medication errors

Leverage technology and innovation

- Launching NHS Digital Apps in Spring 2017 to improve the management of health
- Improving routing of electronic prescriptions from NHS 111 and GP out of hours to pharmacies via electronic prescription services
- Enable GPs to seek advice and guidance from hospital specialists without the patient needing to book an appointment
- Enable patients to book first outpatient appointments with access to waiting times via smartphones, tablets or computer
- All referrals to consultant-led first outpatient appointments made by e-referral service (October 2018)

6. POLICY IMPLICATIONS

The key policy drivers are outlined within the main body of the report and through previous updates presented to the HWBB members.

7. FINANCIAL IMPLICATIONS

All organisations must achieve the delivery of the Five Year Forward View within their existing financial allocations.

8. LEGAL IMPLICATIONS

At present there are no legal implications associated with the report.

9. RESOURCE IMPLICATIONS

Workforce capacity across the health system is known to be a significant risk both nationally and locally.

10. EQUALITY AND HEALTH IMPLICATIONS

Any changes to services resulting from the implementation of the Next Steps priorities will be subject to Equality and Inclusion Risk Assessments however it is the intention of these plans to reduce inequalities and improve health outcomes.

11. CONSULTATIONS

There are no new consultations associated with this briefing report.

VERSION:	V2

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BACKGROUND PAPER:	

