

The *NHS Five Year Forward View* and NHS Planning Guidance

Southwark Health & Wellbeing Board
January 2015



The NHS Five Year *Forward View* was published by NHS England in October 2014 and **sets out a vision for the future of the NHS**. - <http://www.england.nhs.uk/ourwork/futurenhs/>

The document makes clear that a lot has been achieved over the last fifteen years:

- Cancer outcomes are vastly better, with more people surviving cancer than ever before.
- Waiting times for A&E and for routine operations have been cut significantly.
- Stroke and cardiac services have been centralised leading to better outcomes.
- Patient satisfaction in the NHS has increased.

But over the next five years more work is needed to:

- Reduce variation in the quality of services and outcomes
- Tackle preventable illness and inequalities and put an emphasis on public health
- Adapt to an aging population by changing the way we deliver services
- Ensure financial stability in a climate of growing demand

The first argument made in the *Forward View* is that the future health of millions of children, the sustainability of the NHS, and the economic prosperity of Britain all now depend on a **radical upgrade in prevention and public health**. The NHS will therefore need to:

- Back hard-hitting national action on obesity, smoking, alcohol and other major health risks.
- Help develop and support new ideas in the workplace to help employees' health and cut sickness-related unemployment.
- Advocate for stronger public health-related powers for local government/elected mayors.

When people do need health services, **patients will gain far greater control of their own care**. This will include:

- The option of shared budgets combining health and social care.
- New support for the 1.4 million full time unpaid carers in England
- The NHS will becoming a better partner with voluntary organisations and local communities.

The second argument in the *Forward View* is that **the NHS will take decisive steps to break down the barriers in how care is provided** between family doctors and hospitals, between physical and mental health, between health and social care.

However, there will be no model for transformation imposed on local health economies. Different local health communities will instead be supported and resourced to choose from a small number of new care delivery options and then put them into action:

The *Five Year Forward View* suggests two models that local areas could adopt:

- **Multispecialty Community Providers (MCPs)**. This model envisages groups of GPs combined with nurses, hospital specialists, mental health, social care and community services to create integrated out-of-hospital services. These groups would seek to harness the collective skills and knowledge of those within them, to work much more intensively and proactively with patients with complex and on-going needs.
- **Integrated Primary and Acute Care Systems (PACS)**. This model would allow a single organisation to provide GP and hospital services, together with mental health and community services. Hospitals would be able to open their own GP services and provide additional out-of-hospital services. By bringing together all parts of the health system, this could promote 'joined-up care' and allow for greater discretion over how money is spent.

Further steps will also be taken at national and local levels so that:

- Across the NHS, **urgent and emergency** care services will be redesigned to join together A&E departments, GP out-of-hours services, urgent care centres, NHS 111, and ambulance services.
- **Smaller hospitals** will have new options to help them stay workable, including making partnerships with other hospitals further away, and partnering with specialist hospitals to provide more local services.
- Midwives will have new options to take charge of the **maternity services** they offer.
- The NHS will provide more support for **frail older people** living in care homes.
- More money will be invested in **primary care** and the number of GPs in training will be increased as fast as possible, with new options to help GPs who want to stay on working.
- More money will be spent on developing the **workforce** and improving the use of health technology and will improve the NHS' ability to do research and use innovation.

The **third argument** is about the **NHS using money well**. Analysis has shown that there will be a significant gap of nearly £30bn a year between resources and patient needs by 2020/21. So to provide the full and high quality care that people clearly want from the NHS, we will need to:

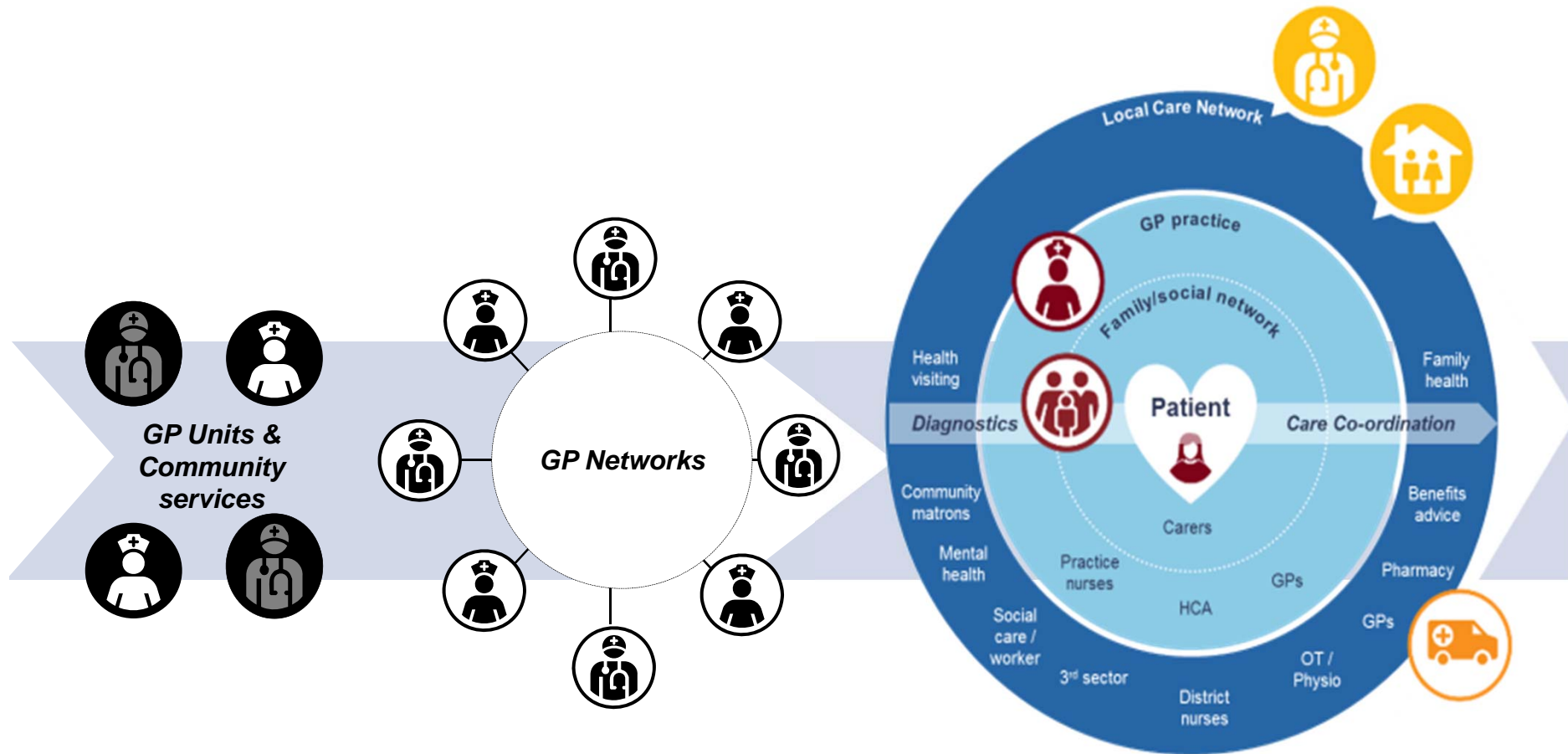
- Take action on prevention, to reduce the burden of disease and keep people healthy.
- Invest in new care models to deliver services.
- Become more efficient in everything we do, and embrace innovation and new technologies.

But The *Five Year Forward View* is also clear that **these alone will not be enough** to close the £30 billion gap. Additional funding from the government will be required for the NHS (as well as partners in social care) to maintain and improve services.

Southwark CCG is well placed to meet the challenges posed by the *Five Year Forward View*. We have been working with our partners across health and social care to change the way care is delivered to patients to make it more personalised and responsive.

- GPs have now come together in **federations** to work together at scale and with greater resilience to reduce variation and improve quality, with an enhanced ability to work with others to provide a wider range of community based services.
- We rapidly moving towards agreement with partners to establish **Local Care Networks** which will bring together all health and social care organisations, the voluntary sector and patient groups and are founded on neighbourhoods of local populations.
- Local Care Networks will have the autonomy to act to improve health and wellbeing outcomes for their designated population with a strong emphasis on **prevention and early intervention**.

The Local Care Network model



Primary care working within LCN's

- The *Forward View* into Action: Planning for 2015/16 guidance was published on 24th December 2014. This operating guidance for the NHS relays requirements and announcements included in the Five Year Forward View and the NHS financial allocations for 2015/16.
- The guidance sets out the first steps the NHS should take in 2015/16 towards implementation of the vision set out in the *Forward View* document.
- In response to the guidance, CCGs are required to complete a short 'Operating Plan', which should include:
 - A declaration of commitment to meeting national requirements;
 - A statement of ambition for the improvement of NHS performance indicators;
 - Demonstrate a credible financial plan;
 - Set a clear forecast of anticipated activity levels; and also
 - Describe some key programmes of service improvement.
- As CCG's current plans were written last year to cover the period until the end of 2016, the guidance requires CCGs only to review and refresh their plans for 2015/16 (these two year plans were endorsed by the HWB Board last year).

What's new in this year's planning guidance?

- The specific national requirements set out in this year's guidance are very similar to those issued last year. The exception is additional performance targets, which establish maximum waiting times for psychosis and IAPT services:
 - By April 2016, it is expected that more than 50% of people experiencing a first episode of psychosis will receive treatment within two weeks.
 - At least 75% of adults should have had their first IAPT treatment session within six weeks of referral, with a minimum of 95% treated within 18 weeks.
- The CCG is currently working with providers to identify performance and activity trajectories in these areas.
- The operating planning guidance emphasises the requirement for CCG's to maintain an intense focus on ensuring performance and all NHS Constitution standards (e.g. A&E and RTT targets) are consistently delivered for their populations.

What's new in this year's planning guidance?

- Planning guidance confirms an additional £1.83bn is to be allocated to the NHS as well as a further investment of £480m nationally to be used to support transformation in primary care, improved mental health and the transformation of local health economies. The guidance confirms winter pressures funds will be made available to trusts (via commissioners) upfront rather than in-year as had been the case previously.
- The guidance outlines a 'permissive' approach to local health economies developing and implementing new models of care transformation. The document describes an opportunity for "vanguard" areas to move at pace on the implementation of the models of change outlined in the *Forward View* (see previous slides).
- Local areas are also "strongly encouraged" to use 2014/15 units of planning (SPGs) to develop and progress transformation and whole system working is also strongly emphasised.

The *Forward View* into Action guidance is particularly relevant to the work of health and wellbeing boards in the following ways:

- The emphasis on a radical new approach to public health and prevention with CCG and local authorities asked to set and share quantifiable levels of ambition to reduce local health and healthcare inequalities and improve outcomes for health and wellbeing. These should be supported by agreed actions to achieve these, such as specifying behavioural interventions for patients and staff, in line with NICE guidance, with respect to smoking, alcohol and obesity, with appropriate metrics for monitoring progress. Further guidance is anticipated and the approach should be specified in the Health and Wellbeing Strategy.
- The encouragement to all local areas to develop a shared vision of health and care for their populations in the context of the strategic choices outlined by the *Forward View*. There is a call for partners to look afresh at their medium-term strategies so that they explore opportunities to create the conditions for rapid early adoption of the new models described in the *Forward View*.

- CCGs are to lead a major expansion in 2015/16 in the offer and delivery of personal health budgets to people, where evidence indicates they could benefit.
- The ambition for the level of improvement agreed by CCGs and Councils in Better Care Fund (BCF) plans should be reviewed if there is a material change in their assessment of the risk to delivery, taking into account:
 - actual performance in the year to date, particularly through the winter;
 - the likely outturn for 2014/15;
 - progress with contract negotiations with providers.
- Any such review should be undertaken within the partnership underpinning local BCF planning and approved by the Health and Wellbeing Board.
- The Health and Wellbeing Board will be asked to endorse a refreshed CCG operating plan. The updated plan will be made available at the March 2015 HWB meeting. The refreshed plan should reflect any updated Health and Wellbeing Strategy.

Example of local responses to the *Forward View*

Prevention	Integration
<p>Enhancing prevention and investing in smoking cessation.</p> <p>Strengthening early intervention services to address obesity.</p> <p>Preventing and reducing the use of alcohol. Developing approaches with our providers to influence employee behaviours and attitudes.</p> <p>Building community resilience by improving access to good information and advice on health & well-being.</p>	<p>Develop detailed commissioning ambitions for integrated locality care, testing new models of care and Locality Care Networks.</p> <p>Continued development and implementation of the service model for the Dulwich locality.</p> <p>Commission enhanced homecare services.</p> <p>Enable independence and care at home through the expansion of self management support and telecare.</p>
Mental health and parity of esteem	Primary and Community care
<p>An enhanced mental health offer across primary and community care including investing in dementia services and procuring extended talking therapies.</p> <p>Strengthen community based crisis management services. Re-commission community drug and alcohol services to improve patient recovery and outcomes.</p> <p>Provide assessment and treatment for people with Autism/Asperger's in line with Care Act (2014) requirements.</p>	<p>Implement and embed extended primary care access with GP Federations in North & South localities.</p> <p>Commission community pathways and outcome measures for patients with common health conditions (notably diabetes; respiratory illness; sickle cell for children; paediatric phlebotomy)</p>

The above summarise the type of commissioning intentions likely to be included in the CCG's Operating Plan. A final draft of commissioning intentions will be presented to the HWB Board in March 2015.