

Paper NHSE191403

BOARD PAPER - NHS ENGLAND

Title: The NHS Five-Year Forward View

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Purpose of paper:

- To update the Board on progress, direction of travel and next steps for the forward view.

Actions required by the Board:

- Note the current work to develop the Five Year Forward View for publication during the Autumn.

The NHS Five-Year Forward View

Context and objectives

1. The future challenges faced by the health service have been well-rehearsed: changing health needs, rising expectations and constrained public resources combine to make the coming years a crucial inflection point for the NHS. The Forward View will set out how the health service and its partners can rise to these challenges.
2. The Forward View aims to influence the national debate by outlining the challenges and choices for further discussion. It is intended to provide:
 - a **clear vision** beyond just confronting the financial gap, setting out the contribution citizens, patients, the NHS and its partners can make to the health of our nation, and the transformation required to meet the challenges ahead;
 - a **shared understanding** of the extent and nature of the gap between where we are and where we need to be, including: the *financial* challenge, the '*health*' opportunity and the '*care*' opportunity. Transformation requires all three to be tackled;
 - a range of **care models** that could help close these gaps, and the key incentives and enablers we need to put in place to support delivery;
 - **priority areas** for targeting transformation and the potential benefits for patients and taxpayers; and
 - **actions** that we can take nationally to create the conditions for local action and improve care for the patients of today and tomorrow.

The process

3. Rather than commissioning new work, wherever possible we are drawing on our existing work – particularly responses to A Call to Action and the local five-year plans that have been developed by clinical commissioning groups (CCGs) and providers. We are keen to ensure that our proposals are grounded in, and designed to accelerate, the innovative approaches already in train across the country.
4. The project has been divided into fifteen work-streams (described below), working alongside partners from across the system including national NHS bodies, but also think tanks and local commissioners and providers. We have also engaged a range of patient and carers' groups, as well as other third sector organisations. Many of these have been invaluable in generating our initial insights.

Emerging thinking

5. We know that the NHS faces a financial challenge in the coming years. However, this should not obscure the opportunity we have to improve the quality of care the NHS provides as well as to improve people's health and prevent them from becoming ill in the first place.
6. We are considering questions including the following, which the Board are invited to discuss and identify proposals they would wish to see included in the Forward View.

	KEY QUESTIONS
1.	The health of our population: What is the current health status of the population, including key risk factors (such as alcohol & smoking) & opportunities for reducing demand? How can we engage the population, and how could this impact demand?
2.	Reducing the health gap: What contribution can the NHS make to improving health and reducing demand, and what is it that we need others to do (including other sectors, local/national government, and individuals themselves)?
3.	Prevention: How might we use the workplace in general and the NHS workplace in particular to increase the health and wellbeing of our population? How can we ensure the workforce is more representative of the people we serve?
4.	The informal/hidden workforce: What tangible steps can we take to recognise, support and build the capacity of those who care for others and themselves and support prevention?
5.	The future patient: Given changing demographics, what kind of care and services will individual patients need from the NHS when prevention fails? What would a high quality service & experience look like to a more diverse population with multi-morbidities, & how can we better support all patients to be more active in their own care?
6.	Future commissioning models: How might commissioning be organised to reflect and manage changing patterns of demand, refocussing models on quality through the patients' eyes?
7.	Health and Social Care Integration: What is our view (as an NHS system) of integrating Health and Social Care? How would it change patterns of demand and what would it mean for how we provide, commission and regulate care and the workforce?
8.	New Care Models: What is the menu of clinical delivery systems that might support a transformation in quality & what are the benefits? How can we ensure delivery (drawing on lessons from the past and including detailed work on the workforce & leadership required to deliver this)?
9	Analysing local health economies: Can we describe the different conditions within which organisations work, allowing us to identify the most appropriate models and interventions for achieving local improvement?
10.	The financial gap: What is the likely extent of the financial gap on the current trajectory what would be impact of different interventions on closing this gap?
11.	What is the true 'cost' and 'value' of the NHS to UK plc? How can we consider the fuller ways in which the NHS adds value by keeping workforce healthy and also as part of a major a growing sector of the UK economy?
12.	How can we use the NHS as a lab for innovation? What could we do to use our £100b muscle to foster innovation on an industrial scale?
13.	Technology: How do we make the NHS future-proof and respond to the data revolution and introduction of genomics, technology and the personalisation of care?
14.	What are the potential patient benefits? What tangible and visible benefits would citizens and patients see if we are successful?
15.	What is the underpinning model of change? To provide clarity on respective roles of commissioning, provision and regulation to effect the change we need to accomplish.

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