

Paper NHSE180702

### **BOARD PAPER - NHS ENGLAND**

Title: Strategy: Call to Action

**Clearance:** Bill McCarthy, National Director: Policy

Purpose of paper:

• To provide the Board with an update on the strategy process announced by the chairman and the Chief Executive in June.

#### Key issues and recommendations:

The Board is asked to note publication of a strategy 'Call to Action' supported by strategic partners; and the process for involvement and engagement going forward.

#### Actions required by Board Members:

• The Board is asked to note publication of a strategy 'Call to Action' supported by strategic partners; and the process for involvement and engagement going forward.

#### **Strategy: Call to Action**

#### Purpose

1. To provide the Board with an update on the strategy process announced by the Chairman and the Chief Executive in June.

### Background

- 2. At the NHS Confederation Conference in June, the Chairman and the Chief Executive both spoke about the importance of the NHS having a clear direction so that it can best serve patients and communities over the next five to ten years. They announced the start of a strategic process led by NHS England in partnership with Clinical Commissioning Groups (CCGs), Health & Wellbeing Boards and national partners.
- 3. The strategy process is intended to promote a new style and method of working, reflecting strong collaboration between health and care partners; clear voice and active engagement of local communities; all focused on how best to shape care around the interests of patients now and for future generations. Over the next 12 months, the strategy work will have seven products three of which are 'thought leadership' for the NHS as a whole; and four of which are strategies for NHS England's own functions:

#### (i) A Call to Action - The Case for Change

The clinical, safety and financial facts and data supporting the arguments that the NHS must change how it delivers health and care services in the interests of patients and communities.

#### (ii) A Call to Action – Local leadership and engagement

The process by which the public, patients, the NHS and its partners can respond to the Call for Action. This will lead to 5 year commissioning plans owned by each CCG, with the first 2 years covering hard edged commitments.

#### (iii) Future scenarios

An opportunity to bring together in the Autumn leading thinkers on healthcare to share views on the shape of services 10 years out.

#### (iv) Specialised commissioning strategy

This will look at how we currently spend our specialised budget and will examine how best to respond to the ambitions of patients in future.

# (v) Primary care commissioning strategy

This will look at how primary care is currently structured and how it might be developed into a wider and deeper clinical offer, shaped by patients and local communities.

(iv) and (v) taken together will lead to 5 year direct commissioning plans owned by NHS England with the first 2 years covering hard edged commitments.

# (vi) Transparency and public participation strategy

This will identify ways to promote better use of data and technology and will suggest ways of giving patients more direct influence over the services they use.

# (vii) Tools, levers and incentives

This will address how we pay for services and how we might incentivise higher quality services and service change more generally.

# The 'Call to Action'

- 4. The 'Call to Action' was published by NHS England on 11 July. We have the support of Monitor, Trust Development Agency, NICE, PHE, HSCIC and the Local Government Association in this undertaking. This can be viewed online at <a href="http://www.england.nhs.uk/wp-content/uploads/2013/07/nhs-belongs.pdf">http://www.england.nhs.uk/wp-content/uploads/2013/07/nhs-belongs.pdf</a>
- 5. The analysis is clear:
  - The NHS is loved, respected and benchmarks well against other health systems.
  - The core values and commitments set out in the NHS Constitution are essential for the wellbeing of patients and communities.
  - But the challenges of aiming for excellent outcomes, coping with technological and demographic trends, and living in an age of austerity are unprecedented in the NHS' 65-year history.
  - NHS England cannot expect the taxpayer to bridge a potential £30bn funding gap between 2013/2014 and 2020/2021, rising to a possible £60bn gap by 2024/2025; will not concede on standards, scope or funding regimes; and so must work with patients, partners and local communities to accelerate beneficial change.
  - This will require new relationships between citizens and services: active citizens owning their NHS.
  - And much greater integration of public services around the needs of patients and local communities.

# Next Steps

6. Along with the 'Call to Action', NHS England has designed a series of aids targeted at CCGs to help them organise local events and debates; has worked

with NHS England Area Teams in designing methods for co-ordinating local contributions; is working with voluntary sector organisations to design and deploy methods to connect with harder-to-reach communities; will be working with NHS Confederation and Local Government Authority to run a series of national and local events throughout the 'Big Conversation' period.

#### **Conclusion**

7. The Board is asked to note publication of a strategy 'Call to Action' supported by strategic partners; and the process for involvement and engagement going forward.

#### **Bill McCarthy**

#### **National Director: Policy**

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