

NHS ENGLAND – Board Paper

Title:

NHS performance and progress on implementation of 'Next Steps on the NHS Five Year Forward View'

Lead Director:

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Purpose of Paper:

To provide the Board with a summary of NHS performance and give assurance on the actions being taken by NHS England and partners to recover, sustain or improve standards.

To provide the Board with an update on implementation of the key commitments included in 'Next Steps on the NHS Five Year Forward View'.

The Board is invited to:

Note the contents of this report and receive assurance on NHS England's actions to support NHS performance and progress with the implementation of 'Next Steps'.

NHS performance and implementation of 'Next Steps'

Introduction

1. 'Next Steps on the NHS Five Year Forward View' published in March 2017, is NHS England's business plan for 17/18 and 18/19. It sets out a range of specific commitments for improving the NHS over the next two years.
2. This paper focuses on the progress we are making in addressing the following priorities identified in 'Next Steps':
 - Urgent and emergency care
 - Primary care
 - Cancer
 - Mental health
 - Integrating care locally
3. This is the first of what will be regular reports to the Board on implementation of 'Next Steps'. Current NHS performance is incorporated in this report. In addition, we publish comprehensive statistics regarding NHS performance on our [website](#).

Urgent and emergency care

4. The Urgent and Emergency Care (UEC) programme brings together all of the ongoing UEC work across the organisations and wider system into a coherent strategy to drive UEC transformation and A&E performance improvement. We are delivering transformation at all points of the pathway for UEC, to ensure that it is clear where patients can access services that best meet their urgent care needs.
5. The NHS continues to see and treat, admit, transfer or discharge more than 9 out of 10 patients (90.3%) who attend A&E, up from 85% at the time Next Steps was published in March. This was achieved whilst also delivering improvements at other points of the UEC pathway, including to 111 clinical consultation, primary care streaming, urgent treatment centre standardisation and reducing delayed transfers of care. We have seen a fall in A&E attendances thanks to these out of hospital interventions in August 2017 (compared with August 2016) and an increase in the number of people speaking to 111 for advice. A&E admissions have increased over the same period, whilst performance has remained stable.
6. The following sections set out more information about progress against the elements of UEC transformation as set out in Next Steps:
 - In July 2017, 61 sites reported that they have a **front-door clinical streaming** service in place. All remaining trusts have plans in place to implement primary care streaming by October 2017, with the exception of two where further assurance is being sought.
 - Next Steps set out an expectation that the NHS and social care will collectively 'free up' **2,000-3,000 beds**, which will be delivered equally between the NHS and social care. Since February 2017, we have therefore been tracking the number of beds freed up as a result of DTOC reductions. In

total, 411 beds have been saved from reducing NHS delays, 228 saved from reducing social care delays, and 144 saved from reducing jointly attributable delays equating to a total of 783 of the targeted DTOC reduction.

- We are on track to deliver 24 hour '**Core 24**' **mental health teams** in A&Es to nearly half of acute hospitals by March 2019. To date, £30m transformation funding has been awarded to 74 areas.
- More people are calling **NHS 111** for advice and treatment on their urgent care needs. In August 2017, there were on average 37,600 calls per day, an increase of 4% on the same time last year. The proportion of people receiving clinical input to their call has also increased for the ninth month in a row, up from 22% to 36.4%.
- The **Ambulance Response Programme** continues to be implemented with a new set of operating standards. We are also implementing 'see and treat' services with paramedics, and in July 2017, 574,909 emergency calls received a face-to-face response from the ambulance service.

Primary care

7. The Primary Care Programme is supporting the delivery of the General Practice Forward View by increasing investment in primary care services, developing an increased and expanded workforce and supporting the improvement of access, services and premises:
 - In 2017/18, we plan to increase investment in GP services; a further step towards our overall ambition that by 2020/21 funding will rise by 14% in real terms to £2.4 billion. Figures published by NHS Digital on 20 September show that in 2016/17, total GP investment was £81m above the funding profile set out in the chart in the General Practice Forward View, being a 3.2% real terms increase on the prior year. This is the fourth real terms annual increase in a row, which contrasts markedly with real terms cuts in the years prior to the creation of NHS England. Investment in general practice is up 13.9% since the creation of NHS England in 2013/14.
 - We are on track to offer **extended access** to 50% of the country by March 2018, with 56 CCGs currently offering this, and a further 26 CCGs planning to do by the end of September (40%).
 - In August 2017 we announced the expansion of our **international recruitment** to boost GP numbers. We have now confirmed schemes across the country covering **an additional 601 doctors** with more areas due to be announced early in the New Year. Health Education England (HEE) has increased GP specialty training places to 3250 per year.
 - As at the end of March 2017, the **wider workforce in general practice** has grown by 2,709 FTE since September 2015, putting us over half way to meeting the wider target. The majority of this increase was seen in staff with direct patient care responsibilities (e.g. clinical pharmacists, dispensers and health care assistants). There are now **over 1,000 clinical pharmacists confirmed** or in post in GP practices. There are also an **additional 363 mental health therapists** in primary care.
 - There have been c.800 completed schemes overall to date and a further 1000 are planned to be delivered within the next three years to **modernise primary care facilities**.

Cancer

8. We continue to focus specifically on recovery of the **cancer 62 day** from referral to treatment standard; July 2017 performance was 81.4% against a standard of 85%. This includes deploying over £10m in intensive support teams to hospitals, and the implementation of optimal pathways for lung, prostate, upper and lower GI and bowel cancers.
9. In October 2016, NHS England announced a £130 million investment in **modernising radiotherapy** over two years to fight cancer and cure more patients, and in early 2017, the first 23 hospitals received new or upgraded equipment. In Next Steps on the Five Year Forward View, we committed that over 50 new radiotherapy machines in at least 34 hospitals will be rolled out over the next 18 months. So far in 17/18, we have allocated funding for 20 replacement machines in 18 Trusts.
10. Wave 1 of transformation funding for improving **early diagnosis** has been agreed for over half of the Cancer Alliances and vanguard partnerships.

Mental health

11. Since introduction of the first access **standards for mental health**, we are on track for delivery in 2020/21. This includes the ambition of 95% of children and young people in need accessing evidence-based community eating disorder services within one week for urgent cases and within four weeks for routine cases, with the latest data showing performance of 73% in Q1 2017/18. The proportion accessing within four weeks (for routine cases) has remained stable at 79%. 75% of people started treatment for early intervention in psychosis within 2 weeks in July 2017. The monthly annualised access rate for May 2017 was 17.1%; this is an increase from April 2017 which had an access rate of 14.3%.
12. The monthly **IAPT recovery** standard was met for a fifth consecutive month with a rate of 50.0%. 89.3% of people had their first treatment within six weeks of referral.
13. In September 2017 we published the Q4 mental health dashboard, showing a final **mental health investment** outturn position for 16/17 of £9.7bn, from £9.1bn in 15/16. Hence the 'investment standard' was clearly met.
14. Plans to open 150 – 180 new **CAMHS Tier 4 beds** across the country over the next two years have been agreed. This will help to reduce travel distances and rebalance capacity to where it is most needed.
15. In September 2017 we announced the four selected providers for the new **mental health Mother and Baby Units** expected to open in 2018: Kent and Medway NHS & Social Care Partnership Trust, Devon NHS Partnership Trust, Lancashire Care NHS Foundation Trust and Norfolk & Suffolk NHS Foundation Trust.

Integrating care locally

16. We continue to work with our most advanced STPs, the **Accountable Care Systems** (ACSs) to co-develop the model of population health management. By the end of October, all ACSs will have agreed and signed Memorandums of Understanding, setting out what they will be expected to deliver and how the

flexibilities described in Next Steps will operate.

Recommendation

17. The Board is asked to note the contents of this report.