The 2015 Challenge

our prescription for the election
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The 2015 Challenge: our prescription for the election

As the 2015 general election approaches, we need to ensure that we have a mandate to radically reshape care around people’s needs and aspirations, which are now very different from when the NHS was created. We also face a perfect storm of inexorably rising demand for health and care, and financial austerity. The pressures on the whole system have never been greater.

In the face of this, an unprecedented level of consensus exists across the system on what the challenges are, and how they should be addressed. Twenty one organisations representing health and care charities, local government, NHS staff and leaders published the 2015 Challenge Manifesto in the autumn of 2014. Our manifesto is both a vision for our future health and care system and a set of shared ‘asks’ of politicians and policymakers which are essential to enable change.¹

Recent political announcements, and publications and programmes from national bodies, contain helpful steps and indicate we are moving in the right direction. But there is much more to do if we are to make a sustainable health and care system a reality.

With just weeks remaining until the election, this paper sets out for politicians and national policymaking bodies our shared analysis of progress so far on the changes we asked for, and the immediate next steps required during the election period and before summer 2015.

In addition, addressing the challenges fully will require a long-term effort from the next Government, Parliament and the national bodies. We want to work with the national bodies and the next Government over the coming months and years, as they put in place the conditions for change. Together, we can avoid a crisis if we act quickly to reshape the health and care system so that it remains sustainable and delivers the high-quality, compassionate, personalised care and support we wish for ourselves and our loved ones.

Leaders at all levels of health and care, and in all local areas, need to drive the changes required. They will do this through a new leadership model that supports working in partnership: with people who use the NHS and social care and the public; with their staff; and, as peers in local systems, with each other.

These partnerships will be challenging and focused on delivering better health and care, fit for the 21st Century. These local partnerships are the first part of a new compact that must exist between the national system and local leaders, and we remain fully committed to playing our part.

There is a deal here, though. We will only succeed in improving people’s care, and making the health and care system more efficient, if the Government and national bodies put in place the right conditions for local leaders at all levels to work together to reshape care and support.

“Together, we can avoid a crisis if we act quickly to reshape the health and care system so that it remains sustainable and delivers the high-quality, compassionate, personalised, care and support we wish for ourselves and our loved ones.”
Our prescription for the 2015 general election

Different parties’ speeches and pledges have indicated progress on many of our ‘asks’.

**We now need all parties’ general election manifestos to:**

- Prioritise reducing preventable illness and maintaining wellbeing across all public services, and set out how local areas’ efforts on this will be supported
- Detail concrete plans to make mental health services as accessible to people as physical health services by the end of the next Parliament
- Commit to adequate funding for health and social care – including transition funding to enable service change – and the next Government must begin to deliver on this in its first budget and spending review
- Commit to providing the stability and consistency required for local areas to continue to make progress on vital work to reshape care. The principles of the Five Year Forward View have secured broad support and the next Government should support their implementation as well as avoiding yet another top-down, large-scale structural reorganisation of the administration of the NHS.

**Politicians’ leadership role has never been more important.** National and local politicians must be candid with the public about the need to change the way we deliver care, and the tough choices required if we are to sustain a world-class health and care system. If necessary change is blocked, the funding gap will increase. Proposals for service change need to be developed and championed by commissioners and providers, clinicians and politicians working in partnership. At the heart of what they do will be a new engaged approach to this that places people who use services, the public and staff at its heart. This will be focused on achieving the best possible health outcomes and sustainable services within the resources available.

**The national policymaking bodies have made much valuable progress in creating the conditions for change.** By summer 2015, we also need to see substantial progress towards achieving these key asks:

- A stronger vision and action to make health and wellbeing a shared, fundamental priority across all public services, moving this from rhetoric to reality
- A genuine push to deliver supported self-management and personalised care and support planning at scale, through a sector-led programme of work, supported by national bodies, as part of wider efforts to personalise care
- A programme to ensure our health and social care workforce is developed and supported to work in a more open culture, to operate within both communities and hospitals, and deliver coordinated and personalised care as part of a more integrated system
- A simplified outcomes framework which aligns across healthcare, public health and social care
- Faster development of new payment mechanisms in the NHS, to support more integrated and outcome-focused care

Our organisations want to work in partnership to help the national bodies to develop the detail of some areas, and to support implementation over the next few years through co-production of plans and delivery.
Background: What is the 2015 Challenge?

In May 2014, a partnership of eight national organisations representing health and care charities, local government, staff and leaders published the 2015 Challenge Declaration, outlining the seven challenges that politicians, policymakers and the public need to address after the election.3

The momentum and consensus behind our 2015 Challenge has continued to grow. Last September, 21 organisations launched the 2015 Challenge Manifesto, which contains both a vision for our future health and care system, and our 15 shared ‘asks’ of politicians and policymakers to enable change.

Support people to stay as well as possible for as long as possible

Reshape care around the needs, aspirations and capabilities of people today

Develop and support our workforce to meet future needs

Strive to continually improve quality and outcomes

Have adequate funding

The time for action is now

Read the 2015 Challenge Manifesto and the 2015 Challenge Declaration at www.nhsconfed.org/2015Challenge
Vision: What is the 2015 Challenge trying to achieve?

The 2015 Challenge Manifesto sets out the better future we want to shape for health and care provision, and the steps needed to make this a reality.

A health and care system fit for the future must:

- invest in prevention and support people to stay healthy
- redesign services around people’s changing needs and aspirations
- empower people to shape their own care, making supported self-care the default assumption for patients
- give the public a real say about services
- continually improve quality and safety of care
- innovate and embrace new technologies
- equip staff to work in new ways, and value, develop and engage staff to improve care, quality and safety
- eliminate discrimination and reduce inequalities in outcomes
- use its finite resources efficiently, fairly and sustainably, making tough choices
- be accountable to the people we care for and the public.

These points are explained in more detail in the 2015 Challenge Manifesto.

Leaders at all levels need to drive changes to services locally, working in equal partnership with each other, staff, people we care for and local communities. To succeed, they must develop partnerships across organisational boundaries, engage and work with service users and the wider public, and support, value and engage staff.

But these vital changes can only happen if Government and national bodies create the conditions to enable change. Our manifesto spells out what politicians and policymakers need to do.

“Leaders at all levels need to drive changes to services locally, working in equal partnership with each other, staff, people we care for and local communities.”
Analysis: what progress have we made so far?

Since we launched our joint manifesto, the political debate has begun to reflect this consensus, and recognise and discuss the challenges facing health and care. A number of recent policies and programmes set out by national bodies have contained positive steps in the right direction. But there is still much more for all of us to do.

We summarise below the progress made by Government, national bodies and political parties so far on each of the 15 policy asks in the 2015 Challenge Manifesto, and outline the main elements on which progress is still needed.

We need to support people to stay as well as possible for as long as possible

Our asks
1. All political parties must set out in their manifestos how they would support local efforts to reduce preventable illness and improve wellbeing.

Progress so far
The emphasis on prioritising prevention in NHS England’s Five Year Forward View (5YFV) is helpful, as is Public Health England’s From evidence into action.

Next steps required
Given the scale of public health challenges, and the need to begin making progress straight away, a stronger vision from Government, with immediate and clear action, is required. This must make health and wellbeing a shared, fundamental priority across all public services, support health and wellbeing boards to work with partners to ensure all decisions about local services (including those beyond health and care) reflect local priorities for improving health and reducing preventable illness, and contain clear actions for national bodies. Party election manifestos also need to include specific actions to support local efforts to reduce preventable illness and maintain wellbeing.

We need to reshape care around the needs, aspirations and capabilities of people today

Our asks
2. All political parties must commit publicly that they will not impose another top-down structural reorganisation on the NHS, and will instead focus on enabling locally-led improvement of care.


4. All politicians, national and local, must recognise that change in the way we organise care is necessary, and play a leadership role in ensuring debates about change focus constructively on the implications for people’s outcomes, experience and wellbeing.

5. Government and national bodies must make available a range of organisational models for providers, including small providers from the voluntary and community sector, to enable them to deliver clinically and financially sustainable services and reflect the needs and aspirations of local service users and communities. Government to clarify as soon as possible its strategic intent for the ‘pipeline’ of NHS trusts still seeking foundation status.

6. All parties must commit to supporting a national sector-led programme to support health and social care organisations to adopt participation, personalised care and support planning, shared decision-making and supported self-management approaches for all who would benefit.

Progress so far
There is much more to do to empower people to play a far greater role in their own health and care, maintain independence, and to personalise care to individual needs, wishes and assets/capabilities. The significant practical and cultural changes this involves will require high-quality local leadership.
and staff engagement, as well as strong support from Government and national bodies. Key recent publications place a welcome emphasis on this, and many of the commitments in the Department of Health’s *Personalised Health and Care 2020* are a step in the right direction, though there is still a long way to go in delivering the extent of change needed.

We are pleased the 5YFV emphasised the responsibility of local leaders to work with staff, patients, local partners and each other to develop new models of care, and outlined a number of different approaches for local areas to choose from rather than imposing a detailed blueprint. We cannot afford to delay efforts to reshape people’s care, improve support for people with long-term conditions and strengthen primary and out-of-hospital care, and sustainability issues are pressing in many local areas. The next Government must therefore stick with the principles and support the implementation of the 5YFV, which was endorsed by six national arm’s length bodies and reflected many elements of consensus across the whole system, rather than putting on hold vital work to redesign models of care. The New Models of Care in the Vanguard programme are based on service models rather than structure and are welcome.

It is also helpful that the Dalton Review set out a range of organisational models to support individual providers in delivering new models of care. However, we note there remains a need to ensure that all providers have a clear future within a sustainable health and care economy, including clarifying intentions for NHS trusts seeking foundation trust status.

**Next steps required**

Further work is needed to ensure people’s own capabilities, and local community assets, including the contributions of voluntary and community sector organisations, are used to their full potential to support health and wellbeing. In particular, by summer 2015 we need to see national bodies supporting a sector-led programme of work that makes a genuine push to deliver supported self-management at scale, as part of wider efforts to personalise care.

Politicians at national and local level have a vital leadership role to play in being candid with the public about the need to change the way we organise care, and the tough choices required if we are to sustain a world-class health and care system. They must help ensure debates about changes focus on the evidence about securing the best outcomes for people rather than on conserving individual buildings. For their part, the national bodies now need to ensure they consistently behave in ways which support and enable local partnerships to lead the changes required to develop better models of care at scale.

The principles of the 5YFV have secured broad support and the next Government should implement these, as well as avoiding yet another top-down, large-scale structural reorganisation of the NHS, in order to provide the stability required for local areas to continue to make progress on vital work to reshape care and support. The New Models of Care programme must focus on local flexibility and service design, not structure.

Clarity is still needed on the Government’s intentions for NHS trusts struggling to achieve foundation status.

“We cannot afford to delay efforts to reshape people’s care.”
We need to develop and support our workforce to meet current and future needs

Our asks
7. Government must initiate and resource a development programme that equips and supports today’s workforce for the challenges of working in new ways, including working across and with different sectors and professions, engaging service users and supporting personalised care and support planning, shared decision-making and self-management.

8. Government must help build consensus around the expectations on the health and care workforce to provide seven-day services more widely, and provide support for making the changes required to achieve this.

Progress so far
The new models of care people need cannot work without the right numbers and mix of staff, in the right places, supported and equipped to work in new ways.

Health Education England has begun to lead work to develop the NHS workforce for the new models of care.

It is not yet clear whether there will be a development programme to equip and support our workforce for the challenges of working in new ways, including across and with different sectors and professions, engaging service users and supporting personalised care and support planning, shared decision-making and self-management, which reflects fully the scale and urgency of the challenges and commands wide support.

A number of stakeholders continue to express a high level of concern about how shortages of some professionals in some places will be addressed.

Next steps required
Given the scale of change that is needed in how, and where, people work, further progress is urgently needed on a development programme to ensure the NHS workforce is equipped and supported for the challenges of working in new ways, including across and with different sectors and professions, engaging service users and supporting personalised care and support planning, shared decision-making and self-management. There is also a need to improve development and support for social care staff.

We also face significant challenges in strengthening and expanding community-based care and support for people in their homes and communities, and working across traditional boundaries between services in order to develop a workforce across health and social care that is fit for the future.

Leaders of health and care organisations, for their part, must engage with and value staff to build trust and confidence, use the talents and experience of the people who deliver services, welcome and support people who raise concerns, foster compassion and encourage retention. Positive work is already underway in these areas and there have been improvements, although there is a long way to go before these aspirations are met throughout the health and care system.

The pressures seen in A&E this winter, which are symptomatic of pressures elsewhere across the system, help illustrate the need for the next Government to prioritise helping to build consensus around the expectations on staff providing seven-day services, and provide support for making the changes required to achieve this.
We need to strive to continually improve quality and outcomes

Our asks
9. All parties must set out concrete plans to make mental health services as accessible to people as physical health services, over the course of the next Parliament. This must include committing to:

- extending rights – all mental health service users should be able to access services from a provider of their choice on the same basis as service users with physical health problems

- continuing to tackle stigma, including by funding the Time to Change programme over the lifetime of the next Parliament.


11. Government must ensure the right conditions are in place to enable the locally-led deployment of new technologies, coordinated information systems and research at pace and scale to underpin better models of care and improve quality, efficiency and people’s experience.

Progress so far
A number of recent announcements on mental health from different political parties and national bodies are significant steps towards making mental health services as accessible to people as physical health services. However, no party or national body has yet set out plans which are substantial enough to lead to genuine parity by the end of the next Parliament.

We are disappointed that the national bodies have not yet committed to develop the new approach to performance, and the simplified outcomes framework which aligns across health and social care, which we called for in our Manifesto.

The 5YFV emphasised the importance of technology, data and research in supporting greater self-management, quality improvement and efficiency, and Personalised Health and Care 2020 contains many steps in the right direction.

Next steps required
We now need all parties’ general election manifestos to detail concrete plans to make mental health services as accessible to people as physical health services by the end of the next Parliament.

By summer 2015, we need the national bodies to make significant progress towards a simplified outcomes framework which aligns across healthcare, public health and social care and allows room for personalised outcomes developed and agreed with individuals.

To realise the full potential of technology, data and research, the next Government will need to work with the national bodies and representatives across health and local government to develop further the level of ambition and support to encourage locally led adoption of technologies, data and research that add value.

“A number of recent announcements are significant steps towards making mental health services as accessible to people as physical health services.”
We need to have adequate funding

Our asks

12. Government must generate the stability that would enable longer-term approaches to investing to achieve savings. All parties should set clear expectations on the level of health and care spending for at least the next Parliament. National bodies should be tasked with facilitating health and care organisations to take a longer-term approach to investing in service change, particularly those that require spending up-front in order to deliver savings later.

13. Government and national bodies must commit to making faster progress towards new payment mechanisms that support integrated, personalised care and reward good outcomes.

14. Government must put in place as soon as possible a transition fund of at least £2bn per year of new money, for two years, to help enable investment in service change.

15. The political parties must recognise their accountability for the decisions they make on funding health and care adequately.

Progress so far

The Autumn Statement8 contained a welcome commitment to transition funding to enable NHS service change. Work to shape the detail of how this will work is ongoing, and the King’s Fund and Health Foundation are working to quantify how much funding is needed and how such a fund might operate.

The 5YFV estimated the level of additional funding needed by the NHS, and the extent to which this need will grow if the NHS is not able to generate the maximum potential demand and efficiency gains, including through reshaping care and preventing demand. Political parties have promised different amounts of additional funding for the NHS.

It is clear that the amount of funding so far committed by the Treasury does not match the £8bn per year (in addition to transition funding) required by the NHS by 2020 in the most optimistic scenario in the 5YFV. Even this £8bn funding increase will still require an extremely challenging £22bn efficiency programme.

We are concerned that the funding crisis in social care has been largely overlooked, which will leave vulnerable people without care and increase the pressure on the NHS. Local authorities have already had to make savings of 26 per cent in adult social care over the past four years, the equivalent of £3.5bn, and warn that the reduction to local government spending in the Autumn Statement will make it impossible to protect adult social care budgets. The LGA and ADASS analysis identifies that by 2019/20 the estimated funding gap for adult social care will be £4.3bn, which amounts to 29 per cent of the total budget for adult social care.9 There is an urgent need to address this.

We are calling for the Government and national bodies to urgently commit to speed up the development of new payment mechanisms in the NHS to support more integrated and outcome-focused care. There has also been insufficient progress towards developing longer-term approaches to investing in health and care services that balance risk and reward in the system.

Next steps required

All parties need to both promise at least the minimum amount outlined in the 5YFV, and address the funding crisis in social care. The next Government must begin to deliver on this in its first budget and spending review.

The national bodies need to commit now to faster development of new payment mechanisms in the NHS, to support more integrated and outcome-focused care.

Alongside this, given the current period of austerity, it is imperative that all politicians, the next Government and the national bodies do all they can to support and enable rapid progress on demand and efficiency across health and care throughout the election period and the next Parliament. The coalition behind the 2015 Challenge is keen to engage in the development of the delivery plan and to co-produce the arrangements that will secure the £22bn of efficiency required across the next parliament.
The 2015 Challenge: our prescription for the election

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