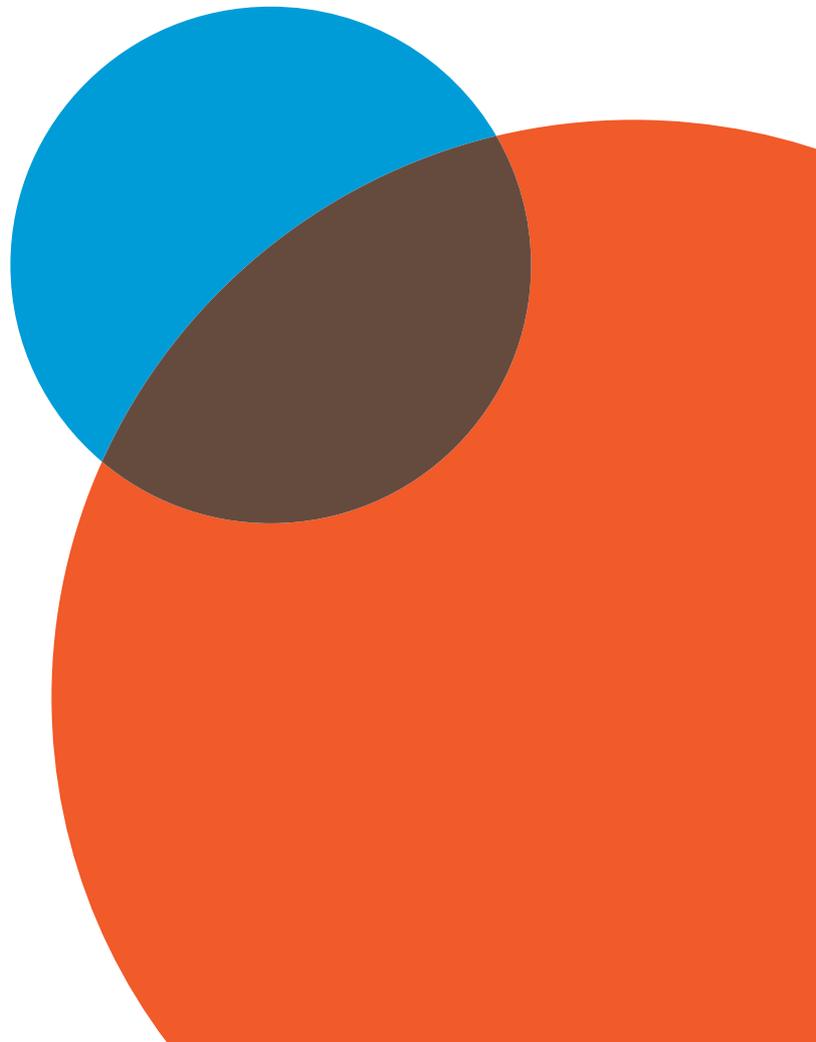
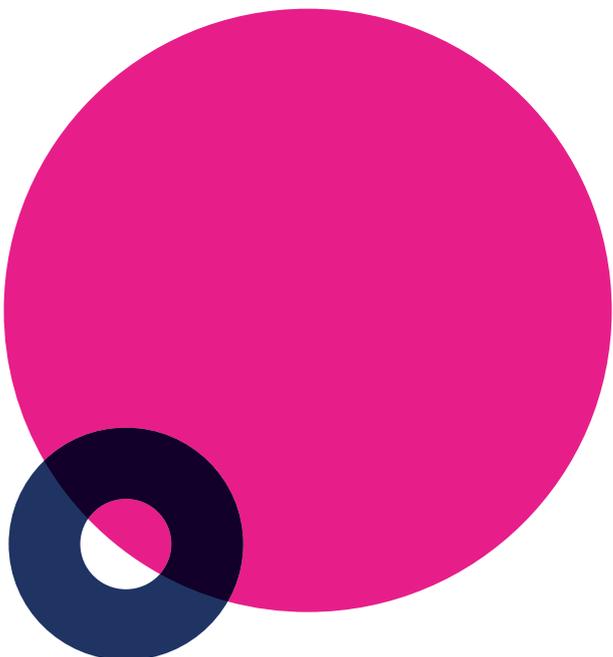
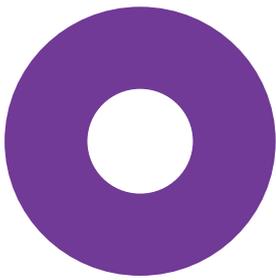


Time to deliver

NHS priorities for the new government



About the NHS Confederation

The NHS Confederation is the membership body that brings together and speaks on behalf of all organisations that plan, commission and provide NHS services in England, Wales and Northern Ireland. We support our members by:

- being an influential system leader
- representing them with politicians, national bodies, the unions and in Europe
- providing a strong national voice on their behalf
- supporting them to continually improve care for patients and the public.

Key points

This report reflects on the pledges made in the Conservative Party manifesto and sets out how NHS Confederation members believe they should be developed to provide a comprehensive programme of action for the new government. It covers both the immediate actions needed, and those that need to be delivered within the lifetime of this parliament, in five key areas: workforce, capital investment, social care, mental health and Brexit.

- The NHS workforce requires sustained and significant investment in recruitment and retention. Meeting the shortfall in numbers across primary, secondary and community care will require careful planning. While the NHS People Plan will go some way to achieving this, the service will require additional funding beyond the government's planned investment of £20.5 billion to create the additional nursing and other posts it needs to meet rising demand.
- NHS estates are in poor shape, with significant investment needed to bring old buildings in line with modern standards. The money promised by the Conservative Party represents the beginning of what is needed and should be considered as separate to the spending required to modernise antiquated IT systems and bring old buildings up to standard.
- The social care sector is facing increasing demand, growing unmet need and its own vacancy crisis. In the short term, a settlement to stabilise the sector must be reached. In the long term, the government must look at ways of improving the level of provision both to enable more people to access care and to reduce unnecessary demand on NHS services. The government should use its majority to deliver a sustainable social care system, backed up by a long-term financial settlement.
- Improving the provision of mental health care across England is now a critical priority. Workforce shortages are most pronounced in the sector and many people trying to access services are not able to secure the support they need. A new mental health bill to implement the review of the Mental Health Act is the only foundation on which meaningful progress can be made.
- NHS leaders are broadly happy with the direction of travel laid out in the NHS Long Term Plan, and with NHS England and NHS Improvement's legislative proposals. Closer integration between providers and commissioners through the creation of integrated care systems and the establishment of primary care networks will be key to delivering better patient care. An NHS bill based on NHS England and NHS Improvement's legislative proposals that gives statutory underpinning to these new ways of working must be laid before parliament to enable the system to push ahead with plans already underway.
- The impact of Brexit on the health of the population must be minimised, and patient safety and access to life-saving drugs must be preserved upon the UK's exit from the European Union. In order to ensure access to medicines and preserve the UK's global position as a centre of medical and technological excellence, those stakeholders with expertise in these areas must be part of discussions over future arrangements between the UK and EU.

Introduction

On Friday 13 December 2019, the Conservative Party formed a majority government following five weeks of campaigning during which the NHS featured heavily in the political pledges and commentary.

Its landslide victory in the polls comes at a time when record levels of demand for services and restrained funding are leaving the NHS unable to provide the level of care patients expect from it. The service continues to struggle to recruit and retain sufficient staff on the frontline, with issues surrounding the taxation of pensions leaving clinical shifts unfilled. Also, the NHS is reeling from historic underinvestment in its infrastructure. Successive governments have failed to provide a sustainable system for social care funding and provision, which hinders the NHS's ability to deliver for patients.

Added to that, the NHS is about to face what is predicted to be the worst winter on record for patient waiting times and performance, and the future of the United Kingdom, including the NHS's international workforce, is uncertain following its imminent departure from the European Union.

This report reflects on the pledges made in the Conservative Party manifesto and sets out how our members believe these need to be developed further to provide a comprehensive programme of action for the new government. Our report covers both the immediate actions needed, and those that need to be delivered within the lifetime of this parliament, in five key areas:

- workforce
- social care
- capital investment
- mental health
- Brexit.

The Conservative Party manifesto made a number of welcome pledges to bolster the NHS, including 50,000 more nurses, 6,000 more GPs, 6,000 more primary care professionals and the abolition of car parking charges. The NHS Confederation calls on the incoming government to fully cost these commitments and provide the additional funding to deliver them as soon as it can. There also remain areas where the government recognises there are ongoing funding problems, including the pension annual allowance, capital investment and social care. Our members would like to see rapid action on these areas to enable them in turn to deliver the NHS Long Term Plan.

Across the country local health and care systems are finalising their plans for delivering health and care services for the next five years. The challenges are significant but local leaders are committed to making a difference for their communities. However, in turn, health and care systems need the government to deliver on its promises, provide the funding to meet its election pledges and work with us to develop funding solutions in other ongoing problem areas. The NHS Confederation looks forward to working with the Prime Minister, the Secretary of State for Health and Social Care and other ministers to overcome these challenges and in doing so, deliver better outcomes for patients in the months and years ahead.

Workforce

Overview

The NHS employs around 1.2 million full-time equivalent (FTE) staff across its range of services, making it the largest employer in England. There are more than 100,000 FTE vacancies in England in hospital and community services alone. In every month from 2014 to 2019, most hospitals were not able to meet planned staffing numbers in nursing.¹

Workforce is widely regarded as the biggest single challenge facing the health and care sector. Responding to an NHS Confederation survey in November 2019, 94 per cent of health leaders said that supporting and growing the NHS workforce is a key priority and 91 per cent agreed that understaffing across the NHS is putting patient safety and care at risk.² The inability to develop, recruit and retain a skilled workforce risks both stretching our existing services to breaking point and undermining the sector's plans for transforming future service provision.

Conservative pledges

- Deliver 50,000 more nurses by the end of the next parliament.
- Reintroduce the maintenance grant for nursing.
- Deliver 6,000 more doctors in general practice and 6,000 more primary care professionals by the end of the next parliament.
- Introduce an NHS visa.
- Hold an urgent review of the 'taper problem' with doctors' pensions in the first 30 days of government.
- Introduce a points-based immigration system.

NHS Confederation view

The commitments around workforce go some way to meeting the challenges of supply in the NHS. Employers will welcome government support to boost the number of nurses being educated, but also need recognition of the importance of social care and health staff as new immigration policy is implemented. Moreover, the number of new nurses promised is closer to 30,000 when taking into consideration that 18,500 will be delivered through retention rather than recruitment. With vacancy rates of 44,000, even an extra 30,000 will still leave the NHS 14,000 short. It has not been made clear how this recruitment drive will be funded. If the cost of retaining an extra 18,500 nurses is devolved to trusts, it will draw money away from other areas.

Immediate priorities (first six months)

- The expected 2020 Spending Review must set a realistic budget for Health Education England to restore investment in training clinicians; facilitate recruitment and retention programmes; and mitigate the effects of the loss of the nursing bursary.
- Given the potential impact of the pension annual allowance taper on the availability of senior clinical staff, the government should either reform aspects of the tax system or the NHS Pension Scheme to rectify this problem. Any reforms must meaningfully consider the range of staff working across the NHS.

- Ensure prompt delivery of the NHS People Plan by NHS England and NHS Improvement.

Long-term priorities (first two years)

- Integrated care systems should be further empowered to better influence their local labour market, with devolved powers over strategy and planning, supply and retention and deployment.
- Better value could be achieved by giving employers in the NHS more flexibility to use their apprenticeship levy to fund backfill and infrastructure.

Social care

Overview

Social care is seen by 92 per cent of leaders as a key priority for the incoming government, making it the second most pressing concern for health leaders after workforce. The interdependency of health and social care is increasingly recognised as a critical issue, evidenced by the Health for Care coalition – a group of health organisations, led by the NHS Confederation, which have come together to make the case for greater investment in social care. A report last year commissioned by the NHS Confederation and undertaken by the Institute for Fiscal Studies and The Health Foundation, calculated that social care funding would need to increase by 3.9 per cent a year to meet the needs of an ageing population and an increasing number of younger adults living with disabilities. Age UK has estimated that nearly 1.2 million people fall into the bracket of those with unmet needs.³

Conservative pledges

- A three-point plan to develop a long-term solution to social care. This plan included a commitment of £1 billion additional funding for each year that the government is in place, starting from April 2020, working with the other political parties to build a cross-party consensus, and ensuring that nobody needs to sell their home to pay for care.
- Extending leave entitlement for unpaid carers to a week.
- Increase funding research into dementia to look for a cure and increase clinical trials to research new treatments.
- Spend £74 million over three years specifically to increase capacity within community settings for people with learning disabilities and autism.

NHS Confederation view

We support the short-term funding increases outlined in the manifesto, but it falls well short of the secure, long-term funding that is required. The NHS Confederation leads the Health for Care campaign, which estimates that between £1.1 billion and £2.5 billion is needed simply to stabilise social care levels, and between £4 billion and £5.75 billion is needed to return to a model of social care that provides more universal access. Sustainable funding to support the social care needs of people with severe mental illness must also be integrated into the new social care model.

A cross-party approach to the future of the social care system has been advocated by the NHS Confederation. However, we have heard warm words about a cross-party approach to social care before and we need to see immediate action on this.

Health and social care must be viewed as a singular, integrated system that has at its heart the wellbeing of the entire UK population. Without reform and investment in social care, we risk putting the ambitions of the NHS Long Term Plan at risk.

Immediate priorities (first six months)

- Clarity is needed on how the short-term funding increases to cover immediate gaps will be allocated and a long-term financial settlement.

- The new government must make social care funding reforms a priority with commitments within the Treasury in the next Budget.
- A cross-party group for social care needs to be immediately set up and implemented.

Long-term priorities (first two years)

- Any social care settlement should provide secure, long-term funding at a level that enables the social care system to operate effectively, for both older and working-age adults, and deliver the outcomes that people want and need. This should be set at a minimum of £4 billion.⁴
- Eligibility for social care services should be widened and based on need, instead of by means to pay.
- The government must set out a long-term plan to tackle the social care crisis and deliver on the Prime Minister's previous commitment to fix social care.

Capital

Overview

Spending on capital investment in the NHS has fallen from £5.8 billion in 2010/11 to £5.3 billion in 2017/18.⁵ In a survey carried out by the NHS Confederation during the general election, 85 per cent of health leaders cited restrained capital funding as a key issue. With a reported maintenance backlog of £6.5 billion this year, the case for action is clear. The UK has some of the lowest levels of healthcare capital funding in the Organisation for Economic Cooperation and Development (OECD). At 0.27 per cent of GDP, it is 0.24 per cent lower than the OECD average of 0.51 per cent.⁶ While the additional funding promised earlier this year was welcomed, over 92 per cent of NHS leaders remain concerned that it will not be enough to overcome the scale of challenges facing the service, not least the antiquated IT infrastructure and outdated buildings and equipment.⁷

Conservative pledges

- £2.7 billion for six new hospitals with seed funding totalling £100 million promised to a further 21. Although only around £850 million of this is 'new money' with the remainder expected to come from a collective fund that NHS trusts are expected to contribute to.
- Investment in new cancer diagnostic machines to boost early diagnosis across 78 trusts.

NHS Confederation view

The commitments made by the Conservative Party during and prior to the election provide some new funding, ostensibly to build 40 new hospitals. However, to date only £2.7 billion has been made available over the course of this parliament for six to be built. This is compounded by the fact that there appears to be little progress on addressing the underlying maintenance backlogs.

Investment in new cancer diagnostic machines is welcome but must be matched by funding. Before the election this commitment was made with £200 million attached, however the Conservative Party manifesto was more ambiguous, with no exact figure. Moreover, the intention for these machines to be AI-enabled will be wasted without corresponding investment in the more general IT infrastructure across the NHS. Targeted capital investment to mental health and community services must also be prioritised, with provision to each to bolster infrastructure and better enable delivery of services.

Ultimately, the scale of capital funding needed goes far beyond even the most generous pledges made by the Conservative Party in their manifesto. If we are to deliver the ambitions set out in the NHS Long Term Plan, then additional funding must be provided to modernise the infrastructure across the NHS. Reflecting on the Conservative's promise to charge foreign patients to use the NHS, further work must also be undertaken to better understand how this will work in practice.

Immediate priorities (first six months)

- An emergency capital infrastructure fund to make investment available to those trusts with maintenance backlogs deemed high or significant risk⁸ – this equates to around £3.4 billion. This money should be reserved for building restoration rather than new construction.

Long-term priorities (first two years)

- Funding to match the commitment made by the Secretary of State to provide all NHS hospitals and community care organisations with fibre-optic broadband.⁹
- Central funding to make up for any revenue lost from the abolition of hospital car parking charges. The Press Association has estimated that this revenue across 140 trusts is around £245 million.¹⁰
- More support for hospitals planning reconfiguration and redesigns, where a clear business case has been made that this would benefit patient care.

Mental health

Overview

More than eight in ten (84 per cent) of leaders responding to our recent survey said improving mental healthcare should be high or critical priority. Workforce and capital within mental health were flagged as priority areas.

Conservative pledges

- To legislate so that patients suffering from mental health conditions, including anxiety or depression, have greater control over their treatment and receive the dignity and respect they deserve.
- Improve the mental health workforce by providing additional funding to support the recruitment of mental health nurses.
- Ensure that mental health is on an equal footing and treated with the same urgency as physical health.
- £74 million on community support for people with learning disabilities and/or autism to make discharge from hospital easier, as well as improving legislation for people in this area.
- To extend social prescribing.

NHS Confederation view

Mental health is now clearly established as a national priority. However, when fewer than four in ten people who need support are accessing mental health services, there is still a long way to go on the road to equality.

The commitments in the NHS Long Term Plan to increase the spend on mental health as a proportion of the entire NHS budget, and to increase the proportion of the mental health budget that is spent on children and young people, is a step towards true parity.

Our country's progress on mental health is fragile. Successful implementation of the NHS Long Term Plan will require a dramatic increase in the number of people who work in mental health and a significant capital settlement for the sector. Taking concerted action to improve the nation's mental health is the work of a generation. It is going to take the sustained commitment and leadership of government to get us there. And at a time when more and more people are speaking out about their mental health and demanding better support, the government cannot afford not to listen.

Immediate priorities (first six months)

- The new government should support the publication of the forthcoming white paper in response to the independent review of the Mental Health Act and commit to bringing forth a new mental health bill.
- There are significant staffing shortages in mental health and learning disabilities services and so urgent investment and innovation is needed to encourage people to work in the sector, and to retain existing staff.

Long-term priorities (first two years)

- Previous pledges to increase mental health funding should be acted on, with funding reaching the front line.
- Funding should also include ringfenced capital to eliminate the use of shared accommodation and dormitories in mental health hospitals, and for major upgrades in technology.
- The new government should capitalise on young people's interest in mental health by opening more avenues into mental health roles and expanding the number of mental health places available at medical and nursing schools.

Brexit

Overview

With the Withdrawal Agreement still to be approved, it has not yet been determined whether the UK will leave the EU with or without a deal on 31 January 2020. If the Withdrawal Agreement is approved and the UK moves into a transition period, the nation's health will be an important part of negotiating our long-term relationship with the EU. If the UK leaves the EU without a deal, health will need to be a priority in EU discussions. More than half of health leaders consider that a no-deal Brexit could put patient care at significant risk.

Conservative pledges

The NHS Confederation's recommended long-term priorities are currently reflected in the existing high-level ambitions for the future relationship with the EU, as set out in the Political Declaration. The government has also made various commitments to protect citizens' rights and maintain cooperation with the EU.

NHS Confederation view

The test of the impact of any pledges made to date will be how they are translated into a future trade deal and relationship with the EU. Time is of the essence, given the short timescale to agree terms before December 2020, and we should be seeking to define the cornerstones of our future relationship as early as possible. Making health a priority in the negotiations will not only bring certainty to citizens and protect the safety and health of patients, it will also ensure the UK continues to be a great place to work and live and does not lose out on global opportunities.

Immediate priorities (first six months)

The government's first priority for the health of the nation should be to guarantee patient safety and wellbeing when the UK leaves the EU on 31 January 2020 (or on another date).

- **Deal** – Since the time available to put in place the required agreements that will protect the health of UK and EU citizens is limited, we ask that:
 - health is made one of the top priorities in the UK's negotiating mandate and for the health community to have a 'seat at the table' in the development of trade policy and negotiations
 - early agreements are reached that protect patient safety, citizens' rights to healthcare, access to medicines and the prosperity of medical research.
- **No deal** – If the UK leaves the EU on 31 January 2020 without a deal, we ask that:
 - agreements are secured that will avoid delays at the UK/EU border for the supply of medicines and medical devices; continue cooperation on health security matters; and maintain reciprocal healthcare
 - agreements are made so that overseas staff can come to work in the NHS easily and with confidence about the future, to address current and future NHS staffing shortfalls (over 5 per cent of the workforce in the English NHS are EU nationals).

Long-term priorities (first two years)

To secure clarity, certainty and security for patients, the following agreements for the future relationship should be prioritised in the first stage of negotiations:

- **Patient safety** – Shared regulatory frameworks to continue for medicines and medical technologies across the UK and EU so patients are guaranteed a high level of safety and rapid access to new treatments.
- **Access to medicine and medical devices** – Continued cooperation and harmonised standards on medicines and medical technologies, recognising the substantial scale of trade with the EU.
- **Furthering medical research** – Maximum participation in European research to improve patients' options for treatment. The UK has a world-leading science base and in the face of global competition, UK/EU collaboration is vital to remain an attractive destination for cutting-edge research.
- **High standards for public health** – Shared high standards and continued robust coordination mechanisms to protect the health security of the UK and EU from threats that know no borders.
- **Citizens' rights to treatment** – UK citizens to continue to have rights to healthcare in any EU member state for simple, safe access to treatment when working, living or travelling.

Conclusion

In this general election, perhaps more than any other in recent memory, the NHS formed the backbone of each of the three major English political parties' campaigns. Now that the outcome is known, it is time for action. The pledge to increase funding for NHS England by 3.1 per cent last year was welcome, offering some hope in the face of increasing demand. However, subsequent pledges made by the Conservative Party during the general election need to be costed and properly funded to enable the NHS to deliver them.

Funding increases to public health, capital investment and social care, deemed necessary in order to realise the full impact of the uplift to NHS England's budget, are also needed. An absence of funding to address the maintenance backlog will undermine efforts to address demand at the frontline, particularly as we head into the busy winter months. The lack of direction for social care will increase pressure on NHS services and the funding that has been promised falls well short of what is needed to stabilise the sector.

Immediate action must be taken on those priorities identified as critical to the running of the NHS in the first six months of government, with plans drawn up to address the longer-term concerns of the service in order to stabilise the sector and make way for improvement. Without this, there is a very real danger that increasing demand will ultimately outstrip the capacity of the NHS to respond.

The NHS Confederation will continue to represent and support health leaders across the system on how to overcome their collective challenges and will engage with the new government and hold it to account on its progress.

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