

## Healthcare on the brink

### How parliamentarians can support their local NHS

#### Key points

- **Recruitment and retention requires attention.** Nursing vacancy rates, for example, have doubled in three years. To attract students, we need the government to address issues such as affordable accommodation and increased funding of continuing professional development (CPD).
- **International staff keep the NHS going.** Any future immigration policy must include public service value as a key factor. The NHS needs a streamlined and affordable process to recruit professionals from abroad.
- **Brexit could affect medical research, technologies and agreements on treating patients.** It is in both Europe and the UK's interests to maintain cooperation in research and public health issues. We encourage MPs and peers to support the Brexit Health Alliance.
- **The 1 per cent pay cap is unhelpful.** Given current recruitment and retention difficulties the cap should be relaxed, but must be paid for in full at national level.
- **The way the health service delivers care is not sustainable.** The goal has to be to create new forms of integrated services which use data to stratify populations, focus on managing demand and tear down the barriers that have blighted effective care in the past.
- **The NHS is working with local government and others to redesign services.** In return, the NHS needs support from politicians to bring about much-needed radical change.
- **Mental health services face soaring demand yet lack the resources they need.** Parliament must hold the UK government to account and make sure mental health services are adequately resourced.
- **Social care remains in a critical condition.** It has placed an intolerable strain on health services, leaving vulnerable people without support. There needs to be a comprehensive review of funding and of the provision of social care, and for the UK government to put forward reform proposals at the earliest opportunity.
- **Last year, NHS organisations saved a remarkable 3.7 per cent of their turnover in cost improvement.** Yet the gap between funding and demand remains. Staff shortages and the social care crisis are already taking their toll and winter pressures are on their way. An immediate injection of funds could help alleviate pressures, but dedicated transformation funding is also essential and the proposed funding levels for the next two years is woeful. Unless more money is found, more services will have to be cut.
- **There needs to be a comprehensive review of funding for health and care over the coming decade and how we can shape and pay for the services needed to meet that demand.** An Office of Budget Responsibility for Health and Care should be created to determine what proportion of GDP should be invested in the sector.

# What are the main challenges facing health and care?

The next five years will demand more from the NHS than at any point in its history. Challenges in workforce, funding, transformation and mental health have been added to by uncertainty over Brexit negotiations, and in particular the UK's status as a hub of medical research and the future of staff from the EU working in the UK.

Alongside this, in the last few years the UK has seen the largest growth in population since 1945 and significant growth in demand for health and care services from a rapidly ageing population. Yet funding growth during this period has been lower than at any time since the service was founded.

In spite of record demand, the National Health Service has coped and, throughout the UK, has continued to provide good care to millions.

But the strains are also evident. Waiting lists and times are rising, access to GPs is becoming more difficult and, all over the country, patients are stuck in hospital beds, not because they are sick but because there is nowhere for them to go. Meanwhile, thousands in need of mental health support are being denied the care they need or are being kept waiting for too long.

To make the system sustainable, radical reform is needed. Local sustainability and transformation partnerships (STPs) have made progress but remain challenging in many areas. In part, this is because they require leaders to set aside organisational interests in favour of the system as a whole, a challenge that is easier to describe than to deliver. And it is made harder still because change requires clinical and public support – and this can only be achieved by explaining how change will improve services in the long-term rather than simply being viewed as backdoor cuts.

The UK also needs a more mature debate about the role of the independent sector in the NHS. Since universal healthcare was established in 1948, independent providers have supported the NHS in the delivery of free at-the-point-of-use services for NHS patients, with polls consistently showing that the public does not care who provides their NHS services; what matters is getting accessible, high quality and timely care free at the point of use. To this day, the independent sector continues to provide the capital, capacity and capability needed to help the NHS meet the increasing demands it faces – last year, independent hospitals carried out over half a million NHS routine procedures at NHS prices, to NHS standards and free at the point of use. During a time of such pressure, this has to be welcomed.

**So what is to be done? The NHS is gradually becoming unsustainable. Unless action is taken now, the pressures will grow and patients will suffer.**

## Workforce

The UK no longer has a health and care workforce that can deliver what is being demanded. Vacancy rates for nurses nearly doubled (from 6 to more than 11.1 per cent) over the past three years. There has been a 96 per cent drop in the number of EU nurses registering to work in the UK. NHS Confederation members are clear that these high vacancy rates are beginning to have a real impact on patient safety.

The NHS recognises the importance of recruiting and retaining talented staff and there are positive examples of organisations looking at new ways to attract people to the healthcare sector, but there is much more to do.

The nature of training also needs to change. Health professionals need support to prepare them for the different needs and expectations of the 21st century – a world in which professional boundaries will be more permeable and staff at all levels will need to be much more flexible. New types of worker should be encouraged and much better use made of the skills of existing professionals such as pharmacists, GPs, specialist consultants, and community nurses. On top of this, our members need certainty about the future for the 60,000 NHS staff from the EU.

### What our members need

The NHS needs a combination of strong incentives to motivate students from the UK to embark on a career in healthcare and the agreement to draw health professionals from abroad to work here.

Our members need the position of EU nationals in the UK to be dealt with as a matter of urgency.

### How you can support our members

We need you to highlight these workforce challenges and press the government to support better domestic supply and retention of staff. The government can provide support to address issues such as access to affordable accommodation, improved funding for continuing professional development (CPD), and better use of technology.

We need you to continue to press the government to secure early agreement on the future status of EU citizens living in the UK as part of Brexit negotiations.

And we need the government to create a post-Brexit settlement that makes sure we have a streamlined and affordable recruitment process for foreign staff once we leave the EU. These issues are being championed by the Cavendish Coalition, which is made up of 36 health and care organisations and provides advice and information on the workforce implications of Brexit negotiations.

### Cavendish Coalition

Established by the NHS Confederation, the Cavendish Coalition is made up of health and social care organisations united in a commitment to provide the best care to communities, patients and residents.

The coalition recognises that the talented and diverse group of people employed and represented across health and care are central to the success of that commitment, and that individuals from the UK, Europe and across the world make a vital contribution to delivering care to the UK's population.

The coalition is working to influence on post-EU referendum matters and continues to provide expertise and knowledge on the issues affecting the health and social care workforce, to ensure a continued domestic and international pipeline of high calibre professionals and trainees in health and social care.

For further information, please visit [www.nhsconfed.org/cavendishcoalition](http://www.nhsconfed.org/cavendishcoalition)

## 2 Pay

Pay restraint is a major factor affecting staff working in health, social care and the wider public sector. NHS staff are currently subject to the 1 per cent pay cap. However, any relaxation of the cap will put pressure on local budgets and would require additional investment.

### What our members need

NHS organisations need clarity from the government as soon as possible on future pay policy. Some relaxation would be welcome given current recruitment and retention difficulties, but this must be paid for at national level. It is simply not possible for NHS organisations to fund any element of any additional pay award.

### How you can support our members

If the government does decide to relax the 1 per cent pay cap, we need parliamentarians to highlight the implications and urge the government to commit to fully funding any relaxation of the pay cap.

## 3 Transformation

There is now agreement across the NHS that without changing the way care is delivered, current systems are not sustainable.

The goal has to be to use both domestic and international best practice in this area and create new forms of integrated services which use data to stratify populations, focus relentlessly on managing demand by keeping people as healthy as possible, and which tear down the barriers that have blighted effective care in the past. This includes establishing a new compact with primary and community care, so that patients receive the right care in the right place at the right time. It will also mean valuing NHS and social care staff, so that they are fully involved, along with patients and communities, in redesigning services.

That is the underlying message of the NHS's Five Year Forward View and our members remain committed to this vision in England. Local sustainability and transformation partnerships are starting to change the way care is delivered, but the system needs to quicken the pace of transformation.

Our members are also under no illusions about the challenges, particularly the requirement for leaders to set aside organisational interests in favour of the system as a whole. This is often made more difficult by a lack of alignment across the regulatory and accountability mechanisms that govern the system. Moreover, the challenge of trying to keep the system afloat can overwhelm the requirement to transform services.

### What our members need

Health and care leaders recognise the need to make the case for reform and to work with partners, not least in local government, to redesign services. In return, our members need constructive engagement from politicians, a willingness to support local leaders and acceptance of the need for services to change.

The arguments in favour of reducing clinical variation, rationalising hospital services, merging back-office functions, and eliminating blockages in the system that prevent patients being transferred out of hospital are overwhelming and not always popular. Strong and informed political support will be vital, as will be strong relationships across health and local government. Our members need politicians who understand the barriers to transformation and who, over time, will also be prepared to give the legislative levers that will better enable them to transform and implement new models of care.

### How can you support our members

It is vital that MPs and councillors are part of the wider health and care partnerships that will bring about the transformation of services.

In parliament, we need MPs and peers to ensure that the necessity and benefits of transforming services are made clear and that the challenges are reflected in parliamentary committees, questions and debates.

## 4 Brexit

It is crucial that the NHS and social care are given priority during Brexit negotiations.

Brexit has the potential to affect not only the healthcare workforce but also areas such as healthcare research, access to technologies and reciprocal arrangements for the treatment of UK and EU patients. We believe that it is in both Europe and the UK's interests to maintain cooperation in research and in handling public health issues.

### What our members need

As noted, our members urgently need certainty about the future of the 60,000 health and care staff from the EU.

The NHS Confederation is a founding member of the Brexit Health Alliance, which has set out how the NHS and healthcare generally must be protected in the negotiations.

The alliance has called for action on five key areas:

- continued participation and collaboration in pan-European research networks and investment
- regulatory alignment for the benefit of patients and population health
- the preservation of reciprocal healthcare arrangements
- robust coordination mechanisms on public health and wellbeing
- a strong funding commitment to the health and public health sectors.

**Members urgently need certainty about the future of the 60,000 health and care staff from the EU.**

### How you can support our members

Our members need MPs and peers to continue to prioritise the future status of EU citizens living in the UK.

We also encourage MPs and peers to engage with the Brexit Health Alliance, to make sure there is progress on the key areas of concern:

- future participation in European research and innovation networks
- securing resources to fund research
- ensuring regulatory alignment between EU and UK on health technologies
- ensuring reciprocal health arrangements remain
- securing continuous collaboration on cross-border public health threats
- a strong commitment to funding the health and public health sectors.

## 5 Funding

Health and care needs are increasing – the number of people over 65 will rise by 49 per cent in the next 20 years.

The NHS continues to make required efficiencies on the heels of seven years of cost improvement programmes. In 2016/17, NHS organisations saved a remarkable £1.3 billion (3.7 per cent) of their total turnover in cost improvement gains. Yet the gap between funding and demand remains and unless something is done, it will mean reduced services for patients.

Winter pressures are set to compound challenges around funding, while staff shortages across the NHS have created a challenging environment for the delivery of safe care. Social care services, which are vital in taking pressure off hospitals, are experiencing shortages of their own, further reducing the capacity

of health services up and down the country. Amid a tough winter in 2016, the NHS managed incredibly well, but it is not enough to rely on the hope that viruses will not wreak havoc, much less that existing staff will be willing to go the extra mile to ensure patients' needs are met.

NHS trusts, health service commissioners and health and care providers are increasingly facing difficult choices over service provision and staff capacity. We will continue to push the government for a comprehensive review looking at which services are needed, where they are needed, how much they will cost and how they will be funded. A truly service-wide review would support holistic funding decisions that reflect the diverse needs of individual hospitals.

### What our members need

Extra funding over the challenging winter period will be necessary to guarantee extra capacity, not just in the health sector, but in community and care services as well. The ability to provide extra capacity will reduce strain on hospitals and better enable those that come under increasing pressure to respond.

Our members recognise that while an immediate injection of funds is needed to help alleviate pressures on the service now, dedicated transformation funding is also essential. Ring-fenced investment for transformation programmes would enable the NHS in England to become a more resilient and effective service, improving patient outcomes and reducing unnecessary costs to the system.

### How you can support our members

Parliamentarians need to continue to make the case in parliament for ring-fenced transformation funding that enables the NHS to move towards new models of care and which will ensure the sustainability of the NHS in longer term.

Our members would also welcome a debate on winter pressures in the NHS. Such an opportunity would present parliamentarians with the chance to highlight limitations in NHS capacity, not only during the winter period but more broadly throughout the year.

## 6 Social care

The social care system continues to be under enormous pressure, and this has placed an intolerable strain on health services, as well as leaving many vulnerable people without the support they require. The extra funding that social care has received in the past two years is not enough to keep up with the growing demand on services.

### What our members need

Our members still need a long-term solution to the funding and provision of social care. The general election allowed for some public debate on the options that are available. We now need the government to put forward proposals for reforming social care at the earliest opportunity, so that a full public debate can take place.

### How you can support our members

It is vital that MPs and peers continue to push the government to put forward proposals for social care in this parliament, to ensure that a sustainable solution can be found for social care as soon as possible.

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## **7** Mental health

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### **What our members need**

The time for empty promises on mental health is over. The NHS accepts the need to upgrade its focus on mental health, but resources are required to invest in the implementation of the Five Year Forward View for Mental Health.

The government has rightly promised to review mental health legislation. Formal detentions through use of the Mental Health Act have risen by around 10 per cent a year since 2010/11, and it is important that work is undertaken to understand the reasons behind these concerning increases.

### **How you can support our members**

Parliamentarians need to continue to highlight the specific challenges facing mental health and to make sure the government delivers on its promises. This includes making sure mental health services receive the resources needed to implement the Five Year Forward View for Mental Health.

The NHS Confederation encourages parliamentarians to engage with us, particularly through our Mental Health Network, which represents NHS-funded mental health and learning disability service providers in England.

**Parliamentarians need to continue to highlight the specific challenges facing mental health and to make sure the government delivers on its promises.**

## How the NHS Confederation can help

If you would like more information on any of the issues raised in this briefing, please get in touch.

**We can:**

- provide information and briefings ahead of parliamentary debates on issues affecting the NHS
- put you in touch with local NHS organisations and health and social care leaders
- provide case studies and examples of innovations and new models of care and implemented by our members throughout the country
- collect the views of NHS leaders representing all the different parts of the service, to provide a picture of the issues affecting the NHS
- organise events and meetings that bring you face to face with those working in and leading the NHS, to get first-hand insight into the issues affecting the health service.

**For more information, please contact:**  
[matthew.macnair-smith@nhsconfed.org](mailto:matthew.macnair-smith@nhsconfed.org)  
or [daniel.keel@nhsconfed.org](mailto:daniel.keel@nhsconfed.org)

**The NHS Confederation** represents nearly 500 NHS organisations that commission and provide health services, including hospitals, community and mental health providers, and independent sector organisations that provide NHS care in England. It also includes the Welsh NHS Confederation and the Northern Ireland Confederation.



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NHS Confederation  
50 Broadway, London SW1H 0DB  
Tel 020 7799 6666  
Email [enquiries@nhsconfed.org](mailto:enquiries@nhsconfed.org)  
[www.nhsconfed.org](http://www.nhsconfed.org)

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