

The NHS at 75:

How do we meet the needs of future generations

July 2023

Introduction

On 5 July 1948, the National Health Service was established. With continued post-war food rationing, growing inequalities, a housing shortage and spiralling tuberculosis death rates, the inception of the NHS could not have come at a more crucial time for Britain. For the first time, hospitals, doctors, nurses, pharmacists, opticians and dentists were brought together under one umbrella to provide services for those who needed them and care for the most vulnerable in society, free at the point of delivery.

The history of the NHS is one of evolution, responding to the needs of the nation. While the values which underpinned the establishment of the NHS in 1948 still hold true today, the founders of the NHS could not have anticipated how the NHS would change and needs to continue to change.

The NHS continues to drive innovations in patient care, none of which would be possible without the skill, dedication and compassion of NHS staff, as well as the many social care staff, volunteers, third sector, unpaid carers and communities that support the health and wellbeing of the nation.

Health and care are becoming more integrated across all public bodies. Combined with investment in new medicines, research and digital technologies, this will ensure we continue to live longer, manage our own health and wellbeing and lead healthier lives. However, as we mark the NHS at 75, now is the time to consider what transformation is needed to make the NHS fit for the future.

This is a future where health and care is based on early detection and prevention, provision in the community by default and only going to hospital for acute services. A future with a whole-system approach, which focuses on wellbeing and delivers care at the right time and as close to home as possible. We must bring the public with us to realise this transformation.

The public must feel personally invested in their wellbeing and our health and care service to help ensure its long-term sustainability, which will only be possible through public involvement and co-production of services. This will allow people to feel supported, empowered and informed to take more responsibility for their health and wellbeing, manage their conditions and use services responsibly.

As the NHS reaches its 75th anniversary, now is the time to galvanise the Welsh public to engage in a national conversation on how the health and care system can innovate and transform to meet the needs of future generations, enabling the NHS to provide care as it reaches 100 and beyond.

We're calling for a **national conversation** to co-produce a health and care service for the future.





Wales faces a significant number of population health challenges which stall life expectancy and widens inequalities. This includes high levels of obesity, unhealthy alcohol consumption, smoking and poor levels of physical activity.

The most recent National Survey for Wales results shows that 13 per cent of adults currently smoke, 16 per cent drink more alcohol than the recommended guidelines, only 36 per cent reported a healthy weight and 56 per cent reported that they had been physically active in the previous week (Welsh Government, 2022). The impact of such behaviours is resulting in greater demand on health services, as well as to the public purse (The King's Fund and Local Government Association, 2014).

The solution: Reshaping the public's relationship with the NHS

As highlighted in our report 'Reshaping the relationship between the public and the NHS' (Welsh NHS Confederation, 2022), we need to reshape the public's relationship with the NHS and support people to look after their own health and wellbeing.

This will require the government to redirect resources towards long-term investment in public engagement and communication and introduce a Deal for Health and Wellbeing. The Deal must clearly set out what the public and staff are entitled to from the NHS, the contributions that the public can make to their own health and wellbeing and how services can be co-produced with the public, delivering on 'what matters' to people.

Health and care bodies must also maximise the potential of digital innovations. This will enable people to maintain their independence, health and wellbeing, stay up to date with the latest information relating to their care and access a wide range of health and care services from home. However, tackling digital exclusion will be key to ensuring everyone has the capability and skills to navigate and access services in this way.

To debate: Increase in frailty and long-term conditions

Since the creation of the NHS 75 years ago, the make-up of our population has changed dramatically. Our average life expectancy has improved considerably, with men and women in England and Wales living more than 12 years longer than in 1948 (Office for National Statistics, 2022) - something to celebrate as a success. But an ageing population with increased frailty and long-term conditions brings with it fresh challenges for health and social care. As with all UK health systems, the NHS in Wales faces these challenges against a backdrop of increasing demand, with immediate pressures impacting health and care services' ability to plan in the long term.

The solution: Shifting services closer to home

There is an opportunity to co-produce and redesign services to ensure they better meet the changing needs of the population, so that services remain sustainable in the future.

Prior to the COVID-19 pandemic, A Healthier Wales (Welsh Government, 2018) set out the need to shift services from large general hospitals to regional and local centres, with people spending less time in hospital with more support to recover quickly in the community. Services in the community, delivered by a mix of health and care professionals, will support people to make decisions about looking after themselves and stay independent, so that they have access to the most appropriate care to meet their particular need.

To debate: Performance targets

Waiting times are an important measure of whether patients can really access the comprehensive healthcare the NHS promises.

However, saving lives and preserving the health of the population are the ultimate goals of a healthcare system. The current NHS targets sharply focus on secondary care and do not always support the system to grow and redesign, such as by moving services into primary and community care settings.

Services need to work with individuals and communities to reduce avoidable disease and dependence on secondary care services. Currently not all parts of the system work together so people do not always receive timely, efficient and effective care that achieves the right outcome for them.

The solution: Quality-based outcomes focusing on patient experience

While targets have a role to play, we must also look at the bigger picture, instigating whole system change in the way prevention and health promotion is prioritised, treatment is delivered, how services are provided, and how population health is measured.

It is vital that meaningful, personcentred performance measures and frameworks are developed across health and social care, and wider public sector. These should focus on patient experience, value-based healthcare, clinical outcomes, prevention and whole-system collboration.



To debate: Siloed working in all sectors

The health and wellbeing of the population is not the sole responsibility of the NHS; everyone must come together and play their part. Access to healthcare only accounts for around 10 per cent of a population's health, with the rest being shaped by socio-economic factors (The Health Foundation, 2017). Collaborative working and integration of services within and outside of the health and care service is vital to provide person-centred care.

The solution: One public service

Improving population health and wellbeing requires an integrated approach across services and sectors. We must support and empower the whole public, private and third sector to work seamlessly across organisational boundaries, ensuring that the right governance structure, leadership, outcome measures and financial support is provided to design and deliver effective, simple and person-centred services.

All sectors have a role to play in creating a preventative model and collectively we need to create the economic, social and natural environment in Wales to support good health and wellbeing throughout the life-course. This requires good housing, education, social care, transport, access to the arts and leisure, community support and an environment that actively promotes and encourages people to live healthy lives.

While the health and care system is complex, given its size, structure and strong working relationships, Wales has a golden opportunity to achieve so much when it comes to designing and delivering integrated personcentred services.

To debate: Care in the community

The last three years have further exposed deep cracks in the social care system and intensified structural vulnerabilities, with significant consequences for those requiring social care and their families. Social care has a crucial role to play in care pathways by enabling faster, safer hospital discharge and keeping people well for longer outside of hospital. Therefore, vulnerabilities in social care impact both demand on and the capacity of the NHS.

The solution: National Health and Care Service

As highlighted in our briefing, "It's not just a crisis, it's a national emergency": Addressing the challenges in social care' (Welsh NHS Confederation, 2022), the social care sector requires appropriate resource and a sustainable workforce, including pay parity with the NHS. The work of the National Care Service Expert Group and consideration of a national care service provides an opportunity to address issues in the sector and improve integration between health and social services to achieve seamless care and support for the patient.

There are also opportunities for Regional Partnership Boards and other innovative local partnerships to consider issues such as public engagement, workforce and supply chain development, community working, new forms of funding and strengthening population health through prevention and early intervention.



To debate: Health and care workforce

The health and care workforce is at the heart of how we deliver care and services to patients and their families. The NHS is Wales' biggest employer, currently directly employing over 100,000 people (Welsh Government, 2023). Together with volunteers and unpaid carers the health and social care workforce impacts on the social, cultural and economic prosperity of Wales.

As well as meeting the future needs of the population, the workforce must develop new ways of working to manage an expected shortfall in future NHS staff levels. We must acknowledge that maintaining and developing the current workforce is just as important as growing and training a new one. The impact of the pandemic and post-pandemic pressures on staff morale needs to be considered, as staff struggle with moral injury due to feeling they are unable to provide adequate care.

The solution: Promoting staff wellbeing and developing cross-sector skills

We need to continue to promote staff wellbeing, delivering agile and improved ways of working for staff and volunteers and plan for a sustainable and resilient workforce to better match changing demand and more digitally-delivered services. Developing staff roles and skills is key to providing complex, multidisciplinary, co-ordinated care in partnership with individuals, cross-sector partners and communities.

Beyond the health and social care workforce, there are opportunities to develop the skills of other occupations to help support the wellbeing of the Welsh population. Individuals who work in local communities, such as postal workers, teachers, hairdressers, volunteers, and shop assistants, all have an active role to play in supporting communities to stay healthy and connected.

To debate: Inequalities and cost of living

Health inequalities – unfair and avoidable differences in health and access to health and care across the population, and between different groups within society – have been exacerbated by the COVID-19 pandemic (The Health Foundation, 2022) and the rising cost of living (World Health Organisation, 2022).

Audit Wales (2022) has recently called poverty the single major challenge facing all tiers of Welsh Government. Wales has the highest poverty rate among the four UK nations (Joseph Rowntree Foundation, 2022), with over a third of children (34 per cent) classed as living in poverty (Audit Wales, 2022). Inequality has a broad adverse effect on societal wellbeing, as has been demonstrated across a range of measures, including health, life expectancy, crime, and mental health. It is estimated that health inequalities costs the Welsh NHS £322 million every year (Public Health Wales, 2021).

The solution: Crossgovernment approach to reducing poverty and inequalities

The NHS alone does not have all the levers to reduce health inequalities, which is why we need to shift the focus from public health initiatives delivered through the NHS and local authorities to addressing factors such as poor housing, green spaces, transport and food quality.

As highlighted in the Welsh NHS
Confederation Health and Wellbeing
Alliance and Royal College of
Physicians report, 'Mind the gap:
what's stopping change?' (2022),
addressing the factors that cause ill
health in the first place should be a
central focus for the Welsh
Government. There needs to be a
whole cross-government and public
service approach to inequalities and
the Welsh Government should
produce a cross-government plan for
reducing poverty and inequalities in
adults and children.

To debate: Getting value for money from the NHS

As highlighted in the Welsh NHS Confederation report, 'Investing in the NHS: Priorities for future government budgets' (2022), the rise in demand, coupled with constrained financial resources, has made delivering health and care in the current model increasingly difficult. The NHS is facing its greatest financial challenge, and it is essential for the sustainability of the NHS that the population engage in maintaining their own health and wellbeing.

The solution: Long-term financial certainty and investing in Welsh communities

While there are vast financial challenges across public services, long-term financial certainty is needed from both the UK and the Welsh Government and we need to increase awareness of the NHS' contribution to the economy.

Without sufficient long-term funding, the service will struggle to reduce the backlog, embed positive pandemic-era changes and truly make inroads in reducing inequalities by transforming models of care. The NHS and governments need to work together to create more innovative solutions across a streamlined set of priorities, which effectively balance short-term need with long-term vision.

Spending money on the NHS is not just about plugging gaps. Health spending drives innovation and growth in communities across Wales. The Welsh NHS Confederation briefing 'Health, wealth and wellbeing: The NHS' role in economic and social recovery' (2021) highlights the numerous ways the NHS helps support the economy, including as a large employer, a key purchaser of goods and services, and a capital estate holder and developer. Recent analysis by Carnall Farrar shows that for each £1 spent per head on the NHS, there is a corresponding return on investment of £4 (NHS Confederation, 2022).



To debate: NHS estates and infrastructure

The NHS has an ageing estate that was not designed with current demands in mind. Many hospitals in Wales were built in the 1960s or earlier, with 12 per cent of the estate built pre-1948 and only 6 per cent post 2015 (Senedd Cymru, 2023), meaning significant investment will be required to bring them in line with modern standards. Many NHS organisations use significant amounts of funding to repair estates and undertake essential maintenance and repair work rather than investing in new infrastructure.

The solution: Capital investment plan to improve patient experience, quality of care and energy efficiency

Capital investment is key to enabling the NHS to continue to deliver high-quality, safe health services and reaching longer-term goals to integrate care. It is critical that a tenyear investment plan for service change is developed, similar to the 21st Century Schools and Education Funding Programme (Welsh Government, 2019), to reshape NHS estates and infrastructure, making them more energy efficient, improving patient experience and quality of care.

A multi-year capital funding settlement for the entire NHS in Wales would drive productivity and aid in reducing the backlog. It would ensure estate-related safety, embed positive pandemic-era changes, and make inroads in reducing inequalities by transforming models of care, including the use of digital technology.

To debate: The impact of climate change on future generations

The climate emergency is a health emergency, which is only worsening over time. Climate change threatens the foundations of good health, with direct and immediate consequences for patients, the public and the NHS. Direct health effects of climate change include increased respiratory and cardiovascular disease, injuries and premature deaths related to extreme weather events and changes in the prevalence and geographical distribution of food.

Without accelerated action there will be an increase in the intensity of heatwaves, more frequent storms and flooding, poor air quality and increased spread of infectious diseases.



The solution: Changing behaviours to tackle the climate crisis

Addressing the global climate crisis via mitigation and adaptation techniques requires changing human behaviour, with an estimated 62 per cent of actions to reduce emissions relying on behaviour change (House of Commons, 2021). As Public Health Wales' guide, 'Responding to the climate crisis: applying behavioural science' (2022) highlights, making positive climate behaviours as normal, easy, attractive and routine as possible is key to evoking sustained change and mitigating the effects of the climate crisis.

It is important that all professionals and practitioners working on policy, services or communications to tackle the climate crisis offer useful tips and promote the immediate benefits of positive behaviour changes when speaking to the public. People must see and feel the impact they can make in the coming minutes, days and weeks, rather than years and decades. Additionally, the benefits of behaviour change that are important and relevant to individuals, as well as the wider future climate impact, must be made clear.

Through networks such as Green Health Wales, health and care professionals are already playing an active role in responding to the climate and ecological emergency.

Conclusion

The history of the NHS is one of evolution, responding to the changing needs of the nation. In response to COVID-19, health and care organisations worked at pace to transform services and deliver care innovatively, enabled by effective partnership working.

Now is the right time to empower the health and care system to drive change, with greater clarity about how we can deliver 'system by default' in ways that support partnerships and integrated services.

It is human nature to be emotionally resistant to change - attached to old practices, local institutions and cultures that have been passed down over the years. However, there is now an opportunity to have an open and honest conversation with the public about co-producing future health and care services and the support individuals require to become active participants in their own care.

This will require effective communication and engagement across the whole public service by developing meaningful and realistic messaging and solutions which are coproduced with the public.

Now is the time to engage and transform to meet the needs of the population today and in the future.

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