



Summary of National Documents

February 2018

5 years on: responses to Francis: changes in board leadership and governance in acute hospitals in England since 2013

University of Manchester | University of Birmingham | Nuffield Trust | 25th January

This report, written in partnership with the University of Manchester and the Nuffield Trust, reveals that hospital boards are giving care quality and safety a high priority, and many invested significantly in nurse and medical staff after the Francis Report. However, some hospital boards feel quality assurance is a pressure, as the demands of multiple external regulators are burdensome, threatening to distract from a focus on the actual work of service improvement.

An Easy Guide summarising the report is available [here](#)

Full document: [Responses to Francis: changes in board leadership and governance in acute hospitals in England since 2013](#)

The government response to the Naylor review

Department of Health and Social Care

This document sets out the government's response to Sir Robert [Naylor's review](#) of NHS property and estates, published in March 2017. The actions outlined will drive transformation of the NHS estate and help the NHS to deliver the NHS five year forward view. They combine targeted investment with clear leadership from a new NHS Property Board and a strategic estates planning team to provide on-the-ground support for sustainability and transformation plans.

Full document available [here](#)

Euro health consumer index 2017

Health Consumer Powerhouse | 29th January

This annual report compares the performance of health systems across Europe. It finds that European health care is steadily improving, with infant mortality decreasing and survival rates from heart disease, stroke and cancer increasing. It warns that too many countries are inefficiently



funding and delivering care services and it highlights examples of best practice in different health systems.

Full report available [here](#)

Refreshing NHS plans for 2018/19

NHS England | NHS Improvement | 2nd February

This guidance, published jointly with NHS Improvement, sets out the plans for the NHS in light of the November 2017 budget announcements. It outlines how additional funding will impact on frontline services such as primary care and A&E services. It also sets out plans for the development of accountable care systems into integrated care systems. The guidance is accompanied by revised clinical commissioning group allocations for 2018/19.

Full document: [Refreshing NHS Plans for 2018/19](#)

The Commissioner Sustainability Fund and financial control totals for 2018/19: guidance

NHS England | 2nd February

This guidance provides details of a targeted fund to support clinical commissioning groups that would otherwise be unable to live within their means for 2018/19.

Full guidance available [here](#)

Divided we fall: getting the best out of general practice

Nuffield Trust | 5th February

This report finds that initiatives that offer faster and easier access to GPs for some patients risk undermining the ability of doctors to manage people with complex or unknown illnesses and keep them out of hospital. It calls on national policy makers to move away from splitting off services for different patient groups and to support better access, better continuity and medical generalist care within GP organisations.

Full document available [here](#)



Left to chance: the health and care nursing workforce supply in England

Royal College of Nursing |

This report analyses UCAS data and finds that the number of applications for nursing degree courses has fallen by a third since 2016. It calls for a range of incentives to encourage people into nursing, including a central funding pot in the Department of Health and Social Care to help with students' costs; more incentives for postgraduates to convert to nursing; and the DHSC and Treasury to cover the cost of apprenticeships to encourage greater uptake by NHS employers.

Full document available [here](#)

The risks to care quality and staff wellbeing of an NHS system under pressure

The Picker Institute | The King's Fund | 1st February

This report, written in conjunction with The King's Fund, considers the relationships between the self-reported experiences and wellbeing of NHS staff, measures of workforce pressures in the health system, and patients' experiences of their care. It uncovers striking associations between the experiences of NHS staff and patients in hospitals and NHS trusts' reliance on agency health care workers. The report indicated that;

- Staff wellbeing is related to issues within the NHS workforce. Factors that show a relationship with staff wellbeing include numbers of doctors and nurses per bed, and bed occupancy rates. Staff that worked at Trusts with more negative workforce factors and higher spending on agency staff self-reported worse experiences. The authors state that this strongly suggests that 'staff wellbeing is impacted negatively by a workforce that is overstretched and supplemented by temporary staff'.
- Patient experience is also impacted upon by some of these workforce issues. As might be expected, workforce factors such as having fewer doctors and nurses per bed also are also related to patient experience. However, the report also showed that spending more on agency staff has a negative association with patients' experiences of their care. This signals the risks to the quality of care for patients as the NHS buoys up its struggling workforce with temporary staff.
- Staff wellbeing is related to a patient's experience of their care. This finding will prove important to NHS management and policy makers, as it provides further evidence of a correlation between staff experience and patient experience. This demonstrates that 'staff and patient perceptions about quality of care are consistent, and their feedback is both a sensitive and an accurate barometer of quality'.

Full report available [here](#)



In and out of hospital

British Red Cross

A new British Red Cross report calls for action to stop an 'endless cycle' of avoidable hospital admissions among vulnerable patients. This could ease pressure on the health and social care systems. The study proposes introducing automatic home assessments and other simple interventions for elderly and vulnerable people who are often admitted to hospital. Currently these people are being sent home without the right support, or to unsuitable or unsafe conditions at home. They are then more likely to end up back in hospital.

The latest figures show that emergency hospital admissions have risen by 22.8% in the last five years. People being readmitted within 48 hours now accounts for one in five of all emergency readmissions.

According to analysis of first-hand accounts of frontline health and care workers, there are too many missed opportunities to prevent many of these avoidable admissions.

Key recommendations include:

- The government should invest in non-clinical personnel in A&Es to help prevent people who have no medical needs but need support at home from being admitted.
- The government should establish more multidisciplinary teams who work with people at risk of being admitted into hospital.
- Hospitals should ensure all discharge checklists include an assessment of equipment and medication needs, from a wheelchair to blister packs. These should be arranged before leaving hospital.
- At a minimum, transport home from hospital should be offered to all those who live alone or who are leaving by themselves and have poor mobility. Helping them inside their homes would give an opportunity to check their home environment.
- When frail patients' transfer home has been delayed, hospitals should encourage and help them to get dressed and walk around every day so their condition does not deteriorate.
- People who live alone, have poor mobility and have been in and out of hospital due to falls should automatically have their home assessed for falls hazards before they are discharged.
- Staff need to know when someone has been in and out of hospital. In such cases, an automatic home assessment is vital. While people might appear to be medically fit enough for discharge, a regular cycle of readmission often signals that something is amiss at home.

Full report available [here](#)



Securing cyber resilience in health and care: a progress update

Department of Health and Social Care | 1st February

[Your data: better security, better choice, better care](#) was published in July 2017, it included an implementation plan on securing data and cyber security which set out how the Department plans to deliver key data and cyber-security actions. All actions set out in that plan have either been delivered or are in progress. This document summarises these actions.

Full document available [here](#)

Learning from the vanguards

NHS Clinical Commissioners | 31st January

In partnership with NHS Providers, the Local Government Association (LGA) and the NHS Confederation, NHS Clinical Commissioners have developed this briefing series to explore crucial topics for the vanguard areas and offers practical examples from a number of the sites.

- Supporting people and communities to stay well:

This briefing explores how the vanguards have sought to design health and care services around the needs of people who use them, focusing on the outcomes that matter to people and tailoring care to their needs and goals. It also explores how the vanguards have adopted community- and asset-based approaches to consider the broadest possible influencers on health and care.

Full briefing available [here](#)

- Spreading and scaling up change:

This briefing explores the ten key factors that the vanguards have identified as crucial to encourage the spread of initiatives. It points to how the vanguards have benefited from the co-ordinated support of the arm's-length bodies and their permission to 'fail fast and learn faster'. It also highlights how investing heavily in different ways of sharing learning, building networks and bringing people together, have been critical to the vanguards.

Full briefing available [here](#)



The adult social care workforce in England

National Audit Office | 8th February

This report considers the Department of Health and Social Care's role in overseeing the adult social care workforce and assesses whether the size and structure of the care workforce are adequate to meet users' needs for care now and in the future, in the face of financial challenges and a competitive labour market.

Report Summary available [here](#)

Full report available [here](#)

Joint working protocol: when a hospital, services or facility closes at short notice

NHS England | 1st February

This document aims to give clear guidance and direction to any organisation involved in a short notice closure, so it can take appropriate and timely action in supporting patients and make sure they get the care and treatment they deserve.

Document available [here](#)

Suicide prevention: policy and strategy

House of Commons Library | 5th February

This briefing examines suicide prevention policies and strategies throughout the UK. It outlines national and local approaches to prevention policy by considering the strategies of the UK Government, as well as the devolved administrations, through the lens of various policy perspectives.

Full briefing available [here](#)

Relationship-based practice: emergent themes in social work literature

This report from Iriss highlights the importance of interpersonal skills and relationships in social work practice. It reviews the literature to explore the history of relationship-based practice (RBP), and features of RBP, and discusses opportunities and implications for practice.

Full document available [here](#)



Using digital technology to improve the public's health: a guide for local authorities

Local Government Association | 7th February

This report discusses how digital health technologies can deliver value for money and drive efficiencies, as well as benefiting the health of the population. Up and down the country, councils have been working with their partners – both public and private – to innovate and pilot new ways of working. This report reflects a snapshot of what is going on.

Full report available [here](#)

Integrated care: what does it mean for commissioning?

Nuffield trust | 14th February

A new [long read](#) from Nigel Edwards of the Nuffield Trust looks at the risks and opportunities for commissioning as we move towards integrated care, while a new [blog](#) from Helen Buckingham looks at commissioning in changing times and the lessons we can learn from the past.

Approaches to social care funding

The King's Fund | Nuffield Trust | 15th February

It is widely accepted that the system for funding social care is in urgent need of reform, but there is little sign of a long-term solution on the horizon. This report considers the following five different approaches, setting out the implications of each:

- Improving the current system
- The Conservative Party's proposals at the time of the 2017 general election (a revised means test and a cap on care costs)
- A single budget for health and social care
- Free personal care
- A hypothecated tax for social care

Full document: [Approaches to social care funding: Social care funding options](#)



Explainer: communities and health

The King's Fund | 14th February

The role of communities in improving population health is receiving increasing, and long overdue, attention in health policy and practice. This piece gives an overview of the different approaches to working with communities for health.

Article available [here](#)

A Royal Commission on the NHS: the remit

Centre for Policy Studies

This report sets out how a Royal Commission can ensure the NHS delivers the best outcomes on a sustainable financial basis over the coming decades. It outlines what the remit and priorities of such a Commission should be.

Report available [here](#)

Making sense of integrated care systems, integrated care partnerships and accountable care organisations in the NHS in England

NHS England has recently changed the name of accountable care systems to integrated care systems, which describes more accurately the work being done in the 10 areas of England operating in this way. This updated long read from the King's Fund looks at work under way in these systems and at NHS England's proposals for an accountable care organisation contract.

The article looks at the following:

- Why is change needed?
- What are integrated care and population health?
- What's happening with new care models?
- What's happening in integrated care systems?
- What are ACOs and why are they controversial?
- How are integrated care systems and partnerships developing?
- What has this way of working achieved?
- What do these developments mean for commissioning?



- Are these developments really a way of making cuts?
- Will these developments lead to privatisation?
- Where next?

Full article available [here](#)

People's experience in adult social care services: improving the experience of care and support for people using adult social care services

National Institute for Health and Care Excellence

This guideline covers the care and support of adults receiving social care in their own homes, residential care and community settings. It aims to help people understand what care they can expect and to improve their experience by supporting them to make decisions about their care.

Full guideline available [here](#)

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