



Summary of National Documents

September 2017

STPs and accountable care

Supporting providers: STPs and accountable care | NHS Providers | September 21st

NHS Providers are working to develop a programme of support that helps provider organisations adapt to the challenges and opportunities presented by the move to accountable care.

The programme, [Supporting Providers: STPs and accountable care](#), will be developed in close collaboration with NHS trusts over the next six weeks. The programme aims to ensure there is the right support and a strong advocate making the case for NHS trusts as they move to accountable care structures that deliver more integrated care for the public.

Elements to support trusts will include:

- Developing new and effective relationships with local authorities, primary care and commissioners
- Responding to specific challenges such as moving care closer to home, prioritising mental health, workforce strategy and getting the most out of the NHS estate
- Exploring new ways to support change, identifying “enablers” including new approaches to contracting, different financial flows, adopting risk stratification and whole population health management approaches, and developing STP level governance arrangements.

More detail at [NHS Providers](#)

Person-centred care in 2017: Evidence from service users

National Voices | September 21st

This report provides a snapshot of the extent of person-centred care, based on how people report their experience of treatment, care and support. The report concludes there is a need for person-centred care to be given greater priority and a need for a strategic overhaul of what is measured.

Key findings:

- Person-centred care is inadequately measured
- A mixed picture: people’s experiences can be highly variable



- Some aspects of person-centred care have improved
- Progress towards involvement in decisions and being in control
- Steady progress is now deteriorating, both for general practice and inpatient care
- Little evidence of personalised care and support planning
- Coordination of care is not measured
- Family involvement is not central, and most carers need better support

Full report: [Person-centred care in 2017: Evidence from service users](#)

The state of pre and post-graduate medical recruitment in England, September 2017

British Medical Association | September 21st

British Medical Association (BMA) finds nearly three quarters of all medical specialties had unfilled training places last year, and many specialties were suffering year-on-year recruitment shortfalls.

The [BMA](#) has warned that a shortage of doctors across most specialities of medicine is putting patient care at risk. The BMA obtained data from 2013 onwards, on the current state of recruitment into pre- and postgraduate medical education and training.

Analysis of the data revealed that:

- Although still highly competitive, fewer people are applying to medical school.
- Foundation programme posts and applications are decreasing.
- Applications to specialty training are decreasing.
- Nearly three quarters of all medical specialties faced under-recruitment in 2016.
- There are geographical variations in recruitment trends, with the northern regions bearing the brunt of the recruitment crisis.

To address this workforce crisis, the BMA is calling for greater career flexibility, improved health and wellbeing services, rota gaps to be tackled, maintaining the NHS's ability to recruit from overseas and improved workforce planning.

Full briefing: [The state of pre and post-graduate medical recruitment in England, September 2017](#)



The state of care in general practice 2014 to 2017

Care Quality Commission | September 21st

Care Quality Commission (CQC) report finds that at the end of its first inspection programme of general practices 4% were rated 'outstanding', 86% were 'good', 8% were 'requires improvement' and 2% were 'inadequate'.

The state of care in general practice 2014 to 2017 presents findings from CQCs programme of inspections of GP practices. This detailed analysis of the quality and safety of general medical practice in England has found that nearly 90% of general practices in England have been rated as 'good', making this the highest performing sector CQC regulates.

Full document: [The state of care in general practice 2014 to 2017](#)

Large scale general practice

Rosen, R. Kumpunen, S. Curry, N. Davies, A. Pettigrew, L. Kossarova, L. (2017) Summary booklets on lessons for large-scale general practice. | Nuffield Trust | September 20th

In July 2016, the Nuffield Trust published [Is bigger better? Lessons for large-scale general practice](#) which examined the factors affecting the evolution of general practice and its impact on quality, staff and patient experience.

The Nuffield Trust has now released four booklets which sit alongside this main report covering:

- [Leadership and governance](#)
- [Sustainability](#)
- [Working with the wider health economy](#)
- [Improving quality](#)

The future of the mental health workforce

The Centre for Mental Health | September 20th

This report is based on insights from service users, carers and professionals and outlines a list of recommendations for a sustainable mental health workforce.

It emphasises the importance of prevention, including the role of GPs in supporting people before they reach crisis point. It describes commissioning of mental health services as in "crisis" with a



“shrinking workforce, growing expectations and exhausting demands” putting pressure on staff across the country.

The report makes 22 recommendations for policy, practice, education and training, highlighting 4 key calls to action:

1. For mental health careers to be promoted in schools and colleges: to build on growing awareness and understanding about mental health to encourage young people to aspire to work in the sector when they’re considering their career choices
2. For all mental health service providers to support the mental health and wellbeing of their staff: to become ‘compassionate organisations’ that care for the people who work in them
3. For mental health workers to get training in the skills they will need in the future, including in coproduction, community engagement and psychological interventions
4. For people to be able to build their careers more flexibly, working in a range of different settings and sectors, and taking on new roles as they get older

Download the full report: [The future of the mental health workforce](#)

What does the public think about the NHS?

The Kings Fund | September 16th

The Kings Fund commissioned Ipsos MORI to conduct a survey on the public’s attitude to the NHS. Do the public believe the NHS should be maintained? Do they still believe in its founding principles? What do they see as their responsibility when it comes to their own health? Do they want a say in how decisions that affect the NHS are made? Do they think people’s expectations of the service are realistic and do they think those expectations are being met?

Key messages:

- As the NHS approaches its 70th birthday, it is facing significant challenges. Despite this, it continues to enjoy unwavering support among the public which endures across the generations.
- Seventy-seven per cent of the public believe the NHS should be maintained in its current form. This level of support has remained consistent over almost two decades despite widespread social, economic and political change.
- Around 90 per cent of people support the founding principles of the NHS, indicating that these principles are just as relevant today as when the NHS was established.
- A clear majority (66 per cent) of adults are willing to pay more of their own taxes to fund the NHS, underlining growing support among the public for tax rises to increase NHS funding.



- Sixty-seven per cent think that treatments and services should only be available on the NHS if they are available to everyone and not dependent on where people live, while 31 per cent think that treatments and services should be based on local need.
- While some people (29 per cent) say decisions about the availability of treatments and services should be left to qualified health professionals, 56 per cent at least want to be consulted and a minority (14 per cent) want to be actively involved. This underlines the importance of engaging the public and ensuring that service changes are supported and led by clinicians.
- Sixty-five per cent believe that keeping healthy is primarily down to the individual, with just 7 per cent placing this responsibility with the NHS. While this only skims the surface of very a complex issue, it suggests there is a debate to be had about what people can expect from the NHS and their obligations in return.

Full report available [here](#)

Getting into shape: Delivering a workforce for integrated care

Reform | September 15th

This paper focuses on the structural barriers to delivering integrated care. It studies issues such as the medical labour market, devolved workforce planning and pay, and professional boundaries.

The Government is rightly committed to a radical reshaping of NHS delivery, based on a shift to new care models and treatment in the community. Its management of the NHS workforce, however, has not delivered with nearly three times more doctors, and four times more nurses in the acute sector than in the community. Since 2009, the number of consultants has risen by nearly a third, whilst the number of GPs has fallen.

Freedom of Information requests made for this report found that, across 61 acute trusts, only 6 per cent of consultants work in the community for at least one session per week.

As the Government and the NHS leadership have repeatedly said, the priority for the NHS is to increase its speed of innovation. To do this, the NHS is rightly seeking to devolve decision-making and to deregulate. For the workforce, however, policy remains highly centralised and tightly regulated. This paper shows how to bring the same reform ideas to the workforce as the NHS is applying to other areas.

- [Overview](#)
- [Report](#)



Leading Large Scale Change: A guide to leading large scale change through complex health and social care environments

NHS England Sustainable Improvement Team | NHS England Horizons Team | September 13th

This [guide](#) from NHS England has been produced to help all those involved in seeking to achieve transformational change in complex health and care environments. This is a fully revised update of the original 2011 publication, responding to current health and care policy and practice, and introducing new concepts, tools and techniques to help deliver successful large scale change. It is relevant to all those involved in transformational change programmes such as Sustainability and Transformation Partnerships (STPs) and the development of new care models, and has relevance across public services.

The publication includes:

- Updates on the leading transformational change models
- The latest thinking from national and global improvement experts and change leaders
- New tools, techniques and tips to help effectively progress large scale change programmes
- Case studies and learning that will help leaders and change agents in health and care and across public services
- Signposting to a host of new online resources including videos, presentations and digital media links.

Full document: [Leading Large Scale Change: A guide to leading large scale change through complex health and social care environments](#)

Scrutiny: the new assurance? A good governance discussion document.

The Good Governance Institute | September 13th

As collaboration and partnership working need to become more streamlined, more strategic and more effective, organisations spending public monies should be constantly redefining their roles and responsibilities, searching for constant improvement. This paper looks at scrutiny across a number of organisations, as all four home nations are seeking better outcomes by the alignment of health, social care and other funders and providers.

Download the publication [here](#)



Sustainability and transformation plans in London: an independent analysis of the October 2016 STPs

The Kings Fund | Nuffield Trust | September 13th

This report looks at the five Sustainability and Transformation Plans in London, their contents and common themes. The authors, from The King's Fund and the Nuffield Trust, assess the main issues and risks to be addressed across the plans. They make a small number of recommendations for the future of the STP process in London, focusing specifically on the role of London-wide action in taking forward the plans. The report includes a brief update on progress since March 2017.

Download the full report [here](#)

Partnerships for improvement: ingredients for success

The Health Foundation | September 7th

The idea of partnerships and collaboration across organisational boundaries is at the heart of NHS reforms in England. This briefing from the Health Foundation looks at what makes successful partnerships between providers at an organisational level, providing a snapshot of some of the key ingredients needed for successful partnerships.

The report looks at a range of current organisational partnerships focusing on five different partnering arrangements. It also includes interviews with national leaders, and draws learning to help inform and guide policymakers and providers.

The report finds that partnering does have potential benefits, but these are not easy or quick to achieve. To have a meaningful impact on the quality of care, the right form of partnering needs to be used in the right context and it needs to be accompanied by the right set of enabling factors – as described by the report.

Full briefing: [Partnerships for improvement: ingredients for success](#)

Related: Health Foundation blog: [Is together always better? How good are NHS organisations and the wider system at achieving the potential benefits of partnering?](#)



National Engagement Service

National Engagement Service | September 6th

The National Engagement Service (NES) has developed an infographic to promote understanding of the service.

Including useful statistics and helpful information about the work of the team, the [infographic](#) explains how the service supports senior leaders on workforce issues, in order to drive up organisational effectiveness and the quality of care for patients. Delivering engagement across the country through regional networks by:

- connecting with HR directors to share best practice and learning
- ensuring that stakeholders are kept up to date on current issues and key developments
- highlighting opportunities where stakeholders can influence and shape policy
- stimulate discussion and innovation among HR professionals.

Understanding the NHS deficit and why it won't go away

Nuffield Trust

This briefing assesses the financial health of those providers by unpicking the headline figures presented in the official accounts to reveal the true underlying state of the NHS's finances today, and to outline prospects for the next three to four years.

- NHS trusts have begun the current financial year, 2017/18, on course for an underlying overspend or deficit of £5.9 billion. To meet their reported deficit target of £500 million, they will need to cut their operating costs by £3.6 billion and receive temporary extra funds of £1.8 billion.
- This would require trusts to make savings in one year equivalent to 4.3 per cent of their operating costs – far in excess of any level achieved over recent years and likely to be almost impossible to deliver.
- A more likely scenario is that they will make cost savings similar to the level made last year. That would collectively leave the trusts with an underlying deficit of around £3.5 billion.
- The headline deficit for 2016/17 (which ended in March 2017) was £791 million. However, that figure was flattered by billions of pounds' worth of one-off savings, temporary extra funding and accountancy changes that did nothing to improve the underlying state of provider finances. Once they are removed, the underlying deficit for 2016/17 is £3.7 billion.



- This is compared to an underlying deficit the year before, 2015/16, of £4.3 billion. As trusts also had to soak up additional inflation costs in 2016/17, the reduction in the underlying deficit between 2015/16 and 2016/17 actually represents providers making £2.3 billion in permanent savings.
- Projections of future years suggest that, even under optimistic assumptions for inflation and continued high levels of savings, NHS providers will continue to run a large collective underlying deficit until at least 2020/21.

Read the full briefing [here](#)

References

Person-centred care in 2017: Evidence from service users

https://www.nationalvoices.org.uk/sites/default/files/public/publications/person-centred_care_in_2017_-_national_voices.pdf

The state of pre and post-graduate medical recruitment in England, September 2017

<https://www.bma.org.uk/-/media/files/pdfs/collective%20voice/policy%20research/education%20and%20training/state-of-medical-recruitment-sept-2017.pdf?la=en>

The state of care in general practice 2014 to 2017

http://www.cqc.org.uk/sites/default/files/20170921_state_of_care_in_general_practice2014-17.pdf

Is bigger better? Lessons for large-scale general practice

1. Leadership and governance

<https://www.nuffieldtrust.org.uk/files/2017-09/1.-leadership-and-governance.pdf>

2. Sustainability

<https://www.nuffieldtrust.org.uk/files/2017-09/2.-sustainability.pdf>

3. Working with the wider health economy

<https://www.nuffieldtrust.org.uk/files/2017-09/3.-working-with-the-wider-health-economy.pdf>

4. Improving quality

<https://www.nuffieldtrust.org.uk/files/2017-09/4.-improving-quality.pdf>



The future of the mental health workforce

<https://www.centreformentalhealth.org.uk/Handlers/Download.ashx?IDMF=fe8b0590-732b-45f6-a0e8-4c5863b08e50>

What does the public think about the NHS?

<https://www.kingsfund.org.uk/publications/what-does-public-think-about-nhs>

Getting into shape: Delivering a workforce for integrated care

<http://www.reform.uk/wp-content/uploads/2017/09/Getting-into-shape.pdf>

Leading Large Scale Change: A guide to leading large scale change through complex health and social care environments

<https://www.england.nhs.uk/wp-content/uploads/2017/09/leading-large-scale-change-practical-guide.pdf>

Scrutiny: the new assurance? A good governance discussion document.

[https://www.good-governance.org.uk/wp-content/uploads/2017/09/Scrutiny-The-new-assurance - A-Good-Governance-Discussion-Document-1.pdf](https://www.good-governance.org.uk/wp-content/uploads/2017/09/Scrutiny-The-new-assurance-A-Good-Governance-Discussion-Document-1.pdf)

Sustainability and transformation plans in London: an independent analysis of the October 2016 STPs

https://www.kingsfund.org.uk/sites/default/files/2017-09/STPs-London-Kings-Fund-September-2017_1.pdf

Partnerships for improvement: ingredients for success

<http://www.health.org.uk/sites/health/files/PartnershipsForImprovement.pdf>

Understanding the NHS deficit and why it won't go away

<https://www.nuffieldtrust.org.uk/files/2017-08/the-bottom-line-final-v2a.pdf>

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knowledge.service@rothgen.nhs.uk