<table>
<thead>
<tr>
<th><strong>Meeting Date:</strong></th>
<th>4th February 2019</th>
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<tbody>
<tr>
<td><strong>Title:</strong></td>
<td>The NHS Long Term Plan – Summary</td>
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<tr>
<td><strong>Executive Summary:</strong></td>
<td>The report provides the Board with a brief summary of the NHS Long Term Plan and highlights the key aspects for the Royal Wolverhampton NHS Trust</td>
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<td><strong>Action Requested:</strong></td>
<td>Receive and note: Impact for RWT</td>
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<td><strong>For the attention of the Board</strong></td>
<td>This report provides an overview of the key chapters within the Long Term Plan and considers the impact of these for RWT. It also highlights the evolution from the Five Year Forward view and presents the potential legislative changes required.</td>
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<tr>
<td><strong>Assure</strong></td>
<td>None in this report</td>
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<tr>
<td><strong>Advise</strong></td>
<td>None in this report</td>
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<tr>
<td><strong>Alert</strong></td>
<td>None in this report</td>
</tr>
<tr>
<td><strong>Author + Contact Details:</strong></td>
<td>Deputy Directory Strategic Planning and Performance ext 4366 Email: <a href="mailto:simon.evans8@nhs.net">simon.evans8@nhs.net</a></td>
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| **Links to Trust Strategic Objectives** | 1. Create a culture of compassion, safety and quality  
2. Proactively seek opportunities to develop our services  
3. To have an effective and well integrated local health and care system that operates efficiently  
4. Attract, retain and develop our staff, and improve employee engagement  
5. Maintain financial health – Appropriate investment to patient services  
6. Be in the top 25% of all key performance indicators |
<p>| <strong>Resource Implications:</strong> | None at this point |
| <strong>Report Data Caveats</strong> | N/A |</p>
<table>
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<tr>
<th>CQC Domains</th>
<th>Safe: patients, staff and the public are protected from abuse and avoidable harm. Effective: care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence. Caring: staff involve and treat everyone with compassion, kindness, dignity and respect. Responsive: services are organised so that they meet people’s needs. Well-led: the leadership, management and governance of the organisation make sure it’s providing high-quality care that’s based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.</th>
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<tr>
<td>Equality and Diversity Impact</td>
<td>Details will be worked through as part of the planning process.</td>
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<td>Risks: BAF/TRR</td>
<td>SR1 - Workforce - Recruitment and Retention of staff across the Trust and in particular the future pipeline of nursing and medical staff SR6b - Black Country or Staffordshire STP has an adverse impact on RWT income or services SR8 - That there is a failure to deliver recurrent CIP's. SR9 - That the underlying deficit that the Trust has (in 2018/19) is not eliminated in medium term to bring the Trust back to financial surplus.</td>
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<td>Public or Private:</td>
<td>Public</td>
</tr>
<tr>
<td>Other formal bodies involved:</td>
<td>NHS Constitution: In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: • Equality of treatment and access to services • High standards of excellence and professionalism • Service user preferences • Cross community working • Best Value • Accountability through local influence and scrutiny</td>
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</table>
The NHS Long Term Plan – implications for RWT
Overall approach

• First time in >5 years we have “NHS Planning Guidance”
• Reform of key targets is missing
• Evolution not revolution in most areas
• Commitment to improved patient outcomes for some areas
• Almost everything is being done somewhere
• 19/20 a year of transition……
• STPs will all be ICSs by 2021
• Big push on use of CQI at Trust and system level
Chapter overview – New Service models

• An Integrated Care system (ICS) in each STP, focus on population health
• Boost out-of-hospital care with development of urgent community response services
• Establishment of primary care networks covering 30-50k population, inc pharmacists, DNs
• New primary care network contract due any day now
• Reduce pressure on emergency hospital services, introduction of Same Day Emergency Care (SDEC) and more Urgent Treatment Centres (UTC)
• Introduce digital first primary care (telephone or online)
Action on prevention and inequalities

- Reduce demand and support people to age well
- 5 key areas: smoking, alcohol, obesity, air pollution, antimicrobial resistance
- Increased funding to areas of higher levels of health inequality
- Local systems will have to develop plans address these issues
Quality and outcomes

• Big focus on Children and young people (maternity, mental health, LD and cancer)
• Increased commitments for:
  • Cancer (diagnosis within 28 days),
  • Cardiovascular (prevent 150,000 heart attacks in 10 years)
  • Stroke (development of post-hospital rehab models)
  • Diabetes (access to online tools for type 2)
  • Respiratory (reduce variation)
  • Mental health (all A&E have liaison services by 2023)
  • Planned care (hospital and CCG to be fined for >52wk)
• Specific milestones in place for each of the key areas highlighted above
Supporting NHS staff

- High level ambitions BUT detail delayed until the publication of “the comprehensive workforce implementation plan” in 2019
- Plan to fund additional 5,000 nursing undergraduate training places from 2019/20
- Supported by online nursing degree which will be less than current £9k fees
- Every nurse/midwife graduating gets a 5-year NHS job guarantee in the region they qualify
- Expects employers to offer all entry-level jobs as apprenticeships before considering other recruitment options
Mainstream digital care

- Give patients right to switch to a Digital GP Provider
- Drive to redesign outpatients through digital and reduce number of face to face appointments by 1/3
- Local commitment with a Chief Clinical Information Officer (CCIO) or Chief Information Officer on every Board
- Health and care records to be linked (first 5 areas in 2020)
- NHS App rollout – all practices connected by July 2019
- Every patient to have access to their care plan on the NHS APP by 2020/21
Use taxpayers investment wisely

- All providers to return to financial balance (1.1% efficiency growth) by 2020/21
- Financial recovery Fund (FRF) introduced for Trusts with deficit plans
- Re-emphasis on previously stated ambitions, blended tariffs, MRET, MFF and ICS models etc.
- Focus on improving efficiency and reducing waste – highlights 9 key areas
- Capital plans likely to be reviewed to reflect needs of transformation – will be dealt with in the spending review
Regulation

- New shared operating model to support delivery of the Long Term Plan - released in 2019
- Move away from arms-length regulation and performance management to supporting service improvement and transformation across systems and providers
- Strong governance and accountability mechanisms in place for systems to ensure best value from its combined resources
- Reinforcement of accountability at Board level for adopting best practice and contribution to national improvement programmes, on a comply or explain basis
- Making better use and improving the quality of the data and information at local system and provider level
- More use of Model Hospital - moving to Model System
Proposed legislative changes

- Give CCGs and NHS providers shared new duties to promote the ‘triple aim’ of better health for everyone, better care for all patients, and sustainability, – remove the purchaser/provider split and create local system based budgets
- Support the development of ICSs by letting trusts and CCGs exercise functions and make joint decisions – could mean a joint commissioner/provider committee across the ICS to make system based decisions
- Support the creation of NHS integrated providers (ICPs) – organisational mergers allowing for full integration of primary care with existing providers
- Remove the Competition and Markets Authority’s (CMA) duties,
- Cut delays and costs of the NHS automatically having to go through procurement processes
- Increase flexibility in the NHS pricing regime
Links to operating plans

• LTP contains high level aspirations with milestones for achievement covering the next 10 years.
• Details of what is expected to be delivered in the immediate ‘transition year’ of 2019/20 are detailed in a suite of planning documents that support the LTP.
• Activity, workforce and financial worksheets along with a supporting operational plan that also covers quality, digital and STP ready for draft submission on 12 February and final submission on 04 April.