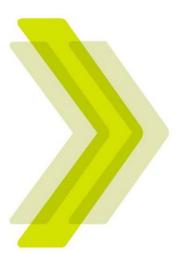
# The rise and decline of the NHS in England 2000-20

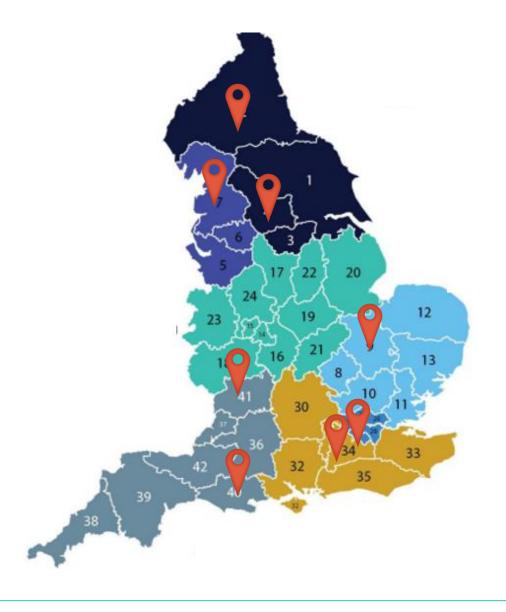
How political failure led to the crisis in the NHS and social care



Chris Ham

## System case studies

- North East and North Cumbria
- West Yorkshire Health and Care Partnership
- Lancashire and South Cumbria
- The Thames Valley and Surrey shared record
- Dorset
- One Gloucestershire
- Cambridgeshire and Peterborough
- Surrey Heartlands













The NHS in England at 75 A report from the NHS Assembly



## The engagement identified three shifts...



There is growing consensus that three big shifts are now needed. These shifts are all already under way in many places, and were featured in the NHS Long Term Plan in 2019. However, none are yet at sufficient scale or speed.



## **Preventing ill health**

- Shifting funding to prevent + manage CVD and other causes of poor health (smoking & obesity).
- Working more effectively with partners to reach those at greatest risk.
- More boldly advocating for action on determinants of poor health.

## **Personalisation and participation**

- More control in planning their own care
- Continuity of relationship with clinical teams
- NHS accountability framework giving great priority to patients' experience and voice, particularly those who have been marginalised historically.

## From hospital care to co-ordinated care closer to home

- Accelerating plans to strengthen primary and community services.
- Universalising better care for complex needs and frailty based on community teams & hospital @home services, supported by hospital outreach.

## And the enablers which underpin them...



Within these enablers, there are overriding messages of creating the right conditions for change; continuous system learning, innovation and improvement, and making use of a compact with the public, setting out what people can expect and what they can contribute.

#### Supporting those who provide care

 Providing staff with a safe, inclusive & healthy work place, with support in place for unpaid carers and volunteers.

#### Harnessing the power of digital & data

 Placing digital and data at the heart of how the NHS works in a way that is digitally inclusive & empowers patients.

## Maximising the value of care and treatment

 Involving patients in decisions on treatment options and alternatives, leading to more realistic expectations and match between values and treatment choices.

### **Investment in infrastructure**

 Long term infrastructure plan, addressing: maintenance backlog, primary and community care modernisation.

#### **Building partnerships**

 Allowing Integrated Care Systems time to mature, ensuring that partnerships with organisations and patient involvement in health system design become mainstream.

#### **Leadership and learning**

 Acting on the NHS delivery and continuous improvement review; NHS Impact, a single NHS Improvement approach, with a small set of codesigned priorities.

#### A new relationship between the NHS and the public

Developing a "compact" between the public and the NHS —
reinforcing the NHS Constitution. Integrated Care Systems to take a
role in engaging their local population on what a compact should
include.

## Securing our Future Health: Taking a Long-Term View

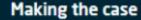
Final Report

Derek Wanless April 2002



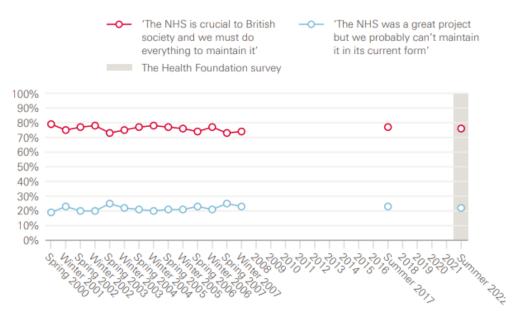
Integrated care New models of care Patient involvement

Local service design Population health



## ..And the public remain deeply committed to the NHS model...

#### Which of the following statements best reflects your thinking about the NHS?



Source: Health Foundation, 2022

