The NHS is made of people

Rob Webster
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London Social Partnership Forum
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The need challenge
Meeting the rising demand for care, particularly from people with complex needs or long-term conditions, while maintaining people’s wellbeing and preventing ill health for as long as possible.

The culture challenge
Building confidence in the health service by achieving a fundamental shift in culture from the bottom up. Creating a more open and transparent NHS, which enables patients, citizens and communities to be partners in decisions, and staff to improve care.

The design challenge
Redesigning the health and care system to reflect the needs of people now – and so that it remains sustainable in the future. Shifting more care closer to people’s homes, while maintaining great hospital care. A focus on joining up all parts of the health and care system so care revolves around the needs and capacities of individuals, families and communities.

The finance challenge
Recognising the financial pressures on all parts of the system and squeezing value from every penny of public money spent on health and care. Debating honestly and openly the future levels and sources of funding of health and social care.

The leadership challenge
Creating value-based, system leaders across the NHS and empowering them to improve health and wellbeing for local people. Supporting these local leaders to work in partnership with a wide range of health, care and related organisations to address the 2015 Challenge, involve patients and citizens as leaders, and have the resilience to make the biggest changes in the recent history of health and care.

The workforce challenge
Planning for a workforce to better match changing demand. Developing staff roles and skills to provide complex, multidisciplinary, coordinated care, in partnership with individuals and communities and more often in community settings.

The technology challenge
Using technology to help transform care and enabling people to access information and treatment in a way that meets their needs. Spreading innovation to improve the quality of care while responding to the financial challenge facing the NHS and care system.
“A new perspective”
Life expectancy and disability-free life expectancy (DFLE) at birth, males by neighborhood deprivation, England, 1999–2003 and 2009-2013
We are a guest in other people’s lives and communities.

We should see people as assets not issues.

Our outcomes should be theirs.

We should organise around them and not our professional egos.
“Reality bites”
Funding for next five years does not match demand

- For health, spending is broadly flat per person and so accounts for population growth

Change in health spending per person, 2010 to 2020

Source: Health Foundation, 2015
Funding for next five years does not match demand

• For local government, spending falls on average by 0.5 per cent each year over the four year period

Change in local government core spending power, 2016 to 2020

Source: HM Treasury, 2015
Unprecedented efficiency savings required

- Savings plan for the Second Great Efficiency Challenge (SGEC), 2016 to 2020, are still to be outlined

**Provider-driven**
(25%, c.£5bn)

As suggested by Lord Carter

**Transformation?**
(50%, c.£12bn)

Service change and redesign in 5YFV

**Nationally-driven**
(25%, c.£5bn)

Savings from pay and system costs

Overview of NHS Finances

More information at: [http://www.nhsconfed.org/finance](http://www.nhsconfed.org/finance)
- Redesigning the aircraft whilst in flight
“New Models of Care”
Vanguard types

- integrated primary and acute care systems
- enhanced health in care homes
- multispecialty community provider
- urgent and emergency vanguards
- acute care collaborations
“the NHS is made of people”
Workforce challenges

• Staff numbers and supply

• Carter Review

• New Models of Care

• Recruitment and retention

• Sustaining staff engagement

• Right staff in the right place
“We must stop wasting the assets of committed, passionate, experts every single day”
What does high quality care mean to you?

Respect & dignity

LEADERSHIP
by Adam Boyleon

This rhyme is a pestsk, as you will see, this rhyme tells what a good leader should be.
A good leader respects the young & the old.
A good leader strives to be kind.
A good leader is brave & will try something new.
A good leader works hard & gives praise when it.
A good leader expects the best from all who.
A good leader brings happiness & always tries.
A good leader supports people & gives them tough.
A good leader leads staff to be afraid of fear.
A good leader enforces it everywhere.
A good leader requires in times of death, to face it.
If you show this rhyme, I hope you like it.
I will discover the leader I admire most.
ELEVATING THE DIVERSITY DISCUSSION

LEGACY DIVERSITY:
Reflects differences in physical attributes and social constructs, such as race, ethnicity, age, gender, ability and sexuality.

EXPERIENTIAL DIVERSITY:
A function of our physical and social identities.

THOUGHT DIVERSITY:
How our neural makeup and lived experiences impact our problem solving.

"The implication of this new frontier in diversity is that leaders and organisations must let go of the idea there is 'one right way' and instead focus on creating a learning culture where people feel accepted, are comfortable contributing ideas, and actively seek to learn from each other."

Diversity's New Frontier, Deloitte University Press

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