



NHS Long Term Plan: Recent Developments

Summary

NHS England's Long Term Plan (LTP) was published in January 2019. It was accompanied by a press release that predicted the plan would “save almost half a million lives” with action on major conditions and investment in “world class, cutting edge treatments”. The LTP followed the announcement in June 2018 by the then Prime Minister, Theresa May, of increased funding for the NHS. This was set to average 3.4% each year during the period from 2019/20 to 2023/24, compared to average growth of 2.2% in each of the previous five years. The Government has stated that an NHS Funding Bill will be brought forward to set out the funding commitment in legislation.

The aims of the plan were to maximise the impact of the extra funding, tackle the pressures faced by NHS staff in England and take advantage of new health technologies. The LTP included measures intended to change the way NHS services in England are provided and increase the coordination of NHS services with local authorities, the care sector and the voluntary sector. Although the objectives of the plan were welcomed by stakeholders, concerns were raised that success would be contingent upon various factors, including: funding; staff capacity; the implementation framework; and local leadership. Since January 2019, several milestones in the execution of the plan have been reached. These include:

- The *Interim NHS People Plan* was published in June 2019.
- The *Implementation Framework* was published the same month.
- Local systems have developed their five-year strategic plans to set out how they would improve services and achieve financial sustainability. These were expected in November 2019, but their publication was postponed as a result of the pre-election ‘purdah’ period.

The Health Foundation, the King's Fund, and the Nuffield Trust have commented that the plan had a renewed emphasis on “collaboration”. This represented a shift away from the “competition” extended by the so-called ‘Lansley reforms’ advanced by the Health and Social Care Act 2012. In the LTP, NHS England made recommendations for changes to this legislative framework. Although the plan stated that it did not require changes to the law to be implemented, it did argue that “amendment to the primary legislation would significantly accelerate progress on service integration, on administrative efficiency, and on public accountability”. There has been a consultation into the proposed legislative changes, the response to which was published by the NHS in September 2019. The Government has stated that it “will bring forward detailed proposals shortly” following the recommendations.

Joe Skelton | 29 January 2020

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NHS Long Term Plan: Background and Summary of Key Aims

The NHS Long Term Plan (LTP) was published in January 2019 amidst “much fanfare”.¹ The document set out the NHS England’s strategy for the next decade. Although the LTP built on the policy platform described in the *NHS Five Year Forward View* (2014), the King’s Fund has argued that it “signalled a shift in gear” and meant that there was “no doubt” that the NHS in England was moving rapidly away from the focus on organisational autonomy and competition that characterised the so-called ‘Lansley reforms’ introduced by the Health and Social Care Act 2012.²

In June 2018, the then Prime Minister, Theresa May, had asked NHS England to produce a plan to improve access, care and outcomes for patients. The Government stated that the plan would ensure “every pound” of the five-year funding settlement announced the same month would be “spent wisely”.³ The LTP was developed “in partnership with those who know the NHS best—frontline health and care staff, patients and their families and other experts”.⁴ The 136-page plan is split into seven chapters which give detail about various priorities, including sections focusing on specific clinical areas, prevention and staff development.⁵

In summary, it aimed to ensure that the NHS in England is:

- More joined-up and coordinated in its care.
- More proactive in the services it provides.
- More differentiated in its support offer to individuals.⁶

NHS England stated that five “major, practical changes” to its service model would help bring these changes about over the next five years. It suggested the plan would:

- Boost ‘out-of-hospital’ care and dissolve the primary and community health services divide.
- Redesign and reduce pressure on emergency hospital services.
- People will get more control over their own health and more personalised care.
- Digitally-enabled primary and outpatient care will go mainstream across the NHS.
- Local NHS organisations will increasingly focus on population health and local partnerships with local authority-funded services, through new Integrated Care Systems (ICSs) everywhere.⁷

¹ Helen Buckingham, ‘[On the Same Page? Taking a Closer Look at the Long Term Plan and the Planning Guidance](#)’, Nuffield Trust, 23 January 2019.

² King’s Fund, ‘[The NHS Long-term Plan Explained](#)’, 23 January 2019.

³ Department of Health and Social Care, ‘[Prime Minister Sets Out 5-year NHS Funding Plan](#)’, 18 June 2018.

⁴ Leeds Clinical Commissioning Group, ‘[NHS Long Term Plan](#)’, accessed 12 November 2019.

⁵ A summary of the different sections of the NHS Long Term Plan is provided in the following briefing: House of Commons Library, ‘[General Debate on the NHS Ten Year Plan](#)’, 15 February 2019.

⁶ Healthy London Partnership, ‘[The NHS Long Term Plan—Summary](#)’, January 2019.

⁷ *ibid.*

NHS partners and stakeholders welcomed the plan but noted that “implementation will be its litmus test”.⁸ Concerns had been raised by organisations representing NHS staff about the support provided to realise the LTP’s ambitions. They also argued that several factors might make effecting the plan particularly difficult. These included: the size of the NHS budget; the level of funding allocated to social care and medical training; and vacancies in the NHS.⁹

Key Developments Since January 2019

Although many NHS partners supported the principles of the LTP when it was published in January, some, including Action on Smoking and Health, also stated that “the proof of the pudding will be in the eating”.¹⁰ The LTP differed from the *Five Year Forward View* by focusing more on delivery and implementation.¹¹ It sought to accelerate progress towards the goals set out in the *Five Year Forward View*.¹²

Implementation Framework and Forthcoming Five-year Strategic Plans (‘System Plans’)

The LTP *Implementation Framework* (IF) was published in June 2019. It set out in further detail how the plan would be delivered. The IF was intended as an operational document to support health and care systems with their planning, developed and tested with many of the stakeholders involved in developing the LTP.¹³

The LTP had set out a 10-year programme of improvements to the NHS in England. These changes, however, would need to be phased in at different rates in different parts of the country based on local need.¹⁴ Realistic workforce assumptions would also need to be made when establishing strategies to deliver commitments within the LTP.¹⁵ The framework indicated the expectations that NHS England and NHS Improvement had of local systems. Sustainability and transformation partnerships (STPs) and integrated care systems (ICSs), both geographically-based groupings of NHS organisations and local authorities, would lead local planning through development of five-year strategic plans.¹⁶ The IF expected local systems to meet the end points set out in the plan but allowed substantial freedom to respond to local needs and priorities. A support offer was set out alongside the framework, detailing the programmes and organisations that systems could call on as they develop and implement their plans.¹⁷

⁸ Richmond Group of Charities, [‘The NHS Long Term Plan: Lots to Welcome but Implementation Will Be its Litmus Test’](#), 4 January 2019.

⁹ Further information on the NHS Long Term Plan, its background and reactions to it is provided in the following briefing: House of Lords Library, [NHS England Long Term Plan](#), 25 January 2019.

¹⁰ Equally Well UK and Action on Smoking and Health, [‘The Proof of the Long Term Plan Pudding will be in the Eating’](#), accessed 8 November 2019.

¹¹ King’s Fund, [‘The NHS Long-term Plan Explained’](#), 23 January 2019.

¹² Further information on measures in the *Five Year Forward View* are provided in the following briefings: House of Lords Library, [NHS and Integrated Healthcare Services](#), 29 June 2018; and House of Commons Library, [NHS Reorganisation](#), 11 December 2018.

¹³ NHS England and NHS Improvement, [‘Long Term Plan Implementation Framework’](#), accessed 13 November 2019.

¹⁴ NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p 3.

¹⁵ *ibid*, p 4.

¹⁶ Further information on the ‘local systems’ known as STPs and ICSs is provided by NHS England on the webpage [‘Frequently Asked Questions—STPs’](#), accessed 8 November 2019.

¹⁷ NHS England and NHS Improvement, [‘Long Term Plan Implementation Framework’](#), accessed 13 November 2019.

The plan relies on the ability of local systems to deliver and the Health Foundation has reiterated the importance of national NHS leaders considering the assistance local systems may need to “implement plans once they have been written”.¹⁸ NHS England expected to receive the plans by mid-November 2019.¹⁹

Interim NHS People Plan

The *Interim NHS People Plan* (IPP) was also published in June 2019. It aimed to set “a vision for how people working in the NHS will be supported to deliver care”. It also aimed to identify the actions national bodies would take to assist NHS staff in achieving this ambition.²⁰ It recognised that “more of the same will not be enough to deliver the promise” of the LTP and that the NHS would require “different people in different professions working in different ways”.²¹ Through the IPP, the NHS pledged to transform the way its 1.3 million-strong workforce operated by focusing on 5 core themes:

- Making the NHS the best place to work.
- Improving leadership culture.
- Addressing urgent workforce shortages in nursing.
- Delivering 21st century care.
- A new operating model for workforce.

The IPP noted that workforce issues and planning had “lost their priority” at board level over the last decade, with operational and financial plans taking precedence.²² It concluded that workplace culture within the NHS had become challenging for many, with vacancies causing staff to be overstretched, compromising quality of care and adding to financial pressures with the use of temporary staff. In addition, it recognised that employment expectations had changed with people choosing to take a more flexible approach to their career and work-life balance.²³

Specific measures announced in the IPP included:

- Immediately increasing the number of undergraduates studying nursing with an offer to universities of more than 5,700 extra hospital and community placements for student nurses this year.
- Rapidly expanding the number of staff in recently created new roles including increasing the number of nursing associates to 7,500, offering a career route from healthcare support work to registered nursing.
- Rapidly addressing current pensions issues which are discouraging experienced doctors and nurses from doing extra work for patients and causing them to think hard about remaining in the NHS.

¹⁸ Health Foundation, [‘The Best Laid Plans: Making the NHS Long Term Plan a Reality’](#), 10 July 2019.

¹⁹ NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p 31.

²⁰ NHS Improvement, [‘Interim NHS People Plan’](#), 3 June 2019.

²¹ NHS Improvement, [Interim NHS People Plan](#), 3 June 2019, p 2.

²² Healthcare Financial Management Association, [Summary of the Interim NHS People Plan](#), June 2019.

²³ *ibid.*

- Conducting a major staff engagement exercise to create an explicit offer to staff covering issues they say matter to them. For example, access to flexible working, career development and the best possible support from line managers.
- Devolving significant responsibilities for workforce planning to the emerging integrated care systems.
- Developing new models of multi-disciplinary working to support the LTP’s ambition to integrate primary and secondary care.²⁴

When the LTP was published in January, the King’s Fund reached the conclusion that the “greatest risk to delivery” of the plan was workforce shortages.²⁵ Responding to the IPP, it commented that “NHS bodies have set out a welcome vision for shoring up the healthcare workforce” and “many of the actions can be delivered without delay”. However, it also highlighted that “funding for staff training and other key decisions have been put off” until following the spending review and that “the staffing crisis [...] cannot wait—the Government must now step up and back the plan”.²⁶

NHS Improvement aimed to publish a “full People Plan [...] towards the end of 2019” following the spending review and the development of the 5-year STP/ICS plans.²⁷ It stated that this would be costed and build on the vision set out in the IPP by:

- Setting out how culture changes will be embedded, and the leadership capability needed to make the NHS a better place to work.
- Setting out in detail the changes to education and training, career paths, skill mix, and ways of working.
- Quantifying the full range of additional staff needed for the LTP’s service priorities.
- Aggregating the people plans developed by local systems to build a detailed national picture of supply and demand by skill sets.
- Iterating local and national workforce requirements with STP/ICS plans.²⁸

Next Steps: Future Implementation

National Implementation Plan

NHS England had expected the local system plans developed by STPs and ICSs to be brought together as part of a national implementation plan by the end of 2019.²⁹ This timeframe was established before the 2019 general election was called. Purdah had implications for NHS arms’-length bodies, and this timeline was not met.

In June 2019, NHS England stated that when writing the national implementation plan it would “properly take account of the Government’s spending review decisions on workforce education and

²⁴ NHS England, “[More Staff Not Enough—NHS Must Also Be Best Place to Work](#)” Says New NHS People Plan’, 3 June 2019.

²⁵ King’s Fund, ‘[The NHS Long-term Plan Explained](#)’, 23 January 2019

²⁶ King’s Fund, ‘[The King’s Fund Responds to the Interim NHS People Plan](#)’, 3 June 2019.

²⁷ Royal College of Paediatrics and Child Health, ‘[Interim NHS People Plan—Our Summary](#)’, 30 July 2019.

²⁸ Royal College of Psychiatrists, ‘[Interim NHS People Plan](#)’, June 2019.

²⁹ NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p 2.

training budgets, social care, councils' public health service and NHS capital investment".³⁰ The spending review was delivered to Parliament in September 2019 and was described as "turning the page" on austerity, with specific commitments announced on the NHS and social care.³¹ NHS England stated that the national implementation plan would set out initial performance trajectories and programme milestones to deliver LTP commitments.³² The Government has since announced that a Budget will be held on 11 March 2020.³³

Delivery Concerns and Criticisms

Several organisations have highlighted potential issues around how the plan will be realised:

- NHS partners have emphasised the importance of balancing national direction and local autonomy.³⁴
- STPs and ICSs are central to delivery, but their development is much more advanced in some areas than others. They do not have statutory powers and accountabilities within local systems are unclear.³⁵
- Only 22 percent of non-executive directors think the national regulatory approach positively supports the implementation of the LTP.³⁶

The LTP set out how the NHS is supporting wider social impact including "support focused on the health and justice system, veterans and the armed forces, health and the environment, health and employment" and so-called 'anchor institutions' such as hospitals.³⁷ However, in turn this is also reliant on factors external to the NHS. While the NHS owns the LTP, it "does not operate in isolation".³⁸ The five-year funding settlement applied only to NHS England's budget. Important areas of spending included in the Department of Health and Social Care's budget, including on capital projects, education and training, were not covered by the LTP.³⁹ Social care budgets and local authority expenditure were also excluded from the plan, attracting criticism from the Local Government Network and leading commentators such as Richard Humphries, a Senior Fellow at the King's Fund, to conclude that "this is a plan written by the NHS for the NHS, not for the whole health and care system".⁴⁰

Proposals for Legislation

In June 2018, the House of Commons Health and Social Care Committee concluded that while positive progress towards collaborative working and integrated care had been made within the

³⁰ NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p. 3

³¹ HM Treasury, [Spending Round 2019: What You Need to Know](#), 4 September 2019.

³² NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p 3.

³³ HM Treasury, [Chancellor Launches Budget Process to Usher in "Decade of Renewal"](#), 7 January 2020.

³⁴ NHS Confederation, [Step in the Right Direction—NHS Confederation Welcomes MPs Report](#), 21 June 2019.

³⁵ Nuffield Trust, [Primary Care Networks: a Pre-mortem to Identify Potential Risks](#), accessed 11 November 2019.

³⁶ PwC, [Does the Current National Regulatory Approach Positively Support the Implementation of the NHS Long Term Plan?](#), 17 October 2019.

³⁷ NHS England, [NHS Long Term Plan Implementation Framework](#), June 2019, p 22.

³⁸ King's Fund, [The NHS Long-term Plan Explained](#), 23 January 2019.

³⁹ *ibid.*

⁴⁰ King's Fund, [The NHS, Local Authorities and the Long-term Plan: In It Together?](#), 15 March 2019.

current legislative framework, this required “cumbersome workarounds” and had led to local areas operating with “significant risks” in terms of their governance and decision-making. The committee concluded that “the law will need to change to fully realise the move to more integrated, collaborative, place-based care”. It was explicit that “the purpose of legislative change should be to address problems which have been identified at a local level, which act as barriers to integration, in the best interests of patients”.⁴¹

However, within the health and care sector there appears to be little appetite for major reform of the legislative framework governing the NHS in England. For example, the King’s fund has argued that such a course “risks gobbling up the political capital and energy” that will be needed for social care reform.⁴² Following the Health and Social Care Act 2012, it has been reported that NHS leaders and staff are cautious that widescale reform will cause upheaval and hardship.⁴³ Nonetheless, it has been acknowledged that “some legislative changes need to be made and these are better made sooner rather than later in order to accelerate the integration agenda that all parties support”.⁴⁴

NHS England and NHS Improvement Proposals and Public Consultation

Following the publication of the LTP, the then Prime Minister, Theresa May, invited NHS England and NHS Improvement to review the existing legislative framework governing the NHS and produce proposals to achieve greater collaboration and system working.⁴⁵ In February 2019, NHS England and NHS Improvement made initial suggestions and opened a public consultation on legislative reform. They were designed to “solve specific practical problems that the NHS faces and avoid creating operational distraction”.⁴⁶ The NHS underlined that “the purpose of legislative change should be to address problems which have been identified at a local level which act as barriers to integration in the best interests of patients”.⁴⁷

The formal consultation closed on 25 April 2019. It received written responses from 192,806 individuals or organisations representing different parts of the health and social care system. The NHS found a “clear and strong consensus” on what a “highly targeted” NHS bill should contain and argued this suggested its proposed reforms would “command widespread support” from the public.⁴⁸

Proposals that received support during the consultation included the following:

- The Competition and Markets Authority’s (CMA’s) roles in the NHS, as provided for by the Health and Social Care Act 2012 (2012 Act), should be repealed. Section 75 of the 2012 Act should be rescinded and the commissioning of NHS services should be removed from the jurisdiction of the Public Contracts Regulations 2015. These changes would remove the presumption of automatic tendering of NHS healthcare services over

⁴¹ House of Commons Health and Social Care Committee, [Integrated Care: Organisations, Partnerships and Systems](#), 11 June 2018, HC 650 of session 2017–19, p 78.

⁴² King’s Fund, [Politicians Should Avoid the Temptation of Another NHS Top-down Re-organisation](#), 14 October 2019.

⁴³ Nuffield Trust, [Doomed to Repeat? Lessons from the History of NHS Reform](#), 16 October 2018.

⁴⁴ King’s Fund, [Politicians Should Avoid the Temptation of Another NHS Top-down Re-organisation](#), 14 October 2019.

⁴⁵ NHS Confederation, [Questions Need to be Answered on NHS Legislative Proposals](#), 9 May 2019.

⁴⁶ NHS England and NHS Improvement, [Implementing the NHS Long Term Plan: Proposals for Possible Changes to Legislation](#), February 2019.

⁴⁷ *ibid.*

⁴⁸ NHS England and NHS Improvement, [The NHS’s Recommendations to Government and Parliament for an NHS Bill](#), September 2019, p 9.

£615,000. Monitor’s specific focus and functions in relation to enforcing competition law should also be abolished.

- There should be specific flexibilities on “tariff”, the NHS’s payment system. The national tariff is a set of prices and rules used by providers of NHS care and commissioners to deliver the most efficient, cost effective care to patients. NHS England and NHS Improvement proposed that they should have the ability to set a “blended tariff” using a national formula, rather than only being able to set a fixed national price. Taken together, the operation of the tariff changes and the new procurement regime would help against the risk of introducing competition solely on price as opposed to quality.
- A new “triple aim” should be introduced of better health for the population, better quality care for patients and financially sustainable services for taxpayers. This duty would apply to commissioners and providers alike.⁴⁹

House of Commons Health and Social Care Committee Inquiry

The House of Commons Health and Social Care Committee launched an inquiry in parallel with the consultation process and published a report on 24 June 2019. The committee welcomed the majority of the proposals in the consultation, recognising them as a pragmatic set of reforms aimed at removing the barriers to integrated care. It supported, in principle, “proposals to promote collaboration, especially the proposal to repeal section 75 of the Health and Social Care Act 2012 and revoke the regulations made under it”.⁵⁰

However, the committee also said it had heard from witnesses that the proposals were “too NHS-centric, with too little consideration for the wider system with which the NHS seeks to integrate”. It recommended that “the Department of Health and Social Care, NHS England and NHS Improvement should be clearer about the input and roles local government, the voluntary and wider community sector, as well as independent providers, are expected to have in the future of the NHS”.⁵¹ Witnesses giving evidence to the inquiry included the Health Foundation, which broadly supported the proposals but recommended that NHS leaders should more clearly articulate the rationale for the changes.⁵²

The committee also considered risks associated with the proposals, including concerns that they risked deregulating, rather than de-marketising, the NHS without creating an alternative regulatory mechanism.⁵³ The committee declined to support two specific proposals in their format at the time. First, that NHS Improvement should have targeted powers to direct mergers or acquisitions involving NHS foundation trusts, in specific circumstances only, where there were clear patient benefits to be gained from doing so. It said that if similar proposals were included in a draft bill, it would expect to see the bill specify the limited circumstances in which these powers could be exercised. Second, the committee argued that NHS Improvement should have powers to set annual capital spending limits for NHS foundation trusts, in the same way that it can currently do for NHS trusts. The committee

⁴⁹ NHS England and NHS Improvement, [The NHS’s Recommendations to Government and Parliament for an NHS Bill](#), September 2019, p 4.

⁵⁰ House of Commons Health and Social Care Committee, [NHS Long-term Plan: Legislative Proposals](#), 24 June 2019, HC 2000 of session 2017–19, p 3.

⁵¹ *ibid.*

⁵² Health Foundation, [Health Foundation Submission to the Health and Social Care Select Committee Inquiry into Legislative Proposals in Response to the NHS Long Term Plan](#), April 2019.

⁵³ House of Commons Health and Social Care Committee, [NHS Long-term Plan: Legislative Proposals](#), 24 June 2019, HC 2000 of session 2017–19,

instead recommended that the NHS should focus on removing barriers to integrated care and empowering local systems to resolve disputes over the configuration of services and the management of resources, including capital resources, themselves. The NHS Confederation specifically raised concerns around these proposals and was pleased to see the committee had taken them on board when drafting its final report.⁵⁴

Recommendations to Government and Parliament for an NHS Bill

NHS England and NHS Improvement published a set of finalised recommendations to Government and Parliament in September 2019.⁵⁵ These included that “an NHS bill should be introduced in the next session of Parliament. Its purpose should be to free up different parts of the NHS to work together and with partners more easily”. The paper argued that “once enacted” such legislation “would speed implementation of the 10-year NHS Long Term Plan”.⁵⁶

Legislation in the New Parliament

Following the 2019 general election, the Government welcomed the “NHS’s leadership” in making proposals for legislative change and announced that it was “considering the NHS’s recommendations thoroughly and will bring forward detailed proposals shortly”.⁵⁷ It added that these proposals would “include measures to tackle barriers the NHS has told Government it faces” and would be set out in draft legislation to be published in due course.

⁵⁴ NHS Confederation, [Health and Social Care Select Committee Report on NHS Long Term Plan: Legislative Proposals](#), accessed 14 November 2019.

⁵⁵ NHS England and NHS Improvement, [The NHS’s Recommendations to Government and Parliament for an NHS Bill](#), September 2019.

⁵⁶ *ibid*, p 3.

⁵⁷ Prime Minister’s Office, [The Queen’s Speech 2019: Background Briefing Notes](#), 19 December 2019, p 30.