



Consultation response form

Setting the mandate to NHS England for 2016 to 2017

Consultation Questions

1) Do you agree with our aims for the mandate to NHS England?

The RCP generally agrees with the aims of the mandate for NHS England. NHS England's Five Year Forward View broadly reflects the principles contained in the RCP's Future Hospital Commission report.

In particular the RCP welcomes the aim to deliver and plan care over a more long term basis. Supporting trusts and CCG's to plan for care over the long term will help ensure that the NHS is sustainable in the long term and help to deliver high quality care for patients.

2) Is there anything else we should be considering in producing the mandate to NHS England?

The RCP strongly welcomes the Government's commitment to provide additional funding for the NHS. The Five Year Forward View outlines the challenges facing the NHS and solutions to developing a sustainable health care system. The RCP however, strongly argues that any transformation in the NHS will only be possible through providing additional funding. The RCP welcomes that the government has committed to this funding and that the NHS mandate reflects this. However, real change will only occur if the additional funds are frontloaded and the NHS receives significant increases in funding at the start of this Parliament. The mandate should reflect this.

The RCP understands that NHS England only has direct responsibility for NHS services. However, the wider health, social care and prevention areas have an impact on the ability of the NHS to deliver care. Patients often do not distinguish between different areas of care delivery such as NHS or social care. If we are to develop a truly person centred model of care which is patient led, the mandate should recognise the wider implications that these areas of care have on NHS services.

3) What views do you have on our overarching objective of improving outcomes and reducing health inequalities, including by using new measures of comparative quality for local CCG populations to complement the national outcomes measures in the NHS Outcomes Framework?

The RCP welcomes moves to ensure that the quality of care is measured on patient experience and the long outcome of care. Often the NHS can encourage an activity based approach, particularly in commissioning, when delivering care becomes more important than the outcome for patients. The RCP believes that patient experience and outcome are the indicators of high quality patient care.

The RCP argues against the use of metrics which do not drive improvements of care or improve patient outcomes. Any use of metrics should be real indicators of the quality of care.

4) What views do you have on our priorities for the health and care system?

Prevention ill health and supporting people to live healthier lives.

The RCP fully supports this priority. Improvements to health and reducing pressures on the NHS can be achieved through public health interventions. While individuals have a responsibility to making healthy choices about their own health, they can only do this if the correct conditions are created. Lessons learnt from reductions in smoking and the effectiveness of strong regulatory frameworks should be implemented in other areas to encourage and empower individuals to make healthy decisions about their health.

Creating the safest, high quality health and care service.

The RCP fully supports the expansion of services across seven days a week. This is a recommendation that the RCP has publically supported since 2010. However, the RCP has significant concerns over what the definition of seven day services are. The NHS is currently under significant pressure to deliver high quality care. Many services are currently delivered seven days a week particularly in acute and emergency care settings.

We support developing care seven days a week to ensure that patients have access to high quality care in acute and emergency settings. However any significant expansion in the delivery of services must be accompanied by additional funding. Particularly if the expansion of services includes elective and non-urgent care.

The RCP would welcome greater clarity over what the expansion of seven day service entails. This should be reflected in NHS England's mandate.

Maintaining and improving performance against core standards while achieving financial balance. (Driving improvements in efficiency and productivity)

The RCP recognises the importance of ensuring that the NHS provides the greatest value for money and that all healthcare funding is used for the maximum benefit for patient care. However, efficiency savings must not come at the expense of patient care. The quality of care should remain the primary drive for the NHS. The RCP strongly recommends that patient care and experience should be valued over efficiency in the mandate.

Transforming out-of-hospital care, ensuring services outside of hospital settings are more integrated and accessible.

The RCP strongly supports this priority. Ensuring that patients have access to the right care according to their need no matter if they are in the community or the hospital setting was one of the fundamental principles of the RCP's ground breaking Future Hospital Commission.

The UK is already a world leader in innovation and research. We support ensuring that the NHS supports research and growth in the NHS. While growth within the economy is one of the benefits of research and developing innovative treatments, the primary goal for the NHS in developing new treatments should be improving the quality of patient care. The drive for profits should not overtake patient care in the drive for innovation and research. The RCP strongly recommends that this should be reflected in the NHS mandate and improving patient experience should remain at the core of research and innovation over that of making profits.

5) What views do you have on how we set objectives for NHS England to reflect their contribution to achieving our priorities?

No comment on this section.