



Underfunded. Underdoctored. Overstretched. The NHS in 2016.

The NHS offers some of the highest-quality, most efficient and most accessible healthcare in the world and tops polls of what makes people proud to be British. That's a lot to be proud of. Yet in 2016 the NHS is **underfunded, underdoctored** and **overstretched**.

- > **Underfunded** 85% of physicians believe that current health service funding is not sufficient to meet demand

85% of physicians believe that funding is insufficient to meet rising patient needs. Every year, demand for NHS services increases by 4% but, in real terms, NHS funding will increase by only 0.2% per year to 2020. With recorded hospital deficits hitting £2.45 billion, money to transform services risks being sucked into a financial black hole.

- > **Underdoctored** Seven-tenths of trainee physicians now report working on a rota with a permanent gap

The number of medical students has fallen and there is a shortage of doctors training to be medical specialists. Seven-tenths of trainee physicians now report working on a rota with a permanent gap. This also affects consultant physician recruitment, with hospitals failing to fill two-fifths of advertised posts. Nurse shortages have increased the pressure, with 96% of trainee doctors reporting gaps in nursing rotas.

- > **Overstretched** Doctors-in-training work an extra 5 weeks a year on top of rostered hours

NHS staff feel caught between rising demand and squeezed budgets. Four-fifths of trainees say their job causes them excessive stress; three-quarters go through at least one shift a month without water; and, on average, they work an extra 5 weeks a year on top of their normal hours. 95% of trainees warn that poor staff morale harms patient safety.

The cost for patients?

The pressures of an underfunded, underdoctored, overstretched NHS put patient safety and recovery at risk every day of the week:

- > **Longer waits.** Waiting lists are at their longest since 2007 and more people are waiting for longer than 4 hours in A&E than at any time since 2003.
- > **Delays leaving hospital.** In 2015/16, patients spent more than 1.8 million extra days in hospital because of delays in their discharge – an 11% increase on the previous year. In March alone, 5,700 people who did not need a hospital bed were still in hospital waiting to be discharged.
- > **Restricted access.** Clinical commissioning groups are reported to be 'rationing' care by restricting access to non-urgent operations and preventative drugs that could improve patient outcomes.
- > **Closed doors.** Reports of hospitals temporarily closing their doors owing to extreme pressure on beds and staff are now a common sight throughout the year.

Time for action

Patients deserve to know the true choice that we face: increase funding or cut care. The NHS in 2016 needs a new plan – a plan designed to meet the UK's health and care needs in the long term, and to value, support and motivate NHS staff. A truly 7-day NHS will only be possible if we address the underlying and structural threats to patient safety caused by insufficient funding and staffing.

> **Increase NHS funding** The NHS budget has not kept pace with rising demand for services. We need a new NHS budget that:

- > meets the demand for health services
- > sets realistic targets for efficiency savings
- > protects funds for transformation
- > invests in the long-term sustainability of the NHS.

> **Train more doctors** The UK does not train enough doctors. Hospital teams are feeling the pressure of staffing gaps. That's bad for them, and it's bad for patients. We need to:

- > increase the number of medical students and doctors training to be hospital specialists
- > ensure overall training numbers are sufficient to deliver enough doctors across all parts of the medical workforce, from GPs to physicians
- > incentivise doctors to work in the most challenging and in-demand areas of medicine
- > address nurse shortages and promote innovative models of staffing, such as physician associates working alongside doctors
- > take cross-governmental action to relieve immediate pressure on the NHS workforce.

> **Improve the working lives of NHS staff** Being a doctor is intense, rewarding and challenging. A valued workforce delivers better outcomes for patients. In late 2016, the RCP will launch a new campaign to value and support doctors working in the NHS. We will:

- > work with our member doctors to find new solutions to workforce pressures
- > push for action from across government and the NHS
- > showcase the very best of medicine.

About the RCP

The RCP aims to improve patient care and reduce illness, in the UK and across the globe. We are patient centred and clinically led. Our 32,000 members worldwide work in hospitals and the community across 30 different medical specialties, diagnosing and treating millions of patients with a huge range of medical conditions.

Get involved

Email

missionhealth@rcplondon.ac.uk

Social media

Twitter: [#missionhealth](https://twitter.com/missionhealth)

Facebook: [@RCPLondon](https://www.facebook.com/RCPLondon)

For references, more info, and to take a look at the full report, visit

rcplondon.ac.uk/missionhealth

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