A consultation on the Government's mandate to NHS England to 2020
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1. Introduction

A mandate to NHS England

1.1. NHS England is responsible for arranging the provision of health services in England. The mandate to NHS England sets the Government’s objectives for NHS England, as well as its budget. In doing so, the mandate sets direction for the NHS, and helps ensure the NHS is accountable to Parliament and the public. Every year, the Secretary of State must publish a mandate to ensure that NHS England’s objectives remain up to date.

1.2. A new mandate to NHS England is due to be published later this year, to take effect from April 2016. The Government is currently carrying out a Spending Review (SR), which will determine the budget for the NHS. It is due to conclude on 25 November 2015. The new mandate will be published after the completion of the SR and will inform planning guidance for the NHS.

1.3. This year, every government department is producing a plan setting out its objectives to 2020 and how it will achieve them. The Department of Health’s plan will inform the objectives for its arm’s length bodies, including the mandate to NHS England.

1.4. This consultation document sets out, at a high level, how the Government proposes to set the mandate to NHS England for this Parliament. The mandate itself will be finalised in light of consultation responses and subject to the outcome of the SR. Further detail underpinning each objective comprising the long-term aspiration to 2020, in-year deliverables and metrics to measure progress, will be agreed once the SR is complete and the funding settlement for the NHS is known.

Challenges facing the health and care system

1.5. The challenges for the NHS today are those facing healthcare across the world: how the NHS evolves to support people living longer and with more complex health conditions, and how we adapt to the opportunities presented by the advance of science and technology.

1.6. It’s not enough just to have the right values in the NHS. We need the right plan for the future. The coalition government gave the NHS important freedoms to develop its own plan. NHS England and its partners in other arm’s length bodies have done just that, with the NHS Five Year Forward View.

1.7. Because of our long-term plan for a strong economy, this Government backs this long-term plan for a strong NHS. We will continue to increase spending in real terms every year in this Parliament, rising to at least an extra £10 billion a year by 2020.

1.8. In return, people need to have the confidence that the highest quality NHS services will be there when they need them. In the new mandate to NHS England for 2016/17, the Government will be entrusting NHS England with the NHS budget to help deliver the
Five Year Forward View, and meet the evolving needs of the population in a way that is sustainable now and into the future.

1.9. At the same time, we want to develop a new relationship between the NHS and the public. People should be given more power and control over the care that is provided to them so that services are arranged around their needs and they are supported to manage their own health.

The Government’s priorities

1.10. The new mandate will be based on the priorities this Government believes are central to delivering the changes needed to ensure that free healthcare is always there whenever people need it most. Our priorities for the health and care system as a whole are:

- **Preventing ill health and supporting people to live healthier lives.** The escalating demands of ill health driven by our lifestyles also threaten the long-term sustainability of the NHS. It’s a priority to help people to live healthier lives by tackling obesity and preventable illness, and to improve quality of life for people with long-term conditions such as diabetes and those with dementia.

- **Creating the safest, highest quality health and care service,** by securing high quality health and care services and 7-day hospital care to improve clinical outcomes.

- **Maintaining and improving performance against core standards while achieving financial balance,** by ensuring the NHS meets the needs of patients and operates within its budget.

- **Transforming out-of-hospital care, ensuring services outside hospital settings are more integrated and accessible.** As part of a new patient guarantee, this means by 2020, we will ensure every patient has routine access to a GP in the evenings and at weekends, as well as effective 24/7 access to urgent care. We will also strive to reduce the health gap between people with mental health problems and the population as a whole.

- **Driving improvements in efficiency and productivity** by reducing waste and inefficiency to ensure every penny delivers the maximum possible benefit to patient care.

- **Supporting research, innovation and growth,** and influencing global health priorities.

1.11. Delivering these priorities will require contributions from all parts of the health and care system. As leader of the commissioning system, NHS England has a central role to play. This consultation document sets out how the Government proposes to set objectives for NHS England that reflect its contribution to these ambitions in the new mandate to NHS England for 2016/17 and beyond.
2. Our aims in setting the mandate to NHS England

2.1. In setting a new mandate to NHS England our core aims are to:

- **Set out NHS England’s contribution to our goals for the health and care system as a whole, in line with this Government’s manifesto commitments.** We will hold NHS England to account for meeting its objectives, which will be underpinned by key yearly deliverables and metrics, to be agreed following the SR. We will assess NHS England’s performance against these deliverables and metrics, alongside improvement in outcomes measures. This will be reflected in Secretary of State’s annual assessment of NHS England. In turn, we expect NHS England to ensure Clinical Commissioning Groups (CCGs) play their part in delivering the mandate.

- **Endorse the NHS’s own plan for change, the Five Year Forward View.** Implementation of the Five Year Forward View depends on the collective leadership of NHS organisations, including NHS England and national and local partners. The Government will use the mandate to hold NHS England to account for its leadership of and contribution to delivery of the Five Year Forward View.

- **Set a mandate that is more strategic, clearer and more accessible to the public.** The mandate is not just a means of accountability between the Department and NHS England, but a way of supporting transparency between the NHS and the public. We propose that the mandate focuses on the most strategically important objectives for the health service. The NHS Outcomes Framework will continue to set the long-term, strategic measures of progress against health outcomes for the population, to be complemented at local level by new measures of comparative quality for local CCG populations.

- **Set a mandate with a long-term duration.** Subject to the Government’s SR this would mean setting the budget, and therefore CCG allocations, for three or more years. This should enable the system to plan more effectively to deliver our long-term aims by providing the assurance of a multi-year budget. Annual milestones would be specified to support delivery of the longer-term aspirations.iii

| Question 1: Do you agree with our aims for the mandate to NHS England? |
| Question 2: Is there anything else we should be considering in producing the mandate to NHS England? |
3. Proposed strategic objectives for NHS England

3.1. This consultation sets out how we propose to set strategic objectives for NHS England based on the priorities we believe will be central to achieving improved outcomes.

Our overarching ambition: to improve outcomes

3.2. We propose that the overarching objective for NHS England is to continue to strive to improve, and reduce inequalities in, physical and mental health outcomes for all. To do this, we need transparency on the quality and outcomes of care.

3.3. The new mandate will, therefore, make clear that, as well as improving performance against the measures set out in the NHS Outcomes Framework which publishes outcomes at national level, we expect NHS England to work with CCGs and other partners to reduce variations in quality of care and outcomes at a local level.\(^IV\)

3.4. Work is currently underway, informed by work undertaken by The King’s Fund, to develop a new scorecard that will provide transparency about comparative quality of care and outcomes for different CCG populations. This will make it easier for local areas to see how their services and outcomes compare to others and make improvements. NHS England should support improvements in care in those areas where the scorecard shows that greatest progress is needed.

3.5. By 2020 we want to see improvements across all parts of the NHS Outcomes Framework, together with reduced variation in quality at a CCG population level. This should include measurable reductions in health inequalities in access to services, in people’s experience, and in outcomes.

3.6. The Government will safeguard, uphold and promote the NHS Constitution, and the mandate will make clear that this is also required of NHS England.

Question 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?
Preventing ill health and supporting people to live healthier lives

3.7. The costs of obesity, smoking, alcohol and physical inactivity demand a renewed focus on public health and preventable diseases. The Government is committed to creating a healthier society by supporting and empowering people to take the right actions to reduce the risks to their health, with a particular focus on children and young people.

3.8. We fully support the focus in the Five Year Forward View on preventing avoidable ill health and premature mortality. We propose to set an objective for NHS England to work with partners to lead a step change in the NHS on prevention, including improving the delivery of interventions aimed at tackling obesity and diabetes.

3.9. We also want to see the quality of life improve for people living with long-term conditions and those with dementia. We expect NHS England to contribute to the delivery of the Prime Minister’s Challenge on Dementia 2020 to transform dementia care support, awareness and research.

Creating the safest, highest quality health and care service

3.10. The heart of the Government’s vision is a modern NHS working for everyone seven days of the week. Everyone deserves care that is safe, compassionate and effective, at all times and regardless of their condition. The NHS should meet the needs of each individual with a service where people’s experience of their care is as important as their clinical needs and outcomes.

3.11. In hospitals, mortality rates for patients admitted over a weekend can be significantly higher than on a Wednesday, while the biggest numbers of seriously ill patients arrive at the weekend when hospitals are least equipped to handle them. We want the NHS to be the safest healthcare system in the world, with a culture of transparency and learning comparable to the airline industry. We propose to set an objective for NHS England to support the NHS in this ambition, achieving the same safety of care irrespective of the day of admission.

3.12. The NHS should provide the best quality care for all. As part of this, we want NHS England to improve early diagnosis, services and outcomes for cancer patients, in particular survival rates, by taking forward the new strategy recommended by the Cancer Taskforce and by continuing the Cancer Drugs Fund. We will also expect NHS England to make further progress in creating a more person-centred NHS, in which people are empowered to shape and manage their own health and care, and can make meaningful choices to achieve better outcomes, particularly in maternity, long-term conditions and end of life care.

3.13. The mandate will set out that we expect NHS England to ensure the NHS is equipped and incentivised to seek, listen to and act on feedback in all its forms from patients and staff, including through the Friends and Family Test. Feedback is vital to improve services to deliver safe, high-quality care for all patients, particularly the most vulnerable.
Maintaining and improving performance against core standards while achieving financial balance

3.14. Our NHS should always provide the best care for everyone – wherever they are and whenever they need it. People’s demands of the NHS are growing with every year, and the service continues to provide care of a high standard, while also pushing for improvement where it is needed.

3.15. The Government has committed to real terms growth in the NHS budget to ensure that the service can continue to perform well over the next five years, with the capacity to deal with rises in demand during the winter months, and to play its part in any national emergency. A priority throughout the period of this Parliament will be to meet the standards set out in the NHS Constitution while restoring and maintaining financial balance across the NHS, among commissioners and providers.

3.16. We propose to set an objective for NHS England to support the NHS to maintain and, where possible, improve access to timely, quality services for all patients, while playing its part in achieving financial balance across the NHS.

Transforming out-of-hospital care

3.17. We want to transform the health and care system to ensure high quality care is accessible to everyone when and where they need it, with more services provided outside of hospital in the community and closer to patients’ homes. The Five Year Forward View reinforces the need to join up primary care, community health services, mental health services and adult social care, to work alongside specialists in hospitals. These services need to tackle causes, not just symptoms; to treat the whole person, not just an individual ailment; and to be more proactive in supporting people with long-term health conditions to manage their health and avoid unnecessary hospital stays.

3.18. Our vision for a 7-day NHS will be supported by a strong system of general practice and greater integration with local authorities. As part of a new patient guarantee, we want everyone to have easier and more convenient access to GP services, including weekend and evening consultations, and effective 24/7 access to urgent care. People will have a right to a specific named GP who will be responsible for coordinating their care and making sure they get the right support in the right place at the right time. The Five Year Forward View sets out some of the key features of a new deal for GPs, identifying the need for more investment, a rapid expansion in the general practice workforce, and support for practices in introducing new ways of working.

3.19. We propose to set an objective for NHS England to support the transformation of out-of-hospital care using whole system approaches to ensure people get the right care in the right place at the right time. For 2016/17 this would also mean the continuation of the Better Care Fund.

3.20. Patients should only need to tell their story once. We need to ensure that information is shared effectively across health and care services to ensure patients do not need to explain their situation to multiple health and care professionals. Linked to this, NHS England should support the NHS to harness digital and technology to transform patients’
access to and use of health and care, including online access to their personal health records.

3.21. Today one in four people in the UK have a mental health condition. Over half of all mental ill health starts before the age of 14 and 75 percent has developed by the age of 18. Mortality for those with learning disabilities is higher than for the general population with men dying on average 13 years sooner and women 20 years sooner. There is much more to be done to ensure mental and physical health are considered equal, while care for people with special educational needs and learning disabilities needs further improvement. We expect NHS England to strive to close the health gap between people with mental health problems, learning disabilities and autism and the population as a whole, and support people to lead full, healthy and independent lives. As part of this, we expect new mental health access and waiting time standards to be embedded and expanded and crisis care to be improved for people of all ages.

Driving improvements in efficiency and productivity

3.22. This Government will put the right measures in place to help spend taxpayers’ money more efficiently and reduce waste – to help ensure every pound possible is spent on patient care. This ambition will never compromise the safety or quality of services. It will focus on encouraging the most productive ways of working throughout the NHS, managing demand and maximising income. Importantly, we will improve the productivity and effectiveness of our spending on medicines and pharmacy, and take greater advantage of digital and technology. Research shows the NHS is one of the most efficient health services, but we can make better use of the budget.

3.23. Meeting the demands of today’s and tomorrow’s patients depends on delivering the significant efficiencies at the heart of the Five Year Forward View, estimated by the NHS to be £22bn. Delivering this transformation is a major responsibility that will require tough decisions and tough actions. We propose to include an objective for NHS England to play a key role in supporting the NHS to live within its means.

Supporting research, innovation and growth

3.24. Just as a strong NHS depends on a strong economy, so a strong NHS can contribute to the growth of a strong economy, especially in health and life sciences. We propose to include an objective for NHS England to help the NHS promote growth, and to support and harness research and innovation to enable cost effective, transformative new treatments to reach patients more quickly. NHS England will play an important part, working with national and local partners, in contributing to reducing the impact of ill health and disability and promoting the role of work in improving health and wellbeing.

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

**Question 5:** What views do you have on how we set objectives for NHS England to reflect their contribution to achieving our priorities?
4. Getting involved

4.1. We want to hear your views. The consultation questions that appear in this document are listed at Annex A. This consultation will run from 29 October 2015 to 23 November 2015. You can find out more and respond to this consultation at: https://www.gov.uk/government/consultations/setting-the-mandate-to-nhs-england-for-2016-to-2017.

4.2. You can contact us via: mandate-team@dh.gsi.gov.uk.

Confidentiality of information

4.3. The Department will manage the information you provide in response to this consultation in accordance with the Department of Health's Information Charter. viii

4.4. Information the Department receives, including personal information, may be published or disclosed in accordance with the access to information regimes (primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).

4.5. If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this it would be helpful if you could explain to us why you regard the information you have provided as confidential. If the Department receives a request for disclosure of the information we will take full account of your explanation, but we cannot give an assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Department.

4.6. The Department will process your personal data in accordance with the DPA. In most circumstances this will mean your personal data will not be disclosed to third parties.

Comments on the consultation process itself

4.7. If you have concerns or comments which you would like to make relating specifically to the consultation process itself, please contact:

Consultations Coordinator, Department of Health, 2e08, Quarry House, Leeds, LS2 7UE
e-mail: consultations.co-ordinator@dh.gsi.gov.uk

Please do not send consultation responses to this address.
Annex A: List of consultation questions

1. Do you agree with our aims for the mandate to NHS England?
2. Is there anything else we should be considering in producing the mandate to NHS England?
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?
4. What views do you have on our priorities for the health and care system?
5. What views do you have on how we set objectives for NHS England to reflect their contribution to achieving our priorities?
Footnotes

i NHS England’s legal name is the National Health Service Commissioning Board.
ii In accordance with section 13A(1) of the National Health Service Act 2006.
iii To note, In accordance with section 13A(1) of the National Health Service Act 2006, the statutory duty to annually refresh the mandate would still apply.
v http://www.bmj.com/content/351/bmj.h4596 (accessed October 2015)
vii Continuation of the Better Care Fund would need to be underpinned by the relevant requirements including for NHS England to ring-fence funds to pool with local authorities.
viii https://www.gov.uk/government/organisations/department-of-health/about/personal-information-charter