Working together for a stronger NHS
NO cuts to the NHS budget

NO payment at point of use

NO move to a US-style health insurance system

YES to a health system that is free to everyone, with treatment based on need and not ability to pay
We love the NHS

The NHS is our most precious national asset. Every second hundreds of people walk through its doors. Every week it saves thousands of lives. Every year millions of us rely on it.

We love the NHS because it’s there when the people we love fall ill. Because it’s there all the time. Because whoever you are, wherever you’re from, however much money you’ve got in the bank, there’s somewhere you can go to get looked after. And because that says amazing things about our country. That’s why we love our NHS.
But we need change in the NHS because…

**our population is changing**

Today people are routinely living longer lives than their parents and grandparents. For the first time ever there are more pensioners in this country than there are children under 16. Clearly this is something to be welcomed; it gives us longer to enjoy the world and longer with our loved ones. But an ageing population also means increased pressure on the NHS.

As people live longer they’re more likely to live for more of their life with at least one long-term condition like diabetes, asthma, or Alzheimer’s disease. The pressures on the NHS are increasing naturally and rapidly and we need to keep up with them. No change is not an option.
The number of people aged over 85 in this country will double in the next 20 years

Source: Number of people in England by age, Office for National Statistics
The cost of new medicines has been rising, on average, by nearly £600m a year.

- 2000–01: £6,688m
- 2009–10: £11,876m

Source: Department of Health, 2011
We need change in the NHS because…

the **COST** of treatment is rising

Medical science is developing at an extraordinary rate. Genetics, nanotechnology and robotics are being integrated into the work of the NHS – and these discoveries are saving lives. Of course timely interventions with effective new drugs and treatments can deliver cost savings. But when one case of genetic diagnosis costs thousands, and when robots costing millions are routinely used for surgery, there are clear cost implications to this revolution in technology.

We want to continue to invest in the latest drugs and equipment. But we have got to recognise that we will only be able to afford the best treatments in the years ahead if we act now to modernise the NHS.
We need change in the NHS because…

we want to be the best in the world

We enjoy healthcare in Britain that is the envy of billions around the world. But if our NHS was performing at truly world-class levels, we could save literally hundreds more lives every week. Every year we could save an extra 750 lives from heart disease, 2,000 lives from respiratory disease and 5,000 lives from cancer. These facts alone compel us to modernise and improve our NHS.

And there is no good reason for Britain to lag behind. We have the most brilliant health professionals, a long and proud history of universal healthcare, and a government committed to increasing funding for the NHS. Now we just need to modernise the NHS to have a system that is truly world-class.
If the **NHS** was performing at truly world-class levels we would save an extra 5,000 lives from cancer every year

*Source: Abdel-Rahman et al, BJC Supplement, December 2009*
Since May 2010, the NHS has gained 2,500 more doctors and has 3,000 fewer managers.

Source: Department of Health, 2011
So to improve the NHS we love, and to keep it free at the point of use, we need to modernise. We plan to…

give *professionals* more freedom

For years doctors and nurses have been burdened by bureaucracy and crushed under the weight of top-down targets. This has been bad for morale and terrible for patient care, as professionals’ time has (by their own admission) been skewed too much towards hitting targets and ticking boxes. A key part of our plans is to release these highly-qualified, committed people from the endless targets, and free them to do the job they signed up to do.

Whether it’s giving hospitals the freedom to innovate as Foundation Trusts, giving GPs the power to commission services, or giving groups of nurses or midwives the power to come together and form co-ops to take over the running of their services, we are taking power away from the bureaucrats and giving it to the professionals. This comes down to the simple insight that those on the frontline are best placed to make judgements about care, with the best perspective about where resources should be directed.
Our plan to modernise the NHS is to...

give patients more power

Too often people feel that while they can take control over most of the decisions in their lives – the things they buy, the entertainment they watch, the holidays they take – when it comes to public services, they have to take what they’re given. But we understand that choice is absolutely crucial to driving improvements in the NHS. Customer service should be at the heart of public service, for one simple reason: when patients have more choice over where they get treated and more information to make that a genuine choice, that will incentivise hospitals and surgeries to raise their game. That’s why we’re putting more power and control into patients’ hands. They’re getting more choice about where to get treated, more information about how their local providers are performing and more control over their personal budgets. Real patient power is long overdue – and we are determined to finally make it a reality.
95 per cent of people want more choice over their healthcare

Source: The 25th British Social Attitudes Survey (NATCEN, 2009)
£1 in every £20 spent by the NHS already goes to a private or voluntary sector provider.

Source: Audited Primary Care Trust summarisation schedules 2006–07 to 2009–10, Department of Health
Our plan to modernise the NHS is to...

bring together the best providers of healthcare

We believe in diversity. And we welcome the fact that in the NHS today there is already a range of different organisations providing services; from the charity running the hospice to the private company running the NHS walk-in centre. This diversity gives people more choice over where they get treated, it introduces a wider range of expertise into the health service, and the competition it generates incentivises all providers to offer the best service to patients.

That’s why we are committed to going further in opening up the NHS to qualified providers. We will do this carefully, in ways that will strengthen not undermine the NHS. As long as new providers can meet NHS standards of care and safety – as well as NHS costs – patients should be able to choose to be treated by them.
Our plan to modernise the NHS is to…

make **services** more local

This coalition believes that local is good. We understand that where possible, people want public services that are run, managed and delivered close to where they live. It should be no different with our NHS. In recent years there has been a tendency to design NHS policy from on-high, as though all towns and cities shared the same concerns and the same health issues. It’s time we had a healthcare system that is truly responsive to local needs.

To achieve that we are giving local authorities a much stronger say about how health services in their area are run. Add to this our plans to give local communities a clear say in changes to essential services (like A&E and maternity units) and our plans to devolve public health funding to local areas, and you have a vision of a health service that is truly local.
90 per cent of local authorities have come forward to play a bigger part in local healthcare

Source: Department of Health, 2011
Next steps:

Working together for a stronger NHS

We see a clear and urgent case to modernise the NHS. We believe passionately that it is right to put patients, clinicians and local people in the driving seat of our health service. But we also know that real change will only happen if we have the people who work in the NHS on board – and if we get all the details right. That’s why we are asking for the thoughts and opinions of professionals – GPs, nurses, midwives, hospital consultants, doctors, physiotherapists – and of the patients who rely on them.

Now that the Health and Social Care Bill has passed through Committee stage in the House of Commons, we’ve got a natural break before its final stages in Parliament. We’re taking this time to pause, listen and reflect on how to improve our NHS modernisation plans. This is a genuine chance to make a difference. Where there are good suggestions to improve the legislation or the way things are working on the ground, those changes will be made.
There will be events running in every part of the country over the next two months. This will give people a chance to get involved – from specific events for NHS staff, to others involved with the NHS, and those already involved in making change.

You can also have your say online, and find out more about the engagement process, at www.dh.gov.uk/healthandcare