**The NHS Long Term Plan**

**Overview:** Seven chapters detailing the plans for the NHS in the next 10 years focusing on three broad categories: making sure everyone gets the best start in life, delivering world-class care for major health problems, and supporting people to age well.

**Chapter 1:** A New Service Model for the 21st Century

 Five major, practical, changes to the NHS service model: boost out of hospital care, redesign and reduce pressure on emergency hospital services, more individual control over health (more personalised care), make digitally enabled primary/outpatient care mainstream, and local NHS organisations increasing focus on population health and moving to integrated care.

**Chapter 2:** More Action on Prevention and Health Inequalities

 Focus on initiatives surrounding risk factors such as smoking, obesity, alcohol, air pollution, and antimicrobial resistance. The plan also intends to allocate resources for more concerted and systematic approaches to health inequalities. For example, provide targeted funding aimed at geographies with high health inequalities. There will also be up to £30 allocated towards the homeless and efforts to promote early cancer screening.

**Chapter 3:** Further progress on care quality and outcomes.

 This section focuses on improving care for specific focus areas which have proven to be the population’s biggest killers and disablers: diabetes, cancer, mental health, dementia, children’s health, heart and lung conditions, learning disabilities, and autism. The NHS is planning to broaden the focus of care for children and young people to create “stronger starts” to lead to better health outcomes. Specifically, there will be an increased focus on maternity and neonatal services, children’s mental health services, and improving the understanding of those with learning disabilities.

 For chronic conditions, there will be efforts directed at preventative measures via screening and awareness to risk factors. These chronic conditions are a significant cost to society and there will be efforts to identify at risk individuals and data trends.

**Chapter 4:** Improved Backing for NHS Staff

 A workforce implementation program is set to be in place by 2019 with a national workforce group to enforce a continuous professional development. The NHS plans to expand the number of staff (nurses, midwives, AHPs) by opening up university spots, promoting general practice, and recruiting internationally. Other ways staff will be supported include more flexible work schedules, the most comprehensive mental health support services in the world, more leadership and talent management, and create a fairer culture.

**Chapter 5:** Digitally-enabled Care Will Go Mainstream Across the NHS

 Patients will be empowered through digitalisation of healthcare services such as the ability to manage and contribute to digital tools, as well as being provided a medium to access tools. These services will also support health care professionals and clinical care (e.g. in the next five years, every patient will be able to access a GP virtually). The improve data collection will ideally be used to improve population health and design infrastructure for improving efficiency.

**Chapter 6:** Taxpayers’ Investment Will Be Used to Maximum Effect

 In an attempt to meet the goal of making re-investable gains of 1.1% for the next five years, the NHS will focus on eliminating waste and improving efficiency for ten priority areas such as clinical staff, hospital consumables, community health services, and physical capital. Additionally, the NHS seeks to become more standardized by eliminating variation in performance, especially for marginalized populations.

**Chapter 7:** Next Steps

 One important part of implementing this plan will be the establishment of the NHS Assembly which will collaborate across professionals, patients, and the public. Additionally, local planning will be stimulated through five-year indicative financial allocations and will be asked for plans to implement the goals of the Long Term Plan. There will be a strong push to establish Integrated Care Systems which will allow local councils to work closely with the NHS. Also, there has been a provisional list developed with potential legislative changes that will be given to Parliament for consideration.

**What is missing?**

One prominent issue omitted from the Long Term Plan is lack of commitment to achieve the national standards of waiting times. Specifically, the plan does not mention any intention to get back on target for the wait times for A&E, referrals from GPs to start cancer treatment, or the target for elective care. Also, there is an absence of the social care green paper and funding will be such that it “does not impose any additional pressure in the next five years.” Beyond neglect for social care for the elderly, some of the language for preventative measures seems to downplay the actual role the NHS will play. In regards to councils local planning, the language says it will be decided in the next Spending Review over the next five years.