

November 2016

PSNC Briefing 069/16: Update on the Health and Care Landscape

This briefing is part of a series issued regularly by PSNC to inform pharmacy contractors and LPCs of developments in the wider health and care landscape beyond community pharmacy. It builds on the Health & Care Review articles which are published on the PSNC website every week.

National Child Measurement Programme – England, 2015/16

NHS Digital has published a [report](#) that summarises the key findings from the Government's National Child Measurement Programme (NCMP) for England during the 2015/16 school year.

Key facts from the report include:

- over a fifth of reception children were overweight or obese. In Year 6 it was over a third;
- the prevalence of obesity has increased in reception from 9.1% to 9.3%, and in Year 6 from 19.1% to 19.8%;
- obesity prevalence was higher for boys than girls in both age groups; and
- obesity prevalence for children living in the most deprived areas in both age groups was more than double that of those living in the least deprived areas.

The NCMP analyses the prevalence of underweight, healthy weight, overweight, obese and overweight and obese combined in children in Reception (aged 4-5 years) and in Year 6 (aged 10-11 years).

Listening to people with dementia and their carers

The Department of Health (DH) has launched a new [listening programme](#) to find out more about people and their carers' experiences of living with or caring for someone with dementia.

The first part of the programme is an online survey aimed at people diagnosed with dementia in the past two years and people who provide unpaid care for them. Local dementia groups will also be able to discuss the questions and feed their results back to DH.

The programme will inform what impact the Dementia Challenge 2020 Implementation Plan is having and drive future service development.

Shared planning guidance for NHS trusts and foundation trusts

NHS Improvement and NHS England have jointly published the [operational and contracting planning guidance](#) for NHS trusts and foundation trusts for 2017-2019. This has been published three months in advance to allow for more strategic planning.

The planning guidance provides an update on the national priorities for 2017/18 and 2018/19 and long-term financial challenges for local systems. It also explains how the planning and contracting process will change to support [Sustainability and Transformation Plans](#) (STPs) and the 'financial reset'.

Transforming social care using information and technology

The Local Government Association (LGA) has published a [report](#) that aims to highlight how information and technology (IT) can support people to remain independent at home for longer and how it can enable professionals to work together effectively across multiple organisations. Commissioners can also use the report to target the most impactful services.

Topics covered in the report include current innovations to integrate services and information for children, families and adults and enabling them to interact with care services through digital channels. The report also covers current challenges and recommendations to using IT.

Recovering the cost of NHS treatment for overseas patients

A [report](#) has been published by the National Audit Office (NAO) on DH's management of the cost recovery programme, established in 2014 to recover the costs of treating overseas visitors to the NHS.

Key facts from the report include:

- there is significant variation in the amount of overseas visitor income that trusts identify, suggesting scope for improvement;
- DH does not have a good understanding of why some trusts do better than others;
- in 2015/16, just 10 trusts, all in London, accounted for half of the total amount charged to visitors from outside the European Economic Area; and
- current trends and data indicate that, within the existing cost recovery rules, the amount charged is forecast to be £346 million in 2017/18.

New ratings published for mental health and maternity

As part of the new [Clinical Commissioning Group Improvement and Assessment Framework](#) for 2016/17, Clinical Commissioning Groups (CCGs) will have their [ratings](#) for six clinical priority areas published.

The clinical priority areas include mental health and maternity, and NHS England has now published new ratings on these areas to highlight good practice and where improvement is needed.

The ratings are broken down by CCG and are intended to help CCGs self-assess and target areas requiring improvement; NHS England will also be offering a support package to support CCGs in making improvements.

Using data to identify good-quality care for older people

The Nuffield Trust has published a [report](#) that describes the results of a pilot conducted on the effectiveness of using routine health care data in the care of frail and older people. The aims of the pilot were to test out ways of using data to identify potential success; to understand the challenges of attributing data findings to real-world activity, to judge the feasibility of extending into wider work and to inform what this wider work should look like.

The report concludes that there is potential for using more analytical methods for identifying improvements in care quality.

NHS England supporting new trials to help disabled people and those with long-term conditions into work

NHS England, DH, and the Department for Work and Pensions have [announced](#) they will invest £70 million over the next four years to develop trials to test new ways of supporting people with a disability or long-term condition (LTC) as they enter, re-enter and stay in work.

The trials will focus on mental health and musculoskeletal conditions, as they are the two most common conditions reported by those out of work.

The trials will be conducted in collaboration with Sheffield City Region and West Midlands Combined Authority.

Innovative HIV prevention projects awarded £600,000

Public Health England (PHE) has [awarded](#) the National HIV Prevention Innovation Fund to 13 projects that offer new and innovative ways of delivering HIV prevention, in an effort to tackle the rising rates of new HIV diagnoses. The projects will also bring new interventions to deprived and isolated rural communities, as well as targeting deaf people, transsexual people and men involved in chemsex.

The Fund will be worth almost £600,000 between the successful projects, which were selected from 102 applications.

Safer screening test for pregnant women

DH has [approved](#) a new non-invasive test for Down's, Edwards'; and Patau's syndromes as recommended by experts at the UK National Screening Committee.

The test will be offered from 2018 and is expected to be safer for women and their babies. The test will involve a simple blood test that will be checked for DNA fragments for the above syndromes. It will be gradually rolled out over a three-year period and could result in a fall in the number of women undergoing invasive testing each year.

Hospital collaboration in the NHS

KPMG has published its latest [study](#), looking at collaboration in healthcare according to the views of 25 NHS Chief Executive Officers surveyed in April 2016. The study looks at what makes healthcare collaboration successful and what prevents it. It aims to disseminate the benefits of collaboration and provides examples of how to overcome barriers to collaboration.

Key facts from the survey include:

- 68% of respondents felt that the future is all about collaboration and that competition is dead;
- 60% said that there are too few good leaders in the NHS; and
- 64% said that the single biggest barrier to effective collaboration between organisations is individual bias and politics.

Redrawing the health and social care architecture

PricewaterhouseCoopers (PwC) has published a [report](#) which looks at the role of national bodies in the healthcare system and calls for radical devolution to local areas. PwC surveyed more than 1,000 NHS staff and 2,000 members of public to gain both internal and external views.

Key facts from the report are:

- 70% of NHS staff in England say they do not understand the role of the national bodies;
- 71% of NHS staff in England want the healthcare system reformed; and
- 66% of NHS staff in England are frustrated by the division between health and social care.

PwC also calls for the merging of national institutions and new revenue-raising powers for local services.

Adult social care underfunding is increasing the strain on A&E, says report

The Commons Select Committee has published a [report](#) on A&E winter planning and calls for the Government to urgently address the underfunding of adult social care to relieve pressure on A&E departments.

Key facts from the report include:

- the declining level of performance in A&E is a marker of stress across the whole system of health and social care;
- for many hospitals demand pressures are high year round and just reach a more intense peak during the winter;
- the current levels of variation in meeting the four-hour performance standard cannot be explained by financial challenge, demographics and demand alone; and
- the report calls on the Government to make sure that sufficient funding is available to support the infrastructure investment required to ensure that type 1 emergency departments are fit for purpose, and to review the real terms cuts to NHS capital budgets in the Spending Review.

NHS England offers dementia support to CCGs

As part of the NHS England's new CCG improvement and assessment framework, NHS England has offered to [support](#) CCGs in one of the framework's key clinical priorities, dementia.

The support will vary across three levels, depending on how much support a CCG requires:

- Level 1 – general advice available to all CCGs;
- Level 2 – targeted support available to those CCGs that need to make an improvement; and
- Level 3 – bespoke support available to those CCGs with the greatest need to improve.

NHS England announces nearly 300 GP premises upgrades across England

Simon Stevens, Chief Executive of NHS England has [announced](#) the full list of nearly 300 GP schemes eligible for upgrade as part of the NHS England Estates and Technology Transformation Fund.

Speaking at the annual conference of NHS Clinical Commissioners, Simon Stevens said: "Today marks the next instalment of our practical action to strengthen GP services, in this case by providing modern buildings in which a wider range of local care can be offered to patients across England."

Opportunities for action around hypertension highlighted with new resource

New blood pressure [resources](#) have been published which contain packs of infographics and practical key messages for every CCG in England.

The packs were developed by a group of GPs, nurses and pharmacists from the Primary Care CVD Leadership forum, working in partnership with PHE, the British Heart foundation, NHS England, the Stroke Association, Blood Pressure UK, the British Hypertension Society and the Royal College of General Practitioners (RCGP).

Each infographic presents CCG-tailored information on challenges, opportunities for improvement, key messages and what can be done to improve detection and management.

Joint statement on health and social care

The Health Foundation, The King's Fund and Nuffield Trust have published a [joint briefing](#) on the current state of health and social care finances. The statement highlights how councils have had to reduce the amount of support provided to older people; key facts include:

- despite the financial pressures, most NHS providers are still offering good-quality care. However, waiting times are increasing and performance is deteriorating against a number of key indicators;
- public health spending will fall by at least £600 million in real terms by 2020/21, on top of £200 million cut from the budget in 2015/16. This is already affecting spending on services such as smoking cessation and sexual health services; and
- after six years of unprecedented budget reductions, the number of people aged over 65 accessing publicly funded social care has fallen by at least 26%, imposing significant human and financial costs on older people, their families and carers, and exacerbating pressures on the NHS.

Local health and care planning: menu of preventative interventions

PHE has published a [report](#) which outlines public health preventative actions that can improve people's health, support quality improvement and save NHS money. It aims to inform local commissioning strategies and plans.

The interventions mentioned in the report include alcohol, tobacco, diet and obesity, diabetes, sexual health, antimicrobial resistance and many others.

Gaps in healthcare for patients living with LTCs, says RCGP

The RCGP has published a [report](#) that explores the experiences of patients living with LTCs, the barriers that exist to improve their care and the recommendations to overcome them.

The RCGP estimates that our ageing population, with more and more patients living with multiple, LTCs could cost general practice an extra £1.2 billion a year over the next decade.

The report also looks at innovative ways of working and the role of multidisciplinary teams in caring for patients with complex health needs. The RCGP recommends improving communication between primary and secondary care professionals, improved decision making tools and further enhancing GP training by including exposure to caring for patients with multiple LTCs.

Helping people look after themselves: a guide on self-care

The LGA has published a [guide](#) to highlight the importance and benefits of encouraging patients to self-care, to both patients and the NHS. The guide contains information for councils on how they can get involved in the self-care agenda and top tips. It also features eight real case studies on various steps different councils have taken on to implement self-care in their areas.

The accompanying [media release](#) highlights that millions of GP visits for minor ailments are unnecessary and patients could instead have helped themselves at home.

Key facts include:

- minor conditions and illnesses are responsible for approximately 57 million GP consultations and 3.7 million A&E admissions every year, costing the NHS more than £2 billion;
- the 3.7 million visits to A&E (19% of all admissions) were for self-treatable conditions such as a sprain (38%), flu (17%), colic (13%) and insect bite (13%); and
- latest figures show that 5.2 million GP consultations are for blocked noses, 40,000 for dandruff, and 20,000 for travel sickness.

NHS England announces proposed action to cut sales of sugary drinks on NHS premises

NHS England has launched a [formal consultation](#) on its proposal to cut the sales of sugary drinks on NHS premises.

The move follows the findings of a recent survey which found obesity to be the most significant self-reported health problem among NHS staff, with nearly 700,000 NHS staff estimated to be overweight or obese.

The consultation proposes levying a fee for any vendor of sugar-sweetened beverages on NHS premises to begin in 2017 and includes fruit juices, sweetened milk-based drinks and sweetened coffees. Money raised from the fee will be used to fund expanded local staff health and wellbeing programmes and/or the trust's patient charities.

NHS England announces sites to test maternity services of the future

Seven sites have been chosen to take forward the recommendations set out in [Better births, improving outcomes of maternity services in England](#). The [Early Adopter sites](#), chosen by a panel, will be testing new and innovative ways of working to improve maternity services by:

- using small teams of midwives to offer greater continuity of care to women;
- creating single points of access to a wider range of maternity services;
- making better use of electronic records to provide more joined-up care;
- improving postnatal care; and
- providing better personalised care planning.

Dementia and Alzheimer's disease has replaced ischaemic heart disease as the leading cause of death in England and Wales

The Office for National Statistics has published a [statistical bulletin](#) that covers deaths registered in England and Wales in 2015 by age, sex, selected underlying causes of death and the leading causes of death for both males and females.

Key facts include:

- dementia and Alzheimer's disease has replaced ischaemic heart diseases as the leading cause of death in England and Wales, accounting for 11.6% of all deaths registered in 2015;
- ischaemic heart disease was the second leading cause of death in England and Wales, with 11.5% of all deaths registered in 2015;
- for males, ischaemic heart disease was the leading cause of death accounting for 14.3% of all male deaths in 2015, compared with 14.8% in 2014; and
- for females, the leading cause of death was dementia and Alzheimer's disease accounting for 15.2% of all female deaths, up from 13.4% in 2014.

STPs in the NHS

The King's Fund has published a [briefing](#) based on a series of interviews with senior NHS and local government leaders on STPs as part of a wider research project.

The research focussed on how STPs are being developed in different parts of the country and the context in which the plans are being developed.

The briefing highlights practical challenges and barriers to developing STPs, what progress has been made on the plans, followed by recommendations for the future of the STP process based on research findings.

Key facts from the report include:

- local context and the history of collaboration within STP footprints have played a major role in determining the progress of the plans;
- national requirements and deadlines for the plans have changed over time, and guidance for STP leaders has sometimes been inconsistent and often arrived late;
- the approaches of national NHS bodies and their regional teams have not always been aligned;
- tight deadlines have made it difficult to secure meaningful involvement in the plans from key stakeholders, including patients and the public, local authorities (LAs), clinicians and other frontline staff; and
- organisations face fundamental policy barriers to working together on STPs; existing accountability arrangements focus on individual rather than collective performance.

The King's Fund has also published an interactive [timeline](#) tracking the development of STPs in England since December 2015.

New measures to support whistleblowers in primary care

NHS England has published new [whistleblowing guidance](#) following a five-week consultation with staff working in primary care. The guidance is aimed at staff working in GP practices, dental practices, opticians and pharmacies and details principles and actions to apply in primary care, to support the raising of concerns by staff about the delivery of primary care services to patients and how this matter is managed.

Cuts to public health funding are crippling stop smoking services

Cancer Research UK has published a [report](#) suggesting that councils across the country are struggling to provide smoking cessation support to people due to cuts in budgets that fund stop smoking services.

Budgets have been reduced by £200 million in 2015, and further annual reductions of more than £100 million a year are expected between now and 2020. Additionally, funding for mass media campaigns to encourage people to stop smoking has also been reduced. Evidence has shown reducing these types of campaigns can lead to fewer people reading information on quitting smoking and making calls to a national quit line.

For the first time ever, the majority of councils across England are having to reduce the amount of money available to support smokers to quit. No region across England has been spared.

A survey conducted by the charity shows that 59% of councils have been forced to cut their budgets for helping people stop smoking, up from 39% in 2015/16. Around half of LAs have had to cut their budgets by more than 5%.

Black African women almost twice as likely to be diagnosed with late stage breast cancer compared to white women in England

Cancer Research UK and PHE have published a new [analysis](#) on ethnicity and stage at diagnosis for women diagnosed with breast, bowel and prostate cancer in England in 2012 and 2013. This is the first time data on more specific ethnic groups and their stage at diagnosis from across England has been routinely collected.

The analysis shows that 25% of Black African women and 22% of Black Caribbean women diagnosed with breast cancer are picked up at stage three and four; this compares to 13% of white British women.

1.2 million older people don't get the social care they need

Age UK has published the results of a new [analysis](#) which found that since 2010, 383,900 more people aged 65 or over are living with some level of unmet need.

This means nearly one eighth of older people are currently struggling with carrying out essential daily tasks without extra help. The analysis also shows that 696,500 older people do not receive any help at all, from either paid carers or family and friends.

Key facts also include:

- 8% (535,300) of the 718,600 people who find it hard to get out of bed on their own do not receive the help they need;
- approximately 51.2% (797,400) of the 1,557,000 people who find it hard to get dressed on their own do not receive the help they need;
- 42% (240,500) of the 572,500 people who find it difficult to walk across a room on their own do not receive the help they need; and
- approximately 43.1% (535,300) of the 1,243,300 people aged 65+ who struggle to wash/get in the bath don't get the care they need.

General Pharmaceutical Services in England: 2006/07 to 2015/16

NHS Digital has published the latest [report](#) on General Pharmaceutical Services in England from 2006/07 to 2015/16. It shows information about community pharmacy and appliance contractors, and the NHS services they provided.

Key facts include:

- in England, in 2015/16, 995.3 million items were dispensed by community pharmacies (91.5% of all items dispensed in the community). This is an increase of 17 million (1.7%) from 2014/15 when the figure was 978.3 million;
- in 2015/16, 3.3 million Medicines Use Reviews were provided by 11,029 community pharmacies; and
- in 2015/16, 821,893 New Medicine Services were provided by 9,439 community pharmacies.

New research reveals positive evidence that prescribing of antibiotics by GPs is decreasing faster than ever

Antibiotic Research UK and EXASOL have released an antibiotic prescription data [analysis](#) conducted on data from NHS Digital which includes six years of prescriptions from GPs from August 2010 to August 2016.

Key facts from the analysis include:

- the national prescribing rate has fallen by over 5% in a year and 11% since the peak in 2012;
- regional variation remains high, with the highest prescribing in the district of Tendring (40% higher antibiotic prescribing rate than average) – a district known for high deprivation and an elderly population, both contributing factors;
- three of the districts that were in the top ten highest prescribing in 2014/15 – Rochdale in Greater Manchester, Halton in Cheshire and Wakefield in West Yorkshire – recorded double digit percentage decreases in antibiotics prescribing; and
- one antibiotic prescription is still given out every second in England.

How is the NHS performing?

The King's Fund has published the latest [quarterly monitoring report](#) which combines publicly available data on selected NHS performance measures and includes insight from NHS finance leads. The report looks at what has happened over the last quarter to assess the state of the current health and care system and provide an update on how the NHS is coping.

This report also includes views from General Practitioners, Practice Managers and unpublished activity data for the first time.

Key facts include:

- nearly a third of trusts do not expect to hit their control totals and 71% of CCGs are concerned about meeting efficiency targets;
- 283,000 more patients attended A&E departments than in the same quarter last year;
- 29% more bed days have been lost due to delays in discharging patients from hospital; and
- there has been a 26% increase in GP appointments for patients aged over 85.

Realising the Value programme

The Health Foundation has published a series of reports relating to the Realising the Value programme, which was an 18-month programme funded by NHS England and led by The Health Foundation and Nesta that aimed to consolidate what is known about person and community-centred approaches for health and wellbeing.

[New approaches to value in health and care](#)

This paper makes a series of recommendations to ensure the approach to understanding, capturing, measuring and assessing value in health and care takes full account of value that people and communities create themselves. The calls to action made by the paper could be immediately adopted by local areas or [New Care Model vanguard sites](#).

[What the system can do: The role of national bodies in realising the value of people and communities in health and care](#)

This report reviews the mechanisms in place that national bodies use to achieve policy objectives for health and care services. It sets out how policymakers and national leaders can overcome barriers and support the adoption of person and community-centred approaches to health and care.

[Making it happen: Practical learning and tips from the five Realising the Value local partner sites](#)

This report features work done with five voluntary community and social enterprise sector organisations and draws on evidence combined with practical learning and tips to others who wish to implement person and community-centred approaches.

[Realising the value: ten key actions to put people and communities at the heart of health and wellbeing](#)

This final reports looks at the key learning and recommendations from the programme and puts forward ten key actions focussing on what should be done and how this can be achieved.

Eight health innovations join the NHS Accelerator programme

NHS England has selected [eight health innovations](#) to join the second year of the NHS Innovation Accelerator programme.

NHS England selects programmes that are evidence-based, cost-saving and focus on providing solutions to key challenges facing the NHS such as better prevention of ill health, improved management of LTCs and early intervention into diseases.

The innovations selected to join the programme include:

- Sore Throat Test and Treat: a walk-in community pharmacy service where patients are tested to determine whether or not they need antibiotics;
- EpSMon: an epilepsy self-management tool; and
- Serenity Integrated Monitoring: a collaborative model of care related to mental health services.

The programme facilitates and supports health innovators with getting their innovation rolled out across the NHS.

Reducing infections in the NHS

DH has launched [new plans](#) to prevent hospital infections in the NHS.

The new plans include:

- more money for hospitals making the most progress in reducing infection rates with a new £45 million quality premium;
- independent Care Quality Commission inspections focussing on infection prevention based on E. coli rates in hospitals and in the community, and taking action against poor performers;
- the NHS publishing staff hand hygiene indicators for the first time;
- displaying E. coli rates on wards, making them visible to patients and visitors in the same way that MRSA and C. difficile are currently;
- improving training and information sharing so NHS staff can learn from the best in cutting infection rates; and
- appointing a new national infection lead, Dr Ruth May.

Additionally, a £60 million 'Getting It Right First Time' programme is launching which seeks to improve patient experience by sharing best practice across the health service. It will focus on infection control and aims to save the NHS £1.5 billion each year.

The digital patient: transforming primary care?

The Nuffield Trust has published a [report](#) that reviews the evidence on digital technology, how it impacts the NHS and patients in primary care and makes recommendations on how to harness its potential. It explores the impact of wearables and monitoring technology; online triage tools; online sources of health information and advice, targeted interventions and peer support; online appointment booking and other transactional services; remote consultations; online access to records and care plans; and apps.

The report finds that digital technology can improve patient care and reduce strain on the NHS, especially for people with LTCs. However, many digital tools have not been officially evaluated meaning their effectiveness is unknown.

The Autumn Statement: Joint statement on health and social care

The Nuffield Trust, the Health Foundation and the King's Fund have updated an [independent assessment](#) from last year (2015) of what the Spending Review would mean for the NHS and social care.

The update considers developments over the past year to inform the analysis of the funding imposition's implications for health and social care services.

Key facts from the updated statement include:

- in 2015/16 DH overspent its revenue budget by £207 million, mostly to manage the deficits of NHS trusts, which reached £2.5 billion;
- health spending will rise by £4.2 billion by 2020/21;
- health spending will not increase at all in 2018/19 and will increase by just 0.3% in 2019/20 which is not enough to maintain standards of care, meet demand from patients and deliver the [NHS Five Year Forward View](#) commitments; and
- public health budgets suffered £200 million cuts in 2015/16 and will fall by a further £600 million by 2020/21; this is already affecting spending on services such as smoking cessation and sexual health.

Children and young people's mental health: time to deliver

The Education Policy Institute's Independent Commission on Children and Young People's Mental Health has published a new [report](#), which outlines key recommendations that the Government is urged to adopt.

Key facts from the report include:

- the Government's decision not to ring-fence the funding for children's mental health is putting the young people's mental health transformation process at risk;
- the Commission calls for the retention of children and young people's mental health as a national priority over the next five years and after 2020;
- specialist mental health services are on average turning away nearly a quarter (23%) of the young people referred to them for treatment; and
- a significant hindrance to progress is the lack of engagement between health services and schools.

135,000 alcohol-related cancer deaths predicted by 2035

Cancer Research UK has published a [report](#), which it commissioned Sheffield University to produce, which looks at alcohol and cancer trends in England from 2015 to 2035. The report also estimates the impact of potential minimum unit pricing and taxation policies.

Key facts from the report include:

- by 2035 the UK could see around 7,100 cancer deaths every year that are associated with alcohol;
- of the cancer types included in the report, oesophageal cancer is set to see the largest increase, followed by bowel cancer;
- there will be over 1.2 million hospital admissions for cancer over the 20-year period, which will cost the NHS £100 million, on average, every year; and
- a 50p minimum price per unit of alcohol could reduce deaths linked to alcohol by around 7,200, including around 670 cancer deaths and reduce healthcare costs by £1.3 billion.

Children's cancer death rates drop over 20 years

According to [figures](#) released by Cancer Research UK, the rate of children dying from cancer has fallen by more than 30% in the last 20 years. The number of deaths in children from cancer each year in Great Britain has fallen from 340, two decades ago, to around 240 today.

Cancer Research UK attributes much of this success to combining different chemotherapy drugs. Research to improve imaging and radiotherapy techniques is also playing its part.

Commissioning and delivering enhanced seven-day NHS services

NHS Confederation has published a [briefing](#) that explores what is already known about seven-day services in the NHS including political context, the impact of service delivery and public perceptions and attitudes.

The aim of the paper is to share understanding of the evidence base for seven-day services and promote local decision-making. The briefing seeks to simplify and explain the on-going debate to seek a way forward for the NHS and wider system.

Key facts include:

- a significant proportion of NHS services are routinely delivered seven days a week;

- delivering seven-day services will have particular implications for the NHS and wider health and care workforce;
- the ability to deliver a ‘truly seven-day NHS’ must include a strong focus on, and appropriate resourcing of acute provision, urgent and emergency care, community services, primary care, mental health services, pharmacy and social care; and
- the evidence relating to the impact of current seven-day service provision, the different health needs of local communities and the financial pressures on different parts of the health and care system underline the need for decisions about which services are needed to be made by commissioners and those organisations that provide NHS and wider care services locally.

Financial sustainability of the NHS

The NAO has published its fifth [report](#) looking at the financial sustainability of the NHS. The NAO report provides a summary of the financial position of NHS England, CCGs, NHS trusts and NHS foundation trusts. It then examines what DH, NHS England and NHS Improvement have done to manage financial constraints and the support they have given to local bodies.

Key facts from the report include:

- £1.85 billion is the net deficit of NHS bodies overall in 2015/16;
- £2.45 billion is the net deficit of NHS trusts and NHS foundation trusts in 2015/16; and
- 66% of NHS trusts and NHS foundation trusts are in deficit in 2015/16.

End of life care: research into community-based initiatives

PHE has published a qualitative research [report](#) looking at public perceptions, awareness and experiences of community-based and end of life care initiatives. The report is aimed at commissioners of such services and aims to provide useful insight to inform future approaches.

The key objectives of the research were to understand:

- the awareness and knowledge of community end of life care across a number of key audiences;
- their perceptions of community end of life care;
- their experiences of end of life care and any community initiatives; and
- any improvements that could be made to community end of life care.

Changing risk behaviours and promoting cognitive health in older adults

PHE has published a [resource](#) intended for LAs and CCGs that provides a summary of reviews to support commissioning of interventions across a range of health behaviours for older adults. It also enables providers of lifestyle behaviour change programmes to provide an evidence-based approach for development.

The resource covers multi-component interventions, alcohol, smoking, diet, physical activity, cognitive stimulation, social, and leisure activity.

It aims to provide summaries for three questions:

1. What individual-level interventions targeting unhealthy behaviours in people in older age (55+) years are effective for the primary prevention or delay of cognitive decline or dementia?
2. What individual-level interventions in people in older age (55+ years) are effective for increasing the uptake and maintenance of healthy behaviours?

3. What issues prevent or limit, or help and motivate the uptake and maintenance of healthy behaviours in people in older age (55+ years)?

Championing the public's health

The Royal Society for Public Health has, in collaboration with ITN productions, produced an in-depth [programme](#) to shed light on the UK's major public health challenges and what is being done to tackle them.

The financial sustainability of the NHS in England

The House of Commons Library has published a [briefing](#) on the financial sustainability of the NHS in England and looks at various aspects such as STPs, an analysis of the NHS provider sector in England and DH's annual report and accounts for 2015/16.

Key facts from the report include:

- in 2016 so far, attendances at major A&E departments are 6% above 2015 levels. This amounts to an average of 2,500 more people attending A&E every day;
- the waiting list for routine treatment has grown to almost 4 million – its highest level in nine years. At the same time, the target for 92% of those on the waiting list to have been waiting for less than 18 weeks was breached in 2016 for the first time since 2011;
- spending on non-permanent staff by acute trusts, as a proportion of their total income, increased by 24% between 2012/13 and 2014/15; and
- a number of independent commissions and reports have considered possible alternative sources of funding; including patient charges and hypothecated tax.

NHS Health Check quarterly statistics and e-bulletin

PHE has published the [latest quarter](#) of data for the NHS Health Check service. It contains information from 152 LAs for July to September 2016 (quarter 2 for 2016/17) and cumulative data since 1st April 2013.

Key facts include:

- during the last quarter, the number of people who were offered an NHS Health Check was 4.4% of the eligible population; 47.1% of people invited received the health check;
- so far from the 2016/17 year, 8.9% of the total eligible population has been offered an NHS Health Check; 46.2% of those people have had the health check; and
- so far from the five-year cumulative period (2013 to 2018), 66% of the total eligible population have been offered an NHS Health Check, and 48.3% of those invited have received the health check.

The November 2016 NHS Health Check [e-bulletin](#) has also been published which features an operational update, blood pressure profiles for England, registration details for NHS Health Checks webinars and case studies.

Meeting the need: what makes a 'good' JSNA for mental health?

The Centre for Mental Health has published a [report](#) which explores the approaches taken by five local councils across England to better understand the mental health needs of their communities and the action they've taken to meet them more effectively.

The report was funded by PHE and produced in support of the National Mental Health, Dementia and Neurology Intelligence Network.

It features key factors that make a 'good' Joint Strategic Needs Assessment (JSNA) for mental health or dementia which are: leadership; engagement; national policy; presentation; research evidence; follow-up; purpose; and voices of experience. It concludes with key messages for local and national bodies.

UK's pathology services at tipping point

A report, [Testing Times to Come?: An evaluation of pathology capacity across the UK](#), published by Cancer Research UK shows that pathology services in the UK are struggling to cope with the increasing number of referrals for cancer tests, which include biopsies and blood tests.

Despite the increase in requests for tests, pathology staff numbers are not rising at the same rate to meet demand. It is estimated that if this is not tackled, waiting times are likely to increase as it will take longer to process all requests, leading to delays in patients being diagnosed and treated.

Cancer Research UK is therefore calling those in charge of medical education to train and employ more people in pathology and other diagnostic health professionals to meet the rising demand and ensure a stable future for efficient pathology services.

Shooting Up: infections among people who inject drugs in the UK

PHE has published a series of [updated resources](#) that describe the extent of infections among people who inject drugs in the UK.

Key facts include:

- there were 182 new HIV diagnoses associated with injecting drug use in the UK in 2015;
- 45% of the HIV diagnoses among people who had acquired their infection through injecting drugs were made at a late stage of HIV infection; around half of the hepatitis C infections among people who inject drugs remain undiagnosed; and
- hepatitis B infection among people who inject psychoactive drugs has declined in recent years.

The resources include a report, data tables, infographic, slide set and a briefing for directors of public health, commissioners and service providers.

Shortages in care fail UK's older people

The Family and Childcare Trust has published a [report](#) based on the findings of a survey it recently commissioned looking at care across the UK. The survey was aimed at LAs and health and social care trusts, and it asked whether there was enough provision available, and how much it cost for the people who received it.

Key facts from the report include:

- only one in five funding authorities (20%) reported having enough older people's care in their area to meet demand;
- over 6.4 million people aged 65 and over are living in areas with insufficient care provision;
- there is wide regional variation in availability of care services; only 7% of councils in Outer London reported having enough care to meet demand in their area, while in the North East, the figure is 57%; and
- while 84% of respondents in the UK said they had enough availability for care home places, that figure falls to 48% for home care, 44% for extra care homes, and 32% for nursing homes with specialist dementia support.

NHS transformation plans promising but unrealistic, says CIPFA

The Chartered Institute of Public Finance & Accountancy (CIPFA) has published a [briefing](#) that analysed nine published STPs out of the 44 footprints to find out how the STPs are shaping up, and whether integrated working can do more to help make them a success.

The report's findings include:

- there is more scope for STPs to make better use of integrated working; and
- the majority of STPs analysed include an assessment of social care pressures, but without setting out a joint approach between councils and health partners to tackle the problems raised.

If you have queries on this PSNC Briefing or you require more information please contact [Zainab Al-Kharsan, Service Development Pharmacist](#).