



NHS Monthly Insight Report

June 2024

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Introduction

Audit Yorkshire is a member of The Internal Audit Network (TIAN), which comprises of seven NHS internal audit consortiums and in house teams operating in England. These organisations collaborate across a number of areas to leverage their collective knowledge and expertise and drive efficiency and effectiveness. The NHS Monthly Insight Report highlights key publications and is intended as a useful update and reference tool. This report is produced by TIAN and shared by Audit Yorkshire.

Developments in the NHS	
NHS England - Health and Care Passport template and guidance	<p>This co-produced guidance and template is for integrated care systems (ICSs) to support good practice to improve health outcomes for people with a learning disability and autistic people. The guidance and template support ICSs to review existing arrangements for health and care passports (hospital passports) following recommendations by the Health Services Safety Investigations Body, and to improve health outcomes for people with a learning disability and autistic people. It includes a plain English and easy-read guide.</p> <p>https://www.england.nhs.uk/publication/health-and-care-passports/</p> <p><i>For information and guidance</i></p>
NHE England - Safeguarding accountability and assurance framework	<p>NHSE's updated 2024 framework sets out the safeguarding roles and responsibilities of all individuals working in providers of NHS-funded care settings and commissioning organisations. It includes content on national, regional, and local safeguarding; the fit and proper persons test; and duty of candour.</p> <p>https://www.england.nhs.uk/long-read/safeguarding-children-young-people-and-adults-at-risk-in-the-nhs/</p> <p><i>For information and implementation by all NHS bodies</i></p>
NHS Confederation and the Association of the British Pharmaceutical Industry (ABPI) - Accelerating transformation: How to develop effective NHS-industry partnerships	<p>This new guidance, produced by the NHS Confederation and the ABPI, provides a practical, step-by-step guide to help NHS and industry develop, implement and measure partnerships more easily, and deliver the benefits more rapidly. It was created with the expertise of more than 30 NHS and industry leaders and can be used in primary or secondary care settings, or at integrated care board (ICB) level.</p> <p>https://www.nhsconfed.org/system/files/2024-06/Accelerating-transformation-How-to-develop-effective-NHS-industry-partnerships-2024.pdf</p> <p><i>For information and guidance</i></p>



Developments in the NHS

NHS Confederation - The state of NHS finances 2024/25

This report examines the financial challenge facing NHS organisations in 2024/25, and finds that the main challenge facing NHS leaders and their staff is how they balance their books while protecting patient safety, given many organisations are having to achieve significant efficiency savings. The survey of NHS leaders carried out by the NHS Confederation shows that many NHS organisations are having to meet high efficiency targets of 5% and beyond, with some as high as 11%. This is the tightest financial position NHS organisations have faced in years.

<https://www.nhsconfed.org/publications/state-nhs-finances-202425>

For information

Royal College of Nursing - Corridor care: unsafe, undignified, unacceptable



Corridor care: unsafe, undignified, unacceptable

The impact on patients and staff of providing care in corridors and other inappropriate areas



This report reveals that more than 1 in 3 (37%) nursing staff working in typical hospital settings delivered care in inappropriate settings, such as corridors, on their last shift. The report shares the results of a survey of almost 11,000 frontline nursing staff across the UK. The report calls for mandatory national reporting of patients being cared for in corridors, to reveal the extent of hospital overcrowding, as part of a plan to eradicate the practice.

<https://www.rcn.org.uk/Professional-Development/publications/corridor-care-unsafe-undignified-unacceptable-uk-pub-011-635>

For information


Information Commissioner's Office – Learning from the mistakes of others: A retrospective review of Cybersecurity

The ICO's trend data shows that more organisations than ever are experiencing cyber security breaches, which put people's personal information at risk. They had more than 3,000 cyber breach reports in 2023, with the majority coming from the finance sector (22%). The ICO analysed the trend data and shared lessons that organisations can learn from common security mistakes. The common mistakes found come under five headings:


- Phishing
- Brute force attacks
- Denial of service
- Errors
- Supply chain attacks

<https://ico.org.uk/about-the-ico/research-reports-impact-and-evaluation/research-and-reports/learning-from-the-mistakes-of-others-a-retrospective-review/>

For review and consideration by all organisations

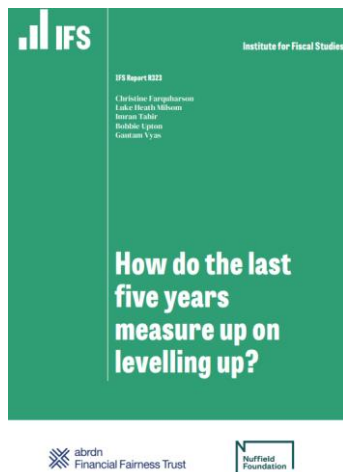
Developments in the NHS	
<p>The Health Foundation - More money, more choice, more of the private sector: can the next government repeat the feat of the 2000s and cut waiting times?</p>	<p>NHS waiting times are a central issue of the 2024 election campaign. Proposed solutions – more money, more staff, more use of the independent sector and strengthening patient choice – are mostly shared between the two main parties. More money, more choice and more private sector provision helped reduce median waiting times (under old measures) from 12 weeks to 5 weeks in the decade following the 1997 election. This long read analyses the data to assess whether this is possible again.</p> <p>https://www.health.org.uk/publications/long-reads/more-money-more-choice-more-of-the-private-sector-can-the-next-government</p> <p><i>For information</i></p>
<p>Understanding Patient Data: The use of data in Integrated Care Systems (ICSs)</p>	<p>This report, published by Understanding Patient Data, aims to understand how integrated care systems (ICSs) are currently collecting, using and sharing patient data, what challenges they are facing and what the opportunities are for improving how patient data is used.</p> <p>https://understandingpatientdata.org.uk/news/new-research-use-data-integrated-care-systems-icss</p> <p><i>For information and implementation by ICBs and other ICS partners</i></p>
<p>Nuffield Trust - Falling through the gaps?: a closer look at NHS Continuing Healthcare</p>	<p>NHS Continuing Healthcare (CHC) is care funded by the NHS but provided outside of hospital for people with significant ongoing care needs. This briefing explains how eligibility for CHC is decided, what the data tells us about eligibility and access over time, and what the impact on individuals, carers and families can be.</p> <p>https://www.nuffieldtrust.org.uk/resource/falling-through-the-gaps-a-closer-look-at-nhs-continuing-healthcare</p> <p><i>For information and guidance</i></p>
<p>NHS Providers - 2024 general election: manifesto briefing</p> 	<p>This briefing provides a summary of the main health and social care commitments, and other relevant policy commitments, made by the Liberal Democrat, Conservative and Labour parties.</p> <p>https://nhsproviders.org/media/698851/nhs-providers-briefing-general-election-2024-manifestos.pdf</p> <p><i>For information</i></p>
<p>NHS Providers - Providers deliver: achieving value for money</p>	<p>This report shows how hospitals, mental health, community and ambulance services are finding new ways to provide better care and value for money. It finds that the efforts of trusts must be matched by a commitment from government for capital investment to modernise buildings, equipment and technology in order to unlock greater productivity gains. It also finds that barriers to progress on productivity</p>

Developments in the NHS

<p>PROVIDERS DELIVER: ACHIEVING VALUE FOR MONEY</p> <p>PROVIDERS DELIVER: ACHIEVING VALUE FOR MONEY</p> <p>June 2024</p>	<p>include the impact of staff exhaustion and burnout, the disruptive impact of industrial action, and the growing numbers of patients with complex conditions needing more resources or staff time to care for them.</p> <p>https://nhsproviders.org/providers-deliver-achieving-value-for-money</p> <p><i>For information and guidance for NHS Provider trusts</i></p>
<p>NHS Providers - Elective hubs</p>	<p>This report is the second instalment in NHS Providers' Provider collaboratives building capacity series, which highlights how provider collaboration is enabling delivery on major health system priorities. The report focuses on the role collaboration is playing in building capacity through the development of elective hubs.</p> <p>https://nhsproviders.org/provider-collaboratives-building-capacity-elective-hubs</p> <p><i>For information and guidance of NHS providers</i></p>
<p>Association of Directors of Public Health - Integrated care systems report 2024</p> <p>The Association of Directors of Public Health Integrated Care Systems Survey Report</p>  <p>Recommendations</p> <ol style="list-style-type: none">1. There should be co-terminosity between ICIs and LAs: Co-terminosity with LAs would significantly ease collaboration and issues around democratic accountability. ICIs are by no means all 'local' with some spanning more than one region and there is potential for disconnect, particularly with the work on wider determinants.2. DsPH are an important voice on the board/groups within an ICS, but the capacity of local authority public health teams impacts their contribution: DsPH should be represented on their ICP and other board/groups, but partners should be aware of the capacity constraints that DsPH work within.3. DsPH need more resources to support their work across both local government and their ICS: DsPH are willing, wherever possible to support the work happening within their ICS but cannot do so without sufficient financial resources.4. ICS priority areas must translate into action and delivery: ICIs must ensure that their priority areas are truly embedded across all their work and that there is a focus on evidence-based action and delivering change within these areas.5. Health inequalities work within ICIs should be joined up, strategic and focused on delivery: ICIs must ensure that their health inequalities work is coordinated across the whole of the ICS and aligned with the local public health teams, including intelligence and population health work. This work should be strategic and focused on delivering outcomes for the local population.6. ICS infrastructure should not supersede local government infrastructure: ICIs must ensure that the structures being built within their systems do not contradict or supersede those within local government. ICIs should jointly build their public health capacity with DsPH and ensure that they take into account the existing workforce challenges, act responsibly when creating positions, and play an active role in the long term sustainability of the workforce.7. All ICS partners should be understood, respected and sufficiently resourced: With ICIs creating increasing demands on their partner organisations, it is important that smaller partners with less resources, such as local public health teams, are well respected, understood and resourced. ICIs should ensure that the role of the DsPH and local public health teams is fully realised so that they can influence all the areas in which they have expertise.8. There should be a strong understanding of prevention with each ICS: A clear definition of prevention within the ICS should be well understood by all partners (which outlines the distinction between primary, secondary and tertiary prevention). Not only should there be a clear commitment to increase spending on prevention (eg by 1% a year up to an operational target of 10-20%) but it should be used to achieve meaningful action and implementation.9. ICIs should do more to fully recognise the work of the voluntary and community sector: Recognising and valuing the voluntary and community sector's understanding of the local population is an important component of improving the health and wellbeing.10. The strong partnership work that is happening between NHS organisations and local government public health organisations should continue: The strong working relationship is a <p>Integrated Care Systems Survey Report, June, 2024 Page 1 of 20</p>	<p>Integrated care systems (ICSs) were formalised across England as legal entities with statutory powers and responsibilities in July 2022. Directors of Public Health (DsPH) and their teams have adapted and sought to collaborate with ICSs effectively for the benefit of the health and wellbeing of local populations. This report summarises the results of a survey to investigate and understand the experiences of DsPH when engaging with ICSs.</p> <p>https://www.adph.org.uk/wp-content/uploads/2024/06/ADPH-Integrated-Care-Systems-Report-2024.pdf</p> <p><i>For information and guidance for ICBs and other ICS partners</i></p>
<p>Pulse - The state of primary care: a PCN evaluation</p>	<p>Primary care networks (PCNs) have been the biggest change in the primary care landscape in a decade. The development of these networks has been controversial and has affected all areas of primary care. As part of Pulse's State of Primary Care survey (which was answered by more than 1,700 health care professionals), GPs, nurses, pharmacists and managers were asked about the impact of PCNs on their profession.</p> <p>https://www.pulsetoday.co.uk/pulse-pcn/the-state-of-primary-care-a-pcn-evaluation/</p> <p><i>For information and guidance of ICBs</i></p>

Developments in the NHS

Institute for Fiscal Studies - How do the last five years measure up on levelling up?

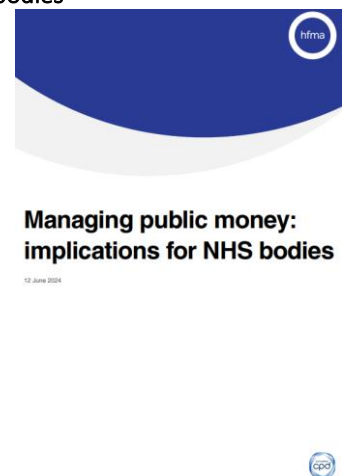


Five years ago, then prime minister Boris Johnson made 'levelling up' a central plank of the Conservative Party's bid for re-election, with a manifesto pledge to 'level up every part of the UK'. In 2022, the government published a thorough and ambitious White Paper setting out 12 levelling up 'missions' to achieve by 2030, as well as specific metrics by which they would be measured. This report examines early progress towards those 12 missions, where possible using the headline metrics identified in the White Paper.

<https://ifs.org.uk/sites/default/files/2024-06/How-do-the-last-five-years-measure-on-levelling-up.pdf>

For information

HFMA Briefing - Managing public money: implications for NHS bodies



Unusual and innovative financial arrangements are, by their very nature, rare. However, when entering into such arrangements NHS bodies need to consider legality, regularity and probity. NHS bodies' auditors have issued qualified opinions in relation to payments that they consider to be irregular. It is important that NHS bodies understand what processes they should put in place when considering such payments. It is important that resources are not spent inappropriately.

<https://www.hfma.org.uk/publications/managing-public-money-implications-nhs-bodies>

For information and guidance

HFMA – The delegation of specialised services to local commissioning

Commissioning specialised services has long been a complex area and is currently going through a period of change due to delegation. This briefing is for information; supporting finance and other professionals working outside the commissioning/contracting process to understand more about the changing landscape for commissioning specialised services. The briefing explains the background for the purchase of NHS specialised services in England, leading to the decision to improve pathway management by delegating commissioning for



a range of services from NHS England to integrated care boards (ICBs). The briefing then explains the process of delegation, including the choice of services, timescales and ongoing governance arrangements.

<https://www.hfma.org.uk/publications/delegation-specialised-services-local-commissioning>

For information and guidance

Disclaimer: This briefing paper is intended to highlight recent developments and issues within the NHS that may be of interest to non-executive directors, lay members and NHS managers. It is not exhaustive and TIAN cannot be held responsible for any omission.

