



14 November 2023

Victoria Atkins MP
Secretary of State for Health and Social Care
Department of Health and Social Care

By email

Dear Secretary of State

Congratulations on your appointment as Secretary of State for Health and Social Care. NHS Providers has had close and positive working relationships with your predecessors, and we look forward to supporting you in your new role as you tackle the challenges ahead. We are keen to meet you as soon as possible to understand your priorities and how we can help deliver them, and our members look forward to hearing from you at our Annual Conference and Exhibition tomorrow.

NHS Providers is the representative body for frontline NHS acute, ambulance, community and mental health services. We have 100% of NHS foundation trusts and trusts in voluntary membership, accounting for £115bn of annual spend and employing 1.4 million staff. Our unique relationship with trusts gives us an unparalleled view of what is happening at the NHS frontline, and places us in a unique position to offer you support and insight as you and your team develop robust solutions to the strategic challenges currently facing health and care services.

The NHS faces significant challenges, including pressures on the workforce, increasing demands across all services and systemic financial challenges. Even so, the NHS continues to deliver – providing care for many more people than before the pandemic, carrying out more diagnostic tests and checks and treating more cancer patients sooner, underlining how hard staff are working to drive recovery during very challenging times.

Industrial action and wider workforce challenges

Trusts are working hard to limit the impact of the current prolonged period of industrial action, but the cumulative impact on patients, staff and the NHS cannot be

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understated. It is adding to existing workforce challenges and has had a profound effect on NHS operational performance. Since December 2022, 1.2 million appointments have been postponed as a result of industrial action, severely hindering the service's efforts to recover care backlogs and boost activity levels.

At the time of writing, BMA representatives for junior doctors, consultants and SAS doctors have agreed to enter into government talks. For junior doctors and consultants, this has come after taking part in successive rounds of industrial action, which both groups say they will return to if talks fail. It is vital that dialogue between the government and unions continues, to enable a sustainable solution to industrial action.

Alongside these talks, it is important to maintain focus on the implementation of the Long Term Workforce Plan (LTWP). Staff lie at the heart of everything the NHS does, but there are 125,000 vacancies across the NHS in England. Trust leaders tell us that one of the biggest and most concerning challenges for the NHS is staff exhaustion, burnout and low morale. This is borne out by the recent NHS staff survey which shows that all measures relating to burnout have remained persistently high. The LTWP brings a welcome emphasis on recruitment, training and retention, but it is vital there is sufficient investment to implement the plan.

Operational pressures

Trusts are making great strides in recovering services, regularly exceeding pre-pandemic levels of activity in several areas. With winter fast approaching, trusts continue to work incredibly hard to clear care backlogs and are making progress in bringing down the number of patients who are waiting the longest.

Nevertheless, demand remains very high. This October was the busiest yet for A&E departments, with over 2.2 million people seeking emergency care, along with a 7% increase in ambulance category 1 incidents (this is 35% higher than four years ago, before the pandemic in October 2019). The elective waiting list has reached 7.77 million. 1.9 million people are waiting for mental health care in England and urgent referrals to mental health services remain considerably higher than in the same month last year. There are continuing delays in discharging patients who no longer meet the criteria to stay in hospital, with more than half of these patients remaining in hospital in October. Backlogs have now reached more than one million in community health services, an increase of 10% since October 2022.

Trust leaders face added pressures from months of industrial action and growing financial pressures ahead of what they expect to be a very difficult winter. They are doing all they can to improve activity levels and reduce costs, including local initiatives to improve staff wellbeing, joint working across pathways, and employing alternative delivery models like virtual wards. Provider collaboratives are also playing

a meaningful role in developing constructive, material solutions to the productivity problem.

However, there are additional factors relating to staff morale, bed availability, patient acuity and social care capacity that require collaboration, support and funding from government and system partners to address. In the long term, it will be vital to provide more care closer to home enabled by significant investment and reform of the social care system. This must take place alongside a step change in capital investment.

Capital investment

The New Hospital Programme is providing welcome targeted support. However, investment is needed across the sector to ensure sustainability and modernisation of health services.

This summer, nearly three-quarters of trusts told us that they do not have sufficient capital funding over 2023/24 to address capital maintenance backlogs. Trusts also identified insufficient capital funding to enable strategic transformation of their estates (including digital), deliver net zero ambitions and tackle care backlogs.

Trusts need major operational capital investment to drive substantial and long overdue improvements, increase service capacity and productivity, improve the safety and experience of patients and staff, and to prevent the further deterioration of the NHS estate. Strategic investment is also needed to transform the delivery of healthcare and modernise the estate. This would deliver the transformation needed to improve patient flow and deliver integrated, high-quality care across the whole system. This requires full consideration of the needs across the acute, ambulance, mental health and community sectors.

A whole government approach to tackling health inequalities and social care

NHS trusts work hard to prevent ill health and reduce health inequalities but funding cuts for public health and preventative services have severely impacted local councils' ability to invest in improving the health and wellbeing of their communities and have meant also that already stretched NHS services face more strain. More support and investment in prevention is needed to help people to lead healthier lives. The government must also work with the health and care sector to invest more holistically in primary care, and in intermediate care and rehabilitation, considering the role that primary care, community services and mental health services can all contribute to enabling people to be supported in the right setting.

We look forward to meeting you soon.

Yours sincerely

A handwritten signature in black ink that reads "Ron Kerr".A handwritten signature in black ink that reads "Julian Hartley".A handwritten signature in black ink that reads "Saffron Cordery".

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