



**Briefing on *High Quality Care for All* –
NHS Next Stage Review Final Report**

July 2008

Contact: Ann Blackmore
Tel: 020 7520 2477
E-mail: ann.blackmore@ncvo-vol.org.uk

Introduction

On the 30th June Lord Darzi published his final report on the NHS next stage review, *High Quality Care for All*.

This briefing does not address the detail of the proposals for the future of the NHS. It is limited to those main recommendations which may impact on the operation of voluntary and community organisations that either provide health and social care services, or provide support and/or advocacy to different parts of the community in relation to health issues.

Copies of the full report and the executive summary can be downloaded from www.ournhs.nhs.uk

General themes

Two key themes underlie the report: a greater emphasis on choice and personalised services; and a greater emphasis on quality of care. In addition the report is seeking to allow far more decision making and commissioning of services to be devolved to the local level, to reflect local concerns and priorities.

References within the report to the voluntary and community sector (VCS) are limited. There are two main requirements for engaging in partnership with the VCS:

- By spring 2009 each Primary Care Trust (PCT) will publish its strategic plan, which is expected to include a strong emphasis on partnership working between PCTs, local authorities and other partners – including the VCS and social enterprise; and
- NHS organisations will work in partnership with a range of social care partners, including the third sector, to help deliver the government's vision for the personalisation of social care.

In addition, whilst not specifically referenced, many voluntary and community organisations (VCOs) that provide support, advocacy and a voice for particular communities will want to inform and influence the development of many of the proposals, for example the proposed quality frameworks (see below).

Commissioning for quality and innovation

When commissioning for contracts, PCTs will be expected to pay higher regard to quality, through the new Commissioning for Quality and Innovation scheme, which will supplement the Payment by Results system. This scheme is expected to be up and running by 2010.

The scheme will be expected to focus on quality, innovation and supporting local priorities for improvement. The report also commits to ensuring that organisations funded by the NHS are able to plan for long term improvements, using multi-year funding.

At the regional level, strategic health authorities will have a new legal duty to promote innovation. They will manage regional innovation funds. There will also be prizes for innovations that directly benefit patients and the public.

Innovation will also be promoted through Health Innovation and Education Clusters. These will bring together partners across primary, community and secondary care, universities, colleges and industry. It is not clear whether VCOs will also be included in these clusters.

Improving quality care and services

National measures for determining quality will be established. The first set of indicators, relating to acute services, will be in place by December 2008. In early 2009 a pilot quality framework for community services will be developed. These metrics will be developed in discussion with patients the public and staff.

Those organisations, including voluntary and community organisations (VCOs), that provide NHS funded services will be expected to develop their own quality frameworks, to help measure, analyse and improve the quality of the services they provide.

From April 2010 healthcare providers working for or on behalf of the NHS will be required to publish annual Quality Accounts. These will be independently reviewed by the Care Quality Commission, who will publish an annual report to Parliament on the provision of NHS care within England.

A National Quality Board, chaired by the NHS Chief Executive, will provide strategic oversight and leadership on quality. Membership will be drawn from various national statutory bodies working in health and social care. The Board will align and agree NHS quality goals, but will respect the independent status of organisations it works with.

Social enterprises

NHS staff will be encouraged and enabled to set up social enterprises to deliver NHS services. Where staff transfer to these new social enterprises they will be able to continue within the NHS Pension Scheme while the social enterprise works wholly on NHS funded work.

There is no suggestion in the paper that staff who transfer into existing social enterprises or VCOs that have taken over the delivery of NHS services will also be able to continue within the NHS Pension Scheme, as has been suggested in some press coverage.

The NHS Constitution

In parallel with the report, the Department of Health has published a draft NHS constitution and a consultation paper. The consultation on the draft will last until 17th October 2008.

The constitution sets out principles and values for the NHS along with the rights and responsibilities of patients, the public and staff.

All organisations providing NHS services will be required by law to take account of the Constitution in their decisions and actions.

Policy Team
NCVO