



nuffieldtrust

# Improving UK health care

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Nuffield Trust strategy  
2015–2020

# Our approach

The Nuffield Trust is an independent health charity. We want to help achieve a high-quality health and social care system that improves the health and care of people in the UK.

Our Strategy sets out a new direction – we will be more **grounded in the practical implications of policy-making**, working closely with NHS staff and policy-makers to identify solutions to the challenges facing the NHS.

We will:

- **Improve the evidence base** that leads to better care for people in the UK through our research and analysis
- Use our independence to **provide expert commentary, analysis and scrutiny** of policy and practice
- Bring policy-makers and NHS staff together to **raise issues and identify solutions**.

Above all, we aim to be a trusted and respected voice at a time of unprecedented challenge to the NHS and social care system.

Stay in touch with our work through our website:  
[www.nuffieldtrust.org.uk](http://www.nuffieldtrust.org.uk)

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# Era of uncertainty

**An ageing and growing population, combined with unprecedented constraints on funding, make the next five-year period one of the most challenging ever.**

The NHS is being required to deliver monumental levels of efficiency savings alongside a range of new measures, such as seven-day working. The situation is compounded by reductions in local authority funding, which continue to affect social care. The Government has committed to providing the NHS with a large injection of extra funding by the end of this Parliament, but with planned growth rates well below the historical average the NHS will need to deliver radical changes in how patient care is organised and delivered.

NHS England's Five Year Forward View outlines a vision for how these challenges can be met, including by developing a range of new care models and through a renewed emphasis on preventing ill health and improving the wider health of the population.

Hope is offered through these new care models as well as new health care technologies, drugs and other

treatments. But these are unlikely to reduce costs – at least not in the short term. While new care models offer encouragement, they are unlikely to create the level of change that is required. More extensive changes in service delivery, operating models and configuration are almost certainly going to be necessary.

A key question is whether the NHS has the clinical and managerial resources to deal with some of the more significant longer-term problems it faces while keeping the financial show on the road in the short-to-medium term.

This Strategy outlines how we will play our part. We will build on our reputation for being a leading centre of research and policy analysis by devoting more time and energy to helping practitioners develop solutions to the challenges facing the system. We want to work with, and support, those leading change during this critical period.



**Nigel Edwards**  
Chief Executive



Download the Layar app for your smart device and scan page to watch video

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# How will we help?

There are limits to what policy-makers can do, as many of the solutions required to deliver the more extensive changes in service delivery need **clinicians and managers to lead the way**.

Our Strategy recognises this – we will be working more closely with NHS staff as well as policy-makers to help improve policy and practice. We will organise our activities around five main areas of work in which we can add value most effectively. These areas are outlined on pages 4–8. In each area, our programme will be driven by three main activities:

## 1. Improving the evidence base that leads to better care

We will undertake **applied research and policy analysis** that leads to improvements in policy-making, practice and, ultimately, the health and health care of people in the UK.

## 2. Providing expert commentary and analysis

There has never been a more important time for **independent scrutiny** of the quality and financial sustainability of services. Our independence means we can offer analysis and challenge that may be difficult for those vested in the system to provide.

## 3. Bringing people together

- We are a respected **forum for debate**: we bring together policy-makers, practitioners and others to help **raise issues and identify solutions**.
- We are providing more opportunities for practitioners to work with us: we run **learning networks for NHS staff**, and we have assembled a **panel of 100 professionals** that we are regularly surveying to ensure their views inform the work of policy-makers.



# OUR PRIORITIES

We have identified five main areas of work in which we can most add value

▶ 1 2 3 4 5



# NHS AND SOCIAL CARE REFORM

## Why is this important?

**The period from 2015 to 2020 is likely to be the most challenging ever faced by the NHS.**

The Conservative Government is attempting to deliver significant reforms, most notably through changes to enable seven-day working and the devolution of powers to cities such as Manchester. All of this is being attempted at a time of financial constraint, while simultaneously implementing the recommendations of the Five Year Forward View, which is ambitious even when taken in isolation. How the NHS responds to these reforms and challenges will be critical to its long-term success.

## What will we offer?

**There has never been a more important time for independent scrutiny of government policies and the performance of the system.**

We will continue to provide this, as well as opportunities for policy-makers, practitioners and others to come together to develop solutions. Our focus will be on improving the quality of policy-making by providing evidence-based analysis, asking insightful questions and providing a challenging view. Our independence puts us in an important space to challenge orthodox thinking and hold policy-makers to account.

Our focus extends beyond England into the UK where we have a history of providing comparative analyses of the performance of the four UK health services. We will continue to provide this.



**“The absence of the debate about what the NHS and care system will need to look like to manage resources and demand is startling”.**

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Social services director of  
a local authority  
(Health Leaders' Panel)



Find out more about our projects in this area:  
[www.nuffieldtrust.org.uk/reform](http://www.nuffieldtrust.org.uk/reform)

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## ► 2

# QUALITY OF CARE

### Why is this important?

**Over the next five to ten years the financial situation for health services will be one of the most challenging in living memory.**

There will be a focus on a search for efficiency and it is vital that cost savings are not achieved through unwarranted reduction in the quality of care provided.

### What will we offer?

**Independent and authoritative commentary on key aspects of the quality of NHS and social care is vital.**

We will continue to provide this, primarily through our QualityWatch programme, which is run jointly with the Health Foundation. By tracking 300 indicators of quality and developing in-depth studies, this programme is providing a trusted, independent source of information on how quality of care is changing over time.



**“I’d rather be hung for money than for quality and safety”.**

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Chief executive of an acute trust  
(Health Leaders’ Panel)

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 Find out more about our projects in this area:  
[www.nuffieldtrust.org.uk/quality](http://www.nuffieldtrust.org.uk/quality)

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## ▶ 3

# THE NHS WORKFORCE

### Why is this important?

Many of the most pressing issues in the NHS at present relate to the planning, deployment and design of the workforce (not least the £22 billion of efficiency savings that are required and which will, in part, be delivered by changes in the workforce).

The development of new models of care is often driven by changes in workforce and vice versa. Being able to make the links between the two areas will be very important.

### What will we offer?

**We will constructively challenge current approaches to workforce planning and policy and develop a reputation for thought leadership in this area.**

We believe there is an important role for an independent organisation to collaborate with local and national bodies to identify and work with innovators in the NHS on new approaches to the workforce, and we will be exploring these opportunities. We will ensure our research and analysis informs the Government's strategy for the future health care workforce.



“Health and social care [has] a model that has never significantly changed over the decades: a delivery model based upon reaction rather than proaction – with very poor management, particularly around workforce planning”.

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Local HealthWatch representative  
(Health Leaders' Panel)



Find out more about our projects in this area:  
[www.nuffieldtrust.org.uk/workforce](http://www.nuffieldtrust.org.uk/workforce)

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## ▶ 4

# NEW MODELS OF HEALTH CARE DELIVERY

### Why is this important?

NHS England's Five Year Forward View outlines a vision for how the traditional boundaries between primary care, community services and hospitals will be dissolved over the next five years and beyond.

This is vital if health and social care services are to be integrated around the needs of patients and service users. This will require a move away from single institutions towards a systems-based approach organised around networks of care. In this world the capacity of care delivered outside of hospitals will need to be boosted through reforms to primary care services and other means.

### What will we offer?

**We are developing expertise and a reputation for thought leadership on how service delivery models in primary and secondary care are changing and need to change.**

This builds on the considerable experience and reputation we have in conducting evaluative work of new models of care. We have a number of research projects in place with royal colleges and specialist societies.



“The effectiveness of new care models is very dependent on whether those implementing them really understand that they are about new models and not about organisational re-structuring”.

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Manager of a clinical  
commissioning group  
(Health Leaders' Panel)



Find out more about our projects in this area:

[www.nuffieldtrust.org.uk/primary](http://www.nuffieldtrust.org.uk/primary) and [www.nuffieldtrust.org.uk/hospital](http://www.nuffieldtrust.org.uk/hospital)

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## ► 5

# OLDER PEOPLE AND COMPLEX CARE

### Why is this important?

The needs of older people with multiple health problems and complex conditions are recognised as being a key driver of health service design utilisation and a sentinel marker of the quality of care.

Older people are among the most intense users of health and social care services and opportunities exist for improving the care offered to them.

### What will we offer?

Our experience in research and analysis is especially relevant to the area of complex care and multi-morbidity. We intend to develop new approaches to understanding the impacts of new models of care for older people and patients needing complex care.

This strand of work also feeds directly into other areas of work, in particular quality and new service models.



“We are constantly told that many people, particularly the frail elderly, are occupying hospital beds unnecessarily, yet the multitude of community services seem to be having little impact”.

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Manager of a clinical  
commissioning group  
(Health Leaders' Panel)



Find out more about our projects in this area:  
[www.nuffieldtrust.org.uk/complex](http://www.nuffieldtrust.org.uk/complex)

# We want to work with you

We are funded primarily from income generated from our own endowment. This guarantees our independence, but we highly value the opportunity to work with individuals and organisations that are exploring topics of mutual interest.

We are particularly interested in working with clinicians and managers involved in new service delivery models. Key partners for our work include royal colleges, specialist societies, provider membership bodies, voluntary sector bodies, as well as providers and commissioning organisations.

There are many ways in which you can engage in our work, including:

- **Research projects:** we are keen to work with others on the issues outlined in our Strategy. We carry out research and analysis for organisations where there is mutual interest and benefit.
- **Learning networks:** we have set up a number of learning networks that bring NHS staff together to work on new solutions to major challenges, and will be launching more networks in the future.
- **Health Leaders' Panel:** we have assembled a panel of 100 professionals that we are regularly surveying to ensure their views inform the work of policy-makers. We are looking to welcome new leaders on to the panel so do get in touch if you would like to join.
- **Our events:** we provide a respected forum for debate and a platform for UK and international health leaders to come together to raise issues and identify solutions to the challenges facing the NHS. We host regular policy roundtables, workshops and major conferences, including our flagship annual Health Policy Summit.

Register for our mailing list at: [www.nuffieldtrust.org.uk/newsletter](http://www.nuffieldtrust.org.uk/newsletter)

Details of our work can be found on our website: [www.nuffieldtrust.org.uk](http://www.nuffieldtrust.org.uk)



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Nuffield Trust is an independent health charity. We aim to improve the quality of health care in the UK by providing evidence-based research and policy analysis and informing and generating debate.

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59 New Cavendish Street  
London W1G 7LP

Telephone: 020 7631 8450  
Email: [info@nuffieldtrust.org.uk](mailto:info@nuffieldtrust.org.uk)

[www.nuffieldtrust.org.uk](http://www.nuffieldtrust.org.uk)

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