

The NHS Long Term Plan: Commitments

This document itemises the commitments in the plan.

Chapter 1: A new service model for the 21st Century

Section	Commitment
1.8	Within 5 years expected to improve the responsiveness of community health crisis response services within two hours of the referral in line with National Institute for Health and Care excellence (NICE) guidelines where clinically judged appropriate
1.8	All parts of the country should be delivering reablement care within two days of referral
1.9	Practices enter into network contract
1.10	From 2019 NHS111 will start direct booking into GP practices across the country, as well as referring onto community pharmacists. Clinical Commissioning Groups (CCG) develop pharmacy connection schemes for patients who don't need primary medical services
1.15	We will upgrade NHS support to all care home residents who would benefit by 2023/24, with an Enhanced Health Care (EHCH) model rolled out across the whole country
1.17	From 2020/21 Primary Care Networks will assess their local population by risk of unwarranted health outcomes and, working with local community services, make support available to people where it is most needed
1.25	From 2019/20 embed single multi-disciplinary Clinical Assessment Service (CAS) within integrated NHS 111, ambulance dispatch and GP Out of Hours services
1.26	By Autumn 2020 fully implement Urgent Treatment Centre model
1.30	Every acute trust with a "Type 1 Accident and Emergency" department (ie fully staffed with Consultant Physicians) will: <ul style="list-style-type: none"> • move to a comprehensive model of Same Day Emergency Care (SDEC). The SDEC model should be embedded in every hospital, medical and surgical specialities during 2019/20 • provide an acute frailty service for a least 70 hours a week. Work towards clinical frailty assessment within 30 mins of arrival • test and begin implementing new emergency and urgent care standards
1.33	From 2020 embed Emergency Care Depts into UTCs and SDEC services

1.34	By 2023 Clinical Assessment Service will typically act as single point of access for patients
1.39	Roll out NHS personalised Care Model reaching 2.5m people by 2023/2024 and aiming to double that within the decade
1.40	Over 1,000 trained social prescribing link workers will be in place by end of 2020/21 rising further by 2023/24 (no mention of how the actual interventions will be funded in plan, a major concern for local authorities and voluntary sector)
1.41	Accelerate roll out of Personal Health Budgets (PHB). By 2023/24 up to 200,000 people will benefit from PHB
1.44	Over next five years every patient in England will have the right to choose telephone or online consultations from their GP
1.47	Re-designing outpatient services over the next five years
1.51	By April 2021 Integrated Care Systems (ICS) will cover the whole country

Chapter 2: More NHS action on prevention and health inequalities

Section	Commitment
2.9	By 2023/24 all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services
2.10	Adapted model available for expectant mothers and their partners
2.11	New universal smoking cessation offer to be available as part of the specialist mental health services for long-term users of specialist mental health, and learning disability services
2.14	Target support offer and access to weight management series in primary care for people with a diagnosis of type 2 diabetes or hypertension with a BMI of 30+
2.20	Over next five years, hospital with highest rate of alcohol dependence-related admissions will be supported to fully establish specialist Alcohol Care Teams
2.21	By 2023/24 NHs will cut business mileage and fleet air pollution emissions by 20%
2.26	During 2019 all local systems expected to set out how they will specifically reduce health inequalities by 2020/24 and 2028/29
2.26	Expect all CCGs to ensure that all screening and vaccination programmes

	are designed to support a narrowing of health inequalities
2.28	By 2024 75% women from Black and Minority Ethnic communities and similar percentage of women from the most deprived groups will receive continuity of care from their midwife, throughout their pregnancy, labour and post-natal period
2.30	By 2020/21 will ensure that at least 280,000 people living with Severe Mental Illness (SMI) have their physical health need met
2.30	By 2023/24 increase the number of people with SMI problems receiving physical health checks to an additional 110,000 people per year
2.31	Over five years we will invest to ensure that children with Learning Disabilities have their needs met by eyesight, hearing and dental services

Chapter 3: Further progress on care quality and outcomes

Section	Commitment
3.9	NHS will accelerate action to achieve 50% reductions in stillbirth, maternal mortality, neonatal mortality and serious brain injury
3.10	In 2019 aim to roll out the care bundle across every maternity unit in England
3.12	Spring 2019, every trust in England with a maternity and neonatal service will be part of the National Maternal and Neonatal Health Safety Collaborative
3.13	By 2021 most women receive continuity of the person caring for them during pregnancy, during birth and postnatally
3.15	Maternity digital care records are being offered to 20,000 eligible women in 20 accelerator sites across England, rising to 100,000 by the end of 2019/20
3.15	By 2023/24, all women will be able to access their maternity notes and information through their smart phones or other devices
3.39	We will actively support children and young people to take part in clinical trials, so that participation among children remains high, and among teenagers and young adults rises to 50% by 2025
3.40	From September 2019, all boys aged 12 and 13 will be offered vaccination against Human Papilloma Virus-related diseases, such as oral, throat and anal cancer
3.45	From 2019/20 clinical networks will be rolled out to ensure we improve the quality of care for children with long-term conditions

	such as asthma, epilepsy and diabetes. (How these will differ from the Networks which the NHS rolled out between 2005 – 2010 remains to be seen)
Milestones for Cancer	<ul style="list-style-type: none"> • From 2019 NHS will start to roll out new Rapid Diagnostic Centres across the country. • In 2020 a new faster diagnosis standard for cancer will begin to be introduced so that patients receive a definitive diagnosis or ruling out of cancer within 28 days. • By 2020 HPV primary screening for cervical cancer will be in place across England. • By 2021, where appropriate every person diagnosed with cancer will have access to personalised care, including needs assessment, a care plan and health and wellbeing information and support. • By 2022 the lung health check model will be extended. • By 2023, stratified, follow-up pathways for people who are worried their cancer may have recurred. These will be in place for all clinically appropriate cancers. • By 2028, the NHS will diagnose 75% of cancers at stage 1 or 2.
Milestones for cardiovascular disease	<ul style="list-style-type: none"> • The NHS will help prevent up to 150,000 heart attacks, strokes and dementia cases over the next 10 years. • We will work with our partners to improve community first response and build defibrillator networks to improve survival from out of hospital cardiac arrest. • By 2028 the proportion of patients accessing cardiac rehabilitation will be amongst the best in Europe, with up to 85% of those eligible accessing care.
Milestones for stroke care	<ul style="list-style-type: none"> • In 2019 we will, working with the Royal Colleges, pilot a new credentialing programme for hospital consultants to be trained to offer mechanical thrombectomy. • By 2020 we will begin improved post-hospital stroke rehabilitation models, with full roll-out over the period of this Long-Term Plan. • By 2022 we will deliver a ten-fold increase in the proportion of patients who receive a thrombectomy after a stroke so that each year 1,600 more people will be independent after their stroke. • By 2025 we will have amongst the best performance in Europe for delivering thrombolysis to all patients who could benefit.
3.80	From April 2019 will ensure that, in line with clinical guidelines, patients with type 1 diabetes benefit from life changing flash glucose monitors
3.80	By 2020/21, all pregnant women with type 1 diabetes will be offered continuous glucose monitoring, helping to improve neonatal outcomes

3.89	Mental health will receive a growing share of the NHS budget, worth in real terms at least a further £2.3 billion a year by 2023/24
3.91	The Five Year Forward View for Mental Health set out plans for expanding IAPT services so at least 1.5 million people can access care each year by 2020/21. We will continue to expand access to IAPT services for adults and older adults with common mental health problems, with a focus on those with long-term conditions. By 2023/24, an additional 380,000 adults and older adults will be able to access NICE-approved IAPT services
Milestones for mental health services for adults	<ul style="list-style-type: none"> • New and integrated models of primary and community mental health care will give 370,000 adults and older adults with severe mental illnesses greater choice and control over their care and support them to live well in their communities by 2023/24. • By 2023/24, NHS 111 will be the single, universal point of access for people experiencing mental health crisis. We will also increase alternative forms of provision for those in crisis, including non-medical alternatives to A&E and alternatives to inpatient admission in acute mental health pathways. Families and staff who are bereaved by suicide will also have access to post-crisis support. • By 2023/24, we will introduce mental health transport vehicles, introduce mental health nurses in ambulance control rooms and build mental health competency of ambulance staff to ensure that ambulance staff are trained and equipped to respond effectively to people experiencing a mental health crisis. • Mental health liaison services will be available in all acute hospital A&E departments and 70% will be at 'core 24' standards in 2023/24, expanding to 100% thereafter.
3.108	The local NHS is being allocated sufficient funds over the next five years to grow the amount of planned surgery year-on-year, to cut long waits, and reduce the waiting list
3.114	We will work to increase the number of people registering to participate in health research to one million by 2023/24
3.115	By 2023/24 the new NHS Genomic Medicine Service will sequence 500,000 whole genomes
3.117	From 2020/21 we will expand the current NHS England 'Test Beds' through regional Test Bed Clusters
3.119	We will invest in spreading innovation between organisations. Funding for AHSNs, subject to their success in being able to spread proven innovations across England, will be guaranteed until April 2023

Chapter 4: NHS staff will get the backing they need

Section	Commitment
4.12	Improve nursing vacancy rate to 5% by 2028
4.15	Extra 5,000 nursing undergraduate places funded from 2019/20
4.18	Continue investment in growth of nursing apprenticeships with 7,500 new nursing associates starting in 2019
4.19	Grow wider apprenticeships in clinical and non-clinical jobs in the NHS with the expectation that employers will offer all entry-level jobs as apprenticeships before considering other recruitment options
4.36	Improve staff retention by at least “% by 2025
4.42	Each NHS organisation will set its own target for BAME representation across its leadership team and broader workforce by 2021/22.
4.48	By 2021 NHSI will support NHS trusts and FTs to deploy electronic rosters or e-job plans
4.54	Double the number of NHS volunteers over the next three years

Chapter 5: Digitally-enabled care will go mainstream across the NHS

Section	Commitment
5.12	In 2019/20, 100,000 women will be able to access their maternity record digitally with coverage extended to the whole country by 2023/24
5.13	We will work with the wider NHS, the voluntary sector, developers, and individuals in creating a range of apps to support particular conditions
5.13	By 2020, we aim to endorse a number of technologies that deliver digitally-enabled models of therapy for depression and anxiety disorders for use in IAPT services across the NHS
5.14	Support for people with long-term conditions will be improved by interoperability of data, mobile monitoring devices and the use of connected home technologies over the next few years
5.14	By 2023, the Summary Care Record functionality will be moved to the PHR held within the LHCR systems, which will be able to send reminders and alerts directly to the patient
5.17	Supporting moves towards prevention and support, we will go faster for community-based staff

5.21	Over the next five years, every patient will be able to access a GP digitally, and where appropriate, opt for a 'virtual' outpatient appointment
5.22	By 2024 all providers, across acute, community and mental health settings, will be expected to advance to a core level of digitisation
5.25	By 2022, technology will better support clinicians to improve the safety of and reduce the health risks faced by children and adults
5.26	During 2019, we will deploy population health management solutions to support ICSs to understand the areas of greatest health need and match NHS services to meet them
5.28	By 2021, pathology networks will mean quicker test turnaround times, improved access to more complex tests and better career opportunities for healthcare scientists at less overall cost
5.28	By 2023, diagnostic imaging networks will enable the rapid transfer of clinical images from care settings close to the patient to the relevant specialist clinician to interpret
Milestones for digital technology	<ul style="list-style-type: none"> • During 2019 we will introduce controls to ensure new systems purchased by the NHS comply with agreed standards, including those set out in <i>The Future of Healthcare</i>. • By 2020, five geographies will deliver a longitudinal health and care record platform linking NHS and local authority organisations, three additional areas will follow in 2021. • In 2020/21, people will have access to their care plan and communications from their care professionals via the NHS App; the care plan will move to the individual's LHCR across the country over the next five years. • By summer 2021, we will have 100% compliance with mandated cyber security standards across all NHS organisations in the health and care system. • In 2021/22, we will have systems that support population health management in every Integrated Care System across England, with a Chief Clinical Information Officer (CCIO) or Chief Information Officer (CIO) on the board of every local NHS organisation. • By 2022/23, the Child Protection Information system will be extended to cover all health care settings, including general practices. • By 2023/24 every patient in England will be able to access a digital first primary care offer (see 1.44). • By 2024, secondary care providers in England, including acute, community and mental health care settings, will be fully digitised, including clinical and operational processes across all settings, locations and departments. Data will be captured, stored and transmitted electronically, supported by robust IT infrastructure and cyber security, and LHCRs will cover the whole country.