WHAT ARE THE NEXT STEPS ON THE FYFV?

The next steps on the five year forward view outlines a two year delivery plan and presents a whole system response to the many challenges currently facing the NHS. The document identifies practical steps needed to deliver the critical priorities as set out in the NHS mandate. It also recognises the impact of the work undertaken to date to reform the NHS.

Over the next two years NHS England aims to make a concerted national effort to move to integrated care and the focus is on what can be achieved within the current funding envelope.

The main national service improvement priorities as set out in the document are:
- Improving accident and emergency performance;
- Strengthening access to high quality GP services;
- Improvements in cancer services;
- Support to help frail and older people stay healthy and independent;
- Emphasis on mental health, workforce development, patient safety and harnessing technology and innovation.

The plan also focuses on getting the best value out of medicines and pharmacy, including the establishment of Regional Medicines Optimisation Committees, using NHS Right Care to drive improvement, consolidation of hospital pharmacy infrastructure to free up pharmacists’ time to undertake more clinical work and the expansion of practice pharmacists optimising medicines usage.

The RPS response to the next steps for the FYFV can be found at https://www.rpharms.com/news/details/Pharmacists-role-in-the-next-steps-for-NHS-Englands-Five-Year-Forward-View
WHAT IS THE ROYAL PHARMACEUTICAL SOCIETY DOING?

• Influencing decision makers nationally to ensure the value of pharmacists working in all care settings is recognised and fully utilised;
• The RPS is regularly meeting with key stakeholders to shape and influence the direction of travel for the pharmacy profession;
• Bringing together pharmacists involved in new care models to share and learn from their experiences. This will provide peer support and enable these pharmacists to share ideas and methodology with each other, and via RPS, with the wider profession;
• Providing support and understanding to members about new roles for pharmacists (in U&E care, GP practices, enhancing health in care homes). More information can be found at https://www.rpharms.com/making-a-difference/projects-and-campaigns;
• Keeping members informed and supported via our website.

WHAT DOES THIS MEAN FOR ME AS A PHARMACIST?

Pharmacists are experts in medicines and their use. The safe and effective use of medicines is the most frequent treatment intervention in the NHS. Pharmacists can help ensure that the value of medicines is realised and improve patient care by undertaking person-centred medicine reviews in a range of different care settings thereby ensuring integration of care across care pathways and multidisciplinary teams.

Pharmacists who work in an area where there is a vanguard / new care model, should work with their Local Professional Network (LPN), Local Practice Forum (LPF) or Local Pharmaceutical Committee (LPC) to ensure that there is pharmacy input and involvement in the vanguard. More information on the new care models can be found at https://www.england.nhs.uk/ourwork/new-care-models/;

Pharmacists can contribute expertise and solutions to all of the new models of care. Locally, pharmacist leaders need to engage with the development of the Strategic Transformation Partnerships (STP) and ensure pharmacists are included as part of local transformation;

The pharmacy profession has a great opportunity to capitalise on the changes that are happening and realise the opportunities that are forthcoming in the progression of delivery of the FYFV.
What is the FYFV?
The Five Year Forward View (FYFV) was published in October 2014 and co-signed by a collaboration of organisations; NHS England, Care Quality Commission, Health Education England, Public Health England, National Institute for Health and Care Excellence and NHS improvement (formerly Monitor and NHS Trust Development Authority). The vision in the FYFV is for a sustainable NHS that continues to be tax-funded, free at the point of use and that is fully equipped to meet the evolving needs of its patients, now and in the future. The implementation of the FYFV aims to improve outcomes: better health for the whole population, increased quality of care for all patients and better value for the taxpayer.

This forward view sets out a triple integration agenda involving greater integration between primary and specialist care, physical and mental health care and health and social care. Services will be organised around the needs of patients rather than professional boundaries.

What is the FYFV hoping to achieve?
The main aim of the FYFV is to deliver high quality care for patients whilst making efficiency savings within the system.

The FYFV aims to close the significant and widening gap between current resources and the demands on the service. It is focusing on three main areas:

• The health and wellbeing gap
  – This has a particular focus on prevention and healthy living;
  – If people are healthier there will be fewer admissions to hospital and a reduced demand on NHS services in general.

• The care and quality gap
  – This has a particular focus on seamless care across the current sectors within the NHS and ensuring primary care is fit for purpose;
  – It seeks to give patients greater control over their own care;
  – It focuses on new ways of working to deliver care and the ability to meet the evolving demands on the NHS service.

• The funding and efficiency gap
  – This has a particular focus on redirecting demand for NHS services so that more effective and efficient care is given to those who need it;
  – It is exploring the spending patterns in the NHS to identify where changes could and should be made.

The main strategy of the FYFV is prevention and public health; patients are to have far greater control of their own care, and any barriers to the provision of more integrated care are to be removed.
KEY MESSAGES FROM FYFV:

• Prevention is key – supporting people to live healthier lives;
• People want to be more involved in their own care – empower people to take responsibility for their care;
• Services are organised around the patient and their needs;
• Commissioning will happen across a place / population and health and social care will be integrated;
• Supporting carers to help sustain the NHS and engaging more with volunteers, charities and voluntary sector organisations;
• Good practice needs to be learnt from and spread more quickly;
• Expand and strengthen primary care (out of hospital care).

For further information on the FYFV please see our previous briefing