



NHS Future Forum

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Professor Steve Field led the Future Forum listening exercise during the pause in the progress of the Health and Social Care bill earlier this year. The Forum made a number of recommendations which led to significant amendments to the bill. Following this successful method of engagement the Prime Minister asked Professor Field to lead a second phase of the Forum looking at four new work-streams. The conclusions from three of the work-streams will inform the development of specific pieces of government policy, and in the case of the integration work-stream consider wider issues about joined up care.

When I led the first Future Forum listening exercise we were under extreme time pressure to offer recommendations to the government that would result in amended legislation. This second phase has a more contemplative air to it but the passion and energy that this particular method of engagement creates with NHS staff, our partners, patients and the public is very much in evidence. Maybe because of the success of the first Forum this second phase has optimism and a real sense of purpose. The membership has been refreshed and enhanced. The new workstream leads include David Haslam, past Chair and President of the RCGP and the current BMA President, Robert Varnam who is a GP in Manchester and who has recently helped establish the RCGP Centre for Commissioning and now designs programmes to support clinical commissioning groups. We are listening to, and engaging with, people across the NHS and beyond on four new areas of work. Ultimately, our work will inform and help shape future health policy as it is developed. As a multi-disciplinary group we are aiming to offer evidence based insight that will enable the best decisions to be made about how we deliver NHS care in the future.

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How are we going to do this? First, from experience we know we work best by using a series of engagements, listening opportunities and bespoke meetings to give our members the opportunity to share thoughts and start discussions in an open, constructive and non-adversarial way. These should capture a wide range of experiences and regions. Secondly, the work of the Forum during the listening exercise really did influence the development of policy and legislation. This gives us a mandate to continue this work with significant pieces of policy that are in development and that we now have a chance to shape at an early stage. Three of our four work-streams are focused on policy development: in **the NHS's role in public health, education and training and information**. Our fourth work-stream, **integration**, is looking at how we can take advantage of the health and social care modernisation programme to ensure services are integrated better around patients' needs.

So far, I've had the most push-back on the integration work-stream from people who question if the Forum really can make a difference with this vast and complex problem. As a GP, I know the NHS offers, in some areas, a fragmented service. This is tough on patients and hard work for staff. It is clear that we need to organise services around the needs of the patient, no matter how many different providers are involved. This is understood, so I will encourage the integration work-stream to go further than simply identifying the problem. We will be looking at practice based examples of integrated services across health and social care that support and enable better outcomes, and then identifying who needs to do what next to make this happen. I hope we will be able to capture real evidence of incentives that work and innovation that can be scaled up to maximize its positive benefits for as many patients as possible.

I've spent a lot of time looking at how the NHS provides services for the most vulnerable in society such as homeless people, travelers and sex workers. I've been aware for a long time that these people cannot always access local GP services. We should be encouraged that these vulnerable groups are coming forward to access their local GP services and take control of their own health. There are good examples of where this is working well but equally, in some areas, we could do better

Another area that is really going to make a difference is the work we are doing to scope the NHS's role in the public's health. The timing of this piece of work is significant ahead of the establishment of Public Health England (subject to the successful passage of the Health and Social Care bill). In this workstream we are looking at how to use the inherent knowledge about local populations to ensure we tackle health inequalities. We are also considering the unique position the NHS is in as one of the world's largest employers and how it can leverage this to improve the health and wellbeing of its workforce.

This is all within our grasp. The Forum has been given a unique role to play in the modernisation of the NHS and I am confident that our influence, at this time, will be significant.