A brief summary of NHS England’s Five Year Forward View

The Five Year Forward View sets out a clear direction for the NHS, showing why change is needed and what it will look like. Delivering the vision contained within the report will require the input of the NHS, local communities, local authorities and employers.

Key Points within the Five Year Forward View include:

- **A radical upgrade in prevention and public health** is needed; in particular national action on obesity, smoking, alcohol, and new workplace incentives. Calls for stronger public health-related powers for local government and elected mayors.
- Giving individuals **greater control of their own care**, including the option for shared budgets combining health and social care. Much greater support for the 1.4 million full time unpaid carers in England.
- **Breaking down the barriers in how care is provided** between doctors and hospitals, between physical and mental health, between health and social care. Move towards “**triple integration**” to support people with multiple health conditions, not just single diseases.
- A “one size fits all” approach will not work, instead a small number of radical new care delivery options will be supported, including:
  - The **Multispeciality Community Provider**: groups of GPs will combine with nurses, other community health services, hospital specialists and perhaps mental health and social care to create integrated out-of-hospital care.
  - **Primary and Acute Care Systems**: an integrated hospital and primary care provider, similar to the Accountable Care Organisations now developing in other countries.
- **Urgent and emergency care services will be redesigned** to integrate between A&E departments, GP out-of-hours services, urgent care centres, NHS 111 and ambulance services. **Smaller hospitals** will have new options to remain viable. The NHS will provide more support for frail older people living in **care homes**.
- A new deal for GPs, with the foundation of NHS continuing to be list-based primary care. GP-led Clinical Commissioning Groups will have the option of more control over the wider NHS budget, enabling a **shift in investment from acute to primary and community services**.
- Improving the use of technology and innovation and empowering local leaders to drive this. Developing new ‘test bed’ sites for worldwide innovators and new ‘green field’ sites where entirely new NHS services will be designed from scratch.
- Taking action to tackle the projected £30billion a year by 2020/21 mismatch between patient needs and funding through focusing on demand, efficiency and funding to sustain a comprehensive, high quality NHS.
- Delivering efficiency savings of up to 3% annually through **taking action on prevention, investing in new care models, sustaining social care services, and through wider system improvements**. Closing the £30 billion gap by 2020/21.

The full **Five Year Forward View** can be found [here](#).