



Department
of Health

The Government's mandate to NHS England for 2016-17

January 2016

The Government's mandate to NHS England 2016-17

A mandate from the Government to NHS England:
April 2016 to March 2017

Presented to Parliament pursuant to Section 13A(1) of the National Health Service Act 2006

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Foreword

The NHS is a truly remarkable institution. Made up of over 8,300 separate organisations and served by more than 1.3 million staff, it sees more than a million patients every 36 hours. It has been independently rated as the fairest and most patient-centred health system in the world, is achieving near record levels of satisfaction and record lows in dissatisfaction despite unprecedented increases in demand, and is still the single institution that makes us most proud to be British. The consultation on this mandate alone received almost 130,000 responses, demonstrating just how much the public care about our NHS.

Stewarding this formidable service on behalf of the patients and taxpayers is both an enormous privilege and a weighty responsibility for myself and NHS England. We are united with NHS staff across the country in a shared objective of sustaining a comprehensive service, free at the point of use, which constantly improves patient care.

The Government has set NHS England an ambitious mandate to do just that in the year ahead, by making big strides in our drive to make the NHS the safest, most compassionate and most efficient health system in the world. At a time when other areas of government spending still face difficult reductions in expenditure, we have committed a substantial £3.8 billion extra funding to the NHS next year to fund this ambitious programme.

Extra investment from taxpayers must come with serious reform, so we have asked NHS England to make rapid progress on tackling the unacceptable variation in the standard of weekend services, focusing on transforming weekend provision of urgent and emergency care across an initial 20% of the country over the mandate period.

We are also continuing to back and fund the NHS's own plan for the future, the Five Year Forward View. This blueprint for the transformation of out of hospital services achieved an extraordinary level of consensus across the NHS, and next year we will see those plans coming to fruition through the vanguards and new models of care programmes. We anticipate real progress in patient outcomes across these transformation areas, including a reduction in emergency admissions, and improvement in accident and emergency performance to ensure that standards are met.

I have great confidence in the leadership and passion of those at NHS England, working with NHS Improvement, to deliver this mandate for the benefit of patients and taxpayers, and look forward to reporting on progress in the months ahead.



Rt Hon Jeremy Hunt MP
Secretary of State for Health

1. Introduction

- 1.1. The Government is committed to providing for patients and the public the highest quality, most compassionate health and care service in the world, built on the guiding principles of the NHS: that access to health care is based on need and not the ability to pay, and that services are comprehensive and available to all.

The mandate to NHS England

- 1.2. NHS England is responsible for arranging the provision of health services in England. The mandate to NHS England sets the Government's objectives and any requirements for NHS England, as well as its budget.¹ In doing so, the mandate sets direction for the NHS, and helps ensure the NHS is accountable to Parliament and the public. Every year, the Secretary of State must publish a mandate to ensure that NHS England's objectives remain up to date.²
- 1.3. This year, every government department is producing a plan setting out its objectives to 2020 and how it will achieve them. The mandate therefore sets out NHS England's contribution to the Government's goals for the health and care system as a whole, in line with the manifesto commitments.
- 1.4. This mandate sets out objectives to 2020, sets requirements relating to the Better Care Fund, and sets NHS England's budget for five years. Setting a multi-year mandate with a multi-year budget will enable the NHS to plan more effectively to deliver our long-term aims.
- 1.5. For the first time, the objectives in the mandate are underpinned by specific deliverables to be achieved in the short term, for the year 2016-17, and to be achieved in the long term, by 2020 or beyond, as set out in the annex. The mandate must be refreshed each year and laid before Parliament, to ensure the objectives and requirements are up to date and to agree new annual deliverables. Together, this mandate and its annex form the mandate to NHS England for 2016-17.
- 1.6. NHS England is legally required to seek to achieve the objectives, and comply with the requirements in this document.³ We will assess NHS England's performance against its objectives, by reviewing progress against agreed yearly deliverables and metrics, alongside improvement in outcomes measures. Our assessment will be published in the Secretary of State's annual assessment of NHS England. In turn, we expect NHS England to ensure clinical commissioning groups (CCGs) play their part in delivering the mandate.

The Five Year Forward View and a seven-day NHS

- 1.7. The coalition government gave the NHS important freedoms to develop its own plan. NHS England and its partner organisations have done just that, with the NHS's Five

¹ NHS England's legal name is the National Health Service Commissioning Board

² In accordance with section 13A(1) of the National Health Service Act 2006, as amended by the Health and Social Care Act 2012

³ This requirement is at section 13A(7) of the National Health Service Act 2006

Year Forward View. In return, people need to have the confidence that the high-quality NHS services will be there when they need them.

- 1.8. This Government will increase spending in real terms every year in this Parliament. The NHS will receive £10 billion more per year in real terms by 2020-2021 than in 2014-15. This investment backs in full the Five Year Forward View and will mean patients receive a truly seven-day health service, with the services people need being offered in hospitals at the weekend and people able to access a GP at evenings and weekends.
- 1.9. In this new mandate to NHS England to 2020, the Government is entrusting NHS England with the NHS budget to help deliver these commitments, and to meet the evolving needs of the population in a way that is sustainable now and into the future. We will hold NHS England to account for its leadership of and contribution to delivery of the Five Year Forward View and a truly seven-day NHS.

2. NHS England's objectives

- 2.1. This mandate is based on the shared priorities of Government and its partner organisations for health and care – the priorities we believe are central to delivering the changes needed to ensure the NHS is always there whenever people need it most. As leader of the commissioning system, but working with others, NHS England has a central role to play. This mandate sets objectives for NHS England that reflects its contribution to these ambitions to 2020.
- **OBJECTIVE 1: Through better commissioning, improve local and national health outcomes, particularly by addressing poor outcomes and inequalities.**
- 2.2. To do this, we need greater transparency about the quality and outcomes of care. We expect NHS England to establish and maintain a new CCG assessment framework, to make it easier for local areas to see how their services and outcomes compare to others and make consistent improvements. We expect NHS England to demonstrate improvements against the NHS Outcomes Framework, and work with CCGs to reduce variations in quality of care and outcomes at a local level.⁴ NHS England must secure measurable reductions in inequalities in access to health services, in people's experience of the health system, and across a specified range of health outcomes.
- **OBJECTIVE 2: To help create the safest, highest quality health and care service.**
- 2.3. Everyone deserves care that is safe, compassionate and effective, at all times and regardless of their condition. We want NHS England to help ensure the NHS provides the same standards of care, seven days a week, for people who need urgent and emergency hospital care. We want the NHS to become the world's largest learning organisation, with a culture that uses all sources of insight, including from complaints,⁵ to improve services and quality of care, particularly for the most vulnerable. NHS England should ensure the NHS helps to identify violence and abuse early and supports victims to get their lives back sooner, including through improved data sharing with community partners.
- 2.4. NHS England should ensure the NHS meets the needs of each individual with a service where people's experience of their care is seen as an integral part of overall quality. We want people to be empowered to shape and manage their own health and care and make meaningful choices, particularly for maternity services, people with long term conditions and end-of-life care. Carers should routinely be identified and given access to information and advice about the support available.
- 2.5. A priority for NHS England will be to improve early diagnosis, services and outcomes for cancer patients, as outlined in Achieving World-Class Cancer Outcomes: A strategy for England 2015-20.

⁴ <https://www.gov.uk/government/publications/nhs-outcomes-framework-2015-to-2016>

⁵ <http://www.healthwatch.co.uk/resource/my-expectations-raising-concerns-and-complaints-report>

- **OBJECTIVE 3: To balance the NHS budget and improve efficiency and productivity.**

- 2.6. Meeting the demands of today's and tomorrow's patients from within the NHS budget depends on delivering the necessary efficiencies at the heart of the Five Year Forward View. The Government has fully funded the NHS's Five Year Forward View, increasing its funding by £10 billion in real terms over the course of the Parliament.
- 2.7. We expect NHS England, working with NHS Improvement, to ensure that the NHS lives within its means and achieves the year on year improvements in efficiency and productivity needed to place the NHS on a secure and sustainable financial footing throughout the Parliament.⁶ As part of this, we want NHS England, with NHS Improvement, to ensure the NHS balances its budget, and for commissioners to work collaboratively with local authorities to make the most efficient and effective use of health and social care funding. This means putting the right measures in place to help spend taxpayers' money more efficiently and reduce waste – to help ensure we get maximum value for patients and service users from every pound spent. It must do so whilst continuing to deliver high quality care and delivering against the objectives set out in this mandate.

- **OBJECTIVE 4: To lead a step change in the NHS in preventing ill health and supporting people to live healthier lives.**

- 2.8. The escalating demands of ill health driven by our lifestyles also threaten the long-term sustainability of the NHS. Across the health and care system, we want the NHS to do more to tackle smoking, alcohol and physical inactivity. We fully support the focus in the Five Year Forward View on preventing avoidable ill health and premature mortality. We ask NHS England to lead a step-change in the NHS on helping people to live healthier lives by tackling obesity and preventable illness. In particular, this includes contributing to the Government's goal to reduce child obesity and doing more to reach the five million people at high risk of diabetes and improve the management and care of people with diabetes. As part of the Prime Minister's 2020 Dementia Challenge, we expect NHS England to make measurable improvement in the quality of care and support for people with dementia and to increase public awareness.

- **OBJECTIVE 5: To maintain and improve performance against core standards.**

- 2.9. Our NHS should always provide the best care for everyone – wherever they are and whenever they need it, in line with the NHS Constitution. The Government has committed to real terms growth in the NHS budget to ensure that the service can continue to perform well over the next five years, with the capacity to deal with rises in demand during the winter months, and to play its part in any national emergency. We expect NHS England to support the NHS to maintain and, where possible, improve access to timely, quality services for all patients.

⁶ NHS Improvement is a new working arrangement bringing together the Trust Development Authority and Monitor

- **OBJECTIVE 6: To improve out-of-hospital care.**

- 2.10. We want to see more services provided out of hospitals, a larger primary care workforce and greater integration with social care, so that care is more joined up to meet people's physical health, mental health and social care needs. We expect NHS England to ensure everyone has easier and more convenient access to GP services, including appointments at evenings and weekends where this is more convenient for them, and effective access to urgent care 24 hours a day, seven days a week.
- 2.11. We want to see more power and control devolved to more areas, enabling communities to design and develop new models of care tailored to meet the needs of their local populations. NHS England should support the NHS to achieve the Government's aim that health and social care are integrated across the country by 2020, including through the Better Care Fund.
- 2.12. We expect NHS England to strive to reduce the health gap between people with mental health problems, learning disabilities and autism and the population as a whole, and support them to live full, healthy and independent lives. This will require great strides in improving care and outcomes through prevention, early intervention and improved access to integrated services to ensure physical health needs are addressed too. In particular, vulnerable children, homeless people, veterans and people in places of detention should receive high quality, integrated services that meet their health needs. To close the health gap for people of all ages, we want to see a system-wide transformation in children and young people's mental health,⁷ with a greater focus on prevention and early intervention, as well as improvements to perinatal mental health. Overall there should be measurable progress towards the parity of esteem for mental health enshrined in the NHS Constitution.

- **OBJECTIVE 7: To support research, innovation and growth.**

- 2.13. Just as a strong NHS depends on a strong economy, so a strong NHS can contribute to the growth of a strong economy, especially in health and life sciences. We ask NHS England to promote and support participation by NHS organisations and patients in research funded both by commercial and non-commercial organisations. We expect to see NHS England help the NHS contribute to economic growth, to support the NHS to reduce the impact of ill health and disability, and to support and harness research and innovation to enable cost effective, affordable, transformative new treatments to reach patients more quickly. Linked to this, NHS England should support the NHS to make better use of digital services and technology to transform patients' access to and use of health and care, including online access to their personal health records.

⁷ <https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people>

3. NHS England's budget

- 3.1. Details of NHS England's revenue and capital budgets for 2016-17 (which equates to a 3.7% real terms growth to the 2015-16 combined revenue and capital budget, excluding depreciation and impairments) and the indicative budgets for the remaining years of this Parliament are set out in the table below. A further breakdown of these figures is provided in the financial directions.⁸

	2016-17	2017-18 (Indicative budget)	2018-19 (Indicative budget)	2019-20 (Indicative budget)	2020-21 (Indicative budget)
Total revenue budget (£m)	106,496	109,853	112,335	115,435	119,535
Capital budget (£m)	305	310	315	320	326

- 3.2. NHS England will need to comply with the financial directions made under the NHS Act 2006, which set out further technical limits, including spending on administration.
- 3.3. NHS England is responsible for allocating the budgets for commissioning NHS services. This prevents any perception of political interference in the way that money is distributed between different parts of the country. The Government expects the principle of ensuring equal access for equal need to be at the heart of NHS England's approach to allocating budgets. This process must be transparent, and must ensure that changes in allocations do not result in the destabilising of local health economies.
- 3.4. NHS England, with NHS Improvement, will ensure the NHS balances its budget, including commissioners and providers living within their budgets. To support this, £1.8bn of NHS England's budget for 2016-17 will be allocated through the Sustainability and Transformation Fund to support providers, in particular of emergency services, payable through commissioning or as other support.

⁸ See section 223D of the NHS Act 2006 (financial duties of the Board); the revenue and capital budgets are the amounts specified as the limits on total resource use under subsections (2) and (3)

Annex: How we will assess NHS England's performance

The table below shows NHS England's objectives with an overall measurable goal for this Parliament and clear priority deliverables for 2016-17. The majority of these goals will be achieved in partnership with the Department of Health, NHS Improvement and other health bodies such as Public Health England, Health Education England and the Care Quality Commission. It also sets out requirements for NHS England to comply with in paragraph 6.2.

1.	Through better commissioning, improve local and national health outcomes, particularly by addressing poor outcomes and inequalities.
1.1 CCG performance	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Consistent improvement in performance of CCGs against new CCG assessment framework. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • By June, publish results of the CCG assessment framework for 2015-16, which provides CCGs with an aggregated Ofsted style assessment of performance and allows them to benchmark against other CCGs and informs whether NHS England intervention is needed. • Ensure new Ofsted-style CCG framework for 2016-17 includes health economy metrics to measure progress on priorities set out in the mandate and the NHS planning guidance including overall Ofsted-style assessment for each of cancer, dementia, maternity, mental health, learning disabilities and diabetes, as well as metrics on efficiency, core performance, technology and prevention. • By the end of Q1 of 2016-17, publish the first overall assessment for each of the six clinical areas above.
2.	To help create the safest, highest quality health and care service.
2.1 Avoidable deaths and seven-day services	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Roll out of seven-day services in hospital to 100% of the population (four priority clinical standards in all relevant specialities, with progress also made on the other six standards), so that patients receive the same standards of care, seven days a week. • Achieve a significant reduction in avoidable deaths, with all trusts to have seen measurable reduction from their baseline on the basis of annual measurements. • Support NHS Improvement to significantly increase the number of trusts rated outstanding or good, including significantly reducing the length of time trusts remain in special measures. • Measurable progress towards reducing the rate of stillbirths, neonatal and maternal deaths and brain injuries that are caused during or soon

	<p>after birth by 50% by 2030 with a measurable reduction by 2020.</p> <ul style="list-style-type: none"> • Support the NHS to be the world's largest learning organisation with a new culture of learning from clinical mistakes, including improving the number of staff who feel their organisation acts on concerns raised by clinical staff or patients. • Measurable improvement in antimicrobial prescribing and resistance rates. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Publish avoidable deaths per trust annually and support NHS Improvement to help trusts to implement programme to improve from March 2016 baseline. • Rollout of four clinical priority standards in all relevant specialties to 25% of population. • Implement agreed recommendations of the National Maternity Review in relation to safety, and support progress on delivering Sign up to Safety. • Support the Government's goal to establish global and UK baseline and ambition for antimicrobial prescribing and resistance rates.
<p>2.2 Patient experience</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Maintain and increase the number of people recommending services in the Friends and Family Test (FFT) (currently 88-96%), and ensure its effectiveness, alongside other sources of feedback to improve services. • 50-100,000 people to have a personal health budget or integrated personal budget (up from current estimate of 4,000). • Significantly improve patient choice, including in maternity, end-of-life care and for people with long-term conditions, including ensuring an increase in the number of people able to die in the place of their choice, including at home. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Produce a plan with specific milestones for improving patient choice by 2020, particularly in maternity, end-of-life care (including to ensure more people are able to achieve their preferred place of care and death), and personal health budgets. • Building on the FFT, develop proposals about how feedback, particularly in maternity services, could be enhanced to drive improvements to services at clinical and ward levels.
<p>2.3 Cancer</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Deliver recommendations of the Independent Cancer Taskforce, including: <ul style="list-style-type: none"> ○ significantly improving one-year survival to achieve 75% by 2020 for all cancers combined (up from 69% currently); and ○ patients given definitive cancer diagnosis, or all clear, within 28 days of being referred by a GP.

	<p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Achieve 62-day cancer waiting time standard. • Support NHS Improvement to achieve measurable progress towards the national diagnostic standard of patients waiting no more than 6 weeks from referral to test. • Agree trajectory for increases in diagnostic capacity required to 2020 and achieve it for year one. • Invest £340m in providing cancer treatments not routinely provided on the NHS through the Cancer Drugs Fund, and ensure effective transition to the agreed operating model to improve its effectiveness within its existing budget.
<p>3.</p>	<p>To balance the NHS budget and improve efficiency and productivity.</p>
<p>3.1 Balancing the NHS budget</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • With NHS Improvement, ensure the NHS balances its budget in each financial year. • With the Department of Health and NHS Improvement, achieve year on year improvements in NHS efficiency and productivity (2-3% each year), including from reducing growth in activity and maximising cost recovery. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • With NHS Improvement ensure the NHS balances its budget, with commissioners and providers living within their budgets, and support NHS Improvement in: <ul style="list-style-type: none"> ○ securing £1.3bn of efficiency savings through implementing Lord Carter's recommendations and collaborating with local authorities on continuing healthcare spending; ○ delivering year one of trust deficit reduction plans and ensuring a balanced financial position across the trust sector, supported by effective deployment of the Sustainability and Transformation Fund; and ○ reducing spend on agency staff by at least £0.8bn on a path to further reductions over the Parliament. • Roll-out of second cohort of RightCare methodology to a further 60 CCGs. • Measurable improvement in primary care productivity, including through supporting community pharmacy reform. • Work with CCGs to support Government's goal to increase NHS cost recovery up to £500m by 2017-18 from overseas patients. • Ensure CCGs' local estates strategies support the overall goal of releasing £2bn and land for 26,000 homes by 2020.

<p>4.</p>	<p>To lead a step change in the NHS in preventing ill health and supporting people to live healthier lives.</p>
<p>4.1 Obesity and Diabetes</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Measurable reduction in child obesity as part of the Government's childhood obesity strategy. • 100,000 people supported to reduce their risk of diabetes through the Diabetes Prevention Programme. • Measurable reduction in variation in management and care for people with diabetes. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Contribute to the agreed child obesity implementation plan, including wider action to achieve year on year improvement trajectory for the percentage of children who are overweight or obese. • 10,000 people referred to the Diabetes Prevention Programme.
<p>4.2 Dementia</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Measurable improvement on all areas of Prime Minister's challenge on dementia 2020, including: <ul style="list-style-type: none"> ○ maintain a diagnosis rate of at least two thirds; ○ increase the numbers of people receiving a dementia diagnosis within six weeks of a GP referral; and ○ improve quality of post-diagnosis treatment and support for people with dementia and their carers. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Maintain a minimum of two thirds diagnosis rates for people with dementia. • Work with National Institute for Health Research on location of Dementia Institute. • Agree an affordable implementation plan for the Prime Minister's challenge on dementia 2020, including to improve the quality of post-diagnosis treatment and support.
<p>5.</p>	<p>To maintain and improve performance against core standards</p>
<p>5.1 A&E, Ambulances and Referral to Treatment (RTT)</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • 95% of people attending A&E seen within four hours; Urgent and Emergency Care Networks rolled out to 100% of the population. • 75% of Category A ambulance calls responded to within eight minutes. • At least 92% of patients on incomplete non-emergency pathways to have been waiting no more than 18 weeks from referral; no-one waits more than 52 weeks.

	<p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • With NHS Improvement, agree improvement trajectory and deliver the plan for year one for A&E. • Implement Urgent and Emergency Care Networks in 20% of the country designated as transformation areas, including clear steps towards a single point of contact. • With NHS Improvement, agree improvement trajectory and deliver the plan for year one for ambulance responses; complete Red 2 pilots and decide on full roll-out. • With NHS Improvement, meet the 18-week referral-to-treatment standard, including implementing patient choice in line with the NHS Constitution; and reduce unwarranted variation between CCG referral rates to better manage demand.
<p>6.</p>	<p>To improve out-of-hospital care.</p>
<p>6.1 New models of care and General Practice</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • 100% of population has access to weekend/evening routine GP appointments. • Measurable reduction in age standardised emergency admission rates and emergency inpatient bed-day rates; more significant reductions through the New Care Model programme covering at least 50% of population. • Significant measurable progress in health and social care integration, urgent and emergency care (including ensuring a single point of contact), and electronic health record sharing, in areas covered by the New Care Model programme. • 5,000 extra doctors in general practice. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • New models of care covering the 20% of the population designated as being in a transformation area to: <ul style="list-style-type: none"> ○ provide access to enhanced GP services, including evening and weekend access and same-day GP appointments for all over 75s who need them; and ○ make progress on integration of health and social care, integrated urgent and emergency care, and electronic record sharing. • Publish practice-level metrics on quality of and access to GP services and, with the Health and Social Care Information Centre, provide GPs with benchmarking information for named patient lists. • Develop new voluntary contract for GPs (Multidisciplinary Community Provider contract) ready for implementation in 2017-18.
<p>6.2 Health and social care integration</p>	<p><i>Overall 2020 goals:</i></p> <ul style="list-style-type: none"> • Achieve better integration of health and social care in every area of the country, with significant improvements in performance against integration

	<p>metrics within the new CCG assessment framework. Areas will graduate from the Better Care Fund programme management once they can demonstrate they have moved beyond its requirements, meeting the government's key criteria for devolution.</p> <ul style="list-style-type: none"> • Ensure the NHS plays its part in significantly reducing delayed transfers of care, including through developing and applying new incentives. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Implement the Better Care Fund (BCF) in line with the BCF Policy Framework for 2016-17.⁹ • Every area to have an agreed plan by March 2017 for better integrating health and social care. • Working with partners, achieve accelerated implementation of health and social care integration in the 20% of the country designated as transformation areas, by sharing electronic health records and making measurable progress towards integrated assessment and provision. • Work with the Department of Health, other national partners and local areas to agree and support implementation of local devolution deals. • Agree a system-wide plan for reducing delayed transfers of care with overall goal and trajectory for improvement, and with local government and NHS partners implement year one of this plan. <p><i>2016-17 requirements:</i></p> <ul style="list-style-type: none"> • NHS England is required to: <ul style="list-style-type: none"> ○ ring-fence £3.519bn within its allocation to CCGs to establish the Better Care Fund, to be used for the purposes of integrated care; ○ consult the Department of Health and the Department for Communities and Local Government before approving spending plans drawn up by each local area; and ○ consult the Department of Health and the Department for Communities and Local Government before exercising its powers in relation to failure to meet specified conditions attached to the Better Care Fund as set out in the BCF Policy Framework.
<p>6.3 Mental health, learning disabilities and autism</p>	<p><i>Overall 2020 goal:</i></p> <ul style="list-style-type: none"> • To close the health gap between people with mental health problems, learning disabilities and autism and the population as a whole (defined ambitions to be agreed based on report by Mental Health Taskforce). • Access and waiting time standards for mental health services embedded, including: <ul style="list-style-type: none"> ○ 50% of people experiencing first episode of psychosis to access treatment within two weeks; and ○ 75% of people with relevant conditions to access talking therapies in six weeks; 95% in 18 weeks.

⁹ The BCF Policy Framework is to be published shortly.

	<p>2016-17 deliverables:</p> <ul style="list-style-type: none"> • 50% of people experiencing first episode of psychosis to access treatment within two weeks. • 75% of people with relevant conditions to access talking therapies in six weeks; 95% in 18 weeks. • Increase in people with learning disabilities/autism being cared for by community not inpatient services, including implementing the 2016-17 actions for Transforming Care. • Agree and implement a plan to improve crisis care for all ages, including investing in places of safety. • Oversee the implementation of locally led transformation plans for children and young people's mental health, which improve prevention and early intervention activity, and be on track to deliver national coverage of the children and young people's Improving Access to Psychological Therapies (IAPT) programme by 2018. • Implement agreed actions from the Mental Health Taskforce.
<p>7.</p>	<p>To support research, innovation and growth.</p>
<p>7.1 Research and growth</p>	<p>Overall 2020 goals:</p> <ul style="list-style-type: none"> • Support the Department of Health and the Health Research Authority in their ambition to improve the UK's international ranking for health research. • Implement research proposals and initiatives in the NHS England research plan. • Measurable improvement in NHS uptake of affordable and cost-effective new innovations. • To assure and monitor NHS Genomic Medicine Centre performance to deliver the 100,000 genomes commitment. <p>2016-17 deliverables:</p> <ul style="list-style-type: none"> • Implement the agreed recommendations of the Accelerated Access Review including developing ambition and trajectory on NHS uptake of affordable and cost-effective new innovations.
<p>7.2 Technology</p>	<p>Overall 2020 goals:</p> <ul style="list-style-type: none"> • Support delivery of the National Information Board Framework 'Personalised Health and Care 2020' including local digital roadmaps, leading to measurable improvement on the new digital maturity index and achievement of an NHS which is paper-free at the point of care. • 95% of GP patients to be offered e-consultation and other digital services; and 95% of tests to be digitally transferred between organisations. <p>2016-17 deliverables:</p> <ul style="list-style-type: none"> • Minimum of 10% of patients actively accessing primary care services

	<p>online or through apps, and set trajectory and plan for achieving a significant increase by 2020.</p> <ul style="list-style-type: none"> • Ensure high quality appointment booking app with access to full medical record and agreed data sharing opt-out available from April 2016. • Robust data security standards in place and being enforced for patient confidential data. • Make progress in delivering new consent-based data services to enable effective data sharing for commissioning and other purposes for the benefit of health and care. • Significant increase in patient access to and use of the electronic health record.
<p>7.3 Health and work</p>	<p><i>Overall 2020 goal:</i></p> <ul style="list-style-type: none"> • Contribute to reducing the disability employment gap. • Contribute to the Government's goal of increasing the use of Fit for Work. <p><i>2016-17 deliverables:</i></p> <ul style="list-style-type: none"> • Continue to deliver and evaluate NHS England's plan to improve the health and wellbeing of the NHS workforce. • Work with Government to develop proposals to expand and trial promising interventions to support people with long-term health conditions and disabilities back into employment.