



Northern Ireland
Confederation
for Health and Social Care

Back on track: securing the health and wellbeing of our population

Health and social care leaders' priorities
for the incoming executive

Towards an HSC which is innovative, efficient, outcomes-focused, has a valued and supported workforce and works in partnership to get closer to communities

About us

About NICON

The Northern Ireland Confederation for Health and Social Care (NICON) is the voice of the organisations working across Northern Ireland's integrated health and social care system (HSC). Part of the NHS Confederation in England and Wales, it is the membership body for all HSC organisations which comprises of all six trusts together with the range of regional HSC organisations.

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Our priorities: overview



Investment in workforce

Our members urge immediate agreement on a new pay deal and the implementation of the Health and Care Workforce Strategy 2026 to address our significant workforce gaps. This must be supported by investment to ensure the HSC is recognised as a great place to work, to attract and retain staff and modernise for the future.



Sustainable funding

To stabilise, support transformation and meet growing demand, we need a sustained funding package underpinned by a three-year budget to support effective planning. Funding shortfalls will limit progress. We need honest conversations with the public and realistic expectations within the funding envelope agreed. Importantly, we must recognise spending as an investment with a £4 return for every £1 spent.¹



Redesigning services – accessing value

There are significant opportunities to improve the design of our service delivery model, but changes have traditionally been met with resistance. It is urgent that we break this pattern to deliver. We propose the establishment of a Citizens' Assembly to support this vital public conversation, to fast track agreement and support make progress at pace.



Collaborative and empowered leaders

We must invest in more collaborative ways of working, tapping into leadership in our HSC organisations, communities, partners, patients and in our workforce.



Stabilisation and transformation

Recognising the significant pressure currently, we must prioritise the stabilisation of our services and address unacceptable waiting times, while seizing opportunities for transformation.



Population health approach

We must press on with our integrated care planning model, investing in prevention and addressing inequalities and working in partnership with communities, other public services and the voluntary sector.



Mental health

Our new Mental Health Strategy has been co-created with patients and partners, emphasising the need for parity of esteem between physical and mental health. We call for adequate funding and the continued support of our partners to deliver this ambitious agenda.



Social care

We welcome recent progress on the reform of adult social care and children's social care services and call for progressive action to deliver for our citizens, not only improving quality of life but delivering efficiencies in our system.



Investment in technology

We welcome the beginning of the rollout of encompass, NI's first digital health and care record. We need sustained focus on implementation of our new suite of digital strategies, supported by adequate staff training, to access the considerable benefits that technology and data can offer.



Engaged patients, public and partners

Learning from international experience, we call for a cultural shift in public engagement and invite the people of NI, as well as staff and partners, to be involved in keeping people well and active at home.



Innovation and economy

Having a strong and fair economy can help improve health outcomes. There are many opportunities to more fully support the HSC to embrace innovation and contribute as partners in local economies



Net zero carbon commitments

At COP26, the HSC committed to reaching net zero as part of the global effort to tackle climate change. New action is required to proactively drive this agenda.

Introduction

This report sets out the collective views of our members and aims to inform the ongoing public debate and subsequent decisions of the incoming Northern Ireland Executive.

Northern Ireland's Health and Social Care system is under mounting pressure. A series of strategic reviews had concluded that significant service redesign, and sustained investment would be necessary to address the long-term needs of our population.² The pandemic, absence of functioning government, rising demand, and industrial action has considerably worsened the situation. Unsurprisingly, health consistently ranks as a key concern in the public's mind.³

Over the last few years, colleagues at all levels in the HSC have demonstrated exceptional dedication, compassion, collaboration and creativity to maintain services and lead change across the system. Widescale vaccination programmes, digital ways of working, and new elective care centres are all noteworthy examples of the swift pace at which change has been implemented.

As this new Executive and Assembly take up office, health and care must be the key focus in the new Programme of Government to deliver amidst what are undoubtedly immense challenges. This document sets out the priorities agreed by the Northern Ireland Confederation of Health and Social Care members.

While the challenge is truly unprecedented, our members believe that there is significant opportunity to make real progress, by delivering a bold reform agenda and placing health and social care at the heart of all we do in Northern Ireland. Our call to the public and politicians alike is to 'support us to support you', so that we can ensure our health and care system gets back on track to meet the needs of our population.

Michael Bloomfield
Chair, NICON
Chief Executive, NI Ambulance Service



Jonathan Patton
Vice-Chair, NICON
Chair, South Eastern HSC Trust



Our vision

Members agree that the vision that our citizens ‘lead long, healthy, and active lives’ and the four ambitions for reform set out in Health and Wellbeing 2026: Delivering Together⁴ remain at the core of our ambition and continue to align with international best practice.

- **Building capacity in communities and in prevention**
- **Providing more support in primary care**
- **Reforming our community and hospital services**
- **Organising ourselves to deliver**

Although we have seen significant strides to deliver in these key areas,⁵ progress has been significantly hampered, creating additional pressure and demand for services, while Northern Ireland’s waiting times continue to deteriorate. If we are to get back on track, members agree there are four core enablers, complemented by a set of eight supporting activities that must be prioritised in the new Assembly.

“This is a time of unprecedented challenge for our nations. Driving change in our health care must form a turning point to create a cultural revolution in how we deliver services.

At this very important time of restoration of the institutions in Northern Ireland, this report sets out our members’ views, based on international best practice, and calls for a revitalised national mission, system leadership and local engagement approach. I commend this report to politicians and the public alike. Tough decisions and a relentless focus on implementation are now urgently needed. The NHS Confederation and our members stand ready to play our part.”

Matthew Taylor, Chief Executive, NHS Confederation



Core priorities

To support healthcare leaders to deliver this vision at the necessary pace and scale, our members believe **four core, interrelated enablers** must be in place:

1. Investment in workforce

Workforce capacity is central to the functioning of our entire health and social care system. However, there are currently significant gaps in our medical, nursing and social care workforce. The impact of a prolonged period of underinvestment is apparent in the form of widespread industrial action, vacancies at unsustainable levels and, despite some progress, there remains an overreliance on agency staff. The pandemic and ongoing pressure has further exacerbated staff shortages, with soaring absence rates and reports of staff leaving the HSC early due to burnout and low pay being cause for serious concern.⁶

While the latest workforce statistics show a consistent increase in the number of WTE staff across virtually all groupings since 2018, this rate of growth has been outmatched by the parallel increase in demand.⁷

Such staff shortages place undue pressure on existing staff and ultimately translate into increased waiting times and reduced quality and safety. Breaking this vicious cycle and securing a highly valued and supported workforce will be key in stabilising and shaping our services for the future. We must act to **ensure we have the optimum number of staff in place** to deliver both core services and to implement the variety of new strategies that will facilitate transformation. This will require **swift resolution of pay disputes** and investment in **long-term workforce planning**. This must be robustly backed up with adequate, recurrent funding, according to the renewed action plan of the Health and Social Care Workforce Strategy 2026.⁸ In addition, we must work with partners to keep pace with emerging thinking and innovation, modernising our workforce with new roles and new ways of working.⁹

Finally, there is a pressing need to care for our workforce. We need cultural change to **ensure the HSC is seen as an attractive place to work**, wherein our workforce feel valued, supported, and empowered to lead in their own service areas. Evidence indicates that placing mental health and wellbeing at the forefront of our efforts will be particularly important as we seek to deliver and transform services – something we simply cannot do without our staff.¹⁰ Given the importance of this work, we note the appointment of a Chief People Officer in other nations, and believe the creation of such a role would be helpful in Northern Ireland.

“Having the right workforce is the single biggest challenge for our system – we have made good progress on planning, but we need sustained funding to ensure we can recruit and retain our workforce for the future.”

Jacqui Reid, Director of HR, Northern HSC Trust



2. Sustainable funding

As we approach the General Election this year, there is ongoing national debate, with many calling for a wholesale reinvestment in the NHS to match the founding vision of a service free at the point of need. This also the case locally. Current estimates indicate that the HSC could be facing a potential deficit **in excess of £500 million in 2023/24** when pay uplifts are accounted for and before any additional funding is applied.

HSC leaders require an uplifted and sustained funding package to support stabilisation, prioritise waiting lists, meet rising demand and meaningfully continue the transformation journey. A three-year budgeting cycle would greatly support effective planning and implementation.

Members therefore call for early agreement and prioritisation of the health and care budget, underpinned with pump priming investment to support a rapid approach to transformation. Funding must also be viewed as an investment. Carnall Farrar's report shows that for every £1 spent there is a return of £4 in our economy.¹¹

Politicians and the public must understand that **failure to provide sustained funding**, to meet the recognised level of need within Northern Ireland **will limit progress** in key areas, such **waiting list management** and **wider transformation efforts**. The full delivery of crucial strategies such as the Cancer Recovery Plan and Mental Health Strategy will also be at risk.

Members believe that our priorities – including building workforce capacity, investing in prevention and service redesign – represent significant opportunities to ensure that funding offers the best value for money. Working collectively and using best evidence, we must ensure that future investment is used to drive efficiency and deliver improved population health outcomes.

“The funding package agreed will shape what we can realistically deliver. We need honest conversations and must ensure that we are employing all the money we have as effectively as possible.”

**Maureen Edwards, Director of Finance,
Belfast HSC Trust**



3. Redesigning services – accessing value

As has been highlighted by many reviews, the current design of our services is no longer fit for purpose; it neither offers citizens the best outcomes nor the best value for money. An honest, two-way conversation must be brokered with the public to deliberate on the changes that must take place across our health and care system. We invite politicians and the public to consider evidence-based research and international best practice setting out the benefits that service redesign can bring about for our population.

We call for a wider dialogue on this service design, which members believe will support staff to deliver the best outcomes possible, for the best value. New Decade, New Approach committed to holding a Citizens' Assembly on an annual basis as part of a wider programme of civic engagement.¹² Given the significance of the health and care system in our wider society, members call on elected representatives to commission a Citizens' Assembly or similarly robust public engagement process on this vital topic to support the process of making best use of our workforce and estates.

“During the pandemic, we saw how the system can change very quickly and effectively – we must build on this learning to redesign many of our services to secure the best value and outcomes for our communities.”

**Neil Guckian, Chief Executive,
Western HSC Trust**



4. Collaborative and empowered leaders

Change happens in large systems when leaders and at every level of our organisations are empowered and supported to lead that change. While we have made some progress by investing in collective and clinical leadership programmes, we need to step up this approach to create a much more enabling culture.¹³

This will involve working more effectively with communities, partners, and our staff, tapping into local knowledge and existing relationships to develop collective solutions. We call on the public, politicians, and partners to engage with new integrated care partnerships which provide a framework for more collaborative ways of working that can support better outcomes.

“In the HSC, as in the NHS, we know that collaborative ways of working are delivering more. We need to embrace these new ways of working by developing both systemwide and local solutions.”

**Dr Maria O’Kane, Chief Executive,
Southern HSC Trust**



Supporting priorities

1. Stabilisation and transformation

As ministers return, we must prioritise the unacceptable waiting times, while seizing opportunities for transformation to more sustainable ways of working. Members agree the need to progress the 2021 Elective Care Framework, which proposed a £707.5 million investment over five years to close the stark gap between capacity and demand driving our waiting times.¹⁴ To progress this, we welcome investment in specialist elective care, in primary care, and further development of the suite of transformation initiatives, with a particular focus on improving access to care outside of acute settings.

Members also support consideration of a regional approach to tackling waiting lists via a series of pilot projects, which would ensure a focus on equity of access. Such a project should be data driven and entail greater communication with patients and carers.

“We have a real opportunity to redesign how we deliver elective care, in a way which protects the need to improve waiting lists, be more efficient, prevent harm and lead to better outcomes. The Regional Day Procedure Centre in Lagan Valley is a real example of success and should be further developed; dedicated centres such as this will improve access to treatment for all our population.”

Roisin Coulter, Chief Executive, South Eastern HSC Trust



2. Population health approach:

Investing in prevention and addressing inequalities

Evidence shows that fairer societies deliver better citizen health and wellbeing.¹⁵ However, one in four children in Northern Ireland are living in poverty¹⁶ and those living in the most deprived areas live in “good health” for up to 15 fewer years less than those in wealthier areas.¹⁶ Members therefore welcome the new Integrated Care System (ICS) planning model, which will be rolled out in shadow form this year. We must harness this model, in which the HSC will work with local partners to plan and deliver health and social care services based on local population needs, to

provide more integrated and continuous care, create a greater focus on prevention and early intervention and address the unacceptable inequalities which drive poor **health outcomes**. **We must now also change our commissioning processes to support this aspiration, getting closer to communities.**

New ministers must also agree a Programme for Government which embraces this approach by investing in housing and education, addressing economic inactivity and other social determinants of health.

“The pandemic and cost-of-living crisis have shown in sharp relief the impact of poverty and deprivation. We call for a whole of government approach to address these issues systemically and support the new integrated care planning model to ensure that prevention and population health are at the heart of the HSC.”

**Aidan Dawson, Chief Executive,
Public Health Agency**



3. Mental health

Members welcome the political commitment to addressing mental health in Northern Ireland in New Decade, New Approach, agreeing that this supports a more preventative approach. Colleagues welcome the move to a regional mental health service, which will provide a more focused and consistent approach across Northern Ireland, and the agreement of the new Mental Health Strategy 2021-31.¹⁸ In particular, adopting a multi-agency, early intervention and prevention-based approach will be key. Members call for the 10-year strategy to be adequately funded, noting that poor mental health costs NI an estimated £3.4 billion annually.¹

“We are delighted that Mental Health is receiving a much greater profile, in parity with physical health. We have engaged with many stakeholder groups to co-design our far-reaching Mental Health Strategy. We must now ensure this is appropriately funded to deliver for our citizens”.

**Petra Corr, Director of Mental Health,
Northern HSC Trust**



4. Social care

Social care is an integral element of how societies secure the health and wellbeing of citizens, but for too long, it has been treated as a ‘Cinderella service’, resulting in a poorer quality of life and additional hospital pressures. We have an opportunity to reprioritise the social care agenda, learning from others about how we engage communities in the mission to care for vulnerable people in our society. The Department of Health has engaged extensively with stakeholders through work on the Reform of Adult Social Care to develop an ambitious reform agenda for the next ten years that is aligned with international best practice.²⁰ We must work through the new Social Care Collaborative Forum to secure the urgent delivery of this long-awaited reform, underpinned with adequate funding and investment in this workforce to support a sustainable social care system. This is a challenging agenda, but it must be considered a core priority.

Similarly, following the Independent Review of Children’s Social Care Services by Professor Ray Jones in June 2023,²¹ the Children’s Social Care Services Strategic Reform Board has since been established to progress the reform programme in this area. Taking forward this crucial work and addressing the report’s recommendations will involve urgent prioritisation of workforce gaps, funding issues, and improving the design of services. Children’s social care services in Northern Ireland must be given the priority it deserves if we are to succeed in ensuring that all children have the best start in life and are equipped to achieve their full potential.

“If we are to enable all our citizens to live well and give every child the best start in life, we must invest in and value our social care workforce and ensure that sustainable funding is secured to facilitate this.”

**Patricia Higgins, Chief Executive,
NI Social Care Council**



5. Investment in technology

Significant progress has been made with the use of technology in the last decade and has been much accelerated over the last two years with the beginning of the rollout of encompass, Northern Ireland’s first electronic patient care record. There is, however, a long way to go to fully realise the potential of data and technology as an enabler.

There must be a sustained focus on implementation of our new suite of digital strategies published in the spring by Digital Health and Care NI: electronic healthcare record, cyber security, data and innovation. Staff must be provided with the training and time to engage with this work, and we must build much better relationships with our partners to accelerate and deliver innovation.

“Delivering an economically sustainable Health and Social Care service for the next generation requires breaking the linear relationship between rising demand for services and our capacity to meet that demand. While technology and data are only one part of the jigsaw puzzle, it is the one with the highest potential. Creating impact on the bottom-line through adoption of Digital is perhaps the biggest challenge and opportunity we face as leaders.”



Karen Bailey, Chief Executive, Business Services Organisation

6. Engaged patients, public and partners

The challenge ahead to recover and reshape our services is immense. To succeed in achieving the vision set out in Health and Wellbeing 2026, we will need energy, support, diversity of thought, as well as constructive challenge, to deliver the level of change necessary.

Building on the important co-production agenda and the HSC values, we need to strengthen and promote these open ways of working, facilitating local government input into new integrated care planning, patients and carers co-designing new pathways and more strategically engaging with and harnessing the expertise and support of the voluntary and community sector. In addition, we should explore further mechanisms to actively support families and communities to protect and enhance their own health. We welcome the opportunity to learn from effective citizen-led approaches to public health in other areas, such as Wigan.²²

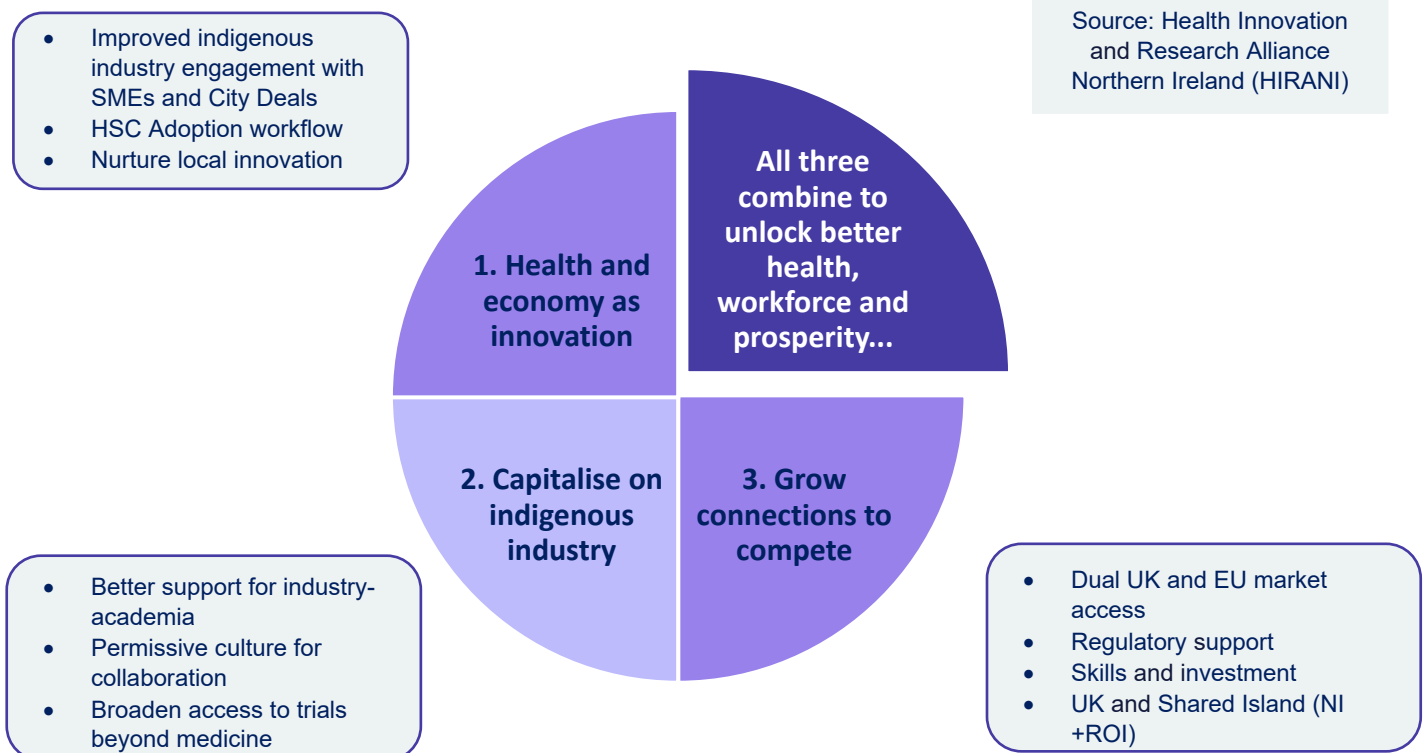
“In the Northern Trust, we have been prioritising engagement for several years now and have seen significant benefits in terms of harnessing greater energy and innovation – there are significantly more opportunities to progress this agenda.”

**Jennifer Welsh, Chief Executive,
Northern HSC Trust**



7. Innovation and economy

In the past, innovation and the economy have been perceived as bolt-on activities. However, recent evidence reiterates how investment in innovation and fostering our local economy, with HSC bodies acting as ‘anchor institutions’, can in fact act as a central pillar for recovery. The HSC must be supported to fully embrace this agenda, by working proactively with universities and partners in the health and life sciences sector and with communities to be a key partner in supporting Northern Ireland’s economy.



“Closer engagement between health and economy will be fundamental to deliver benefits for the citizens of Northern Ireland. It will deliver a Return on Investment for HSC and help improve patient outcomes, drive efficiency and working as a key player in local economies can help improve health and wellbeing in our communities.”

**Dr Janice Bailie, Assistant Director,
HSC R&D Division**



8. Meeting net zero carbon commitments

Climate change is the global issue of our time, which is set to negatively impact the physical and mental health and wellbeing of our citizens in a range of ways. During the COP26 summit in Glasgow, Minister of Health Robin Swann committed the HSC to a net zero carbon target, contributing to the global mission to tackle climate change.²³

The HSC must be supported to work more proactively, both internally and with our partners, to drive this agenda. To that end, the HSC should establish a small expert unit, or at a minimum, tap into the learning from the wider NHS, ensuring milestones can be met and that we offer strong, forward-thinking leadership on this agenda.

“The HSC must join citizens and colleagues across government to become a key player in moving towards a low carbon economy. We must develop clear policies and programmes and work with our staff and partners to deliver this change.”

**Michele Larmour, Chair,
Northern Ireland Ambulance Service**



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HSC Leadership Centre
12 Hampton Manor Drive
Belfast
BT7 3EN

02895 361765
www.nhsconfed.org
[@NHSC_NI](https://twitter.com/NHSC_NI)

If you require further information, please email
contact@niconfedhss.org

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