Devolution and place - a role for the NHS?

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NHS Confederation
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A tale of two ‘places’

RDAs scrapped and LEPs created

Localisation of finance and powers

City Deals, Local Growth Deals, Devo Deals

New regional collaborations

Local Authorities as key partners

Population health management

The place is where they (could) meet…
WHO is making decisions about WHAT with WHOM and HOW?
Why ‘place’ really matters?

- UK regional productivity often similar or worse than Poland, Hungary and Slovakia and former DDR
- Very weak levels of business investment in R&D; and concentrated in too few (EU dependent) sectors
- Interregional problem is **worst** in OECD with ‘decoupling, dislocating and disconnecting’
- Measured comparatively, 11 of the 21 poorest local economies in Northern Europe are in England (Eurostat)
- Most UK regions up to 4 times as dependent on EU markets than London / South East
The NHS matters to every local economy but every local economy is different…

Local partnerships can derive service improvement, additional resources and greater influence, but:

- where is our added value?
- how do we show this?
- what does good look like?
- how do we link up across a fragmented system?
NHS spending and jobs in the Black Country

- **Expenditure 2014/15** *(based on a review of local CCG and NHS Trust accounts)*
  - Annual spend of £2 billion on
    - Wages / other benefits: £1.1bn
    - Purchases: £0.9bn

- **Gross Value Added 2014/15** *(based on wages and reported surpluses)*
  - Direct economic impact: £1.1bn
    - 5.5% of Black Country GVA
  - Total impact (after multipliers): £1.5bn
    - 7.9% of Black Country GVA

- **Employment 2014/15** *(based on review of local CCG and NHS Trust accounts)*
  - Permanent employment: 29,000 jobs (24,200 full-time (FTE) equivalent jobs)
  - Plus Bank (4,400) and Agency staff (2,100) FTE
  - Total direct jobs funded by the NHS: 30,800 FTE
    - 6.3% of the Black Country workforce
  - Total impact (after multipliers): 40,800 FTE
    - 8.3% of the Black Country workforce
  - Informal care: 3.9m hours per week (c100,000 FTE)

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Weighing up the options locally

• Investing in mental health for productivity gains
• Better use of estates to generate local business rates
• Clinical/non-clinical research focused in the Industrial Strategy Grand Challenge areas
• Careers advice in schools that’s focused on entry points to health and care workforce
• Workplace wellbeing ‘owned’ by the big employers
• Health and Work Programme in action
• Lord Carter efficiencies v local supplier development
From alphabet soup to a local structure – underpinning population (health) management

‘better and better off’
Maximising the economic and social value of the Cheshire & Merseyside NHS £

Tuesday 19 June 2018

Everglades Park Hotel (Ambassador Suite), Derby Road, Widnes WA8 3UJ

<table>
<thead>
<tr>
<th>From 12.00pm</th>
<th>Lunch and registration</th>
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<tbody>
<tr>
<td><strong>1.00pm</strong></td>
<td>Welcome and introduction</td>
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<tr>
<td><strong>1.10pm</strong></td>
<td>Realising your place’s potential -- the national challenge</td>
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<td><strong>1.20pm</strong></td>
<td>The Health and Care Partnership for Cheshire and Merseyside -- what is it trying to achieve?</td>
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<tr>
<td><strong>1.40pm</strong></td>
<td>Delivering an economic growth strategy across a region</td>
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Mel Pickup, CEO Warrington and Halton Hospitals NHS Foundation Trust and STP lead
Michael Wood, Local Growth Advisor, NHS Confederation

Dave Sweeney, Executive Implementation Lead, Health and Care Partnership for Cheshire and Merseyside

Andy Rose, Sector Manager – Life Sciences and Health, Liverpool City Region LEP & Innovation Agency
Philip Cox, MD, Cheshire and Warrington LEP
Weighing up the options locally

Why economic growth?

- Founding ambition around devolution
- Population health management and the wider determinants of health
- Government policy and direction

Surrey Heartlands
Developing a Local Industrial Strategy

Skills
Transport
Infrastructure
Research
Economic Growth
Inclusive Growth
Final thoughts

• Local Growth agenda is about understanding how a ‘place’ can be its most productive & prosperous

• Economic success of place becoming directly linked to public service provision of place – with the levers of control local

• Needs of NHS and how we work not well understood outside sector – how can we be seen as investment rather than cost?

NO ONE ELSE IS GOING TO DO THIS FOR YOUR PLACE…

Michael Wood
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