

State of the provider sector 2020: survey findings

Key findings

- 1** Trust leaders are particularly concerned about the resilience and wellbeing of their staff after the first wave, with 99% either extremely or moderately concerned about the current level of burnout across the workforce.
- 2** 94% of trust leaders are extremely (56%) or moderately (38%) concerned about the impact of seasonal pressures over winter on their trust and local area.
- 3** 56% of trust leaders say that they are worried or very worried that plans and activities from the national NHS leadership (the Department of Health and Social Care and its arms-length bodies, including NHS England and NHS Improvement and its regional teams) are not effectively supporting the delivery of a sustainable service. Only 11% of trust leaders are confident in the activities from the national leadership and 31% are neither confident nor worried.
- 4** 83% of trust leaders are worried or very worried that sufficient investment is not being made in social care in their local area.
- 5** 68% of trust leaders say that the healthcare currently being provided in their local area is of a high or very high quality. 29% said services are an average quality and 3% said low or very low quality. Trust leaders expect the quality to fall over the next year but improve slightly in year two. However, they predict that the quality in two years will be lower than current levels.
- 6** 92% of trust leaders say that the pandemic accelerated better partnership working and collaboration in local systems.
- 7** In response to the uncertain external environment, trust leaders said the biggest risk is the 'perfect storm' of workforce shortages, staff burnout, second wave of coronavirus and a potentially difficult winter.

Introduction

In recent years we have conducted an annual survey of NHS hospital, mental health, community and ambulance trusts, which has become the authoritative voice on the challenges facing the sector. Each year, the survey looks at the past year's policy developments and provides commentary on the sector's contributions.

This year, the survey includes some tracker questions from previous annual surveys, as well as a distinct focus on the current environment and the preparedness of the provider sector to meet pressing challenges related to the coronavirus pandemic and recovery of services in the months ahead. The survey asked for members' views across a number of areas, such as COVID-19, Brexit, capacity to meet rising demand, winter pressures, quality of care, workforce priorities and system working.

The survey was open during August 2020 and was sent to all chairs and executive directors of trust boards.

This briefing sets out the results of the survey which reflects trusts' focus on learning from the first wave of the pandemic and doing all they can to restore services safely. However, the results also highlight a strong sense among trust leaders that we are entering an unpredictable time - at its very worst a 'perfect storm' consisting of a second wave of COVID-19, seasonal winter pressures, workforce burnout, staff shortages, an unstable social care system, and the ongoing threat of a no-deal Brexit looming.

Survey sample

- 199 executive directors responded to the survey. 53% of the respondents were chairs or chief executives, 12% were medical directors and 9% finance directors.
- The 199 responses came from 140 unique trusts, accounting for 65% of the provider sector.
- All regions and types of trust were represented in the responses.

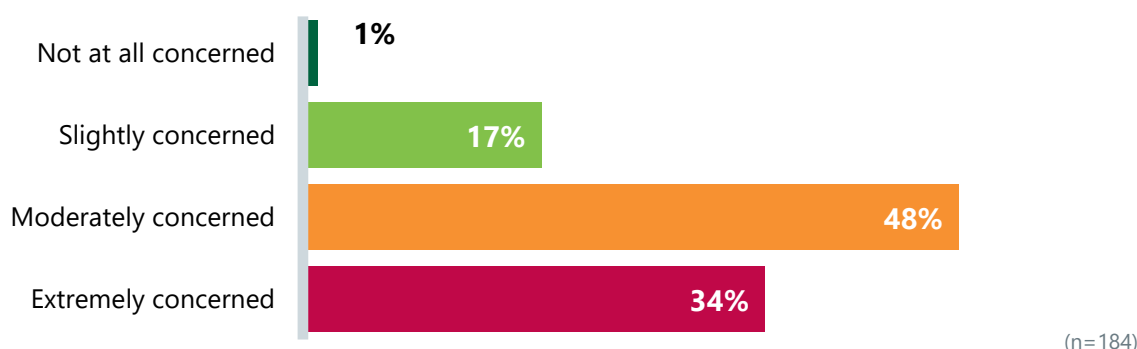
Trust type	Count	%
Acute specialist trust	19	10%
Acute trust	76	38%
Ambulance trust	8	4%
Combined acute and community trust	38	19%
combined mental health / learning disability and community trust	21	11%
community trust	18	9%
Mental health / learning disability trust	19	10%
Grand total	199	100%

Trust type	Count	%
East of England	17	9%
London	33	17%
Midlands	36	18%
North East and Yorkshire	33	17%
North West	24	12%
South East	33	17%
South West	23	12%
Grand Total	199	100%

Survey results

How concerned are you about the current level of burnout across your workforce?

- 34% of trust leaders are extremely concerned about the current level of burnout across the workforce, with 48% moderately concerned, 17% slightly concerned and 1% not at all concerned.
- There was little variation by trust type in terms of those who were extremely concerned. Community trusts had the highest number of those slightly concerned (41%).



Quotes:

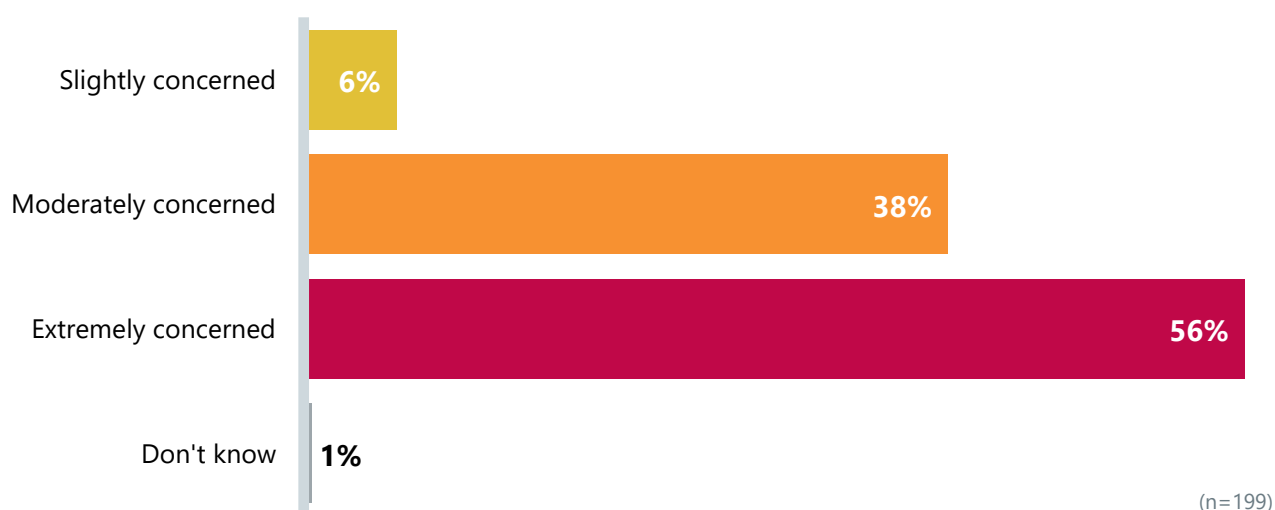
“Staff have been working in high stress circumstances for quite some time, long hours and not having leave. Despite wellbeing offers, this is a real concern” – director of nursing, mental health/ learning disability trust

“Some staff I talk to are energised, recommitted to their vocation and have been given a new lease of life by their recent experiences. Others are exhausted. It is hard to know what proportion are in each group.” – chief executive, acute trust

“Staff burnout is a very clear strategic risk for us - moving from a busy winter in 19/20, into pandemic, phase 3 recovery and back into a busier winter with the potential of extremely busy 20/21 with potential for further spikes and Brexit.” – chief executive, acute trust

How concerned are you about the impact of seasonal pressures over winter on your trust and local area?

- 94% of trust leaders are extremely (56%) or moderately (38%) concerned about the impact of seasonal pressures over winter on their trust and local area.
- Acute trusts (64%) and ambulance trusts (63%) were most likely to say they are extremely concerned about the impact of seasonal pressures over winter. This compares to 33% of combined mental health and learning disability and community trusts and 47% of mental health and learning disability trusts.
- When looking at combined scores of extreme and moderate levels of concern there was no significant variation by region.



Quotes:

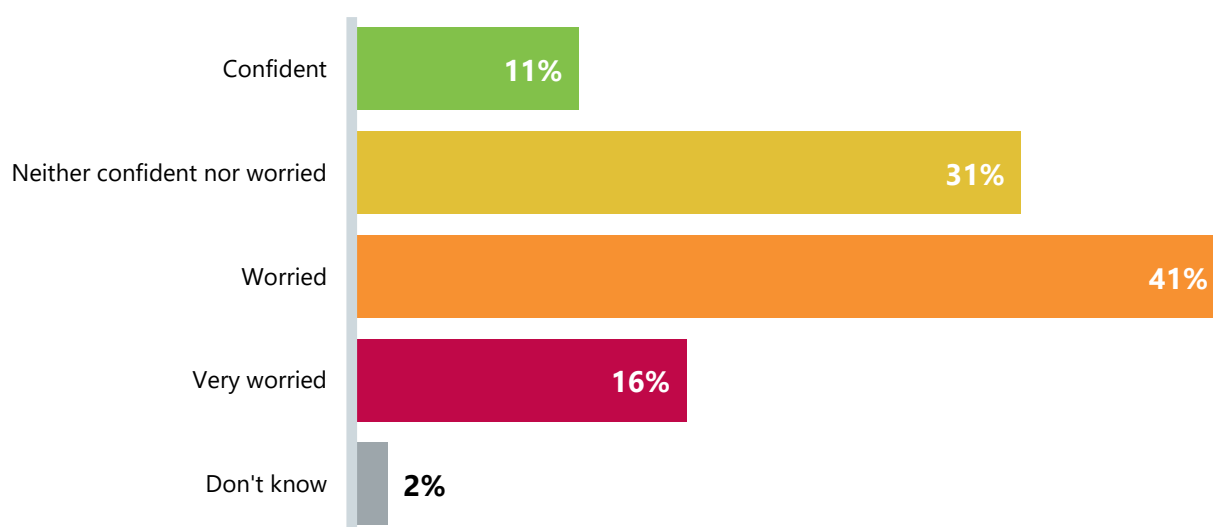
"We have a perfect storm on the horizon; depleted staff, depleted capacity, increasing workload." – chief executive, acute trust

"This year it is possible that we will be affected by a no-deal Brexit leading to severe difficulties, winter pressures and a further wave of Covid-19 at the same time. We are planning for that but there is a limit to what can really be achieved in the time and financial window." -chief executive, ambulance trust

"We are seeking to learn the lessons of the spring and ensure that we capture the best of that, learn any lessons in terms of who was not well served by these changes, build as best we can resilience in our voluntary sector partners, bring in other asset holders such as housing providers and work even more closely with employment advice services." – chair, mental health and learning disability trust

How confident are you that plans and activities from the national NHS leadership (the Department of Health and Social Care and its arms-length bodies, including NHS England and NHS Improvement and its regional teams) are effectively supporting the delivery of a sustainable service in your area?

- 56% of trust leaders say that they are worried or very worried that plans and activities from the national NHS leadership are not effectively supporting the delivery of a sustainable service. Only 11% of trust leaders are confident in the activities from the national leadership and 31% are neither confident nor worried.
- Combined acute and community trusts were most likely to be worried or very worried about the plans and activities from national NHS leadership with 71% selecting these options. 58% of acute trust leaders shared the same opinion, as do 50% of ambulance trusts and combined mental health, learning disability and community trusts. Acute specialist trusts were slightly more positive with 38% saying they are worried or very worried.
- There was also significant variation by region. Those in the East of England (75%), the North East and Yorkshire (70%) and the South East (64%) were most likely to be worried or very worried. This compares to 26% in the North West, 47% in London and 57% in the South West.



(n=179)

Quotes:

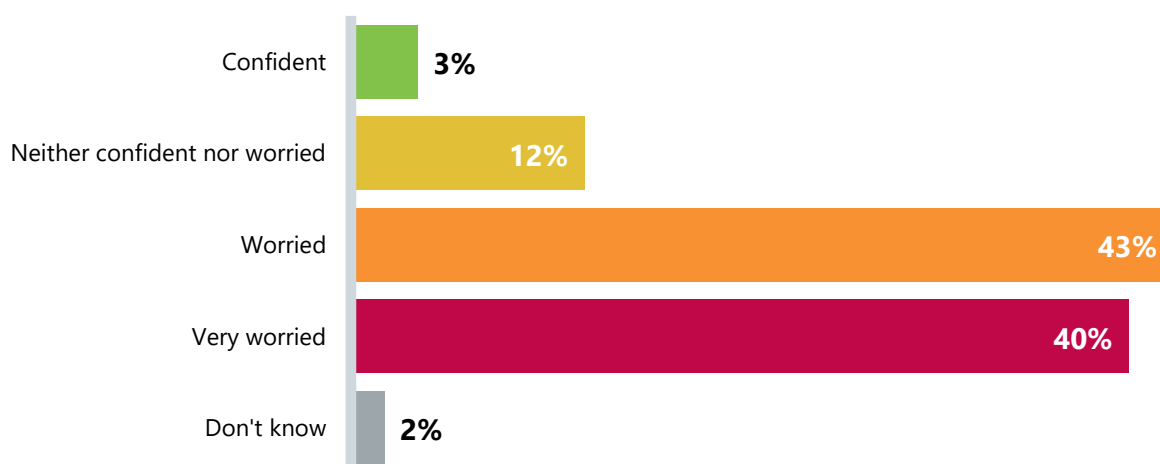
“As a community services provider I feel that the priority at national and regional level continues to be on acute services when strategy revolves around supporting more care at home but with little if any shift of resource or investment” – chief operating officer, community trust

“NHS England and NHS Improvement seem to be focused on the right things but the constant requests for short-turnaround returns is very frustrating.” – director of strategy, combined acute and community trust

“The centralisation of decision taking leads to delays and detachment from the frontline” – chair, combined acute and community trust

How confident are you that sufficient investment is being made in social care in your local area? (This could include direct investment by the trust, by the system and its partners)

- 83% of trust leaders are worried or very worried that insufficient investment is being made in social care in their local area.
- There was some variation by trust type. Similar to the trend for public health, 94% of respondents from mental health and learning disability trusts are worried about the investment being made in social care in their local area. Those from ambulance trusts were slightly less worried with 71% saying they were worried or very worried. Other trust types fell within this range.
- There was no significant variation by region.



(n=174)

Quotes:

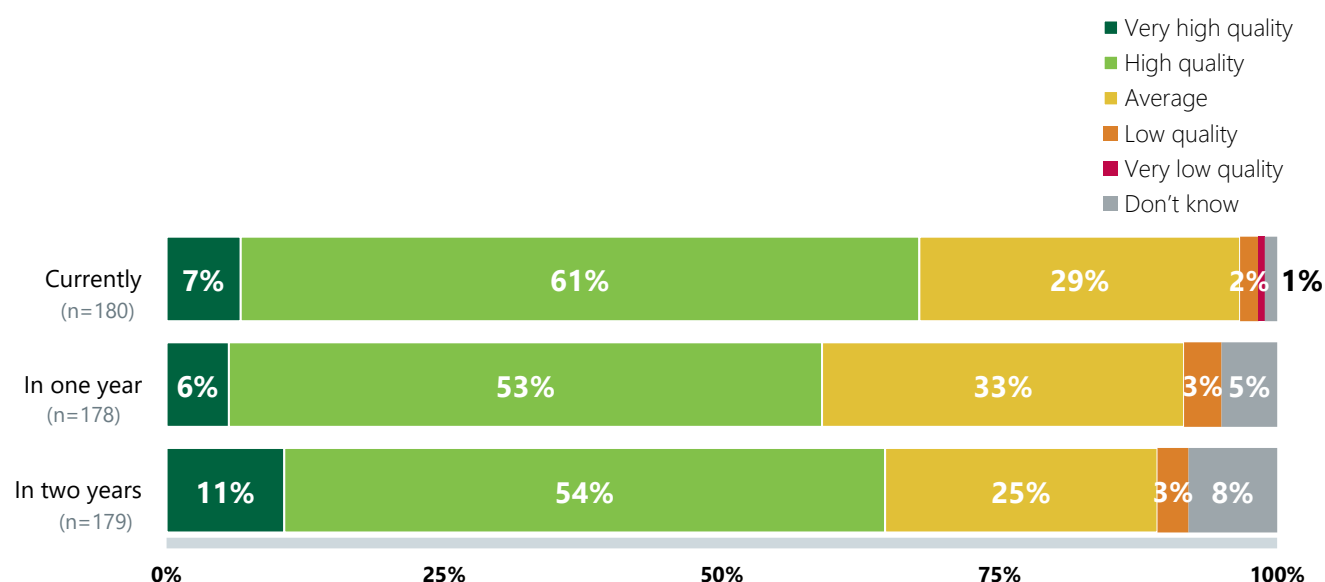
“The pandemic has highlighted that many of the traditional barriers to social care have been because of money. When that barrier was taken away temporarily, we were able to do so much more” - company secretary, acute trust

“Community services cannot function properly to facilitate discharge and avoid admission without social care support - they are willing but don't have enough money” – medical director, combined mental health / learning disability and community trust

“[There are] clear gaps in provision, especially for supported accommodation” – chief operating officer, mental health/ learning disability trust

How would you rate the quality of healthcare provided by your local area now and in the future?

- 68% of trust leaders say that the healthcare currently being provided in their local area is of a high or very high quality, 29% said average quality and 3% said low or very low quality.
- Trust leaders rated this over one and two years. Trust leaders expect the quality to fall over the next year but improve slightly in year two. However, they predict that the quality in two years will be lower than current levels.
- There was only small variation across trust type when it came to rating the quality of healthcare in their local area. Acute and mental health trusts were slightly more positive than combined trusts.



Quotes:

"Finance is uncertain. Recruitment will be affected by Brexit. There were some lengthy waiting times before covid-19 and some of these have substantially deteriorated." – chair, community trust

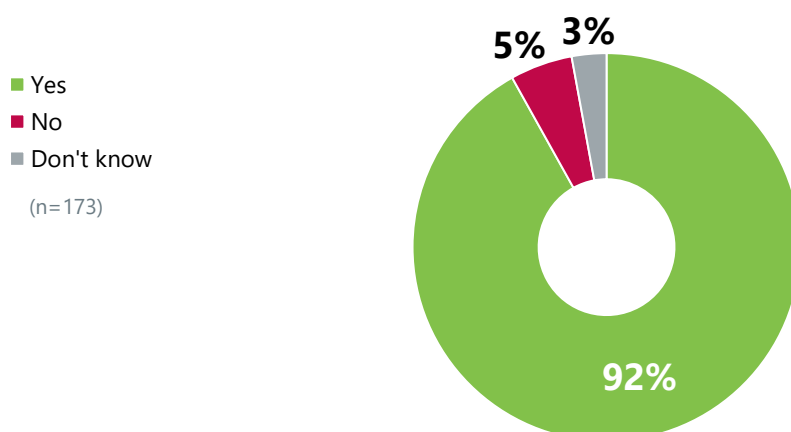
"A major challenge at the moment is restoring services and dealing with backlogs within the estates constraints that we face. If we avoid bad winter pressures and a major resurgence of COVID-19 the answer to the question is 'confident.'" - chair, community trust

"Our forecasting work is giving some big numbers and it's not just these 12 months but over a five-year period - this is a sustained increase in demand across all mental health services. So, this is not going to go away." – mental health/ learning disability trust

"We will need a different financial block settlement if we are to recruit enough staff to be confident" – chief executive, ambulance trust

Do you think that the pandemic has accelerated better partnership working/collaboration in local systems?

- 92% of trust leaders say that the pandemic accelerated better partnership working and collaboration in local systems.
- There was no significant variation by trust type or region.



Quotes

"Partnership working was broadly developing well at a system level, COVID has accelerated the need for teams to work collectively and has seen wider ownership of partnership and system working" – finance director, mental health/ learning disability trust

"Partnership working at integrated care system (ICS) level was already fairly good, but I am concerned about the expectations that NHS England and NHS Improvement seem to have of the ability of ICSs to lead in a really challenging environment. The present ambiguity about their roles in that they are attempting to promote system working but also to performance manage at place level is unhelpful."- medical director, combined acute and community trust

"Local place- level has seen accelerated collaboration but the progress at ICS level is limited." – chair, combined acute and community trust

"Some fantastic initiatives developed and implemented at pace. Blurring of organisational boundaries, a focus on a single aim by all partners, the 'easier' financial regime and more flexible governance by all statutory organisations have been important in this." – chair, acute trust

Conclusion

In response to the uncertain external environment, trust leaders said the biggest risk is the “perfect storm” of workforce shortages, staff burnout, a second wave of coronavirus and a difficult winter. This all needs to be considered within the context of a possible no deal Brexit, which could add further complications for the NHS in terms of supply chains and staff recruitment and retention.

Following the first wave of the pandemic, winter planning began earlier than ever and trusts across England feel they have done everything they possibly could do to plan and prepare for the coming months. However, with COVID infections and hospital admissions rising throughout September, many leaders are concerned about sustaining levels of planned care and addressing growing waiting lists.

All trust leaders recognise the contribution of their staff and are working tirelessly to support and help build resilience across the workforce. This is clearly a major concern, however, in an uncertain external environment and with further increases in demand for NHS services highly likely.