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Are you brave enough Mr Hunt? Are you brave enough Mr Burnham?

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I am very proud of living in the UK where there is a National Health Service (NHS) that is (more or less) free at the point of delivery. However, it is becoming widely acknowledged that the health service in England needs to change significantly if it is going to survive the next decade and beyond. The new chief executive of NHS England (Simon Stevens) has tried to tackle this head on and laid down the gauntlet for political parties ahead of next year's UK-wide general election. *Five Year Forward View* (FYFV) was published on 22 October (<http://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>). In this Mr Stevens sets out a vision for the NHS and outlines the changes that need to be made.

A key part of the vision is to have a strong emphasis on preventative measures to reduce the need for health-care. Long-term health conditions—many of which are preventable—now take up 70% of the health service budget. England is not alone in trying to address this area and it is not the first time an attempt has been made to do so. The Wanless report in 2002 warned that changes needed to be made if the health service was to survive financially.¹ Twelve years later many of the same issues are being raised and we have a situation where:

- One in five people in the UK smokes.
- A third of people drink too much alcohol.
- A third of men and half of women do not get enough exercise.
- Almost two-thirds of adults are overweight or obese.
- The number of obese children doubles during primary school (rising from 1 in 10 to 1 in 5).

At a recent seminar at London South Bank University Christine Hancock from *C3: Collaborating for Health* (<http://www.c3health.org/>) stated that to reduce the number of people suffering from preventable long-term illnesses (non-communicable diseases) all that is needed is for people to smoke less, exercise more and eat a healthier diet. I doubt any of us would disagree with this but changing behaviours is complicated. Research needs to be carried out to ascertain the most effective ways of changing behaviours. Health service staff will need retraining to carry out work with a different focus. Changing the emphasis of the health service to prevention requires a new mind-set and financial investment. Despite long-term financial benefits this may be difficult for a Government to achieve in an age of austerity. I wonder which of the political parties are brave enough to address this issue?

¹The Wanless report is available from: <http://si.easp.es/derechosciudadania/wp-content/uploads/2009/10/4.Informe-Wanless.pdf>

Another key change outlined by Mr Stevens relates to general practitioners (GPs) and local hospitals. On page 8 of FYFV it states:

A future that sees far more care delivered locally but with some services in specialist services.

There is clear evidence that centralised specialist services, such as cardiac surgery, have better outcomes for patients. Some changes have been made but implementing this fully often means closing local services and usually results in some political fallout. So again I wonder which political party is brave enough to do this.

Having more services locally has got to be a good thing. I am sure no one is going to complain if they can have simple tests and investigations (blood tests, ECGs, X-rays, etc) at their GP surgery or a local health centre. Reorganising primary healthcare to provide this requires funding and will be difficult at a time when GP services are approaching crisis point. The Nuffield Trust published a report in November entitled *Is General Practice in Crisis?* (<http://www.nuffieldtrust.org.uk/publications/general-practice-crisis>.) They conclude that there is not yet a crisis but one may be on the cards before too long. The key facts they outline are:

- Patient satisfaction with opening hours and appointment waits has been falling steadily for the past 3 years, suggesting access to GPs is getting worse.
- Not enough GPs are being trained, more trainees now work part-time, and more existing GPs plan to retire early. Numbers are not keeping up with hospital doctors.
- Funding for general practice has lagged behind that for hospitals despite political rhetoric about moving care into the community.
- General practice needs more money to improve its ability to coordinate patient care and to enable organisational development.
- There is a need for up to date data about how many consultations general practices do, and who is doing them—most current estimates are based on data from 2008.

Having worked in the health service or nurse education for over 30 years I have seen Governments come and go. I wonder whether the time has come to set up an Independent Authority to oversee the health service in England? Such an organisation would be able to make decisions without worrying about the results of the next general election. Instead it would be able to draw on research from organisations such as the Nuffield Trust and the Kings Fund to ensure decisions made are evidence based. So Mr Hunt, Mr Burnham are you brave enough to do this if your party is in power after next year's general election?

Competing interests None.