

10-Year Health Plan for England - Response from the Community Hospitals Association

December 2024

Introduction

The Community Hospitals Association (CHA) represents a network of over 500 community hospitals across the UK. Our mission is to champion the role of community hospitals within the wider health and care ecosystem, advocating for their critical role in providing accessible, high-quality, and patient-centred care.

Our Partner Organisations

We work in collaboration with national organisations, including the National Gold Standards Framework (GSF), NHS Benchmarking, the End-of-Life Coalition, the British Geriatrics Society, and CHART – Community Healthcare Alliance of Research Trusts.

Through partnerships with these organisations and our ongoing engagement with Q community initiatives, we contribute to innovative care models, best practices in end-of-life care, and the development of integrated, community-based solutions.

Our recent annual conference brought together stakeholders from across community hospitals UK-wide to explore the transformative role of community hospitals in addressing the current pressures on the NHS. Key findings from the Q study underscore the value of community hospitals in bridging care between primary, secondary, and social care, particularly in rural and underserved areas.

We welcome this opportunity to contribute to the development of the 10-Year Health Plan for England and to share insights that reflect the voice of community hospitals.

Q1: What does your organisation want to see included in the 10-Year Health Plan and why?

Investment in Community-Based Infrastructure

Community hospitals should be at the heart of the move toward localised care. They provide diagnostic services, minor treatments, rehabilitation, and palliative care closer to home. Enhanced funding is needed to modernise facilities and expand their capacity to meet increasing demand.

Integrated Care Models

The Plan must prioritise seamless integration between health and social care, with community hospitals playing a key role as hubs for multidisciplinary teams. Improved integration of IT systems will also be essential.

Workforce Development

Investment in training and retaining a workforce skilled in community and geriatric care is essential. Upskilling staff in frailty management, as demonstrated by the innovation and best practice awards hosted by the CHA, can significantly reduce hospital admissions and improve patient outcomes.

Sustainable Funding Models

Adequate, long-term funding mechanisms must be introduced to support the delivery of community-based care, ensuring that resources align with the increasing acuity of patients managed in these settings. Models of medical care in community hospitals should be explored and evaluated, with meaningful outcomes for patients included in analyses.

Data and Evaluation

Support for robust data collection and benchmarking, such as that provided by NHS Benchmarking, is essential to demonstrate the impact of community hospitals and to inform future planning. The CHA champions and recognises the profound need for higher graded research to be carried out within community hospital settings, with input from the communities they serve.

Q2: Challenges and enablers to moving more care from hospitals to communities

Challenges

- Lack of awareness of the key roles of community hospitals within NHS healthcare provision.
- **Funding Gaps:** Insufficient investment in infrastructure, equipment, and staffing hinders their ability to absorb additional services.
- **Workforce Shortages:** Recruitment and retention of staff with expertise in community-based care remain a challenge.
- **Fragmented Care Pathways:** Poor communication and collaboration between hospitals, GPs, and community services delay transitions and reduce care quality.

Enablers

- **Integrated Care Systems (ICS):** Empowering ICS to develop localised solutions that leverage the strengths of community hospitals.
- **Proven Models of Care:** Community hospitals already provide effective services such as step-up/step-down care.
- **Technology:** Investing in telehealth and mobile diagnostic units can enhance the reach and efficiency of community-based care.

Q3: Challenges and enablers to making better use of technology in health and care

Challenges

- **Digital Inequality:** Patients in rural and underserved areas often lack access to reliable internet or digital devices.

- **Interoperability Issues:** Many community hospitals struggle with systems that do not communicate effectively with primary or secondary care IT systems.

Enablers

- **Standardised IT Systems:** Implementing interoperable systems that facilitate seamless data sharing across care settings.
 - **Telemedicine Expansion:** Providing resources and training for teleconsultations, enabling greater reach into rural communities.
 - **AI and Automation:** Leveraging AI for early diagnostics and care planning, particularly in imaging and pathology, to reduce pressure on overstretched hospital services.
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Q4: Challenges and enablers to spotting illnesses earlier and tackling causes of ill health

Challenges

- **Lack of Preventive Focus:** Current funding and performance metrics prioritise acute care over prevention.
- **Health Inequalities:** Disparities persist, especially in rural and coastal areas.

Enablers

- **Community-Based Screening Programs:** Community hospitals are ideally placed to host preventive health initiatives such as cancer screenings, chronic disease management, and frailty assessments.
 - **Public Health Campaigns:** Localised education campaigns can raise awareness and encourage participation in preventive care.
 - **Collaboration:** Partnering with organisations like GSF and the End-of-Life Coalition to deliver holistic, proactive care.
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Q5: Specific Policy Ideas for Change

Quick to Do (1 year):

- Pilot community diagnostic hubs within community hospitals to deliver tests and scans closer to patients.
- Develop national guidelines for integrated discharge planning involving community hospitals.

Mid-Term (2–5 years):

- Expand workforce training programs in community-based frailty and palliative care.
- Establish dedicated funding streams for community hospitals to support rehabilitation, step-up/step-down care, and end-of-life care.

Long-Term (5+ years):

- Fully integrate community hospitals within ICS frameworks, ensuring they are pivotal in local health strategies.
- Embed technology solutions, including telehealth and AI, within community hospital settings to future-proof care delivery.

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