

## **MiP National Committee: statement on NHS 10 Year Health Plan for England**

The NHS 10 Year Health Plan is ambitious - and rightly so. The NHS must change if it's to meet public expectations and improve patient care. But ambition alone is not enough. Patients want change and they want to see their government deliver it.

Managers want change too. We want to see a modern health service equipped to solve the challenges of today, not one stuck dealing with the problems of the past. We want waiting lists to come down, access to services to improve, and care to be delivered safely. We want to work with government to improve the NHS for patients and for staff.

While the Plan has good ideas, much of what is set out in it is not new. The ambitions it outlines closely mirror those already developed in the 42 Integrated Care Strategies and Joint Forward Plans that managers have spent the past two years developing in much more detail than the 10 Year Health Plan and beginning to deliver. The NHS should be getting on with this work, not dealing with another top-down reorganisation.

Real transformation demands a motivated, empowered workforce. Right now, many feel they're being treated as disposable.

The Plan lands in a system where morale is already on the floor. Years of chronic pressure, political volatility, and lack of recognition have left many NHS staff, including managers, exhausted and disengaged. Simply asking the same people to do more with less, again, is not a strategy. It's a recipe for attrition.

And it's not just about poor morale. Managers know how disruptive organisational change in the NHS can be. It's costly, time-consuming, and distracts from the number one priority: patient care.

The 10 Year Health Plan was a perfect opportunity to work in genuine partnership with staff and their trade unions but that opportunity has, so far, been squandered. Engagement with unions throughout the process has been minimal. Our members expected more, especially from a government that promised to enhance partnership working in the NHS.

Instead, many managers found out about major organisational changes from the media, not from their employers. This approach is not just disrespectful; it actively undermines trust and risks pushing more skilled professionals out of the NHS for good.

While the Plan talks about transformation, many of the people needed to deliver it are already being pushed out through these short-sighted cuts and chaotic restructuring. The MiP National Committee believes that the government's decision to start cutting the NHS's slim managerial capacity, even before publishing the Plan, has already undermined its chance of success.

The Plan recognises that good management and leadership are essential if the NHS is to thrive, committing to accelerate delivery of Sir Gordon Messenger's recommendations, expand the NHS Graduate Management Trainee Scheme, and give leaders more autonomy over local decision-making. These are positives, but they will do little to soften the blow for the thousands

of managers whose jobs are already under threat. As they leave, so too do the tacit knowledge and trusting relationships needed to lead such vital change in the NHS.

One hand wants to develop managers, upskill them, and give them the tools they need to manage well. The other is pressing ahead with the most significant cuts to NHS management since the Lansley reforms over a decade ago. This contradiction leaves MiP members with little reason to feel optimistic about the Plan.

Time is not on our side. Transformation of this scale takes sustained effort, stable infrastructure, and long-term investment in people, yet the current climate of churn and cuts makes it increasingly hard to believe the Plan's goals can be achieved within a decade, let alone start showing results within this Parliament. Without urgent clarity on delivery milestones, implementation support, and accountability, the Plan risks becoming a list of admirable intentions, not unlike an Argos catalogue wish list, rather than a vehicle for real change.

We need clarity, commitment, and credible timelines.

“The process you use to get to the future is the future you get.” (Myron Rogers). If the government continues to act in a top-down, hierarchical, and remote way - disregarding the views of NHS staff and those who lead them - it will get a system to match. Rigid, demoralised, and cut off from the reality of frontline care.

If ministers want the 10 Year Health Plan to succeed, they must first ask themselves this: is dismantling NHS management now worth the risk of making future reform undeliverable? Because while the government may want to reset Lansley's legacy, it risks repeating the worst of it.