

The role of the independent sector in integrated care system (ICS) planning post Covid-19

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Please note: the information contained in this legal update is correct as of the original date of publication.

The NHS Long-Term Plan created an ambition that every part of the country should be an integrated care system (ICS) by 2021. An ICS is a type of even closer collaboration where NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.

In recent times we have seen moves towards engaging the independent sector in local health system planning, most notably in mental health where Provider Collaboratives have been created. This was however driven to a large degree by approximately 25% of NHS mental health beds being provided by the independent sector.

The current Covid-19 pandemic fundamentally changed the relationship between the NHS and the independent sector. On 21 March 2020 the government announced the unprecedented step of contractually block booking around 8,000 beds, 1,200 ventilators and over 18,000 clinical staff from the majority of England's private hospital providers. The contract has already been extended beyond the end of June and it is reported that NHSE is in discussions with private providers to agree a long-term deal to treat more NHS patients privately to tackle the long waiting lists. Both NHSE and private providers have positively reported on the new closer working relationship.

NHS England's national cancer director, Dame Cally Palmer, wrote to hospital chiefs on 8 June stating that *"to support appropriate clinical decision-making, the focus for operational management should be on reducing the number of patients waiting more than 62 days"*. She said that local areas must have *"dedicated diagnostic and surgical capacity for people referred with suspected cancer to enable a return to pre-pandemic levels of activity, including by maximising use of independent sector capacity."*

We know that there is renewed impetus to create ICS' with NHS hospitals looking to build on the high levels of collaboration brought about by the pandemic. Hospitals are also looking to develop Covid-19 free hubs and rapid diagnostic centres that are separate from the main hospitals. We are also aware that there is an increasing mental health crisis as the effects of both the pandemic and the associated economic downturn effect people. Part of the solution is surely to maximise the use of the independent sector, both acute and mental health, and bring them to the table early when planning an ICS.

Contact

Clare Auty

Partner

clare.auty@brownejacobson.com

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