DH’s consultation on the Government’s mandate to NHS England to 2020

NHSPN response

NHS Partners Network
The NHS Partners Network (NHSPN) is the trade association representing a wide range of independent sector providers of NHS services, ranging through acute, diagnostic, homecare, primary and community care and NHS dentistry. Our members are drawn from both the ‘for profit’ and ‘not for profit’ sectors and all are absolutely committed to working in partnership with the NHS and to the values set out in the NHS Constitution.

Summary
We welcome the Government’s early engagement on how it proposes to set the mandate to NHS England for this Parliament. The Government’s priorities are key to ensuring that we continue to achieve excellent outcomes for NHS patients and the fact that this is a four year mandate makes the need for strong and clear signals even more important.

We welcome the Government’s commitment to investment in the NHS and to real terms increases in NHS funding in England. Even with these safeguards, the reality of the current financial position of the NHS is highly concerning and without radical reform we are concerned over the stability of the service being offered to patients.

The independent sector has been a longstanding part of the NHS’s offer to patients. It is important to highlight how important the contributions of the independent sector are to delivering the Government’s objectives.

- The independent sector has been key to reducing waiting times. Some specialties would face long waits without the help of the sector. In the face of increasing demand it is paramount that the Government continues to support this provision and is clear that the NHS must make use of all available capacity to reverse signs of deteriorating wait time performance;
- Our members have excellent examples of innovation leading to efficiency savings and they would like to spread these to more services in the NHS and identify levers for challenging failing provision;
- NHSPN members can access much needed capital from existing corporate balance sheets but need strong commitment to the use of the sector in a fairer and more secure market. A mandate with a long-term duration can help provide more stability;
- The independent sector has excellent expertise in improving access to out of hospital services.
Capacity

NHSPN believes it is necessary to extend and normalise independent sector support to the delivery of waiting list targets and that the mandate represents a good opportunity to make clear to NHS patients that capacity utilisation is a real priority for the Department. NHS England data on waiting times for Q1 2015/16 for one area, diagnostics, shows an increase in patients that waited over 13 weeks, up to 4,765 from 2,774 in the same quarter in 2014/15. The number of patients waiting between 6-13 weeks also grew, with endoscopy and imaging procedures seeing the largest increases.

A recent poll commissioned by NHSPN showed that almost three quarters of adults would choose to receive care at a private hospital delivering NHS care if waiting times at local hospitals exceed 18 weeks and that the NHS should make better use of independent sector provision over winter to help with wait times. A total available capacity of 125,156 surgical procedures and diagnostic tests were made available by NHSPN members over winter 2014/15. A total of 45 different IS providers’ services were used by publicly-owned NHS providers for the treatment of patients over the course of the four month programme with 26,681 patients transferred. This was significantly less than the amount of capacity offered by the sector suggesting that more work is needed to ensure that patients from all parts of the country can be seen as quickly as local capacity permits.

In 2015 the independent sector has continued to engage with this process and has made available an extra 55,000 surgical procedures, nearly 200,000 diagnostic tests and around 35,000 endoscopy procedures between September and December 2015.

We feel our work supporting the Operational Resilience programme cannot deliver the expected outcomes unless it is supported by a strong strategy promoting patient choice. It is important to remember that patient choice is a right enshrined in the NHS Constitution, is a commitment in the Five Year Forward View and was a core part of the Conservative Party’s manifesto. Yet the latest report of NHS England and Monitor’s outpatient appointment referral found that 60% of interviewees had not been offered choice. Even more worrying, the percentage of patients aware of having a choice has gone down from 51% in 2014 to 47% in 2015.

More broadly, we also note NHS England figures that show how the independent sector is contributing to lower waiting times.

Innovation and efficiency

Responding to demand as it currently stands is not the only answer to the problems faced by the NHS. Our sector has clear examples of how to prevent admissions and enable

---


patients to leave hospital which could be accessed by the NHS. In addition to alleviating pressure, there is real and deliverable innovation being developed in the sector to allow frail elderly people to stay in or return to their homes. Examples of efficiency in the sector include strong partnerships and integration between health and social care, which is a must for the future. Technology and workforce are other areas where the independent sector could provide innovative models with proven efficiencies.

All of these examples, along with many more set out in *15 Years of Concordat: Reflection and Renewal*, illustrate the flexible and innovative nature of services being provided by independent sector providers but it is now vital that these are allowed to become mainstream ‘at pace’ to drive real and significant change in the NHS.

We believe that NHS England has an opportunity through its ‘vanguard’ programme to encourage vanguards and others to work in partnership with independent sector providers to brand and mobilise their excellence to enable their services to become mainstream. For too long the NHS has failed to take examples of excellence and offer those up to new areas. By asking vanguards to partner with the independent sector it brings capital, mobilisation expertise and logistical know-how to local services and gives them a chance to operate in more localities.

Such partnerships could also be utilised for important turnaround projects where poor provider performance has become entrenched. This moves the NHS beyond securing expensive Consultancy advice which the leadership team may not be able to execute and brings in long-term partners to help secure improvements.

**Access to out of hospital services**

Independent sector providers have historically been able to demonstrate significant flexibility with services adapting to local conditions whilst often benefiting from significant economies of scale through group structures.

One particularly good example is GP services out of hours services, which should be done at a larger scale than at practice level. NHS 111 offers a unique opportunity for patients to be directed appropriately to these services. Its efficient procurement is paramount to the delivery of out of hours services. The Directory of Services in 111 is considered by members to be an under exploited tool by commissioners in dynamically directing patients to the accessible service of lowest appropriate acuity (and cost) and more could be done by commissioners in tandem with providers to develop and enhance the utilisation of this resource.

NHSPN also believes that patients should be at the heart of decisions we make about how to offer services. It is widely understood that patients still attend A&E for urgent appointments. Some examples of good practice move towards answering this demand right where it is needed, with many of our members delivering contracts that offer urgent

---

care services based in hospitals and alleviate pressure on A&E. Where this is working, it would be important to consider this provision as part of any 7 day working arrangements.

Conclusion

Overall, we feel the priorities set out in this consultation are right. The independent sector has the capacity and willingness to help the NHS to achieve these objectives. Specifically, our members could help to reduce pressures on elective care, increase capital investment, drive improvements in efficiency and productivity and transform out of hospital care through sensible risk-sharing arrangements. We believe the mandate is a good place to demonstrate commitment to the work of the independent sector which, in turn, will result in more trust and investment. Therefore, we would welcome:

- A strong commitment to ensuring that all available capacity across a locality is being properly utilised and that patient choice remains a major strategic priority;
- An expectation that New Models of Care will require strong partnership working and be comprised of a variety of providers including the independent sector;
- A long-term mandate involving a multi-year tariff and longer term contracts to enhance market stability.

23 November 2015

Patricia Suarez, Policy Manager, NHSPN

patricia.suarez@nhsconfed.org 0207 799 6666