

Joint statement on the second reading of the health and care bill

NHS Confederation, NHS Providers and the Local Government Association

In advance of the health and care bill's second reading, this statement sets out the views shared by the NHS Confederation, NHS Providers and the Local Government Association – the organisations that represent the health sector and local government in Englandⁱ – on the proposed reforms.

Broadly, we believe that the direction of travel set by the bill is the right one. There is a clear consensus among leaders in health and local government that the only way to address our health and wellbeing challenges and to reduce health inequalities is to work in partnership at local levels. Many of the measures outlined in the bill are focused on improving the integration of services – both between NHS organisations and between the NHS and social care – and this will help to ensure that the legislative framework facilitates collaboration.

We support the government's intention for legislation that is enabling and which gives local systems the flexibility to develop their own arrangements for joining up services and set their own strategies for improving population health. Within this, we particularly support the vision underpinning the bill of place-based leadership, which will be fundamental to the success of ICSs.

As national membership bodies of the NHS and local government, we stand ready to work with the government to co-produce regulations and guidance and ensure the positive intentions of the bill are realised. We do, however, have some shared areas of concern and we would urge the government to work with us to address these as the legislation progresses through parliament.

1. **Significantly increased powers for the Secretary of State**

The bill introduces new powers of direction for the Secretary of State relating to the running of the NHS and decisions on local services currently taken locally by health and care organisations. Notably, for instance, the bill allows the Secretary of State to intervene at any stage in decisions on local service reconfigurations, which could undermine the ability of integrated care systems (ICSs) to meet their statutory responsibilities to ensure that services are safe and that financial targets are met. It may also undermine local accountability mechanisms, including the role of local health overview and scrutiny committees in these matters.

It is important to preserve the operational and clinical independence of the NHS so any new powers of direction for ministers do not impinge on issues such as procurement, treatment, drug funding and the hiring and firing of frontline NHS leaders. There is no suggestion here that a publicly funded service like the NHS should not be held to account. Rather, that the strategic direction is the domain of politicians, who should then allow NHS leaders in operational and clinical roles - with day-to-day responsibility for supporting patient care - the space to deliver those strategic objectives without undue political pressure or interference.

2. **Maintaining clear lines of accountability**

Our organisations fully support the vision of collaborative working in local places and systems, which underpins this bill. However, we will be seeking further clarity as to how the new ‘pieces’ of the health and care jigsaw fit together to maintain clear lines of accountability for public expenditure and care quality to the public, to national stakeholders, and to parliament.

3. **A greater focus on the health and care workforce**

The NHS and the adult social care sector each went into the COVID-19 pandemic with over 100,000 vacancies across England and there are widespread concerns about the impact that the pandemic will have on staff numbers. The bill includes little to acknowledge or address this, with only a duty on the Secretary of State to set out how workforce planning responsibilities are to be discharged once every five years. We believe that this alone is insufficient and that more comprehensive workforce planning – for both the health and care sectors – is needed. Crucially, this must be backed by sufficient funding.

4. **Social care**

We welcome the commitment made by the new Health Secretary Sajid Javid at the Local Government Association’s annual conference that proposals will be brought forward on adult social care reforms. Many of the challenges faced across the health and care system in England simply cannot be addressed without a long-term funding settlement for these services.

Each of our organisations will be monitoring and analysing the bill as it progresses through Parliament. We look forward to working together, and with the Government and parliamentarians, to address the above issues and ensure that these reforms best support the health and care system and the individuals it cares for.

ⁱ And Wales in the case of Local Government Association