



Tell NHS England/Improvement what they can do with their new NHS legislation!

The big quango that runs the NHS in England is 'consulting' NHS staff and the public on proposed new NHS legislation that will give more control to USA profit seeking companies.

The deadline for responses is midnight on 8th January. This leaflet will make it easy for you to help.

There are four proposals which they misleadingly claim will improve "collaboration" and "accountability".

We STRONGLY DISAGREE with them all.

Proposal 1. "Giving Integrated Care Systems a statutory footing from 2022, alongside other legislative proposals, provides the right foundation for the NHS over the next decade."

STRONGLY DISAGREE - By fragmenting the NHS in England into 42 regional units, Integrated Care Systems would end the national risk pooling that is the basis of the efficiency and effectiveness of the NHS as a comprehensive, universal service.

Integrated Care Systems impose cost-cutting American models of healthcare on our NHS, intensifying pressures to make our NHS operate as a business not a public service. They restrict access to treatment on the basis of actuarial considerations, using decision making methods imported from the USA's Medicare system. (Medicare uses health insurance companies' methods to provide a very limited publicly-funded health service for people who are too poor or sick to get private health insurance.)

So far, Integrated Care Systems have no legal basis and require consent from all the NHS and local authority organisations that make up the networks. Under Option 2 (see below), Integrated Care Systems would become 'statutory corporate NHS bodies'.

NHS and social care services in all areas of England have until April 2021 to form themselves into an Integrated Care System. Most already have.

Proposal 2. "Option 2 (creating new statutory NHS bodies) offers a model that provides greater incentive for collaboration alongside clarity of accountability across systems, to Parliament and most importantly, to patients."

STRONGLY DISAGREE - Option 2 would legislate for "a statutory corporate NHS body model that additionally brings Clinical Commissioning Group statutory functions into the Integrated Care System".

Successive legislation over the past 40 years has made the NHS operate more and more like a business not a public service. Key to this has been its split into "commissioners" and "providers". Local Clinical Commissioning Groups decide what NHS services to pay for and which organisations to buy them from: these may be NHS organisations or private or third sector companies.



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<http://bit.ly/CK999ICResponse>

Proposal 2 (cont.) By abolishing Clinical Commissioning Groups and transferring their commissioning functions into a new statutory Integrated Care organisation, Option 2 would effectively hand control over what NHS services each Integrated Care System provides to a small number of mostly American 'health systems support' companies, that have already been instrumental in setting up the Integrated Care Systems.

This would divert a large part of the NHS funding stream into private profits.

It would also conclusively remodel the NHS along American health insurance company lines, completing the process that is already well advanced. The result would be the transformation of our NHS from a comprehensive, universal public service that's based on meeting people's medical needs (not on our ability to pay), into a state-funded business where access to health care is driven by actuarial considerations.

This so-called 'managed care', imported from the USA's Medicare system, is a way of cherry picking patients whose treatment offers the 'best value for money', and denying the rest of us access to treatment – or making it conditional on participation in "industrial scale" behaviour change schemes, largely run by social enterprises or private companies.

Claiming to be an "empowering" move away from the "dependency model" of healthcare, this is based on the false assumption that modern epidemics such as diabetes, cardiovascular disease and respiratory diseases are the result of poor individual lifestyle choices, rather than structural social and economic inequalities that make people ill through no fault of their own.

Proposal 3: "other than mandatory participation of NHS bodies and Local Authorities, [Integrated Care System] membership should be sufficiently permissive to allow systems to shape their own governance arrangements to best suit their populations needs"

Proposal 4: "subject to appropriate safeguards and where appropriate, that services currently commissioned by NHSE should be either transferred or delegated to ICS bodies"

STRONGLY DISAGREE - It's not in the public interest to dismantle the NHS into Integrated Care Systems; details of their governance and transfer of centralised commissioning functions are not worth thinking about.

We do not think contracts and their procurement should be the basis of providing NHS services. The whole Health and Social Care Act 2012 should be repealed, along with all other NHS marketising and privatising legislation and regulation. The primary legislation we need is an updated NHS Reinstatement Bill that includes putting medical innovation into public hands – to prevent the hijack of the NHS by life sciences, big pharma and digital technology companies.

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THANK YOU!



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