

**Department of Health
Protecting and promoting patients' interests – licensing providers of NHS services
A consultation on proposals**

Response from The Royal College of Radiologists (RCR)

The RCR welcomes the opportunity to comment on the above consultation, but has limited its response to applicable areas.

Question 1: Do you think NHS trusts should be exempt from the requirement to hold a licence, but expected to meet equivalent requirements to those in the general, pricing (where appropriate), choice and competition and integrated care sectors of Monitor's licence?

The RCR considers that exemption for NHS trusts from the requirement to hold a licence whilst being expected to meet Monitor's equivalent requirements as applicable and as set out above would seem reasonable in view of the bespoke performance management regime overseen by the NHS Trust Development Authority (NHSTDA) on behalf of the Secretary of State and supported by the Unsustainable Provider Regime for NHS Trusts.

Question 3: Do you agree that it is not appropriate to license small and micro providers of NHS funded services, at this stage, pending further review of costs and benefits?

Small and micro providers of NHS funded services may include, for instance, small companies providing ultrasound in the community. The RCR considers that such a service should be subject to regulation regardless of the number of employees or turnover of a company providing the service and would have serious concerns should these not be subject to appropriate licensing by Monitor. The RCR would consider that all small companies providing NHS funded services should be subject to regulation and so licensing.

Question 8: Do you agree that providers of primary medical services and primary dental services under contracts with the NHS Commissioning Board should initially be exempt from the requirement to hold a licence from Monitor?

Yes, the RCR agrees with the proposal in question 8 as it seems a reasonable initial approach.

Question 16: Do you think a 20% threshold would be suitable for the standard condition modification objection percentage?

The RCR agrees, as it seems a suitable position to adopt.

Question 23: Do you think the calculation of turnover for the purposes of the variable monetary penalty maximum should be based on turnover from provision of NHS funded services?

This seems a reasonable proposition.

Question 26: Do you have any evidence that the proposals in this document will impact adversely or unfairly on any protected groups?

In view of our response to Question 3, and our view that small companies providing NHS funded services should be subject to regulation, the issue of protected groups would be covered by Monitor's general and specific duties under Equalities legislation. Should the Department of Health not accept the view expressed in answer to Question 3, we would be concerned about the monitoring of unlicensed providers' approach to equalities issues.

The Royal College of Radiologists
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