

## Independent Reconfiguration Panel IRPinfo@dhsc.gov.uk

Sent via email to: The Rt Hon Wes Streeting MP Secretary of State for Health and Social Care

10 October 2024

Dear Secretary of State,

I am writing as Chair of the Independent Reconfiguration Panel (IRP) to request an introductory meeting with you to confirm our policy priorities together as a standing advisory committee to government for which you are accountable to Parliament.

For over 20 years, since the IRP was created by the Rt Hon Alan Milburn under the NHS Plan (2000), we have advised successive health ministers about a wide range of changes to NHS services, particularly those that are in dispute and have reached a standstill locally. Our members are a highly respected and diverse mix of senior NHS clinicians, NHS executive and non-executive leaders, and lay people with experience in representing the public and patient perspectives. Over the years our role has received the support of significant stakeholders such as NHS England, Royal Colleges, local government bodies and various policy institutes.

You will be aware that following the introduction of new powers earlier this year via the Health and Care Act 2022, you are able to intervene in the reconfiguration of NHS services by calling in any proposal for decision. To date there have been several 'call-in requests' made arising from local disputes about NHS proposals that have been escalated by stakeholders to you to decide upon as a legal entity and the final arbiter on NHS planning matters. Some of these NHS proposals are particularly controversial due to their cross-boundary impact on the patient populations of multiple NHS integrated care boards and local authority areas.

I have no doubt you share my concern when local disputes appear to have been ongoing for a significant time without resolution. Some NHS proposals may be at risk of further challenge and even judicial review action, delaying implementation and perhaps negatively impacting both NHS staff and patients. As I outlined to Lord Darzi in my recent submission to his independent investigation, it is therefore vital that the decision-making process for reconfiguration call-in requests is fair, open and impartial, avoids any risk of pre-determination or bias, and concludes without delay.

As I am sure you realise, each case needs to be considered on its own merits and the reasons for any decisions taken properly explained following clinical advice to maintain confidence in the system. This has always been a strength of the IRP's approach to supporting ministers as the subject matter experts on NHS reconfigurations. As a clinician myself, I highlight this because I know that the importance of clinical advice for ministers on NHS service change is something that the now Minister of State for Health (Karin Smyth MP) raised as a concern as a member of the Bill Committee when the reconfiguration call-in powers were originally being scrutinised by Commons members.



I would therefore like to reiterate our ongoing support as a source of independent expert advice to assist ministers with your decision making on any changes to NHS services. In line with the Department of Health and Social Care's statutory guidance, we are ready to provide both procedural advice to you on whether or not the use of the call-in power is appropriate for each case, and if you decide to call in an NHS reconfiguration, to conduct a full and impartial investigation. This includes gathering formal representations from the main parties on your behalf to fulfil your statutory duties and giving each of the complainants a fair and transparent hearing regarding the concerns raised with you.

The output from the IRP for ministers following a call-in direction is clear advice and recommendations about the substantive issues of the case, such as whether an NHS change process was conducted appropriately, or if an NHS reconfiguration is in the best interests of the local area, along with recommendations to address the issues raised and make progress. This will support you to make a final decision on whether the NHS proposal should proceed or not and under what circumstances or conditions.

The involvement of the IRP applies both rigour and impartiality to the process, providing you with the robust assurance you need to make progress and take effective and evidence-based decisions on these issues in a timely manner. In the history of the IRP, ministers have always agreed to accept the advice we have submitted on around 80 cases of NHS service change, which I am sure you will agree is an impressive track record and testament to the high quality of our work.

The IRP is fully supportive of the government's health mission to build an NHS fit for the future and our role as independent expert advisors to government is there to help you deliver change and to increase public confidence in the health system. I hope ministers will continue to draw on our insight and expertise to review any substantial changes to NHS services that may be required to develop new models of care and improve timely access to high quality healthcare that is there when people need it.

The IRP is also seeking to appoint new clinical and lay members requiring the approval of ministers and the Prime Minister's Office via the public appointments process. I hope to see this progress without delay to ensure that the IRP has the skills, knowledge and experience it needs to remain effective.

I would be grateful for the opportunity to discuss these matters further and contribute to your considerations on all of the call-in requests and the use of your call-in power. The IRP would also like to be engaged and give our support to the development of the new 10 year health plan.

I look forward to confirmation of a date for our meeting at your earliest convenience.

Yours sincerely,

**Professor Sir Norman Williams** 

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Chair of the Independent Reconfiguration Panel