Ellie Reeves Labour, Lewisham West and Penge

To ask the Secretary of State for Health and Social Care, what plans he has to (a) monitor and (b) evaluate the *merit of mergers* between clinical commissioning groups.

* Hansard source (Citation: HC Deb, 5 July 2019, cW)

 Stephen Hammond Minister of State (Department of Health and Social Care)

Sustainability and transformation partnerships (STPs) and integrated care systems (ICS) are fundamentally about bringing National Health Service providers, commissioners, local authorities, and other health and care services together to propose how they, at local level, can improve the way that health and care is planned and delivered in a more person-centred and coordinated way.

The most developed STPs have evolved into ICS, an even closer partnership between NHS organisations, local councils and other relevant organisations, which take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.

The NHS Long Term Plan set out the ambition for ICS to cover the whole of England by April 2021. The NHS Long Term Plan sets out that “every ICS will need streamlined commissioning arrangements to enable a single set of commissioning decisions at system level. This will typically involve a single Clinical Commissioning Group (CCG) for each ICS area”. However, this will need to reflect local circumstances, and NHS England is not intending to impose this centrally. NHS England is working with ICS and local areas to determine the best configuration of CCGs.

CCGs have a legal right to apply for a merger and it is for NHS England to decide whether to approve a merger. This is an operational decision, and so sits with NHS England. There are a number of specific legal factors and further criteria that NHS England will consider when deciding whether to agree the merger. The application process and criteria applied for CCG mergers is available in the Procedures for clinical commissioning groups to apply for constitution change, merger or dissolution guidance.

The criteria include the proposed new CCG demonstrating alignment with (or within) the local STP/ICS to provide the most logical footprint for local implementation of the NHS Long Term Plan. CCGs must also include evidence of providing strategic, integrated commissioning to support population health; whilst ensuring that the move to a larger geographical footprint will not be at the expense of local accountability, or the proposed new CCG’s ability to engage with, and consider the needs of, local communities.

Before a merger takes place, the CCG must also demonstrate that they have engaged with and seriously considered the views of their local general practitioners and **local Healthwatch**. In all cases, CCGs’ legal accountability to NHS England remains the same, regardless of the size of the CCG.

More broadly, we support NHS England’s intention to streamline commissioning arrangements, as NHS England expect that this will make it easier for the NHS to manage resources, make strategic decisions, and reduce unnecessary bureaucracy.