

# London Health and Care Devolution

## Frequently asked questions

### What is London Health and Care Devolution?

Devolution is the transfer of powers and decisions, which would usually be taken by central Government or national bodies to a more local level. The devolution agreement for London is essentially an enabling tool to explore the potential of planning and budget decisions for London to be made in and by London, rather than nationally. It expresses a commitment by London and national partners to work together to understand how devolution could work in practice.

Currently, national bodies decide how many services are planned and budgets are allocated. This can make it harder to tailor services to local needs. London has a diverse and rapidly changing population with many health, care and organisational challenges that are unique to our city. If decisions are taken by local health and care partners working together, these could more closely respond to what Londoners want and need.

### What are the aims of devolution?

London is on an exciting journey of transformation and devolution is an opportunity to accelerate the direction of travel already underway. It aims to support health and care decisions being made at the closest possible level that is appropriate. It is also a tool to promote integration and support new relationships by better joining up the planning and delivery of services and budgets at local level, removing barriers and maximising impact. Devolution would be strengthened in some circumstances by collaboration across populations and organisations as there are some objectives that may benefit from a greater critical mass of population than individual Clinical Commissioning Groups (CCGs) or boroughs.

### How does devolution fit with all the other transformation efforts underway within health and care?

There are a number of efforts in progress in London and nationally to transform the health and care system. The most well-known are NHS England's New Models of Care programme, the Better Care Fund and the Sustainability and Transformation Plans (STPs). The STPs are particularly relevant in the current climate and have the same underlying principles as devolution:

- strategy development and governance spanning the NHS and local government
- local placed-based plans, aggregated as appropriate
- a collaborative focus on health promotion and the prevention of ill health
- financial sustainability tied to transformation plans
- utilisation of health and care estate to support overall sustainability and the transformation of a local health economy

Both the STPs and Devolution encompass the need for long term sustainability and for decisions to be made locally to meet each local/regional community's needs.

Through section 75 agreements and other mechanisms, much health and social care integration can already be achieved within the remit of CCGs and boroughs. But we know that many parts of London want to go further and feel constrained by current decision making mechanisms, competing priorities or incentives between different parts of the system.

### Who has been involved?

Within London there has been collaboration from all of London's CCGs and Local Authorities, NHS England London region and Public Health England and the Greater London Authority to support the health and



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care of Londoners. In recognition for the hard work and progress that London has made, the London Devolution Agreement set out national commitments from HM Treasury, The Department of Health (including the DWP and the Work and Health Unit), NHS England, NHS Improvement, Health Education England, Public Health England and the Department for Communities and Local Government to partner with us in co-developing solutions and unblocking barriers to transformation. The pilots have wide partnerships including local providers (Trusts and primary care), clinical leaders, local government, NHS commissioners, the voluntary sector and wider public sector partners.

## **London Devolution**

### **What is London committed to doing?**

London partners are committed to supporting transformation and exploring the potential to accelerate this through Devolution. To establish whether devolution will work in practice and potentially secure a further devolution deal, pilots will be developing business cases and undertaking significant engagement. The London agreements do not commit the London system to undertake devolution.

### **How will it help Londoners?**

The devolution agreement is an enabling tool to explore the potential of planning and budget decisions for London to be made in and by London, rather than nationally. Devolution aims to minimise bureaucracy where possible, providing new opportunities for CCGs and boroughs to deliver faster improvements and innovations to better the health of Londoners. Many local areas have been working to deliver more seamless care to their residents and health has become increasingly joined up with employment support, housing and decisions about licensing and planning. Devolution aims to accelerate these efforts, unblocking barriers that local areas have faced in improving health and care.

### **Do we really need 'Devolution' to make these changes?**

Through section 75 agreements and other mechanisms, much health and social care integration can already be achieved within the remit of CCGs and boroughs. We know that many parts of London want to go further and feel constrained by current decision making mechanisms, other priorities or misaligned incentives between different parts of the system. Devolution aims to address these.

### **The London Devolution Agreement talks about subsidiarity, what does this mean for me?**

The intention is to devolve powers from central government to either CCG/borough, multi-borough or London-wide where these might help London move further faster with the health and care issues we are trying to tackle. Most of the devolution would be to the most local level, and the principle of subsidiarity – decisions being taken at the lowest, most appropriate level, is core to the London agreements. However, some devolved powers, resources or decision-making may be aggregated to a wider geography if this provides greater benefits. These would likely be in areas such as workforce or specialised commissioning.

### **How will Londoners be involved?**

In London we are developing a track record in patient and community engagement. The London Health Commission engaged over 14,000 Londoners at tailored events and through online discussions. The benefits of collaboration with our communities are clear and we want to accelerate progress. At our One Year On event, we asked for commitments by Londoners and other organisations in our capital to join these efforts to deliver lasting health improvement by pledging action against one or more of the aspirations.

During the pilot phase and during wider implementation it will be vital that pilots engage local populations to co-develop proposals. This is already happening in many areas. For example, the Barking & Dagenham, Havering and Redbridge pilot has been doing attitudinal research to assess the needs and wants of the

local population, to ensure that the way in which services are delivered can better meet these needs. Formal consultation with the community will be undertaken before any service change occurs.

**If we are not in a pilot area, what impact will devolution have for us?**

Devolution aims to support transformation efforts already underway by many boroughs and CCGs. The pilots are only one part of the complex transformation process going on in London, Prime Ministers challenge fund and Vanguards are all part of trying to get rapid progress in the light of a challenging financial and service environment. Lessons from testing elements of devolution will help other parts of the city to develop their own cases for more local decision-making and resources. Through the devolution pilots, devolution may be secured both for the pilots themselves and also for other parts of London, contingent on these areas also developing robust plans, delivery and governance arrangements.

**How is the London devolution agreement different to Greater Manchester?**

London's population is more diverse, significantly larger and has more pronounced inequalities than in Manchester. London also has a complex health and care landscape with almost three times the number of health and care commissioners and providers as Greater Manchester. London is a pioneering city for new drugs, techniques and technologies and trains a significant proportion of the NHS workforce. London also comprises some of our most specialist tertiary referral centres where some of the most complex cases in the country are treated. This means that the London model of devolution needs to address the needs of a significantly more complex system, reflecting London's particular challenges and opportunities. For these reasons, London is piloting elements of devolution and has specific focus on prevention, estates and health and care integration. These were key themes of Better Health for London, the report of the London Health Commission.