The future of health and care

Mr Speaker, I come to the House today to set out our white paper on the future of health and care.

The past year has been the most challenging in the NHS's proud 72-year history.

And the health and care system - as a whole - has risen in the face of great difficulties.

Throughout, people have done incredible things and worked in novel and remarkable ways to deliver for patients.

We, in this House, salute them all.

Not just the nurse who may have had to care for 2, or 3, or 4 times as many patients as he would in normal times.

Not just the surgeon who may have been called to treat patients beyond her normal specialism.

But the managers across health and care who've come together — in teams, as part of a health family, at local and national level.

The public health experts who have been needed more than ever before.

The local authority staff who've embraced change to deliver for their residents.

And, from all, a sense of teamwork that has been inspiring to see.

As a citizen, I care deeply for the whole health and care family, for the values they stand for, and the security they represent.

They're there for us at the best of times — and they're there for us at the worst of times.

As Health Secretary, I see it as my role sometimes to challenge — but most of all to support — the health and care family in their defining mission: of improving the health of the nation — and for caring for those most in need.

I come before the House to present a white paper, based firmly on those values, which I believe are the values our whole nation holds dear.

The white paper is built on more than 2 years of work — with the NHS, local councils and the public.

At its heart, this white paper enables greater integration, reduces bureaucracy and supports the way that the NHS and social care work when they work at their best: together. It strengthens accountability to this House and, crucially, it takes the lessons we've learned in this pandemic of how the system can rise to meet huge challenges — and frames a legislative basis to support that effort.

My job as Health Secretary is to make the system work for those who work in the system.

To free up, to empower and to harness the mission driven capability of 'Team Health and Care'.

The goal of this white paper is to allow that to happen.

Mr Speaker, before turning to the core measures, I want to answer 2 questions that I know have been on people's minds.

First: are these changes needed?

Even before the pandemic, it was clear reform was needed: to update the law, to improve how the NHS operates and reduce bureaucracy.

Local government and the NHS have told us they want to work together to improve health outcomes for residents.

Clinicians have told us they want to do more than just treat conditions — they want to address the factors that determine people's health and prevent illness in the first place.

And all parts of the system told us they want to embrace modern technology: to innovate, to join up, to share data, to serve people and, ultimately, to be trusted to get on and do all of that so they can improve patient care and save lives.

And we've listened — and these changes reflect what our health and care family have been asking for, building on the NHS's own long-term plan.

The second question: why now?

Now, as we tackle the biggest public health emergency in modern history?

The response to COVID-19 has, in my view, accelerated the pace of collaboration across health and social care, showing what we can do when we work together — flexibly — adopting new technology focused on the needs of the patient and setting aside bureaucratic rules.

The pandemic has also brought home the importance of preventing ill health in the first place, by tackling obesity and taking steps like fluoridation that will improve the health of the nation.

The pandemic has made the changes in this white paper more, not less, urgent, and it is our role in Parliament to make the legislative changes that are needed.

There is no better time than now.

Mr Speaker, turning to the measures in detail.

The first set of measures promote integration between different parts of the health and care system, and put the focus of health funding on the health of the population — not just the health of patients.

Health and care have always been part of the same ecosystem.

With an ageing population, with more complex needs, that's never been more true.

And these proposals, Mr Speaker, will make it easier for clinicians, for carers and public health experts to achieve what they already work so hard to do, to operate seamlessly across health and care without being split into artificial silos that keep them apart.

The new approach is based on the concept of population health.

A statutory Integrated Care System will be responsible, in each part of England, for the funding to support the health of their area.

They will provide, not just for the treatments that are needed, but support people to stay healthy in the first place.

In some parts of the country, ICSs are already showing the way, and they will be accountable for outcomes of the health of the population and be held to account by the Care Quality Commission.

Our goal is to integrate decision-making at a local level between the NHS and local authorities as much as is practically possible, and ensure decisions about local health can be taken as locally as possible.

Next, Mr Speaker, we will use legislation to remove bureaucracy that makes sensible decision-making harder, so freeing up the system to innovate and to embrace technology as a better platform to support staff and patient care.

Our proposals preserve the division between funding decisions and provision of care, which has been the cornerstone of efforts to ensure the best value for taxpayers for over 30 years.

But we're setting out a more joined-up approach, built on collaborative relationships, so that more strategic decisions can be taken to shape health and care for decades to come.

At its heart it's about population health: using the collective resources of the local system, the NHS, local authorities, the voluntary sector and others to improve the health of their area.

Finally, Mr Speaker, the white paper will ensure a system that is accountable.

Ministers have rightly always been accountable to this House for the performance of the NHS — and always will.

Clinical decisions should always be independent.

But when the NHS is the public's top domestic priority, with over £140 billion pounds of taxpayers' money spent each year, and when the quality of our healthcare matters to every single citizen and every single one of our constituents, Mr Speaker, of course the NHS must be accountable to ministers, ministers accountable to Parliament, and Parliament accountable to the people we all serve.

Medical matters are matters for ministers.

The white paper provides a statutory basis for unified national leadership of the NHS, merging 3 different bodies that legally oversee the NHS into one — as NHS England.

NHS England will have clinical and day-to-day operational independence.

But the Secretary of State will be empowered to set direction for the NHS and intervene where necessary.

This white paper can give the public confidence that the system will truly work together to respond to their needs.

Mr Speaker, these legislative measures support reforms already underway in the NHS, and they should be seen in the context of those broader reforms.

And they are by no means the full extent of our ambition for the nation's health.

As we continue to tackle this pandemic, we will also bring forward changes in social care, public health and mental health services.

We are committed to reform the funding of adult social care and we will bring forward proposals this year.

The public health interventions outlined in this white paper sit alongside our proposals to strengthen the public health system, including the creation of the National Institute for Health Protection (NIHP).

And last month, in our mental health white paper, we committed to bringing forward legislation to update the Mental Health Act for the 21st century.

Mr Speaker, this landmark white paper builds on what colleagues in health and care have told us — and we will continue that engagement in the weeks ahead.

It builds on more than that: it builds on this party's commitment to the NHS – from the very beginning.

And eagle-eyed visitors to my office on Victoria Street will have noticed the portrait of Sir Henry Willink, who published the white paper in 1944, from this despatch box, that set out plans for "A National Health Service" that was later implemented by post-war governments.

Throughout its proud 72-year history, successive governments have believed in our health and care system and strengthened it for their times.

I believe the NHS is the finest health service in the world. I believe in the values that underpin it, that we all share responsibility for the health of one another.

Its extraordinary feats this past year are unsurpassed, even in its own proud history.

And, once again, we must support the NHS - and the whole health and care system - with a legislative framework fit for our times, and fit for the future.

A more integrated, more innovative and more responsive system, harnessing the best of modern technology and supporting the vocation and dedication of those who work in it.

This white paper is the next step in that noble endeavour, and I commend this statement to the House.