Public questions and answers: Integrated Care Board meeting, 15 October 2025
Questions received from the public with response from the ICB

Question 1	I would like to submit the following question regarding the use of the private sector in the treatment of NHS patients; It has recently been reported that the increase in use of the private sector over the last year has been highest in South East London. *"Labour policy has had an impact: the latest figures show the number of NHS patients treated by 'independent sector' hospitals and clinics has increased by almost 10% in Labour's first year (535,000 in the 12 months to July 2025), compared to the equivalent in July 2024. The biggest increase by far has been in South East London, up by a massive 71% from 161,000 in the 12 months to July 2024 to 275,000 to July 2025. " The Lowdown 3rd Oct. 2025 NHS Support Federation* Can you please provide an explanation for this situation.
Question 2	The magazine and research body "The Lowdown" reported on 3rd October 2025 that: *"the latest figures show the number of NHS patients treated by 'independent sector' hospitals and clinics has increased by almost 10% in Labour's first year (535,000 in the 12 months to July 2025), compared to the equivalent in July 2024. The biggest increase by far has been in South East London, up by a massive 71% from 161,000 in the 12 months to July 2024 to 275,000 to July 2025."* Please explain why the increase for the SE London ICB has been so markedly higher than for the rest of NHSE. The figures further show that the number of NHS patients treated by 'independent sector' hospitals and clinics for the area covered by the SE London ICB has increased from 30,345 in the year to July 2020 to 275,260 in the year to July 2025, an almost 10 fold increase. Is there any assessment of the quality of treatments and outcomes provided by the IS? Please provide a comparison of the costs per patient or treatment provided in-house and by the IS.

Response to Q1 & Q2	NHS South East London remains committed to ensuring legal requirements for patient choice including accreditation for new providers entering the market are adhered to; alongside a continued focus on backlog recovery to ensure long waiting patients are treated at the most appropriate setting as soon as possible. Across the country, the proportion of activity delivered by Independent Sector Providers has increased significantly delivering much needed local capacity to support NHS Trusts during and following the Covid Pandemic. In addition, patients are entitled to exercise their legal right to choose where they receive NHS-funded treatment, including from approved independent sector hospitals and clinics. This means some of the increase reflects patient choice, rather than direct commissioning decisions by the ICB. As such the rise in independent sector activity reflects a combination of both local and national factors. In recent years we have used Independent Sector capacity to provide additional capacity specifically for longer waiting patients as part of our south east London backlog and recovery following the increase in the waiting lists as a result of COVID. A large element of the increase in Independent Sector activity has been seen since the opening of the competitively procured Community Ear, Nose & Throat (ENT) Service. This service opened in July 2024 and has significantly supported south east London NHS Trusts with ENT capacity, offering approximately 1,700 appointments per month with an average waiting time of 4 weeks. This provider was also able to take longer waiting patients from our local provider as part of our backlog recovery, resulting in the number of long waiting patients in ENT noticeably reducing. There are also several Independent Sector Ophthalmology providers operating within South East London, and activity in this specialty has increased alongside the substantial capacity. All independent sector providers delivering NHS care are regulated by the Care Quality Commission (CQC) and must meet the same safety and quality standards as NHS Trusts. The ICB monitors quality outcomes, including patient feedback, to ensure that care quality and safety are maintained. Payment for Independent Sector Providers is based on the NHS Payment Scheme unless a separate local arrangement has been agreed.