Dear

I am writing to you on behalf of (*name of group*) but also as a member of the public and an NHS patient in (*name of ICS*).

We have previously highlighted major flaws in the Health and Care Bill, some of which have been raised by MPs and peers from all parties during the parliamentary debate, and others of which were hardly, or never, mentioned despite their central role in the Bill. However the Bill has now been approved by parliament and reached Royal Assent on 28th April.

Despite this, there remains significant scope for local interpretation through the ICB Constitution, and we urge you to ensure that some of the most problematic issues will be addressed and remedied locally through wording of the local ICB Constitution. The operation of the ICB may also involve other issues not specified in the Constitution.

I am sure that you would agree it is crucial for the interests of patients to be paramount, that universal care based on need and free at the time of use is maintained, that private business interests are not allowed to influence what services are provided and by whom, and that that there is full public accountability for decisions made.

Given constitutions are currently being framed, key elements must be clearly stated in order to protect the public interest. I am therefore setting out areas which I feel are of particular importance and to which there should be explicit reference:

1. A commitment written into the ICS constitution that the ICS in *(name of area)* will maintain a comprehensive health service, free at the point of need, accessible to anyone residing in that area – including homeless people – at the time when they need health care or treatment.
2. ICSs should not include representatives from private sector organisations on any ICS board or committees or any bodies with delegated powers from the ICB.
3. There should be a commitment that NHS providers are the default providers of health services, care and treatment, and that as contracts with private sector companies come up for renewal the default position is that they will be awarded to NHS providers.
4. If any contracts do continue to be awarded to the private sector, there must be vigorous scrutiny to ensure that this is conducted in a transparent and accountable manner.
5. A commitment that anyone who needs emergency or urgent services while present in the ICS’s geographical footprint will receive the necessary treatment, whether or not they are registered with, or permanently reside within, the ICS area.
6. The Integrated Care Board should include a councillor from each local authority covered by the ICS, not just one representative covering all the local authorities in an area.
7. A commitment that the Integrated Care Board must include representatives of professionals from Mental Health, Community Health, Maternity, Primary Care and Public Health, as well as from Acute services.
8. A commitment that Integrated Care Boards, the Integrated Care Partnership body, place-based bodies, committees and sub-committees will include representatives of patients’ groups and of NHS staff trade unions.
9. A commitment that all meetings of Integrated Care Boards, Integrated Care Partnership bodies, place-based bodies, committees and sub-committees will be held in public, papers must be available in advance, and observers – from the public, trade unions, patients’ groups – must be allowed to ask questions and be entitled to written answers to those questions.
10. Before a patient is discharged from hospital, there must be a commitment to ensure that it is safe to do so and that any unpaid carers expected to look after the patient are both willing and capable to do so; the operation of the discharge policy should be regularly audited.
11. The ICS Constitution must specify that nationally agreed pay, terms and conditions, including pensions, as negotiated with the NHS staff unions, will apply to all staff employed by any NHS provider within the ICS area.
12. There must be discussion with NHS staff unions about safe staffing levels and what is needed to ensure they can be implemented.

I look forward to receiving your response and would welcome the opportunity for a face to face discussion under your provisions for public engagement,

Yours sincerely,