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Covid-19: Private hospitals “fell well short” in delivering care during the pandemic, says report

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MPs are being urged to examine how UK private hospitals secured potentially billions of pounds to help the NHS during the pandemic but treated very few covid patients and delivered fewer NHS funded operations than usual.

The Centre for Health and the Public Interest, an independent think tank, said that the House of Commons Public Accounts Committee should look closely into contracts that NHS England struck with independent hospitals in 2020 and what the activity incentives were. In a report published on 7 October it called for the full costs of the contracts to be disclosed and asked why purchased capacity was so “underused” and whether taxpayers got value for money from an agreement that gave private hospitals a guaranteed income stream.¹

David Wrigley, deputy chair of BMA Council, said, “Many of these private hospital beds went unfilled, showing there are big questions to be asked about the huge undisclosed amounts of taxpayer money spent . . . and what the NHS got in return.”

But the Independent Healthcare Providers Network, which negotiated the deal on behalf of 26 private hospitals, said the think tank’s analysis contained “misconceptions.”

The Department of Health and Social Care for England also criticised it as “misleading,” adding, “We will make no apology for ensuring the NHS has the resources it needs to provide care for patients during a global pandemic.”

NHS England announced the contract in March 2020 as a “major deal to expand hospital capacity to battle coronavirus” and help the NHS deliver other urgent operations and cancer treatments.²

The NHS effectively block booked some 8000 private hospital beds in 187 hospitals, along with 700 doctors, 10 000 nurses, and more than 8000 clinical staff.

The Centre for Health and the Public Interest said the private sector delivered 3.5 million NHS funded procedures in the year before the pandemic, between March 2019 and February 2020. But from March 2020 to March 2021 this dropped to two million, a fall of 43%, when taxpayers covered 100% of their operating costs under the partnership deal.

Private hospitals accounted for around 3000, or 0.08% of the national total, of 3.6 million bed days for patients with covid-19 in the period, the report said.

The think tank examined publicly available data in hospital episode statistics and situation reports published by NHS England.

It said that none of the 187 private hospitals for which official data were available had patients with covid on 39% of the days from March 2020 to March 2021. And despite government claims that the contract would help prevent the NHS being overwhelmed, no more than one private hospital bed was occupied by a patient infected with SARS-CoV-2 for 59% of the contract period.

Sid Ryan, the think tank’s lead researcher and coauthor of the report, said the data showed that the private sector “fell well short” in delivering services to the NHS at a time when it might have been expected to maintain or raise activity levels. “I think a big question is: what did the contract actually incentivise these hospitals to do?” he told *The BMJ*, calling for full disclosure.

A spokesperson for the Department of Health and Social Care said it was misleading to compare levels of NHS funded services provided by independent sector providers in the first year of the pandemic with levels in previous years. They said that only in the very early stages was the deal focused on securing additional capacity specifically for covid infected patients, after which independent sector hospitals were used “almost exclusively for other services” while NHS England did not pay for underused capacity.

The deal delivered nearly 1200 ventilators and around two million consultations, tests, operations, and chemotherapy sessions for NHS patients between March and the end of 2020, the spokesperson said.

David Hare, chief executive of the Independent Healthcare Providers Network, said the sector was asked to maintain covid-free sites for vulnerable patients, including those with cancer, so it was “not at all surprising” it treated few patients with covid, as this would not have been safe. He said that securing all additional capacity in March 2020 when no one could predict how long the pressures of covid would last was the “right decision.”

Hare said that more than 3.2 million NHS patients were treated in the independent sector under the national hospital contract.

“Without the contribution of the independent sector, the backlog of NHS care would be far worse than it is today,” he said.

1 Ryan S, Rowland D, McCoy D, Leys C. For Whose benefit? NHS England’s contract with the private hospital sector in the first year of the pandemic. Centre for Health and the Public Interest. Oct 2021. https://chpi.org.uk/wp-content/uploads/2021/09/CHPI-For-Whose-Benefit_.pdf.

2 Iacobucci G. Covid-19: all non-urgent elective surgery is suspended for at least three months in England. *BMJ* 2020;368:m1106. doi: 10.1136/bmj.m1106 pmid: 32188602

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