Reference: FOI.ICB-2627/114

Subject: Insourcing and Outsourcing Providers

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
Please refer to requesters template enclosed. Clarification received: We would be interested in any insourcing or outsourcing provider delivering clinical services either in a community setting (contracting with NHS trusts or ICBs) or in an acute setting (elective care only).	Please refer to requesters template enclosed.

The information provided in this response is accurate as of 21 August 2026 and has been approved for release by Caroline Dawe, Director of Strategic Commissioning - Value and Delivery for NHS Bristol, North Somerset and South Gloucestershire ICB.

FOI.ICB-2627/114 - Insourcing and Outsourcing Providers

To whom it may concern

This is a freedom of information request under the Freedom of Information Act 2000. Please provide the following information you have pertaining to NHS insourcing and outsourcing within your Trust / Health Board / ICB.

Insourcing

1. Do you use insourcing providers?

   The ICB does not insource / have any insourcing arrangements in the ICB for Elective Care. The local NHS trusts do however use insourcing, and we advise you to contact them directly for more information, as follows:

   Bristol NHS Foundation Trust (BFT) FreedomOfInfo@uhbw.nhs.uk and FOIArequests@nbt.nhs.uk

   **Note: Insourcing definition as per NHS SBS copied at the end of this email / form.*

2. If yes to the previous question what is the total value of spend, listed by specialty and insourcing provider, used for April 2024 to March 2025 and April 2025 to March 2026?
   Note: if an insourcing provider covers multiple specialties, please list that provider multiple times (one row for each specialty)

Specialty (e.g. general surgery, ophthalmology etc)	Insourcing provider (fill empty rows with provider name, add rows if required)	Total spend (Apr-24-Mar-25)	Total spend (Apr-25-Mar-26)

3. Please list below contracts with insourcing providers in the current financial year April 2026 to March 2027?

Specialty (e.g. general surgery,	Insourcing provider (fill empty rows	Contract start date	Contract end date (please	Formal tender	Procurement framework used for	Estimated contract value

ophthalmology etc)	with provider name, add rows if required)		leave blank if not set)	process conducted?	award (for example, NHS SBS)	

Outsourcing

1. Do you use outsourcing providers?

   Yes – Elective Care described below.

2. If yes to the previous question what is the total value of spend, listed by specialty and outsourcing provider, used for April 2024 to March 2025 and April 2025 to March 2026?
   Note: if an outsourcing provider covers multiple specialties, please list that provider multiple times (one row for each specialty)

Specialty (e.g. general surgery, ophthalmology etc)	Outsourcing provider (fill empty rows with provider name, add rows if required)	Total spend (Apr-24-Mar-25)	Total spend (Apr-25-Mar-26)
Ophthalmology Service	New Medica Spa Medica Somerset Surgical Services Practice Plus Group ACES Sulis Circle Bath	£11,663,574	£11,104,882
Orthopaedics Service	Spire Healthcare Nuffield Health Somerset Surgical Services Practice Plus Group Sulis Circle Bath	£29,817,971	£29,007,773
General Surgery Service	Practice Plus Group Nuffield Health Circle Bath	£2,313,471	£2,222,566

	Somerset Surgical Services		
Gastroenterology Service	Practice Plus Group Circle Bath	£1,605,806	£1,649,912
Endocrinology Service (weight management)	Oviva Nuffield Health	£714,510	£1,980,762
Gynaecology Service	Sulis Practice Plus Group	£857,658	£1,042,252
Ear Nose and Throat Service	Practice Plus Group Sulis	£659,143	£607,697
Plastic Surgery Service/ Derm	Somerset Surgical Services	commercially sensitive*	commercially sensitive*
Spinal Surgery Service	Nuffield Health Somerset Surgical Services	£721,572	£624,278
Urology Service	Practice Plus Group Sulis Cohese Health Care	£473,375	£441,845
Vascular Surgery Service	Sulis	Commercially sensitive*	Commercially sensitive*
Audiology Service	Practice Plus Group Audiological Science Limited Specsavers Hearcare Scrivens Limited	£2,278,177	£2,864,657

3. Please list below contracts with outsourcing providers in the current financial year April 2026 to March 2027?

Specialty (e.g. general surgery, ophthalmology etc)	**Outsourcing provider (fill empty rows with provider name, add rows if required)**	**Contract start date**	**Contract end date (please leave blank if not set)**	**Formal tender process conducted?**	**Procurement framework used for award (for example, NHS SBS)**	**Estimated contract value**
Ophthalmology	New Medica	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Orthopaedics	Spire Healthcare	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*

General Surgery Orthopaedics Spinal Surgery Weight Management	Nuffield Health	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Plastics/Derm General Surgery Ophthalmology Spinal Orthopaedics	Somerset Surgical Services	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Ophthalmology	New Medica	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
ENT Gynaecology Gastroenterology General Surgery Ophthalmology Orthopaedics Urology Audiology	Practice Plus Group	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Ophthalmology	ACES	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Ophthalmology	Spa Medica	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
ENT Gynaecology Ophthalmology Orthopaedics Urology	Sulis		31/3/29	Associate to BSW ICB contract		Commercially sensitive*
Gynaecology Ophthalmology Gastroenterology Orthopaedics	Circle Bath		31/3/29	Associate to BSW ICB contract		Commercially sensitive*
Urology DVT	Cohese Healthcare	1/4/25	31/3/29	N/A - PSR Direct Award C process	PSR - Direct Award Process C	Commercially sensitive*
Vascular	Vein Centre	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*

Dermatology	Health Harmonie	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Orthopaedics	Northwood Hospital	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Audiology	Audiological Science Limited	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Audiology	Specsavers Hearcare	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*
Audiology	Scrivens Limited	1/4/26	31/3/27	N/A – falls under PSR - Direct Award Process B	PSR - Direct Award Process B	Commercially sensitive*

*

The ICB has applied Section 43(2) to provider spend, where there is one sole provider of the service, and all contract values. Section 43(2) exempts from disclosure information which would, or would be likely to, prejudice the commercial interests of any legal person (an individual, a company, the public authority itself, or any other legal entity). Section 43(2) is a qualified exemption and therefore subject to the public interest test.

The public interest argument in favour of disclosing the information includes the ICB's responsibility to be transparent and accountable in its decision making processes and to promote public understanding of processes.

The public interest argument in favour of maintaining the exemption includes the ICB's responsibility to secure the best use of public resources and provide value for money. However, the spend per provider and specifics of the individual contracts are considered commercially sensitive information, and disclosure of the information would likely be detrimental to budgets or future procurement of services, potentially weakening a provider's bidding position in future open competition, if disclosed.

The ICB has considered the requirement to be transparent in its decision making processes and the ICB discharges its duty by monthly publishing of all spend over £25,000 and this is available on the ICB website: ICB spend over £25,000 July 2026 - BNSSG Healthier Together

The ICB has considered the balance of both disclosing the information and maintaining the exemption and believes that it is in the public's best interest to apply the exemption to ensure that the ICB can continue to commission services which are value for money.

If it is not possible to provide the information requested due to the information exceeding the cost of compliance limits identified in Section 12, please provide advice and assistance, under the Section 16 obligations of the Act, as to how I can refine my request – for example by suggesting certain parts of the request to prioritise initially.

*What is insourcing? [NHS England SBS definition]

Insourcing is defined as the employment of a third-party organisation to perform medical services/procedures on trust premises. It differs to locum and agency staffing supply with the full end to end service being provided, not just staff.

The supplier uses the NHS organisation's premises and equipment to deliver these services. Insourcing is largely focused on secondary care and the services are generally used out of hours when the premises/equipment is not being used by the NHS, thus making efficient use of the services.

Insourcing is designed to be results driven by utilising additional capacity provided by a supplier. This could be, for example, but not limited to, reducing patient waiting lists by a certain number over a given period or to triage a certain number of patients within a given period. Virtual patient appointments may also be undertaken by the insourced provider.