

TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 23 January, 2018
Report for:
Report of: Stephen Gardner, Deputy Programme Director, Single Hospital Service

Report Title

Single Hospital Service Update

Summary

Summary

This report provides an update on the progress of the Single Hospital Service (SHS) Programme. This includes an outline of the work that is being undertaken following the creation of Manchester University NHS Foundation Trust (MFT) and sets out the structure/process that is being established to complete the acquisition of North Manchester General Hospital.

1.0 Introduction

1.1 The purpose of this paper is to provide an update for the Trafford Health Scrutiny Committee on the Single Hospital Service (SHS) Programme.

2.0 Background

2.1 The proposal to establish a Single Hospital Service for Manchester, Trafford and surrounding areas was built on the work of the independent Single Hospital Service Review, led by Sir Jonathan Michael, and the SHS Programme has been operational since August 2016.

2.2 The Programme is being delivered through two linked projects. Project 1, the creation of Manchester University NHS Foundation Trust (MFT) through the merger of Central Manchester University Hospitals NHS Foundation Trust (CMFT) and University Hospital of South Manchester NHS Foundation Trust (UHSM), was completed on 1 October 2017.

2.3 Project 2 is the proposal for North Manchester General Hospital (NMGH) to transfer from Pennine Acute Hospital NHS Trust to MFT. The acquisition is expected to take place in 2019.

3.0 Progress to Date

3.1 Merger of CMFT and UHSM to create Manchester University NHS Foundation Trust (MFT).

3.1.1 Following the successful merger of UHSM and CMFT an evaluation report of the

transaction process is being finalised. The aim of this document is to capture lessons learnt to inform the development of the second stage of the SHS Programme – the transfer of NMGH into MFT – and to share with the wider NHS. Emerging strengths of Project 1 include the strategic rationale that was provided in the SHS Review, the commitment of all local stakeholders to the merger process, and the level of clinical engagement maintained over the last two years.

3.1.2 A legacy plan has also been produced following completion of the merger. This plan will ensure the corporate memory of the transaction is retained and that important information relating to the transaction can be accessed in the future.

3.1.3 Arrangements to ensure the new organisation remains focussed on the delivery of sustainable and high quality services for patients are being progressed. A new Council of Governors for MFT has been established and substantive appointments to the MFT Group Board have been made. Leadership arrangements for each of the MFT hospital sites have been developed and hospital Chief Executives have been appointed. It is envisaged that the Hospital Chief Executives and their teams will also have a key role in the continued development and implementation of the integration work.

3.1.4 To support this agenda relevant governance arrangements are in place to oversee the delivery of the Post Transaction Integration Plan (PTIP) and completion of the associated integration planning activities. The work is currently focussed on the implementation of activities for the first 100 days of the new organisation and planning for year 1 and beyond. Corporate integration is progressing to plan and a series of in-depth workshops have provided an opportunity to identify interdependencies and resolve issues promptly.

3.1.4 Clinical and operational integration is also moving at pace through the development of 41 integration projects organised into 27 clinical work streams. These projects vary in size and scale and initially involve service review, due diligence, cross-site clinical engagement, and scoping and testing of the potential opportunities.

3.1.5 Work to define the clinical and operational scheme objectives and timelines for year 1 and year 2 projects, and to develop detailed implementation plans, remains on-going. Planning activities are being carried out in conjunction with the development of an MFT group service strategy and also with reference to the outputs of the Greater Manchester 'Theme 3' programme (standardising acute and specialist care).

3.2 North Manchester General Hospital (Project Two)

3.2.1 The second stage in the creation of a Single Hospital Service is to transfer NMGH, currently part of Pennine Acute Hospitals NHS Trust (PAT), into MFT.

3.2.2 At the request of NHS Improvement (NHS I) the proposed acquisition of NMGH is being managed to run concurrently with the dissolution of PAT and the expected acquisition of the remainder of this Trust by Salford Royal NHS Foundation Trust (SRFT).

3.2.3 The process to acquire NMGH is likely to be complex and will require a significant degree of co-operation and partnership across a range of stakeholders. The proposed transaction will be governed by the NHS I Transaction Guidance which was reissued in November 2017. Based on the criteria described in this guidance the proposed acquisition of NMGH by MFT will be a significant transaction and therefore subject to a detailed NHS I review. This review will be a two stage process involving the development of a Strategic Case followed by the production of a Business Case. Further work will also be required to satisfy the requirements of the Competition and Markets Authority (CMA).

3.2.4 MFT governance arrangements have been established to manage this transaction. A Greater Manchester level 'Pennine Acute Transaction Board' has also been established to provide oversight to the process to dissolve PAT and transfer the relevant services to MFT and SRFT. A timeline for the whole process is being developed by the Transaction Board.

4.0 Conclusion

4.1 This report provides an update on the progress of the Single Hospital Service Programme. The Health Scrutiny Committee is asked to note the progress made to date.

Recommendation(s)

The Health Scrutiny Committee is asked to:

- (i) Note the current position of the Single Hospital Service Programme.

Contact person for access to background papers and further information:

Name:

Extension:

Background Papers:

Implications

Relationship to Policy Framework/Corporate Priorities	
Financial	
Legal Implications:	
Equality/Diversity Implications	
Sustainability Implications	
Staffing/E-Government/Asset Management Implications	
Risk Management Implications	
Health and Safety Implications	