



**Staff Briefing**

**3 December 2010**

As you are aware, we are all committed to providing high quality clinical services to the people of Trafford, whilst ensuring efficiency and maximum value for money.

Our strategic approach to delivering on these commitments has been to work up a business plan that explored the possibility of us merging with Trafford Provider Services[[1]](#footnote-1) and creating an Integrated Care Trust with the aim of becoming a foundation trust (FT).

The Department of Health requires all NHS Trusts to state that they are on track to achieve FT[[2]](#footnote-2) status by 2013. The financial requirements of becoming an FT are rigorous and the current financial climate and impending health legislation mean that the environment within which the Trust must meet these requirements is increasingly challenging. As a result of this, the Trust Board had to consider if the business plan would enable us to meet this requirement and what alternative options could be pursued.

Whilst our preference would have been to continue to develop and deliver integrated care for the people of Trafford through an independent Integrated Care Foundation Trust, we have recognised that the financial constraints that now exist mean this is no longer a viable option.

As a result of this, on Tuesday 30th November the THT[[3]](#footnote-3) Board decided that the most appropriate strategic option was to seek a partner for merger or acquisition to deliver the services we currently provide. We are currently exploring with the SHA[[4]](#footnote-4), PCT[[5]](#footnote-5) and GPs how the process of seeking a partner will work and the timescale in which it can be achieved. Once we have more details about this we will communicate them to all staff.

We believe that this is a positive and proactive step to ensure the best possible future for health services in Trafford. In the last few years we have made huge improvements in the way we deliver services and run the organisation. At the same time as driving clinical quality, we have achieved financial efficiencies, saving 19% of our budget between 2007/8 and 2010/11.

The Board is committed to finding a partner organisation  who will want to continue to push forward with these improvements in patient care, retain services in Trafford, develop integrated care and continue the work we have begun to improve our estate.

We recognise that CYPS[[6]](#footnote-6) is currently an integrated model and we regard the principle of it being integrated within Trafford in the future as of paramount importance. Both the PCT and THT will be working with the local authority to ensure that CYPS continues to deliver an integrated service and remains based in Trafford.

This means that TPS[[7]](#footnote-7) will not now be merging with us. The PCT arefinalising an agreement to retain TPS for up to 3 months beyond March 2011, whilst they develop a new proposal for its future. Should the development and sign off work of a new proposal take longer than this TPS will transfer to Ashton, Leigh & Wigan Healthcare Trust on an interim basis for up to 2 years.

We appreciate that change is unsettling and that you will have many questions regarding what this decision will mean for you and our services. We are committed to answering as many of your questions as possible but acknowledge that we will not have definite answers to them all. As the process moves forward and we have more clarity we will ensure that staff are consulted and kept fully informed of progress.

If you have immediate queries, we have put some questions and answers on the intranet and we will also be holding drop in sessions for all staff. The dates, times and locations of these sessions can also be found on the intranet.

During this period of change we must continue to provide the excellent care to our patients that we have worked so hard to achieve and are so proud of. We know that we will need to rely on our staff to ensure that our commitment to service delivery and quality continues to be exemplary.

**Briefing note for website:**

**Trafford Healthcare NHS Trust to seek partner organisation**

* On Tuesday 30th November the Board of Trafford Healthcare NHS Trust decided to seek to become part of a larger organisation that would deliver the services we currently provide.
* We have come to this conclusion because the Department of Health now requires all NHS trusts to become foundation trusts (FTs) by 2013.  Our business plan to become an integrated care trust by merging with Trafford Provider Services (the provider arm of the PCT) demonstrated that, whilst we could pass the rigorous financial tests to become a FT in five years’ time, we will not be able to do so in a year’s time – particularly as the financial environment is worsening.
* In the last few years we have succeeded in making Trafford Healthcare one of the best-performing trusts in the country on infection control – it is more than 19 months since we have had a case of MRSA bloodstream infection (bacteraemia).  In the first quarter of this year (published Nov 2010), Trafford Healthcare had the third-best Quality Standards score of all acute trusts in the North West. At the same time as driving clinical quality, we have driven financial efficiencies, saving 19% of our budget between 2008/9 and 2010/11.
* The Trust Board is committed to finding a partner who will want to continue to drive these improvements in patient care, will retain services in Trafford and continue the work we have begun to improve our estate. In addition, we remain committed to the principles of integrated care.
* Our services will not be affected by this announcement – it will continue to be business as usual as far as patients are concerned. Patients can be assured that they will continue to be seen and treated by us and to receive a high standard of care while we seek to develop a new organisational form.
* We will consult and engage with patients, GPs, local people and our partners as appropriate throughout this process.

**Message for all staff**

As you may know, all NHS trusts have been assessing their readiness to become foundation trusts in time for the new deadline of 2013, as set out in July’s health White Paper.

We have come to the conclusion that, although we had a robust financial plan to achieve foundation trust status over the next five years, we cannot prove that we will be able to pass the rigorous financial tests required for FT status by 2013 – particularly as trusts had already been tasked with making significant savings over the next four years in light of the national deficit.

Our top priority is ensuring that Trafford residents can continue to access high-quality, local healthcare services. In light of that, we believe the responsible course of action now is for us to seek a partner for merger or acquisition – subject to consultation – and to ensure a smooth transition to a new organisational form.

In the last few years we have succeeded in making Trafford Healthcare one of the best-performing trusts nationally on infection control and providing care of the highest quality. Department of Health figures published in November 2010 show that we achieved the third-highest Quality Standards score in the North West in the first quarter of 2010/11. We are also delivering 19% efficiency savings in the three years from 2008/9 to 2010/11.

We are very proud of this track record and are committed to finding a partner who will want to continue to drive these improvements in patient care, will retain services in Trafford and continue the work we have begun to improve our estate.

In the meantime, it is very much business as usual. Services will not be affected by this announcement. We will continue to see and treat patients and to provide the same high standard of care.

Naturally, there will also be appropriate consultation with our stakeholders throughout.

Fay Selvan Ron Calvert

Chair Chief Executive



 ***Embargoed until noon on Friday 3 December***

**Dear GP Colleague**

We are writing to let you know that Trafford Healthcare NHS Trust has begun the process of seeking merger with or acquisition by a suitable partner.

We have come to this conclusion because the Department of Health now requires all NHS trusts to become foundation trusts by 2013. Our business plan to become an integrated care trust (by merging with Trafford Provider Services) demonstrated that, whilst we could pass the rigorous financial tests to become a FT in five years’ time, we will not be able to do so in a year’s time – particularly given the need for all trusts to make significant additional savings over the next four years.

We can reassure you that this decision has nothing to do with the high quality of the care we provide. You might be interested to know that the latest Department of Health figures (Q1 performance, published November 2010) show that Trafford Healthcare has the third highest Quality Standards score of any NHS trust in the North West.

Our services will not be affected by this announcement and we would like to assure you that you can continue to refer to our clinicians as usual. Our top priority is the continuous delivery of safe, high-quality services from our sites. We also remain committed to the principles of integrated care and will continue to work with the clinical redesign panels and vanguard practices to this end.

In seeking a partner, we are committed to achieving the best outcome for maintaining safe, high-quality and appropriate services for Trafford patients. Our three GP Executive Directors are fully engaged in this and we will keep all GP colleagues informed and engaged throughout the process of changing our organisational form.

If you have any comments, queries or concerns that you wish to share, we would be glad to hear them. Our contact details are at the bottom of this letter.

Yours faithfully

Fay Selvan, Chair

Ron Calvert, Chief Executive, ron.calvert@trafford.nhs.uk

Dr Simon Musgrave, Medical Director, simon.musgrave@trafford.nhs.uk

Dr Jonathan Berry, GP Executive Director, jonathan.berry@nhs.net

Dr Liz Clarke, GP Executive Director, liz.clarke@nhs.net

Dr Ray Wilson, GP Executive Director, raymond.wilson74@nhs.net

**Information for patients and visitors:**

**News about the Trust and our services**

You may have heard that Trafford Healthcare NHS Trust wants to become part of a larger organisation.

We would like to reassure you that this will not affect the care you receive in any way. We provide a very high standard of care and you can continue to be seen and treated by us, as planned.

The reason we want to join a larger organisation is because all NHS organisations need to make big savings over the next few years. The fixed costs associated with being a small, independent trust mean it would be very difficult for us to make these savings without affecting the quality of the care we provide. In order to ensure our patients will continue to enjoy safe, high-quality health services we are therefore looking to partner with another organisation. The process may take some months. We will keep our patients, visitors and the people of Trafford fully informed throughout.

We hope this reassures you that you will continue to enjoy safe, high-quality care provided by us but if you have any queries or concerns at all, please contact our Patient Advice & Liaison Service (PALS) on **0161 746 2019** or **pals@trafford.nhs.uk**. You will also find information on our website ([**www.trafford.nhs.uk**](http://www.trafford.nhs.uk)).

Once again, we would like to confirm that our current services are not affected by this announcement. Our patients will continue to be seen and treated by us as usual.

Ron Calvert, Chief Executive

Dr Simon Musgrave, Medical Director

Morag Olsen, Director of Nursing & Operations

**Press Release: Letter for publication**

We are writing to explain the reasons why the Board of Trafford Healthcare NHS Trust, which runs the borough’s hospitals, has decided to seek to become part of a larger organisation.

The decision is not related to the quality of our services. We provide a very high standard of care so patients can be reassured that they are in safe hands with us.

It is also important to note that our services are not affected by this announcement – patients can continue to be seen and treated by us as usual at Trafford General, Altrincham General, Stretford Memorial and in the community.

We are simply looking at becoming part of a larger organisation because the current financial climate makes it very hard for small trusts like us. The NHS needs to make significant savings over the next few years. Our aim is to ensure people in Trafford can continue to access safe, high-quality, local healthcare and that the need to make these savings has the least possible impact on services.

In the last few years we have succeeded in providing care of the highest quality and in making Trafford Healthcare one of the best-performing trusts nationally on infection control, with no cases of MRSA bloodstream infection in more than 19 months.

We are very proud of this track record and are committed to finding a partner who will want to continue to drive these improvements in patient care, will retain services in Trafford and continue the work we have begun to improve our estate. We will keep patients, GPs, the wider public and our staff informed throughout this process.

In the meantime, it is very much business as usual at Trafford Healthcare. Patients will continue to be seen and treated by us and to receive high-quality care in safe, clean surroundings while we seek a partner to provide the services we currently deliver.

Yours faithfully,

Fay Selvan Ron Calvert

Chair Chief Executive

On behalf of the Board of Trafford Healthcare NHS Trust

**Announcement about our future:**

**Q&A for staff**

**What does it mean for me as a THT member of staff?**

* In the short term, whilst we are seeking a strategic partner, services will continue as normal. Staff will continue to be employed by THT and we are very much ‘open for business’. We are relying on the professional nature of our staff to continue to work hard to deliver the high-quality care our patients have come to expect and receive.

Our top priority in securing a partner will be ensuring that Trafford residents continue to enjoy safe, high-quality and local services and to achieve the best outcome for staff.

Once a strategic partner has been identified, we should gain a better insight into what the future will hold for services delivered in Trafford. Ultimately, if THT is acquired by a Foundation Trust, staff will transfer as part of the business to the new organisation. It will then be for the acquiring Trust to decide how they deliver the services for Trafford and what staffing resources are needed to do that.

As with all public sector organisations at this time, we cannot guarantee that there will be no redundancies as a result of this process, but clinical services will still need to be delivered in Trafford and staff will be needed to do that. We will work as hard as we can in the coming months to preserve both services for Trafford and employment for our employees.

**Does this mean we’ve failed as a Trust?**

* No. The Trust has performed extremely well over the past two years. We have achieved excellent results in patient care and infection control rates. At the same time as improving quality of care, we will also achieve efficiency savings of 19% (from 2008/9 to 2010/11).

However, the White Paper published in July set a new requirement for all hospitals to become foundation trusts by 2013. Although we had a robust plan to address our deficit and become a FT over five years, being realistic it would be very difficult for us to prove next year that we would definitely be able to become a FT by 2013 – especially given the tough economic climate and the fact that all trusts have to make significant additional savings over the next four years. That is why we are now pursuing this other route.

**Whose fault is it?**

* It is no one’s fault. It is a result of a changing economic and health climate. We had a plan to become a foundation trust over five years. The White Paper set a new deadline for all trusts to become FTs by 2013. Given the current economic climate and the fact that all trusts have to make significant additional savings over the next four years, we could not guarantee that we could prove next year that we could become a FT in 2013.

The scale of savings required was so large that, as a small trust with a certain level of fixed costs, it would have been extremely challenging to achieve them without affecting patient care. Clearly, the safety and quality of services is paramount so we were not prepared to take that risk

**What does it mean for the Altrincham General Hospital project?**

* We are pleased that NHS North West has agreed in principle to redevelopment of facilities for the local population.  The services provided there are much-needed and highly-valued by local people and our top priority is securing a partner who will ensure that people in Trafford continue to enjoy appropriate, high-quality and local health services.  We will continue working towards redevelopment and it will be one of the key criteria by which the Trust selects a partner for merger or acquisition.

**Will the hospital close?**

* Our hospitals were here providing healthcare many years before Trafford Healthcare NHS Trust was created in 1994 and we are sure they will be here many years after us. In the medium and longer-term, decisions about services will be down to whichever organisation succeeds us and the NHS more widely. Before changing services, they would need to carry out the necessary consultation with patients, staff, GPs and other interested parties.

**Does this mean we don’t need to worry about achieving our CIPs (efficiency plans) or controlling costs?**

* No, it doesn’t. It is important that we all continue working on delivering financial balance at year-end and on future CIP schemes because we need to present ourselves in as strong a financial position as possible to potential partners. It is important that we do this for health services in Trafford, our patients and our staff because it will mean a better outcome for all of us.

**What impact will it have on beds/services like A&E?**

* In the immediate future, there won’t be any change. One of our top priorities in seeking a partner will be ensuring that Trafford residents continue to have access to safe, high-quality, local services. Looking further ahead, the successful partner is likely to review our business. If they wanted to change services, however, they would only be able to do so after carrying out appropriate consultation with patients, GPs, staff and other interested parties.

**What does it mean for the Integrated Care System?**

* We believe in integrated care and will continue to work with the PCT, GPs and other health and social care partners to create an integrated care system in Trafford. The integrated care system does not depend on us continuing to exist as an independent trust. GPs and the PCT strongly support integrated care and are likely to continue along that path. When a strategic partner for this Trust is identified, we hope to work with them in seeking the best model of care for Trafford.

**What does it mean for the Integrated Care Trust?**

* We had hoped to become an Integrated Care Trust by joining with Trafford Provider Services (the PCT’s provider arm) and developed a robust business plan demonstrating how the new trust could become a foundation trust over five years.

The new requirement to become a FT by 2013 means we won’t now be going ahead with the integrated care trust. (It would have been extremely difficult for us to meet the 2013 FT deadline.) However, as stated above, it does not mean the end of integrated care.

**What will happen to Trafford Provider Services**

* The PCT is retaining TPS for up to three months after March 2011 while it explores other models for delivering integrated care. If this work is not complete by then, the PCT has agreed an interim arrangement for TPS to transfer to Ashton, Leigh and Wigan Community Healthcare NHS Trust for up to two years while a new integrated care model is agreed.

**What does it mean for the proposal to create an elective orthopaedic centre in the former GMSC?**

* We will continue to develop the elective orthopaedic centre with a predicted opening date in late spring 2011. It will generate income and we believe it will enhance our appeal to a potential partner trust. It is likely to take some time for the merger / acquisition process to be completed – potentially over a year – so in the meantime we need to continue with projects that are in the Trust’s best interests.

**What does it mean for all the estates improvements that are underway or planned? Is it a waste of money?**

* Plans for estates development in this financial year will continue. Investment in the Trust’s infrastructure and facilities will be important and essential, regardless of whatever happens with a potential partner.

**What does it mean for federated services?**

* In the short-term, all our services will continue as they are. Once a strategic partner has been identified, we will gain a better insight into what the future will hold. Ultimately, if THT is acquired by a Foundation Trust, staff will transfer as part of the business to the new organisation. It will then be for the acquiring Trust to decide how they deliver the services for Trafford and what staffing resources are needed to do that. We would imagine they will review our whole business and services. Obviously, where service level agreements or contracts are in place with other trusts, then decisions will need to take this into account.

**What does it mean for future planning – for example, will we still outsource Histology?**

* Plans to outsource Histology to Wythenshawe following a competitive tender have now been agreed and will go ahead as planned. Staff will transfer under TUPE over to Wythenshawe.

Any thinking about future changes will need to be made against the backdrop of the fact the Trust is seeking a strategic partner.

**Does it mean we can no longer recruit staff to vacant posts?**

* All vacancies that arise are already subject to a stringent review process before a decision is taken to recruit and this will continue. Vacancies will continue to be filled if there is a genuine business need to do so and particularly if the post is needed to deliver patient care.

We may decide to fill some vacancies on an interim basis, if this is appropriate in the circumstances, but this will be decided on a case by case basis. Candidates applying for posts with THT will be informed as part of the recruitment process of the Trust’s current position.

**What is the timetable for a decision/acquisition?**

* The Trust has been tasked with finding a strategic partner as soon as possible. Once a partner is identified, a longer process of formal acquisition will begin. This will involve ‘due diligence’ – essentially, a series of detailed checks to make sure both parties know what assets each other has and that they have a full understanding of what the deal would involve. We hope this process could be complete by September 2011.

**When will we know the outcome?**

* We don’t have a date for that yet but we will keep staff fully informed throughout. As soon as any decisions are made, we will let you know.

**What if nobody wants to acquire us?**

* We are confident that a strategic partner will be found and the SHA will be helping us to do that. We will take further advice from the SHA and the Department of Health if this proves to be difficult.

**What if NHS North West or Department of Health don’t agree with the proposed outcome?**

* There will be a lengthy approvals process involving the Cooperation & Competition panel, Monitor (which regulates foundation trusts), the Department of Health’s Transactions Board and the Secretary of State for Health. If any of these parties disagrees with the proposed outcome, we will need to look again at alternatives.

**Is Ron going to stay on as Chief Executive? He was appointed for two years starting in January 2009 so his contract will be running out.**

* It is important that we have strong and consistent leadership so the Board are pleased that Ron has agreed to stay on until at least the end of March. The position will be reviewed every few months as we seek to become part of a larger organisation.

**What does it mean for long-term salary sacrifice staff benefits e.g. Lease cars/computers?**

* These schemes are linked to salary. Where someone is made redundant, then clearly the Trust has a responsibility to ensure they receive an appropriate package under Agenda for Change that means they do not suffer significant financial detriment. That is likely to include consideration of schemes like this.

**Key points for patient-facing staff:**

We recognise that, in your role, patients and visitors may ask you for more information about the Trust’s decision to seek to become part of a larger organisation.

We have prepared a short information note that you can give to patients and visitors – you can download it here or obtain it from the Communications office (x2934 or 2945).

Some key points to remember are:

* The decision is not related to the quality of our services. We provide a very high standard of care so patients can be reassured that they are in safe hands with us.
* Our services are not affected by this announcement – patients can continue to be seen and treated here by us as usual.
* We are simply looking at becoming part of a larger organisation because the current financial climate makes it very hard for small trusts like us. The NHS needs to make significant savings over the next few years. Our aim is to ensure people in Trafford can continue to access safe, high-quality, local healthcare and that the need to make these savings has the least possible impact on services.
* This is not about the hospital – it’s just about the name of the organisation that runs it. The hospitals were here long before Trafford Healthcare Trust was created in 1994.
1. Trafford Provider Services provides community health services (e.g. district nursing and health visitors) and allied health professional services (e.g. physiotherapy, occupational therapy, speech and language therapy, dietetics). It is currently part of the primary care trust. [↑](#footnote-ref-1)
2. FT stands for foundation trust. [↑](#footnote-ref-2)
3. THT stands for Trafford Healthcare NHS Trust. [↑](#footnote-ref-3)
4. SHA stands for the strategic health authority, NHS North West. [↑](#footnote-ref-4)
5. PCT stands for the primary care trust, NHS Trafford (previously called Trafford PCT) [↑](#footnote-ref-5)
6. Trafford Children & Young People’s Service (CYPS) brings together health, education and social care for children and young people in the borough. The three main partners in CYPS are Trafford Healthcare, NHS Trafford and Trafford Council. There are quite a lot of Trafford Healthcare services in CYPS, including school nursing, the Children’s Community Nursing Team and the Child & Adolescent Mental Health Service (CAMHS). [↑](#footnote-ref-6)
7. Trafford Provider Services. [↑](#footnote-ref-7)