

Stakeholder Summary



Trafford Healthcare NHS Trust *Acquisition Bid*

FOREWORD

We are delighted to have this opportunity to set out our proposals for the future provision of NHS services in Trafford within this summary document.

CMFT is a local NHS foundation trust and is well established as a fundamental component of the NHS. Our current hospitals group was founded in 2001 with the merger of the two separate children's hospitals, Booth Hall Children's Hospital and the Royal Manchester Children's Hospital with Manchester Royal Infirmary, Manchester Royal Eye Hospital, Saint Mary's Hospital and the University Dental Hospital.

Since that time we have consolidated four of those five hospitals onto our new campus on Oxford Road in Manchester and more recently have integrated 44 of the Manchester community services into our organisation. These key developments have taken place since our authorisation as a Foundation Trust in January 2009 which has enabled our members and governors to really shape the way we do things.

We are proud of the specialist services that we provide to patients across the North West (and beyond) however our core services provided to Manchester, and Trafford, residents are the bedrock for all that we do.

Our Board of Directors and Council of Governors have considered carefully this opportunity and feel strongly that there should be an NHS hospital in Trafford to provide high quality local services. Integration of Trafford Hospitals is a natural step and one which can enhance the services that we offer to patients and stakeholders and protect the future of NHS services in Trafford.

Park Hospital as the birthplace of the NHS, is a landmark in the history of the NHS. More recently health and social care organisations in Trafford have been engaged in exciting, innovative work around the development of integrated care. We are determined to maintain the momentum that has been generated and develop this as another significant transformational step in the evolution of health (and well-being) services in the UK.



Peter W Mount CBE
Chairman



Mike Deegan
Chief Executive

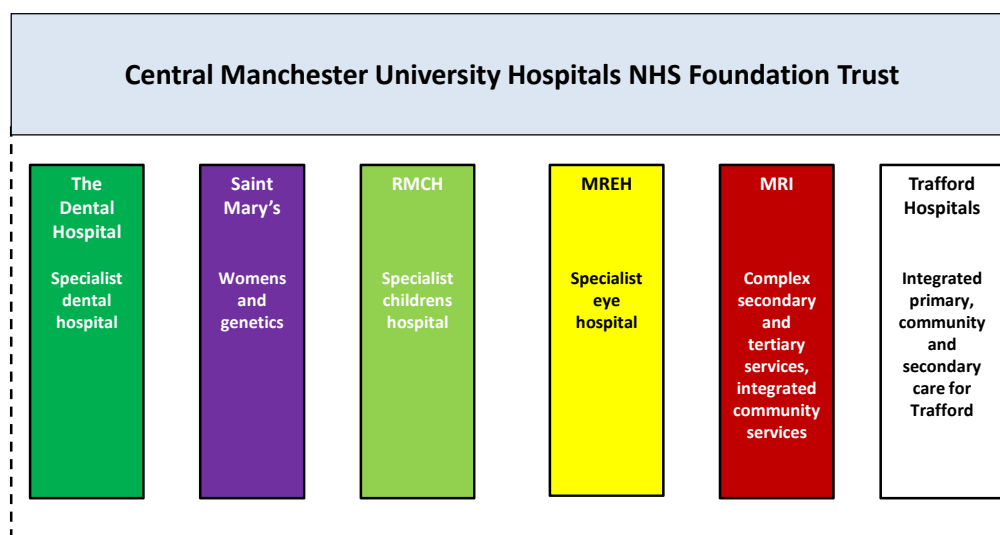
OUR VISION FOR TRAFFORD HEALTHCARE TRUST

Our vision for the future of Trafford Healthcare Trust is characterised by four key themes:

1. Retaining Trafford Hospitals as a distinct NHS entity
2. Integrating services across health and social care
3. Delivering clinical services locally
4. Co-producing service models with stakeholders

Retaining Trafford Hospitals as a distinct NHS entity

Trafford Hospitals would become one of the individual hospitals within the CMFT group. CMFT already comprises five hospitals (Royal Manchester Children's Hospital, Saint Mary's Hospital, Manchester Royal Eye Hospital, Manchester Royal Infirmary and the University Dental Hospital), each with their own distinct identity. This approach has been shown to be successful in retaining the individual identity and local/specialist focus of individual hospitals and also bringing to bear the benefits of economies of scale and support of belonging to a large NHS Foundation Trust with clinical and financial critical mass. The addition of Trafford Hospitals into the CMFT group is a natural next step for us (see schematic below).



Specifically this approach would enable Trafford Hospitals to retain its identity and local focus on the Trafford health and social care system at the same time as benefitting from economies of scale and the support and back-up of being an integral element of CMFT.

We believe that the flexibility of retaining Trafford Hospitals as a distinct entity, particularly in relation to joint working with the Trafford Integrated Care System and the Local Authority is key to enabling Trafford Hospitals to continue to meet the needs of its stakeholders such as its commissioners and Trafford MBC. Accordingly we envisage that Trafford Hospitals would be run as a separate hospital within the CMFT group and retain its own identity, dedicated leadership and management team and staff.

At the same time there is also a range of functions where localism is less important and which would derive greater benefit from being part of a larger department/organisation. Examples of these would be corporate and clinical governance, human resources and finance. These services would benefit from closer integration with existing CMFT structures.

Each function will be assessed individually, in conjunction with stakeholders, to identify and agree the most appropriate future management arrangements.

Each of our hospitals has a dedicated management structure led by a senior clinician who reports directly to the Trust Chief Executive. However these arrangements are flexed to suit the specific requirements of each hospital. In the case of Trafford the management structure would reflect the fact that Trafford Hospitals comprises a number of hospitals, all of which are located remote to the main campus site within a different health and social care system and therefore require very senior local leadership.

Each of our hospitals, and therefore Trafford Hospitals, also benefit from hospital-wide functional teams such as research and innovation that directly supports clinical innovations, research grant applications and clinical trials.

Integrating services across health and social care

In preparing our bid, we have begun to consult with a wide range of stakeholders in Trafford and understand that the over-riding aspiration for the future of health and social care services in Trafford is the ***implementation and further development of integrated services.***

We recognise the importance and significance of changes to the provision of health and social care services that the development of the proposed Integrated Care System will bring. We fully support the principle of integrated care and would expect to work with partners, including Trafford Provider Healthcare Ltd, Trafford Metropolitan Borough Council, Trafford Hospitals staff and staff-side and GP Commissioners, to further develop the concept and range of re-designed services through input to the clinical panels. In terms of implementation we would be keen to work with partners to put new local, accessible services in place. Specifically we envisage that we would:

- provide new and innovative types of services; both direct patient facing services and services to support and build capacity in primary care e.g. telephone advice lines and training and education and specialist advice
- create and provide appropriate facilities in Trafford General Hospital and Altrincham General Hospital for the delivery of new models of care
- provide bed based services that complement the pathways of care developed through the Integrated Care System.

Delivering clinical services locally

Our principle in planning future provision has been that ***clinical services, in particular first point of access, should, as far as possible, be retained in Trafford***, so long as it is clinically safe and economically viable to do so. We are confident that our scale and critical mass gives us a greater ability to support and sustain clinical services in this way.

We believe that services should be provided at Trafford General Hospital and in Altrincham and Stretford.

We have identified a range of NHS services that can be further developed within Trafford, such as:

- the creation of a centre of excellence for orthopaedic surgery serving the population of Trafford, Manchester and beyond
- a wider range of daycase surgery procedures offered within Trafford
- improved access to clinic services for adults and children.

Our preference is to continue to provide ambulatory care services from a re-developed hospital in Altrincham as is currently planned and the continuation of local services currently provided within Stretford. We would work closely with the Integrated Care System, GP Commissioners and other stakeholders to agree the services that should be provided in these neighbourhoods and the model of delivery.

We would also be keen to provide local health services within the other Trafford neighbourhoods, in particular deprived areas such as Partington, should there be sufficient demand and support from commissioners.

Co-producing service models with stakeholders

We are committed to ***engaging with stakeholders*** to design precise service models. We believe that much of the formal machinery for engaging across the health and social care system in Trafford is already in place. We recognise that a lot of work has already taken place which has resulted in ideas and plans and above all considerable enthusiasm and energy across the whole of the system, and it is vital that we maintain this momentum. We see the clinical panels as a very important means of engaging with the key partners, including members of the public. We envisage that the clinical panels will design the service models and pathways of care that we will be required to implement and deliver and it is therefore vital that we ensure that we are fully engaged in the work of the panels.

Ultimately, the shape of services must meet patients' needs as translated into commissioning plans.

In co-producing the service models for Trafford, should there be any significant service change, we would consult with the public at the earliest stage.

The reason for CMFT bidding to acquire Trafford Hospitals is therefore to ensure that there remains an NHS hospital within Trafford that delivers safe, local services integrated across primary, community secondary and social care that are high quality and lead to improved outcomes for patients. We believe we can offer a flexibility of approach to meet these aims.

We believe strongly that a financially viable and clinically safe model of NHS service provision that best meets the needs of all the stakeholders is achievable.

OUR STRENGTHS

The following strengths and attributes of our organisation illustrate why we are well placed to manage and deliver services in Trafford in the future:

- We have a long and successful history of working consistently and reliably with Trafford Hospitals clinical teams to sustain existing clinical services (e.g. A&E) and to develop and implement new pathways for patients (e.g. the elective surgical centre).
- Our structure (a number of individual hospitals within one over-arching organisation) will enable Trafford hospitals to remain a distinct entity – which will in turn enable the hospital to retain its focus on the **local** Trafford health and social care system, as well as benefitting from economies of scale and the support and back-up of being an integral part of CMFT.
- We are a financially sound organisation. We do not need to acquire Trafford Hospitals in order to achieve financial viability. This means that we do not need to take services out of Trafford, but can be **flexible** about providing services under different out-of-hospital models.
- We have a long history of providing **safe**, high quality services across all of the hospital sites within CMFT which is reflected in our Care Quality Commission registration, Clinical Negligence Scheme for Trusts levels achieved, Investors in People status, Monitor risk ratings and Hospital Standardised Mortality Ratios.
- Merger with CMFT can be completed by April 2012, thereby minimising the period of uncertainty and instability and would accelerate the achievement of financial sustainability. Achievement of this timescale is at the discretion of the local stakeholders due to our relationship with Monitor.

- We have unrivalled experience of bringing organisations/services together from multiple sites and differing previous models e.g. integration of RMCH and Booth Hall and acquisition of community services.

KEY CHALLENGES

The key challenges for the future are:

- *Maintaining safe clinical services in Trafford during the transition period* – throughout the period of uncertainty, services will need to be maintained in Trafford. Trafford already has a problem in recruiting and retaining staff in key areas. Further key members of staff may choose to leave. This would be particularly the case with a more protracted process and if there was a high degree of uncertainty.
- *Achieving consensus across all key stakeholders and the wider public* – the wide range of stakeholders involved will have differing views about future service delivery, but achieving agreement and active support for a safe and sustainable model of service provision in Trafford will be essential.
- *Achievement of efficiencies* – there are inevitable efficiency savings required across the NHS including Trafford. It will therefore be essential to agree and implement new, more efficient ways of working in a way which does not compromise clinical safety and effectiveness of treatments for patients. Careful consideration must also be given to ensure that the achievement of efficiencies does not impede the progress towards integrated models of care.
- *Merger of two organisations with differing cultures* – the merger of two organisations with differing cultures can be unsettling for some staff. We fully recognise that organisations and departments within organisations have different cultures and norms and have extensive experience in supporting individuals and teams through change of this nature.
- *IM&T integration* - a key component to facilitate integrated working across Trafford's healthcare system is the development and maintenance of robust information systems. A great deal of work has been done within Trafford to achieve two-way access between primary care and secondary care information systems. There is the risk that the preferred bidder by necessity introduces further IT systems that will require careful interfacing and integration to achieve the optimum solution for patient care.

We firmly believe that we can meet these challenges and that a financially viable and clinically safe model of NHS service provision that meets the needs of all the stakeholders is achievable. This will require early engagement and consultation with stakeholders and the public to develop a new model for the provision of health services in Trafford founded on, and complementing the principles of, integrated care.