

Report to: Cabinet – 6 October 2005

Community and Quality of Life Scrutiny Committee - 25 October

2005

Subject: Proposed merger of Nottingham City Hospital and Queens Medical

Centre NHS Trusts – Trent Strategic Health Authority Consultation

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1. Purpose of the Report

 To inform members of the proposed merger of the Nottingham City Hospital and Queens Medical Centre NHS Trusts, and the public consultation process which is now under way.

2. Background

The Council has recently received a letter and accompanying consultation leaflet from the Trent Strategic Health Authority setting out proposals to merge the NHS Trusts of Nottingham City Hospital and Queen's Medical Centre.

The Nottingham City and Queens Medical Centre hospitals are currently two separate Trusts forming part of the Nottingham health and social care community which comprises the Local Authority areas of Nottingham, Gedling, Broxtowe, Rushcliffe and the Hucknall area of Ashfield. The hospitals provide elective, emergency, day care, specialist and tertiary services to a local population of 650,000 and a wider population of over two million.

The leaflet and letter state that, in a time of significant policy change in the NHS, the Trust Boards of Nottingham City Hospital and the Queen's Medical Centre have come together to consider the strategic implications of change for the two hospitals.

A number of options have been considered for the future, but after careful deliberation, the Trust Boards concluded that the best way forward was to create a single new NHS Trust uniting the strengths of the two existing hospitals.

A twelve-week consultation period began on 8th September and will run until 1st December 2005. The Trent Strategic Health Authority will be inviting responses during this time and have contacted all Local Authorities to seek their views.

An e-mail address, Freephone number and Freepost address are provided for submitting responses.

3. Proposal

The consultation leaflet sets out a range of issues, summarised below.

Full copies of the leaflet are available from Trent Strategic Health Authority, Nottingham Hospitals Consultation, Freepost NEA 14614, Nottingham, NG7 1DR and on line at www.tsha.nhs.uk/nottinghamhospitalsconsultation

Reasons for Change

A combined Trust has the potential to shape and influence strategy and allocation of resources to a much greater extent than two medium sized separate organisations. The Trusts believe that a merger will enable them to overcome a number of challenges posed by a rapidly changing healthcare environment by:

- Improving standards of care and range of specialisation.
- Increasing coordination and integration of care.
- Responding to an increased financial challenge.
- Responding to a change in patient service requirements.

What the New Trusts Will Look Like

The single Trust will have responsibility for the provision of emergency and planned hospital services for the population of Nottingham and specialised services for a wider population. It will have a budget in excess of £525 million. The new Trust will continue to be a teaching hospital and a major research centre.

It is anticipated that the new Trust will provide a range of clinical services similar to that provided by the existing Trusts – clinical support, family health, medicine, surgery. The new Trust will have firmly held values based on the principles of the NHS, the contribution of the local community, designing services around the needs of the patient, valuing the contribution of staff and their development, responsible use of public money, and innovation.

Delivering Benefits for Patients

Both Trusts have demonstrated strengths in providing local services for local people. A new combined Trust providing one service for patients would build on these strengths, reduce duplication, increase a consistent approach to management, and be more cost effective. The new combined Trust will have the opportunity to provide one acute hospital service for everyone by:

- Maintaining and developing local services and valuing expertise.
- · Improving common standards and equal access.
- Enhancing quality assurance.
- Providing a single focus for joint work and working with primary care
- Developing the quality of services through training, education and research.
- Recruiting and retaining staff.

A limited number of patients may have their treatment location transferred to the other hospital as a result of service reconfiguration. Changes in the location of services are inevitable given the NHS policy direction which foresees services being provided ever-closer to patients' homes where this is clinically feasible.

Delivering Benefits for Staff

The new combined Trust will have the opportunity to:

- Offer staff a much broader base of opportunities open to them in a larger organisation.
- Provide more varied training programmes enabled by realised efficiencies and the broader service base.
- Build on and improve existing models of collaboration and partnership working, achieved by drawing on best practice from both organisations.
- Offer a more attractive working environment e.g. higher clinical standards; more opportunity for innovation.

Some reduction in the overall work force will be necessary. Within the first three years of the new Trust a 10% reduction in annual expenditure will be required. This will be partly met through reduced staff costs. As far as possible, this will be achieved by absorption, turnover, retraining, early retirement and voluntary redundancy.

Delivering Benefits for Other Stakeholders

The new combined Trust will have the opportunity to:

- Provide the academic community with a broader range of roles, opportunities and areas of specialisation.
- Provide the academic community with better teaching resources, facilities and coordination of support services.
- Establish a simpler interface for other stakeholders e.g. the PCTs have expressed the view that they would prefer to work with a single Trust provided that it has a collaborative approach to working with the wider health community.
- Make collaborative approaches to future service provision a key feature of the new organisation.

4. Recommendation

Members' instructions are requested.