

HEREFORD HOSPITALS NHS TRUST –FOUNDATION TRUST STATUS

Report By: Director of Adult and Community Services

Wards Affected

County-wide

Purpose

1. To consider the response to the public consultation inviting views on the Hospitals Trust seeking Foundation Trust Status.

Financial implications

2. None identified.

Background

3. The Chief Executive of the Trust briefed the Committee in June on the consideration being given to an application for Foundation Trust status as part of his presentation on the work of the Trust in the preceding year and future plans and thoughts. This was followed by a detailed presentation to the Committee on 5th September, 2006 on the consultation which the Trust had launched on the plan to consider applying for foundation trust status. Copies of the Trust's consultation document, "Your hospital in your hands" has been circulated to Members of the Committee.
4. The Committee held an informal meeting on 21st September at which some initial discussion took place on how the Committee might respond to the consultation exercise.
5. The consultation document contains a number of specific questions. These are listed below together with the emerging thoughts expressed by the Committee to date in response to them. Additional issues raised by Members are also set out.

SPECIFIC QUESTIONS IN THE CONSULTATION DOCUMENT

As a result of changes in Government Policy, you are now able to choose where you receive hospital treatment. Would you choose Hereford Hospital if you required treatment? If not, please explain your choice.

The Committee's position to date has been that Hereford Hospital clearly plays a vital role in providing healthcare in the County. It has expressed the wish to retain the provision of services within Herefordshire as far as is practicable and encouraged the hospital to seek to develop as a Centre of excellence in certain specialisms itself. The sorts of difficulties experienced by cancer patients having to travel to Cheltenham for treatment provide strong evidence for the need for an excellent hospital in Hereford. It is, however, essential that the hospital must continue to demonstrate that it can provide care to the appropriate standard and in a timely

Further information on the subject of this report is available from
Geoff Hughes, Director of Adult and Community services on 01432 260695

fashion. The Committee has noted the comments of the Trust's Chief Executive that the Trust's track record is one of the things that enables it even to consider applying for Foundation Trust Status.

Do you support the plan to have an independent and locally run NHS Foundation Trust hospital?

The Committee has carefully considered the arguments advanced by the Trust for seeking Foundation Trust status.

As stated in the consultation document these are that it *"will enable the Trust to build on its current strengths whilst also having the flexibility to meet the challenges and grasp opportunities. It will enable the Trust to:*

- *Deliver improvements in patient care by having the freedom to make all our decisions locally*
- *Be more open and accountable by consulting with local people on key decisions affecting the hospital Strengthen our links with the community, developing a culture of involvement by building a firm membership base, representative of the people we serve*
- *Use our finances more flexibly to improve patient care*
- *Attract and retain high quality staff by being able to provide unrivalled benefits and working environment."*

The Consultation document also states that, *"The Government is committed to offering all NHS Trusts the opportunity to apply to become NHS foundation trusts by 2008. We believe that hospitals which don't become foundation Trusts will eventually become part of larger groups of hospitals. For Hereford this could potentially mean a reduction or relocation of services that we currently provide and could have a huge impact on provision of healthcare in the County and surrounding areas."*

The Committee has acknowledged the arguments advanced in favour of applying for Foundation Trust Status. It has recognised the role of the Independent Regulator in determining whether the Trust's application is viable. It has also noted the statement in the consultation document that; *"NHS Foundation Trusts will still be part of the NHS, subject to NHS standards, performance ratings and systems of inspection. NHS quality standards and principles will remain, that is free care based on need NOT the ability to pay."*

Members have, however, indicated that they wish to carry out further research before expressing a view in response to this question. They have expressed particular concerns about the future, should an application for Foundation Trust status be successful, noting that whilst considerable efforts have been expended and financial disciplines maintained over the past few years in working towards achieving Foundation Trust status, in a sense the challenge begins once foundation trust status is achieved.

The Committee therefore wishes to gain a clear understanding of the Trust's Business Plan, the financial considerations and the implications if foundation trust status were to be achieved, if the Trust were subsequently to run into difficulties or even fail. They have also noted the role of the independent Regulator in determining

if the Hospital Trust's application for Foundation Trust status is viable and the Trust's own view as expressed to the Committee by the Chief Executive that further work needed to be undertaken with social care and health partners if an application were to be successful. They have also received an assurance that if the Trust Board itself does not want to make an application any pressure to take a different course will be resisted.

The Committee has noted that the views expressed in the consultation exercise are to be forwarded to the Department of Health and that the Trust would consider making a final submission in January 2007. The Committee would expect to be able to complete its further work before that deadline.

What do you think of our plans for developing services?

The Consultation document summarises these plans over the next 2-3 years as:

- *“Treat more patients by improving services in outpatients, investigative and surgical treatments, including diagnostic tests such as radiology so that by 2008 no one waits more than 18 weeks for treatment from the point they are referred by their GP. To achieve this we will appoint additional consultants in orthopaedics, gastroenterology, dermatology, and diabetes.*
- *Enhance the quality of care we provide for emergency patients by developing a service to make quicker assessments of patients on admission*
- *Move our clinical services, as far as possible, into the modern part of the County hospital building enabling the hatted wards to be vacated and demolished.*
- *Construct a new expanded cancer centre in conjunction with Macmillan Cancer Support enabling more patients to receive treatment locally.*
- *Enhance our links with local community hospitals and GP practices to provide more integrated care for our patients by:*
 - *Developing arrangements for the electronic transmission of x-ray and pathology results*
 - *Ensuring hospital consultants and clinicians actively support FPs in managing patients with chronic conditions in the community*
 - *Providing more outreach services such as out patient clinics, in community hospitals where possible.*

Members have not as yet expressed a specific view on these points. A proposed response is that the Committee expresses its support for the development of a range of services, as set out in the consultation document as it is clearly vital to ensure the future financial viability of the hospital.

Do you think our proposals for public member constituencies fairly represent the population we serve.

The consultation document states that, *“it intends the membership and the elected governors to be a fair reflection of the population it serves, via the creation of public and staff constituencies.”* *“The public constituency will cover the whole of*

Herefordshire, south and mid-Powys and some electoral wards in Monmouth, Ludlow and Craven Arms.”

| Public Constituency | No of Elected Governors |
|--|-------------------------|
| North Herefordshire (Leominster and Ludlow) | 2 |
| South Herefordshire (Ross on Wye and Monmouth) | 2 |
| East Herefordshire (Bromyard and Ledbury) | 2 |
| West Herefordshire (Kington and the Golden Valley) | 2 |
| Hereford City (North) | 2 |
| Hereford City (South) | 2 |
| South Powys (Talgarth and Crickhowell) | 2 |
| Mid-Powys (Llandrindod Wells, Presteigne, Hay, Rhayader) | 2 |
| Total | 16 |

The Council of Governors as a whole comprises 28 representatives: 16 from the public constituency, 6 from Stakeholder Organisations, and 6 from staff.

The six stakeholder Organisations are: Herefordshire Primary Care Trust, Powys Local Health Board, Herefordshire Council, Powys County Council, the Voluntary Sector and one other to be determined.

The level of representation from Powys was questioned at the Committee's last meeting. Members have yet to express a firm view on this question.

A proposed response is that the Committee recognises the efforts which have been made to secure representation. It would expect the position to be reviewed, however, if this did not prove to be fair representation in practice.

Do you agree that the lower age limit to becoming a member should be 14? If not – what age limit do you think would be appropriate and please let us know why?

Membership is described as, *“bringing a number of benefits enabling people to be involved in the hospital's future. These include receiving regular information about the services we provide and influencing our plans for the future development of*

Further information on the subject of this report is available from
Geoff Hughes, Director of Adult and Community services on 01432 260695

services; standing for election as a governor, nominating others as prospective governors and voting to elect a governor; providing views on hospital services to help improve the patient experience.”

Members have not as yet confirmed a view on this point. A suggestion was made at the last meeting that there should be a lower age limit of 18.

Should all staff be included as members unless they choose to opt out?

Members have expressed no view on this point. It is proposed to support the proposal that staff be included as Members unless they choose to opt out, on the assurance that there will be no pressure placed on those who do choose to opt out.

Who else in your opinion should be represented as a nominated stakeholder Governor?

As referred to above the six stakeholder Organisations are: Herefordshire Primary Care Trust, Powys Local Health Board, Herefordshire Council, Powys County Council, the Voluntary Sector, and one other to be determined.

Members have not expressed a view on this point. No additional representation is proposed.

Do you feel that our proposals for the size of the Council of Governors is appropriate?

As referred to above the Council of Governors as a whole comprises 28 representatives: 16 from the public constituency, 6 from Stakeholder Organisations, and 6 from staff.

Members have expressed no view on this point. It is suggested that Council of Governors comprising more than 28 Members might become unwieldy.

Is there anything else relating to this public consultation exercise and outcome that you would like the Secretary of State or independent Regulator to know?

Members are asked if there is anything they want to add to their comments above about their wish to undertake further research to gain a clear understanding of the Trust's Business Plan, the financial considerations and the implications, if foundation trust status were to be achieved, if the Trust were subsequently to run into difficulties or even fail. It is intended that the Committee will inform the Secretary of State of its findings following this further research.

RECOMMENDATION

THAT the Committee considers its response to the public consultation exercise on the Hospitals Trust seeking Foundation Trust Status.

BACKGROUND PAPERS

- None

Further information on the subject of this report is available from
Geoff Hughes, Director of Adult and Community services on 01432 260695