

Transforming Community Services

Update for Governors Meeting

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1. Background

NHS Sheffield is required to dispose of their community service provider arm by 31 March 2011. They initiated a transfer process in April 2010 which concludes with the transfer of services on 01 April 2011.

2. STH Process

The Board of Directors established an Investment Committee as recommended by Monitor when considering service mergers or acquisitions. This met regularly throughout and considered the following the results from;

- The financial due diligence review
- The commercial and legal due diligence review
- The clinical services review findings

It also considered;

- The Heads of Terms proposals outlining the transferring the proposed adult community clinical services,
- The Business Transfer agreement which is the legal document backing the transfer of services to STH.
- The business case for the transfer of community services to STH
- The community service contract including the proposed financial plans.

Having considered all of this information and plans indicating that community services would transfer to STH in recurring financial balance, the Investment Committee recommended the transfer of adult community services from Sheffield PCT to STH should proceed. This was discussed and ratified at the Board of Directors meeting on 16 February 2011. On that basis work is being undertaken to enable the transfer to take place on 01 April 2011 and the transformation to occur thereafter.

3. Services that are transferring

After negotiation Appendix 2 sets out which FT each current provider arm service will transfer to.

4. Management Arrangements

The transfer will have three phases;

- Phase 1 will be to 31 March 2011 and covers the completion of the transfer of services and the legal process.
- Phase 2 will be from 01 April to 30 September 2011 which is being called the "interim phase". During this period, services will transfer and remain as a single management entity under the leadership of the current Managing Director (MD). The MD will be accountable to the STH CEO during this time. The services will be called the interim Community Services Care Group and will operate in the same way as other STH care groups. During this period work will be undertaken to support the transformation of clinical services, including services currently provided by STH. This will lead to the development of a transformational plan setting out the timetable to

transform each service over the following three years and set out the proposed management arrangements that will be implemented from 01 October.

- Phase 3 covers the period from 01 October 2011. This will involve implementing the recommendations from phase 2 and will signal the start of the transformation process.

Governance arrangements have been clarified. The MD for community services will become a member of the Trust Executive Team and be accountable to the STH CEO. STH governance arrangements, policies and procedures will have primacy from 01 April 2011, ie from transfer of services.

The Board of Directors were keen to have dedicated project resource supporting this process and established a “Service Transition Team” with the role of leading work for each of the three phases outlined above and implementing agreed plans.

5 Asset transfer (including property)

Under policy issued by the Department of Health, assets with an individual value of over £5k will remain with the PCT (and successor organisations) rather than transfer to receiving organisations in this case STH. The PCT will grant STH a license to access the property and use retained assets for the 3 year duration of the initial contract. All items with an individual value below £5k will transfer to STH for a nominal value.

6 The Adult Provider Partnership Board (APPB)

Many of the services provided by the current Provider Arm are for citizens who do not attend hospital and/or access services from a number of providers including Social Services. The constituent members of the APPB are STH, the Care Trust, Four local GPs and Sheffield City Council. It is a cross cutting advisory group tasked with the remit to ensure that the transformation of services delivers real, tangible benefits for patients and citizens in a more cost effective manner. The APPB will in most instances be the group that initially considers proposals for service change and integration. Primacy for all decisions regarding STH provided community services from 01 April remains with the STH Board of Directors.

7 Conclusions

The transfer of community services offers a real opportunity to transform the whole clinical pathway, genuinely integrating services, improving quality of outcome and patient experience, whilst providing better value for money.

Although this initiative has been badged as “transforming community services” the transformation process will also involve a wide range of services currently based at STH.

Appendix 1; Service Distribution

Proposed list of where staff contracts will transfer

Sheffield Teaching Hospitals NHS FT	Sheffield Children's NHS FT	Sheffield Health and Social Care NHS FT
Admissions Avoidance/Interface Services Care Home Support	Child Health Children's Speech and Language Therapy	Brain Injury CFSME
Care Managers Centre for HIV	Family Nurse Partnership Health Visiting	IAPT Primary Care Mental Health
Community Podiatry	Health Visiting Liaison	Neuro Enablement Service
Community Mātans Continence Service Contraception and Sexual Health Service	Homeless and Travellers Service Children's* Looked After Children Safeguarding Children Service	PCT Managed Practices* SCAIS* Speech and Language Therapy and Physiotherapy (mental health/learning disabilities)
Sheffield Salaried Primary Dental Service* Dietetics including: Weigh Ahead	School Nursing Sure Start	
District Nursing Domiciliary Physiotherapy Evening/Nights and Weekend Nursing GP Collaborative Intensive Home Nursing Intermediate Care		
Lymphoedema Service Mental Health Support for Case Management Phlebotomy Service		
PhysioWorks Musculoskeletal, Foot and Ankle Service PhysioPlus (formerly PhysioWorks for staff)		
Physiotherapy including: Falls and Rehabilitation Primary Care Addiction Services (PCASS) Pulmonary and Cardiac Rehabilitation Referral Information Service Single Point of Access		
Specialist Nurses including: Respiratory, Heart Failure, COPD Specialist Podiatry including (Podiatric Surgery*) Speech and Language Therapy Adults Tissue Viability Tuberculosis Service Walk-in Centre		

Key	Clinical Business Unit
*	subject to the outcome of social enterprise
Blue	Long Term Conditions
Red	Children, Families and Wellbeing
Green	Care Closer to Home
Yellow	Primary Care

