

**EXECUTIVE SUMMARY**  
**REPORT TO THE BOARD OF DIRECTORS**  
**HELD ON**  
**WEDNESDAY 20<sup>TH</sup> JULY 2016**

<b>Subject</b>	Acute Federation Board
<b>Supporting TEG Member</b>	Andrew Cash
<b>Author</b>	Janette Watkins Programme Director Working Together Acute Care Vanguard
<b>Status<sup>1</sup></b>	Approval*

**PURPOSE OF THE REPORT**

The report sets out the development of the Working Together Partnership to an Acute Federation Board.

**KEY POINTS**

The Working Together Partnership was selected as an acute care collaboration vanguard in September 2015. The core feature of the vanguard application was the development of a confederated approach to endow the decision making body with added authority and greater commitment to support the development and implementation of a high level clinical strategy for the collective. Previously progress had been made by the seven willing acute partners but a review by Chief Executives and Trust Chairs in July 2015 concluded that a more robust decision making process, that increased Trust commitment to delivery, and a more structured approach was required to increase the pace and scale of change required. Any new governance structure would also need to balance carefully a committed collective approach with sovereignty considerations.

The development of the Acute Federation Board is therefore seen as a core aspect of the Vanguard development which has been supported by the National New Care Models team and value proposition funding. The focus for our acute care collaboration is on a stronger more consolidated decision making mechanism to allow our vanguard to identify and address systematic issues through standardisation and evidence based best practice, with collective clinical strategies and managed clinical networks to pioneer accountable care networks.

An updated Working Together Partnership Agreement was agreed by Chairs and Trust Boards in February/March 2016 which underpins the partnership working and principles of the Acute Federation. Each Trust in the partnership will retain organisational sovereignty and all systems of governance will remain in place at an individual site level, undisrupted by the formation of a Federation and entailing no loss of organisational sovereignty, save that which is willingly pooled.

The Acute Federation Board derives its authority from the Trust Boards and Chief Executives of the participating organisations. The precise scope of services to be included in the arrangements will be determined by partners and align with the STP strategic review. The Acute Federation Board will support a governance structure that can differentiate those services for shared accountability and those for which individual organisations are accountable for each aspect of delivery and provide clarity on where individual Trust organisations are ceding authority to the Federation, ensuring recommendations are provided to Trust Boards for any changes which have a material impact on the Trusts.

**IMPLICATIONS<sup>2</sup>**

<b>AIM OF THE STHFT CORPORATE STRATEGY 2012-2017</b>		<b>TICK AS APPROPRIATE</b>
1	Deliver the Best Clinical Outcomes	y
2	Provide Patient Centred Services	y
3	Employ Caring and Cared for Staff	y
4	Spend Public Money Wisely	y
5	Deliver Excellent Research, Education & Innovation	

## RECOMMENDATIONS

The Board of Directors is requested to approve the move to an Acute Federation.

## APPROVAL PROCESS

Meeting	Date	Approved Y/N
TEG	13.7.16	Y
Board of Directors	20.7.16	