

JOINT CITY AND COUNTY HEALTH SCRUTINY COMMITTEE

15 SEPTEMBER 2009

REPORT OF THE ACTING HEAD OF OVERVIEW AND SCRUTINY (NOTTINGHAM CITY COUNCIL)

NOTTINGHAMSHIRE HEALTHCARE NHS TRUST – FOUNDATION TRUST EQUIVALENT STATUS

1 SUMMARY

This meeting will be attended by representatives of Nottinghamshire Healthcare NHS Trust who will update the Committee on the outcomes of the consultation process for their application for Foundation Trust Equivalent status.

2 MATTERS FOR CONSIDERATION

The Committee is asked to

- 2.1 consider the outcomes of the consultation process to be presented at the meeting and to consider the quality of the consultation process;
- 2.2 consider whether they would like to receive further information and, if so, when.

3 BACKGROUND AND SUPPORTING INFORMATION

- 3.1 Nottinghamshire Healthcare NHS Trust has made an application for Foundation Trust Equivalent status. The application was made to the East Midlands Strategic Health Authority, prior to an assessment by Monitor, the Foundation Trust regulator, with a decision expected around April 2010. Information on NHS Foundation Trusts can be found at Appendix 1 and the Healthcare Trust proposal is attached at Appendix 2.
- 3.2 The Foundation Trust Equivalent model has been designed by the Department of Health for those Trusts for which Foundation Trust status isn't appropriate. Nottinghamshire Healthcare Trust provides High Secure Services at Rampton Hospital and because the Secretary of State wants to remain assured about the delivery of those services the Trust is unable to apply for Foundation Trust status. Foundation Trust equivalence provides similar freedoms and responsibilities, even though there is no change in the legal status of the organisation.
- 3.3 The Trust has a legal duty to consult the public and the Joint Health Scrutiny Committee on its proposals. It is the role of the Joint Health Scrutiny Committee to both contribute its views to the consultation and to scrutinise the quality of the consultation process itself.
- 3.4 The Healthcare Trust consultation period ran from 1 May – 31 July 2009. As well as inviting written comments on their proposals, the Trust held a number of consultation events across the county. The Trust asked a number of key questions in relation to its proposals, which can be found on page 19 of the proposal document attached at Appendix 2.

- 3.5 The Joint Health Scrutiny Committee considered its response to the consultation at its meetings on 19 May and 14 July 2009. The Committee did not make any objections to the Trust's application but asked that the Trust take the following points into consideration as they take their application forward:
- a) That the Trust considers offering Partner Governor places to organisations that work with communities, such as the Police and Housing Associations, so that the impact on communities of living with people with mental health problems can be represented.
 - b) That the Trust considers offering a Partner Governor place to Nottingham University Hospitals NHS Trust, due to the close links between the two organisations.
 - c) That the Trust considers increasing the number of Public Governor Members from the city to reflect the higher level of need amongst city residents.
- 3.5 Representatives of the Healthcare Trust will attend today's meeting to provide the Committee with an update on the outcomes of the consultation and the progress of their application to date.
- 3.6 Members of this Committee are asked to consider these outcomes and the quality of the consultation process, as well as what further information they might like to receive to ensure that they fulfill their scrutiny role.

4 LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING EXEMPT OR CONFIDENTIAL INFORMATION

None

5 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

Positive about Foundation Trust Equivalence, Nottinghamshire Healthcare NHS Trust

www.monitor-nhsft.gov.uk

www.dh.gov.uk

CONTACT DETAILS

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24 August 2009

NHS FOUNDATION TRUSTS

NHS Foundation Trusts are independent, not for profit public benefit corporations with accountability to their local communities rather than Central Government control. While the Secretary of State for Health has no powers of direction over them, NHS Foundation Trusts remain part of the NHS and exist to provide and develop healthcare services for NHS patients in a way that is consistent with NHS standards and principles ie free care, based on need, not ability to pay. Clinical activity for private patients is strictly limited.

NHS Foundation Trusts have greater freedoms and flexibilities than NHS Trusts in the way they manage their affairs, eg

- Freedom from Whitehall control and performance management by Strategic Health Authorities
- Freedom to access capital on the basis of affordability instead of the current system of centrally controlled allocations
- Freedom to invest surpluses in developing new services for local people
- Freedom of local flexibility to tailor new governance arrangements to the individual circumstances of their community

NHS Foundation Trusts have members drawn from patients, the public and staff and are governed by a Board of Governors comprising people elected from and by the membership base.

NHS Foundation Trusts are inspected by the Care Quality Commission (previously the Healthcare Commission, the Commission for Social Care and the Mental Health Act Commission) for compliance with healthcare standards and targets in the same way as all other NHS Trusts. NHS Foundation Trusts are also overseen by an independent regulator called Monitor. Monitor has statutory powers to authorise NHS Trusts as NHS Foundation Trusts, oversee compliance by NHS Foundation Trusts with their terms of authorisation (a set of detailed requirements covering how foundation trusts must operate) and intervene in the event of significant non-compliance with the terms of authorisation and other statutory obligations.

positive

Nottinghamshire Healthcare **NHS**
NHS Trust
Positive about mental health and learning disability



positive about
foundation trust equivalence
consultation document

Chair and Chief Executive what are we trying to do?

The journey of setting NHS organisations free from central direction began with the creation of NHS trusts and, subsequently, NHS foundation trusts. It continues. Our commitment to making acute, mental health and ambulance trusts into NHS foundation trusts remains strong. It is our clear ambition that in future, hospital care will be provided by NHS foundation trusts. In order to achieve this, we will aim to accelerate the rate at which existing NHS trusts achieve NHS foundation trust status.

However, there are some providers, for example high secure units, where NHS foundation trust status is not appropriate. Here we will aim to give similar freedoms to organisations, which achieve and maintain similar levels of good governance and financial stability, to those required of NHS foundation trusts.

National guidance contained in the Lord Darzi 'High Quality Care for All' ref page 61 points 8 & 9.

The second paragraph of the above quote describes a new model of healthcare organisation known as Foundation Trust Equivalent. Nottinghamshire Healthcare is one of the Trusts that will benefit from Foundation Trust equivalence. We have been providing a wide range of constantly improving mental health and learning disability services to the people of Nottinghamshire and beyond for almost nine years.

During that time we have made a considerable difference to the lives of people who use our services, their carers and our staff. Now, however, the time has come to build upon what we have done and become a first rate service provider in the new, more competitive, world. To make sure that we can realise our full potential and further improve the way we do things we are applying for Foundation Trust Equivalent status. We will do this by working more closely with people who use our services, their carers, our partners and the general public.

This document will tell you about what this means, what we are planning to do and how you can influence the future of mental health and learning disability services – services that affect every one of us, whether personally, within our family and friends, or professionally. This move is in line with national policy aiming for a personalised service for people close to their homes and also a service that meets their individual care needs.

This is not just about how we provide our services to individuals it's about the public perception of those services and people who use them. Mental health and learning disability issues affect many people and yet still carry a stigma.

Do you know that 1 in 4 people experience some kind of mental health problem in the course of a year? Or that about 1 in 10 children have a mental health problem at any time? Or that 9 out of 10 prisoners have a mental disorder?

Just over 5,000 people in Nottinghamshire have a severe or moderate learning disability which impacts on their ability to take part in and undertake activities that most of us take for granted.

It's easy to reel off a list of statistics – without realising the massive impact that these figures have. Let alone the personal cost or the cost to the economy. That's something we're keen to make a difference about.

That's also why we feel passionate about what we do. We believe we are at the right stage to move forward, working with people who use our services, their carers and our partner organisations to become the leading mental health and learning disability service provider in the UK. We are keen to involve you in achieving that ambition.

By becoming a Foundation Trust Equivalent we are both confident that the freedoms and opportunities available to us will help us to make a real difference for the future of mental health and learning disability services in this part of the country and most of all for the people who use those services and their carers. It will also make us a better employer.

We need your help to do this. You can help us by becoming a member and responding to the plans detailed in this consultation document. We look forward to hearing your views, acting on them and explaining where you have made a difference.



Clair Chilvers and Mike Cooke

Clair Chilvers

Clair Chilvers
Chair

May 2009

Mike Cooke

Mike Cooke
Chief Executive

About our Trust

Nottinghamshire Healthcare is one of the country's largest mental health and learning disability Trusts. We provide high secure services at Rampton Hospital, two medium secure units, one at Wathwood Hospital in South Yorkshire, and Arnold Lodge in Leicestershire. In addition, and accounting for two thirds of its business, the Trust provides mental health and learning disability services to people in Nottinghamshire in a variety of settings, from community services through to acute wards and low secure provision; services are provided from more than 100 sites by almost 6,000 staff.

The Trust's services are provided within Adult Mental Health Services, Forensic Services, Mental Health Services for Older People, Child and Adolescent Mental Health Services, Learning Disability Services and Drug and Alcohol Services.

Our vision and values

Nottinghamshire Healthcare is positive about mental health and learning disabilities. Through our vision and values we will ensure that we make a difference to the lives of people who use our services and their carers:

We are committed to being recognised as the leading provider for mental health and learning disability services – locally relevant, nationally important.

We will continually improve our services and our patient, service user and carer experience and at the same time reduce the stigma associated with mental illness and learning disabilities.

We will be a great place to work for all our staff and a valued partner with clear service standards set by and with our Commissioners, service users and our staff.

What is a Foundation Trust Equivalent?

To understand what a Foundation Trust Equivalent is, we need to know what a Foundation Trust is. A NHS Foundation Trust is a different legal entity to a NHS Trust, it is a "Public Benefit Corporation" which has Members, Governors, and Directors with roles set out in the NHS Act 2006. A Foundation Trust is NOT directable by the Secretary of State, and is answerable to a regulator known as Monitor. Before a NHS Trust is authorised to become a Foundation Trust, a process of rigorous testing is undertaken.

Some NHS organisations have a distinct role which is nationally critical; even related to national safety. Nottinghamshire Healthcare is one of these organisations: our services include Rampton Hospital, one of three national high secure psychiatric hospitals. For this reason, we need to remain directable by the Secretary of State.



Sculpture entitled 'Birds in Flight' created by patients at Rampton Hospital.

We are an ambitious organisation. We want the same standards and freedoms as a Foundation Trust, and we want to be held to account at a very high level. We also want to be accountable to the population we serve. We want to operate at an equivalent level to a Foundation Trust.

A model called Foundation Trust equivalence has been developed and outlined in Department of Health policy, which will allow Trusts like us to operate in a similar way to a Foundation Trust, but without the change in legal status. We will remain a NHS Trust established and accountable to Government, but we are still accountable to our Membership through a Members' Council.

Sharon Howe, Ward Manager and Mike Cooke open the newly refurbished Bestwood Ward.



'Picnic at Chatsworth' by Rob Van Beek

P **people:** are central to everything we do: we work with people, for people, in partnership

O **penness:** we listen to what people tell us, whether we like what we hear, or not, and act on that information

S **afe:** sound, supportive, sensitive practices show how we respect and value our staff, service users and other stakeholders

I **ntegrity:** we behave honestly in a way that demonstrates our values, we celebrate the good things we do, and learn from our setbacks

T **rust:** we are trustworthy, we do what we say, and say what we can't do

I **nnovation:** we try new things to be the very best in our field

V **alue:** we value and respect the diversity of our staff, service users and other stakeholders

E **xcellence** is our standard, and we enjoy achieving it together!

Nottinghamshire Healthcare as a Foundation Trust Equivalent

The public will still experience healthcare according to core NHS principles – free care, based on need and not ability to pay.

Becoming a Foundation Trust Equivalent will help us in our ambition to be the best service provider and best employer in mental health and learning disability services nationally.

The first main change you will see because of Foundation Trust Equivalent status, is that people will get more of a say in how the Trust runs and what it provides. We already have an excellent track record of involving people who use our services, their carers, and our staff. This new status will make that more formal. Foundation Trust Equivalent status will be underpinned by a democratic

body, the Members' Council. Our members will vote for Governor Members who will sit on the Members' Council. The Members' Council will have real influence in how services develop, and how we spend our money.

We will use Three-way Governance. Three-way Governance means that power and responsibility will be shared between three parties:

- **the public, service users and their carers**
- **staff**
- **our partners**

These three groups make up the three sides of the Members' Council.

Benefits of being a Foundation Trust Equivalent

Services that meet the needs of our communities

Foundation Trust equivalence will enhance our ability to respond to the needs of our local and wider communities in terms of the services we provide. The views of local people will directly influence decisions about services. They will be included as elected representatives on the Members' Council. As we will be able to check these are real through our continued monitoring, feedback and action. We must not forget that our service users and their carers also form a part of these communities and will also be eligible to stand for election for the Members' Council. As a Trust their involvement has always played a crucial role in how we run things - whether it's devising new services and processes or interviewing potential staff (including the Chief Executive). Their past and current experiences will have a strong influence on how our services should be shaped.

Service standards that will be monitored by the Members' Council

The Members' Council will also have an important role in monitoring our performance, ensuring our compliance to external standards and frameworks, and ensuring we spend our money wisely. Foundation Trust Equivalent status brings a further level of accountability into the Trust – accountability to local and wider communities.

Enhanced partnership working, that will deliver improvements in the responsiveness of services

The composition of the Members' Council brings together for the first time the public, service users, carers, NHS staff and partner organisations. This new forum for discussion will help bring innovation and efficiency into service delivery. Some of the Partner Governor Members will come from our commissioning Primary Care Trusts which will help us strengthen ties and understand fully their requirements and way of working.

Improved regulation that will deliver improved confidence and quality

As a Foundation Trust Equivalent, we will be authorised and monitored in the same way, and to the same standard as a Foundation Trust. We will however, be authorised and regulated by the Strategic Health Authority, NHS East Midlands. We will be given specific criteria which we will be required to meet. We will only be authorised when we have met this criteria and demonstrated the quality of our services. This will increase the confidence of people who use our services, their carers, and our staff in what we are doing.

Increased freedoms that we will earn as a result of excellent performance

As confidence grows, the people who monitor our performance (NHS East Midlands and the Care Quality Commission) will give us more freedom to do what our local (and wider) communities want. This will include the freedom to reap the rewards of "good housekeeping".



We celebrate reaching 4,000 members in November at the opening of the Rosewood Centre in Ollerton.

What will remain the same & what will be different?

same

- Range of services
- Part of NHS
- Collaborative partners
- Quality provider
- Tackling mental health and learning disability stigma
- Accountability on high secure services

different

- Membership and Members' Council
- Authorised and regulated by NHS East Midlands
- Able to compete in the market
- Financial freedoms within a strong plan
- More impact and influence

Do you agree we should apply for Foundation Trust equivalence?

Governance arrangements

Membership

We have been working to develop a membership already and at the moment have almost 5,000 public members and nearly 6,000 staff members. As we have described earlier, these members will have an important role in shaping the future of the Trust. We want our membership to grow in size and in influence. Our membership will work with us in our fight against stigma and will help us lead the way in the development of the highest quality mental health and learning disability services.

Why become a member?

Being a member means that you can:

- **help to shape local mental health and learning disability services through opportunities to comment on the services we provide and what our future plans should be**
- **be informed about local NHS mental health and learning disability services**
- **work with us to tackle stigma around mental health and learning disability**
- **sit on the Members' Council and helping to shape the Trust's plans and reviewing how well the Trust is doing**

As a thank you for being involved, members will benefit from discounts from major retailers through NHS Discounts.

We want our membership to focus on areas where their impact will be most effective. People most effectively produce change when working in groups with a common passion or interest; we are calling these groups 'Communities of Interest'. It would be wrong to determine these groups at this stage, as they will develop from the membership itself. But an example of 'Communities of Interest' might be in the areas of:

- A care group - learning disability
- An area - services in Bassetlaw
- An issue - fighting stigma and promoting recovery

◀ **Graham Allen MP visits Highbury Hospital which is part of his constituency.**

Do you agree with the way we are sub-dividing our public constituency?

We are already fighting the stigma that is still associated with mental health and learning disabilities. Our Chief Executive, Mike Cooke, has achieved significant national, regional, and local profile in this area. We are in a position of influence to help raise awareness of the issues and to encourage a more positive attitude towards people who use our services. Our anti-stigma campaign involves work on a local, regional and national level, including the national 'Time to Change' campaign. We anticipate that one of the main motivators for people to join and work with us as a member will be to fight against stigma.

Who can be a member?

Any member of the public or service user who is 12 years old or above, and who lives in England and Wales

can be a member. Any member of staff can join as a staff member; this currently happens automatically, with an opt-out option (staff membership is linked to payroll). 12 year olds have voting rights but cannot stand as Governor Members until they are 16.

People who work with us as volunteers, secondees, and under contract will automatically be invited to join as public members, and will be associated with a specific Community of Interest.

Memberships constituencies

We want you to comment on what member groups we have:

- Public
- Service users and carers (optional)
- Staff

The public constituency can be divided, but only geographically, along local authority ward boundaries. We think we should sub-divide the public constituency into four areas based on boundaries that mirror our Local and Forensic Divisions' catchment areas: two sub-divisions aligned with the County and City Local Authority boundaries for Nottinghamshire, plus two further sub-divisions aligned to the wider catchment areas for Medium and High Secure Services.

The proposed public constituencies are:

- Nottingham City
- Nottinghamshire County (minus City)
- South Yorkshire, and the rest of the East Midlands
- The rest of England and Wales.

Do you think we should have a separate service user and carer constituency?

The service user and carer constituency

We could have a separate service user and carer constituency. There are pros and cons to this:

Pros:

The creation of such a constituency "protects" space for some of our more vulnerable service users for example people with a learning disability or those who have needed the support of forensic services.

Cons:

Having a separate service user and carer constituency could reinforce stigma; it divides service users and carers from other members of the public, thus weakening the "knowledge" base of the public constituency.

After much careful consideration we feel that we should not divide the service user and carer constituency from the public constituency as it could lead to stigma. We also feel that service users and carers will impart valuable knowledge and experiences to the rest of the public. We hope that this process will unify those who have an interest in what we do and in the long term help us eradicate stigma. We also think we can create space for some of our more vulnerable service users through our Communities of Interest approach. Your views on this topic are really important so please share them with us.

Of course, people who have had contact with services can choose which constituency to join. If we have a service user and carer constituency it would be open to anyone who has used mental health or learning disability services at any time, or anyone who has been a carer at any time.



The staff constituency

Our staff will automatically be members unless they choose not to be. It is proposed that the staff constituency is divided either according to professional group, or according to geography/work base which mirrors our public divisions. We are describing these as Option A and Option B.

option A

- Doctor
- Nurse
- Allied Health Professionals
- Clinical Support Staff
- Non Clinical Support Staff

option B

- Local Services Division
- Forensic Services Division
- Corporate Services

Do you think we should have staff grouped according to profession or area of work?

The Members' Council

The members will vote for the Governor Members who will sit on the Members' Council and representatives of partner organisations will be appointed. The Members' Council will be chaired by the Trust Chair (who will not be a Governor Member). The Members' Council must have:

- A majority of elected public Governor Members
- At least 3 staff Governor Members
- At least 1 Governor Member appointed by a Primary Care Trust (PCT)
- At least 1 Governor Member appointed by a Local Authority whose area includes all or part of the public constituency

- At least 1 Governor Member appointed by a university if the Foundation Trust Equivalent area includes a medical or a dental school

Role of the Members' Council

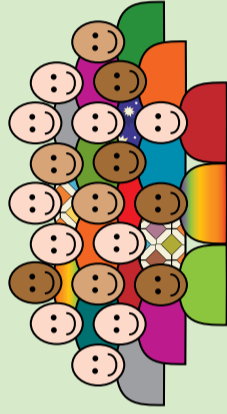
- Link to community support
- Provide service user and carer feedback on the Trust's services and performance and its future plans.
- Produce greater involvement in specific projects
- Offer mentoring (guidance) to others
- Collectively champion Trust campaigns e.g. our Anti-Stigma Campaign

Wendy Saviour, Chief Executive of NHS Nottinghamshire County, said:

“ We are delighted to support Nottinghamshire Healthcare in its application to become a Foundation Trust Equivalent. By working with this model and an active membership there will be real scope for improving the way mental health and learning disability services are delivered to the people of Nottinghamshire. We look forward to a continued strong working relationship with the Trust. **”**

The Membership and Members' Council

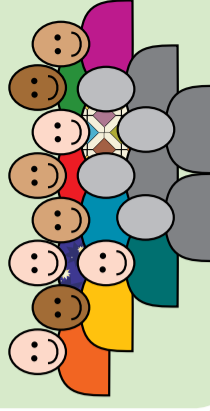
19 Public Governor Members



5 Staff Governor Members



8-13 Partner Governor Members



Public, Service User, Carer Members

Staff Members

Partners and Other Stakeholder Members

Do you agree with the number of Governor Members we are planning to have?



The opening of our second Involvement Centre - Rosewood in Ollerton. It was completely project managed by service users and carers from the North of the County.

Number of Governor Members:

The tables below recommend the numbers of public, staff, and partner Governor Members.

Public Governor Members

Constituency	No of Governor Members
City	4
County	11
South Yorkshire and East Midlands (excluding Nottinghamshire)	2
Rest of England and Wales	2
Total	19

Notes
 1. The population of Nottingham is 266,988 and that of the County (including Bassetlaw) is 748,510. It is proposed that City has 4 places and County 11 to reflect this proportionality
 2. The numbers will be recalculated if a service user and carer constituency is created



Mike Cooke and Professor Leigh Drake, Director at the University of Nottingham Business School, launch Invest to Innovate.

Staff Governor Members - Option A

Staff group	No of Governor Members
Doctor	1
Nurse	1
Allied Health Professionals	1
Clinical support staff	1
Non clinical support staff	1
Total	5

Staff Governor Members - Option B

Staff group	No of Governor Members
Local Services Division	2
Forensic Services Division	2
Corporate Services	1
Total	5

Who do you think should be the extra 4 Partner Governor Members?

Appointed Governor Members: partner organisations

Partner	No of Governor Members
Mandatory partner places (expanded to give each commissioning Primary Care Trust (PCT), the National High Secure Commissioner and principal authority at least one seat.)	
A university	1
Nottingham City Council	2
Nottinghamshire County Council	2
Bassetlaw PCT	1
NHS Nottingham City	1
NHS Nottinghamshire County	1
Sefton PCT - High Secure Commissioner	1
Up to 4 additional places, for partner organisations who wish to be involved	4
Total	13

SUMMARY

Members' Council: Summary	No of Governor Members
Public/service user and carer constituency	19
Staff constituency	5
Partner appointments	13
Total	37

Andrew Kenworthy, Chief Executive of NHS Nottingham City, says;

“Mental health is a very important issue for this city - it is estimated that around 33,000 people in Nottingham have a common mental health problem - and we strongly support any proposals which would see an improved service for our local population. We believe Foundation Trust Equivalent status for Nottinghamshire Healthcare would bring real benefits for service-users with the Trust better positioned to re-invest resources and re-shape services according to local needs. As commissioners of mental health services, our organisation has always had a good working relationship with the Trust and we are committed to supporting them in this application.”



Learning Disability Service User, Matthew Street is awarded the British Gymnastic 5 Star Award for trampolining.

The consultation process

We want to hear your views about the plans we have outlined in this document about being a Foundation Trust Equivalent. That includes our proposed membership, and Members' Council. We will also have a Board of which the Non Executive Directors will continue to be appointed by the Secretary of State for Health. We will take into account your comments to help ensure that we make the right and best decisions regarding these issues and will also feedback where your comments have made a difference.

How you can have your say

We are seeking the views of a wide range of people and organisations during the consultation process and we welcome your views and comments on our proposals to become a Foundation Trust Equivalent. The consultation period will run for three months and there are several ways to have your say:

Public meetings

Attend a public meeting - we are holding four public meetings in our local Primary Care Trust areas to give people the opportunity to discuss the proposals and to share their views.

Dates for these meetings will be made widely available.

Feedback form

Complete the consultation feedback form on page 19 and return this in an envelope to the following freepost address:

Communications, Nottinghamshire Healthcare, Freepost MID30082, Nottingham, NG3 6ZX

Online

Send us your comments by email to involve@nottshc.nhs.uk or respond online at www.nottinghamshirehealthcare.nhs.uk

Specific meetings

Trust representatives will attend the local Overview and Scrutiny Committees, Primary Care Trust Boards, and LINKS Forums to discuss the proposals and to provide further information.

Additional meetings

Trust representatives will also be available to attend other meetings to discuss the proposals and to provide further information. If you belong to a group or organisation and would like a representative to attend your meeting to discuss these issues please contact us to arrange this - contact details are available on the back page of this document.

Frequently Asked Questions

We've been getting a lot of feedback saying that people would like to know more about Foundation Trust equivalence status and what difference it will make to them and, in the case of staff, their jobs. We have put together the following 'Q & A' guide based on the questions that we have been asked most often, to make things clearer.

If you have any further questions about Foundation Trusts or our application, then please feel free to send an email to involve@nottshc.nhs.uk

Staff from Ward A43 at the Queen's Medical Centre receive Level 2 Accreditation for Acute Inpatient Mental Health Services.



1. Why do we need NHS Foundation Trust equivalence?

In line with Lord Darzi's proposals, the Government wants to personalise the NHS and make it into a service that provides fast, convenient, high quality care and is properly responsive to patients' needs.

If these reforms are to succeed, they need to be led by local communities and by the NHS staff who deliver the services on the ground.

2. What difference will this make to staff?

By becoming a Foundation Trust Equivalent, patients and staff will have a real say in the way we operate. Most decisions will be made locally and therefore be more relevant.

3. How can I get involved?

Local people, patients and staff are eligible to become members of the Trust. Members are then able to stand for election to the Members' Council.

With our Trust, our plan is to make all our staff members unless they opt out. Details of how patients and the public can become members are available on the website.

4. What does being a Foundation Trust Equivalent member mean?

Being a member means that you can:

- help to shape local mental health and learning disability services through opportunities to comment on the services we provide and what our future plans should be
- be informed about local NHS mental health and learning disability services
- work with us to tackle stigma around mental health and learning disability
- sit on the Members' Council and helping to shape the Trust's plans and reviewing how well the Trust is doing

Next steps

We will record all comments received during the consultation period and publish a summary of this feedback. This will be used to inform how we proceed to become a Foundation Trust Equivalent and the governance arrangements.

Frequently Asked Questions

5. Is Foundation Trust equivalence the same as privatisation of the NHS?

No. It is about devolving power to local people, and giving the Trust more freedom to manage its priorities and money. The Trust will remain firmly in the hands of the Department of Health.

6. Will Foundation Trust equivalence lead to a two tier health service?

No. We will have to meet the same national standards as other health providers, and will be paid through the same national system.

7. Will Foundation Trust Equivalent organisations be able to pick what services they provide?

No. Under the terms of our authorisation we will continue to provide the services required by its NHS commissioners – in our case the local Primary Care Trusts.

8. Can you assure us that high standards of clinical care won't be compromised when we are a Foundation Trust Equivalent?

Quality of care is at the centre of everything we do. We currently have strong governance in place and will continue with that once we achieve Foundation Trust equivalence. We also have a Risk Assurance policy where members of staff can openly flag up any issues of risk in a timely and confidential manner. We feel that maintaining these policies and open dialogue keeps our standard high.

Frequently Asked Questions

9. If we're competitive in an open market do we also run the risk of losing services to competitors especially the private sector?

Yes but it also means we can win more contracts that will give us national recognition and credibility. This in turn will help us when we bid for more services. We will always try to retain the contracts we win by providing a high quality of service.

10. Will terms and conditions for staff change

No. Terms and conditions for staff will remain the same following the change to a NHS Foundation Trust Equivalent. NHS Foundation Trust equivalence will work with the Agenda for Change pay system along with the rest of the NHS.

11. Is there a difference between being a Trade Union Representative and a Staff Governor Member?

Yes. Trade Union Representatives are formally accredited by the Trust to formally represent members of staff in relation to matters concerning their employment and to agree on behalf of large groups of staff (their members) matters which affect the whole Trust workforce.

12. How do I become a Governor Member?

Any member can express an interest to become a Governor Member. They should either contact us directly or through groups such as the 'Communities of Interest'. They will stand for selection as a Governor Member in a process that will be operated and monitored by an independent third party.

“ Bassetlaw PCT works closely in partnership with Nottinghamshire Healthcare and we welcome their bid to become a Foundation Trust Equivalent organisation. We ourselves work to very high standards and I'm sure that this move will further increase the influence that local people have in the way their mental health and learning disability services are provided. ”

Louise Newcombe, Chief Executive, Bassetlaw PCT.



Mike Cooke hosts the Trust's BME Mentoring Scheme.

“ I've been involved with mental health services for 17 years but more recently I have been working with the Involvement Team. It's been of great benefit to my mental health. I'm happier and more contented than I've been for years, because of the support and encouragement we get. Foundation Trust equivalence will help more people have this positive experience. ”

Gladys Bombek, Involvement Team Member.

Feedback form

please tell us what you think

Do you agree with our proposal to be a Foundation Trust Equivalent?

Yes/No

Comments

Do you think we should have a separate service user and carer constituency?

Yes/No

Comments

Do you agree with the number of Governors we are planning to have?

Yes/No

Comments

Do you agree with the way we are sub-dividing our public constituency?

Yes/No

Comments

Do you think we should have staff grouped according to profession or division/service?

Option A

Option B

Comments

Who do you think should be the extra 4 partner Governors?

Comments

This document contains the Trust's current proposals for Membership and for a Members' Council. The final structure will depend on the Trust Board's further discussion of these proposals, your feedback to this consultation and our discussions with the Department of Health about Foundation Trust Equivalent status.

Available in other languages, please ask for a translation

إِتْصِلْ بِنَا إِذَا إِحْتَجَّتْ تَرْجَمَة	ਜੇ ਤੁਹਾਡੇ ਲਿਖਤੀ ਤਰਜਮਾ ਕਰਵਾ' ਦੇ ਤ' ਕਿ'ਲ' ਕ'ਰ'ਕੇ ਸ'ਭੇ' ਨ'ਚ' ਸੰ'ਘ'ਰ' ਕ'ਰੋ।	Eğer tercümeye ihtiyacınız varsa bize başvurun lütfen.
Contattateci se avete bisogno di traduzioni	Faillan lana soo xidhiidh haddii aad u baahantahay tarjumaad	اگر آپکو تحریری ترجمہ کروانے کی ضرورت ہے تو براہے مسرمانی ہم سے رابطہ قائم کریں

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