



**The Nottingham NHS Treatment Centre at Queen's Medical Centre
Briefing for Joint City & County Health Scrutiny Committee – 12 June 2007**

The Joint City and County Health Scrutiny Committee recently asked the NHS to provide a progress report on the establishment of the Treatment Centre on the Queen's Medical Centre (QMC) Campus which is scheduled to open in December 2007.

The NHS will be represented at the meeting on 12 June by colleagues from the two PCTs, Nottingham University Hospitals NHS Trust (NUH) and Nations. We will be joined by representatives of the public who have been closely involved in the work associated with the development of the Treatment Centre.

In response to the Scrutiny Committee's interest there are three areas which the NHS will address in the meeting on 12 June:

1. The establishment of the Treatment Centre. This brief paper and the accompanying appendix provide the necessary information.
2. Provisional discussions about relocating out-patient Rheumatology services from the City Campus to the Treatment Centre. This paper sets out the rationale for doing so and the implications for patients. We wish to discuss with the Committee whether they feel that the scale of the change warrants wider public engagement/consultation.
3. Early thoughts about developing a paper in relation to the drivers for change which are likely to lead to potential service change in a range of health care settings into the future.

We wish to discuss with the Committee how they want to be involved in this work. At this stage we are assuming that work on drivers for change will be developed in the autumn with any subsequent consultation taking place by spring 2008. At this stage it is important to emphasise that no clear proposals have been developed.

Update on Services within the NHS Treatment Centre

Since financial close all the parties to the agreement have been working together to ensure the successful mobilisation of the NHS Treatment Centre.

During 2006/07 the PCTs identified that current activity levels and casemix would not fulfil the minimum take requirements of the contract. By minimum take we mean the quantity of activity and its costs to be secured from the Treatment Centre. This was due to a number of factors including:

- Services not transferring to the Treatment Centre for clinical reasons previously included in the casemix and activity volumes
- Changes in service delivery models
- The impact of Patient Choice
- Changes in the level of demand actually experienced as opposed to that projected
- Impact and ambitions of Practice Based Commissioners

Recognising that the minimum take would not be secured the PCTs began to discuss with primary care clinical colleagues, NUH and Nations ways in which this could be addressed by altering the casemix and activity volumes within the original specialties transferring to the centre.

The overall casemix was reviewed and discussions with clinicians and NUH began about possible changes that would result in a cohesive service for patients and were in-line with the possible reconfigurations of NUH post merger.

These discussions identified a small number of patients treated at City Campus when the majority of patients were treated at QMC, for example varicose veins. The discussions also identified the possibility of transferring the out-patient Rheumatology service from City Campus to the Treatment Centre and this was recognised by clinical colleagues as providing an excellent opportunity for service change, resulting in patients being treated in a state of the art facility, with all the necessary support services close by. The transfer of Rheumatology out-patients into single site facility also offers NUH the opportunity to review the long-term strategic options for the service.

The PCTs have also discussed with Nations the possibility of providing greater volumes of other services for which there has been a known capacity gap, meaning that more patients can be treated within Nottingham.

The changes the PCTs have made to the contract, including adjusting for the latest activity levels have been made to ensure that patients receive maximum benefits, the PCTs can achieve the required activity volumes and ensure that patient and the public achieve best value for money from the contract.

6 June 2007

Appendix 1 – Briefing on the NHS Treatment Centre at QMC

1 Background

In 2001 the Nottingham Acute Services Strategy identified a need for a planned care treatment centre based at the QMC.

Meanwhile, the Department of Health asked every Strategic Health Authority in conjunction with their respective Primary Care Trusts to identify any anticipated gaps in their capacity needed to meet the 2005 waiting time targets. It then announced a procurement exercise and invited expressions of interest from the independent sector to run a series of treatment centres to increase NHS capacity to meet this identified demand. Following strong support from the local health community, the Nottingham project became part of this Independent Sector Treatment Centre (ISTC) programme.

In January 2004 local clinicians and managers in primary and secondary care selected Nations Healthcare to be the independent provider following a competitive tendering process managed by the Department of Health. The NHS at the time strongly favoured Nations Healthcare as a potential provider because the bid it put forward emphasised:

- Improving the patient experience
- Partnership with the local NHS
- Clinical excellence

In July 2005 a five-year contract was agreed between Nations Healthcare and the local Primary Care Trusts to deliver an agreed amount of NHS patient activity in a newly built facility on the QMC campus.

In November 2005 building contractors Costain moved on site and the Treatment Centre is scheduled to open its doors to patients in December 2007.

2 The Contract

Financial close for the Nottingham NHS Treatment Centre was achieved in July 2005. The Nottingham contract is supported by three key documents:

- The main Project Agreement: The overarching document containing numerous schedules and appendices covering all elements of the treatment centre project between the parties to the contract.
- The subcontract for services (including a number of Service Level Agreements [SLAs]): the agreement under which services are provided to the treatment centre by NUH.
- The Staff Services Agreement (SSA): The agreement under which the medical and other clinical staff are supplied to the Treatment Centre by NUH.

At financial close, the sponsor PCTs agreed to pay Nations Healthcare £201m for undertaking the case mix over the five years of the contract. Nations Healthcare pays £116m of this to NUH for staff to undertake the work (£58m) and support services (£58m). In addition to income from these SSA and SLAs, NUH also receives transitional funding from the sponsoring organisations to indemnify it from the adverse effects of work transferring from the Trust.

2.1 The Project Agreement (PA)

This is the main contractual document defining the patient services to be provided at the Nottingham NHS Treatment Centre and its main signatories are:

- Nations Healthcare (Nottingham) Ltd
- The 21 (now seven) sponsoring Primary Care Trusts in the East Midlands
- The Queen's Medical Centre Trust (now Nottingham University Hospitals NHS Trust)
- Secretary of State/Department of Health

The PA provides for a five year service period and is based on a guaranteed minimum monthly take (MMT), which is based on financial value. This is supported by a base case mix, which is signed up to by the individual sponsor organisations. The basis of these numbers was the 2001 NHS capacity planning round that resulted in the Wave 1 ISTC procurement. The resulting modelling, which was completed by the QMC Trust at the time, was then allocated to PCTs based on historical rather than planned forward activity. So, while the case mix is signed up to in detail by the sponsors and is fixed within the PA, there is some element of refinement currently taking place to these base numbers to better reflect predicted demand. Any changes will only be incorporated once agreed within the framework of the PA and the change procedures set out within it.

2.2 The Subcontract (SLAs)

This is the agreement between Nations Healthcare and NUH for the provision of support services at the Treatment Centre.

While the actual subcontract has been signed as the overall agreement for the provision of (largely clinical support) services to the Treatment Centre, there is scope within the 25 SLAs to modify the final specifications and Key Performance Indicators (KPIs). The 25 individual SLAs have been prepared but have yet to be finally agreed between the parties. The process currently being undertaken between NUH and Nations Healthcare is to agree an overall framework within which to do so.

The key services to be provided under the SLAs are:

- Diagnostic imaging
- Lung function testing
- Orthotics
- Clinical neurophysiology
- Sterile services
- Porterage
- Administration
- Information Computing and Technology (ICT) helpdesk
- Low voltage services
- Vascular testing
- Physiotherapy
- Occupational therapy
- Emergency response
- Infection control
- Linen and laundry
- Patient records
- Information Computing and Technology (ICT) service
- Cardiac testing
- Pathology
- Dietetics and nutrition
- Medical gases
- Radiation protection
- Domestic cleaning
- Clinical coding
- Maintenance out-of-hours

2.3 The Staff Services Agreement (SSA)

This is the agreement between Nations Healthcare and NUH for the supply of clinical staff – doctors and nurses - to the Treatment Centre. It has been agreed but could not actually be signed by Nations Healthcare at financial close as it required consultation with the workforce at NUH.

Under the SSA clinical staff are seconded on the basis of whole time equivalents (WTEs). The actual workforce requirement was put together by Nations Healthcare based on productivity assumptions used in its other bids. This was then converted into a clinical session requirement and then translated into a number of WTEs, which was compared with staff actually delivering the case mix at QMC at the time. A series of negotiations took place to refine the SSA staff list and there remains flexibility around individual secondees and how the staff are matched to the case mix.

3 Nations Healthcare

Nations Healthcare is an independent company which has its origins in a consortium of international organisations with expertise in running health services in the United States, Australia and Europe. In the UK Nations Healthcare already runs Treatment Centres in Bradford and Burton-Upon-Trent.

For more information about Nations Healthcare visit its website: www.nationshealthcare.com

4 Organisational Structure

The Nottingham NHS Treatment Centre development is being overseen by the Nations and Nottingham Partnering Board (NNPB), which is made up of representatives from the Central Contract Management Unit (CCMU), Nations Healthcare, NUH and the Primary Care Trusts. It oversees the different work streams involved - construction; clinical services; workforce; education, training and research; commissioning; Information Computing and Technology (ICT) - and ensures they are progressing to schedule.

4.1 Patient and Care Involvement

Fundamental to the development of the Treatment Centre has been the engagement of staff and patients. Working groups have been set up with representatives of clinical and support staff and patients to enable them to have an input into the design of the building, secondment arrangements and service redesign. A dedicated patient and carer reference group has also been set up and is represented at NNPB level so that right from the outset the people at the heart of this development have had the opportunity to have their say.

5 Infrastructure

The Treatment Centre is being built by contractors Costain next door to the Postgraduate Centre on the Queen's Medical Centre campus.

5.1 Bridge link

The Treatment Centre will be linked to the main QMC building by a pedestrian bridge which will run between the centre and B floor of South Block. This will also enable a swift transfer of staff or patients between the centre and QMC in the event of a medical emergency.

5.2 Parking and transport

The new Treatment Centre will lead to the QMC campus enjoying a net gain in parking. The Treatment Centre itself brings with it 101 parking spaces although these will be designated for Treatment Centre patients only. The contractors Costain have also helped redevelop the Hooley's site which has led to the creation of up to 70 new spaces. As the Treatment Centre is on the QMC campus, all staff will be subject to the same car parking criteria and process for allocation of spaces as those working in the main building.

More emphasis will be placed on improving public transport links and building on successful initiatives such as the park and ride and Medilink shuttle bus services. The Treatment Centre team is also looking at tailored patient transport systems in addition to the ambulance services currently serving NUH.

The Government has just given the go-ahead for an extension to Nottingham's tram network which could see a new route serving the west of the city cutting through the QMC campus. Under the proposals, the line would intersect with the treatment centre bridge link giving patients access to both the treatment centre and the main hospital building. However, it is not expected to be operational until 2013.

6 Clinical Services

6.1 The services on offer in the Treatment Centre:

Daycase	Outpatients	Diagnostic Services	Clinical Support
<ul style="list-style-type: none">• GI Endoscopy• Bronchoscopy• Skin Surgery• Dermatology• Day treatments• Orthopaedics• Vascular Surgery• General Surgery• Gynaecology• Pain management• Maxillo Facial Surgery	<ul style="list-style-type: none">• Dermatology• Gynaecology• Rheumatology• Diabetes• Cardiology• Vascular• Respiratory• Orthopaedics• Digestive Diseases:• HPB, Colorectal Gastroenterology	<ul style="list-style-type: none">• MRI Scan• CT Scan• Ultrasound• Plain X-ray• Cardiac testing• Lung function testing• DEXA Scan• Vascular Ultrasound• Gynaecology Ultrasound	<ul style="list-style-type: none">• Pathology• Pharmacy• Physiotherapy• Occupational therapy• Orthotics• Podiatry• Dietetics

The Centre will provide outpatient appointments – first and follow-up, offer diagnostic tests and provide Daycase surgery where necessary. The Centre will also have established pathways for patients requiring care beyond the remit of the centre eg inpatient care. The Centre will not, however, be providing a paediatric service.

6.2 The numbers involved

By 2010 the Treatment Centre will be able to deliver a total of around 156,000 outpatient appointments and 24,000 day case procedures a year. While the majority of this activity will come from services transferring out of NUH, a proportion will be newly funded additional activity by the PCTs, about 6,000 outpatient appointments and 4,500 day case procedures a year.

7 Education, Training and Research

The Nottingham NHS Treatment Centre development has led the way nationally in ensuring education, training and research programmes (ETR) are safeguarded under the new contractual arrangements with Nations Healthcare.

Schedule 17 of the Project Agreement relates to training and research; the aim is to protect the teaching and research activities that currently take place as part of the transferring clinical activity. The schedule contains a number of governing principles for the delivery of clinical teaching and research in the Treatment Centre and describes how the parties will work together to produce a schedule of clinical teaching and training requirements post-financial close. In particular learning opportunities for undergraduate medical students and postgraduate medical staff and undergraduate nurses and Allied Health Professional (AHPs) must be replicated within the Treatment Centre.

A Clinical Teaching and Research Innovation and Development Board has been formed to take this forward. Parties represented include the Trust, Nations Healthcare and the Multi-Professional Deanery. A working ETR subgroup of this board has been created to ensure the aims of Schedule 17 are realised. The initial work is being approached in three separate tranches:

- Postgraduate medical trainees
- Undergraduate medical students and all non-medical students
- Research

This approach will cover all the ETR activity that currently occurs on the QMC campus. Tranche 1 (postgraduate medical trainees) is work that requires the greatest resources and for this reason the team is primarily focused on this at present.

The output will be a detailed survey and analysis of ETR requirements for each specialty for the various professions they accommodate. It will include quantitative data such as the number of learning opportunities and qualitative data such as a description of quality assurance processes. This information will be used to design the delivery of ETR within the new Treatment Centre in conjunction with the various stakeholders.

A survey of this magnitude is a pioneering piece of work and is attracting attention nationally. It is hoped that it will provide a framework for other ISTC projects to follow.

8 Information Computing and Technology (ICT)

One of the key foundations behind developing an innovative healthcare facility will be the ICT systems in place to support the clinical activity of the Treatment Centre. Nations Healthcare aspires to creating a paper-light environment where as much as possible of the administrative processes and patient records are done electronically.

Discussions are ongoing with members of NUH's ICT team and the clinical services about the extent to which this can be made a reality in each of the specialties with services moving into the Treatment Centre. However, it is accepted that in the initial months following service commencement, where paper records are needed to support clinical activity these will be provided.

NUH's ICT team is working closely with Nations Healthcare's ICT specialists to ensure the systems set up in the Treatment Centre are compatible with the Trust's own systems. The Trust's Picture Archiving and Communications System (PACS) and Medical Photography will both be available in the Treatment Centre. Staff working in the Treatment Centre will be able to use Nations Healthcare's Patient Administration System (PAS) for patients seen there. They will also be able to access NUH's PAS system from the Treatment Centre to pull the histories of patients seen in the Trust and to order the tests in the same way.

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