Whole Health Community
Diagnostic Programme (part 1)

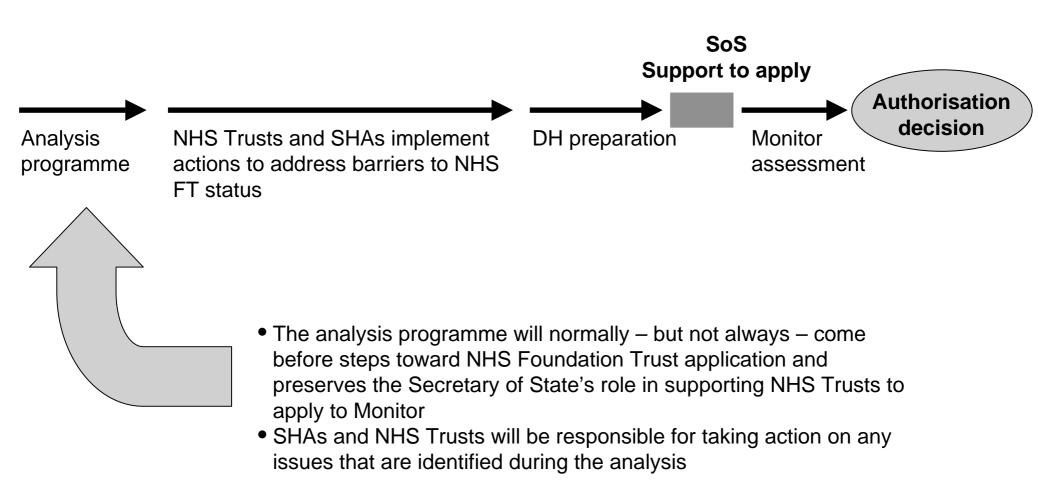
Preparing NHS Trusts for Foundation Status

THIS PROGRAMME REPRESENTS A CORE FUNCTION OF SHAS

- SHAs are accountable for performance and development of NHS Trusts
- SHAs need to identify and resolve strategic capacity and other structural issues
- SHAs together with PCTs and NHSFTs in their area can and need to help NHS Trusts prepare for the rigour of NHSFT status

THE PROGRAMME WILL IDENTIFY ISSUES FOR TRUSTS AND SHAS TO ADDRESS TO ENHANCE TRUSTS' LIKELIHOOD OF SUCCESS

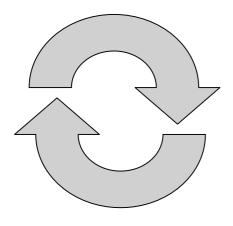
Pathway for an individual NHS Trust to NHS Foundation Trust status



THE PROGRAMME PROVIDES TWO ANALYTICAL TOOLS TO CLARIFY WHICH ISSUES ARE INTERNAL TO ACUTE TRUSTS AND WHICH ARE STRUCTURAL ACROSS A WHOLE SYSTEM

Readiness for NHSFT status is a function of a Trust's internal operations and its external environment, and the 2 analyses aim to highlight these factors

NHS acute Trust analysis



SHA-Wide analysis

What are the **operational and financial issues** that an NHS acute Trust must address to have the opportunity to apply for NHSFT status?

What are the **issues in the SHA-wide area** that a NHS Trust cannot address on its own, and that the SHA must address?

DH, MONITOR AND EXTERNAL SUPPORT WILL ASSIST THE TRUSTS AND SHAS, AND BRING RIGOUR AND OBJECTIVITY TO THE PROCESS

Roles and responsibilities

SHA leads

- Serve as primary point of contact/support for NHS Trusts during analysis
- Provide feedback to NHS Trusts and participate in challenge process
- Integrate findings of NHS acute Trust analysis with findings of SHA-wide analysis
- Own findings and implications of analysis

DH/NHS

Monitor

- Help SHA leads support NHS Trusts
- Provide feedback to NHS Trusts and participate in challenge process
- Integrate findings of NHS acute Trust analyses with findings of SHA-wide analysis

External

- Help SHA leads support NHS Trusts
- Conduct SHA-wide analysis and integrate with findings of NHS acute Trust analysis
- Provide feedback to NHS Trusts and participate in challenge process
- Results of the analysis, and DH and Monitor involvement during the process, will be without prejudice for future NHSFT applications. The support team is committed to the Trusts' and SHAs' success and is there to help, not evaluate
- Outputs of the analysis will provide an objective, fact-based view of any issues identified
- As a result of the analytical exercise, SHAs and NHS acute Trusts will agree an action plan for each acute Trust to develop towards foundation status

PCTs WILL PROVIDE IMPORTANT INPUT INTO THIS PROGRAMME

- PCTs' assumptions and plans (e.g., commissioning intentions, capacity assumptions) will be reflected in SHA-wide financial model and compared to Trusts' assumptions
- PCTs' perspectives will be gathered through targeted interviews with CEs, FDs, clinical directors, etc.
- The programme has been designed to minimise additional demands on PCTs (e.g., will pull from existing work)
- Incentive for PCTs is to be "in on the ground floor" of NHSFT development so acute Trusts' business planning genuinely reflects commissioning intentions
- The PCT diagnostic and development programme will follow on from this programme that focuses on acute trusts, so there will be consistency between the programmes

THE NHS ACUTE TRUST ANALYSIS IS A USER-FRIENDLY TOOL THAT IDENTIFIES KEY IMPROVEMENT AREAS

Objectives of analysis

- Identifies, through a user-friendly developmental exercise, the key issues that NHS acute Trusts must address to have opportunity to apply for NHS Foundation Trust (NHSFT) status
- Assigns clear roles and responsibilities to NHS acute Trusts, SHAs, DH and Monitor in rollout of analysis
- Facilitates development of action plans to develop towards foundation status
- Involves parallel development of a communication strategy
- Provides sense of time required to complete the proposed action plans
- Builds NHS Trusts' familiarity with and capabilities to address key differences between NHS Trust circumstances and NHSFT requirements

Guiding principles for developing analysis

- Covers all of the major issues that
 - Tend to derail NHS Trusts in DH/
 Monitor assessment processes, and
 - Can/should be addressed in an action plan
- Does not cover issues that can/should be addressed during DH/Monitor assessments
- Reflects DH and Monitor requirements such that analysis can serve as building blocks for future applications
- Identifies issues with sufficient specificity so that NHS acute Trusts can develop action plans with results of the analysis

THE NHS ACUTE TRUST ANALYSIS FOCUSES ON FOUR AREAS

Components

analysis tool

Business Plan

Statement of current and future financial and operating plans

- Financial analysis of historical, current and projected financial performance
- Identification and measurement of key risks

 Selected elements of Service Development Strategy (SDS) and simplified long-term financial model*

Governance

- Organisational capacity
- Performance management
- Risk management and controls

Combination of self-certification, interviews, and challenge sessions

Service Performance

- Performance against key targets/standards
- Recovery/improvement programmes

 Performance against national targets and standards, based on existing performance monitoring data collected by NHS trusts

External Relationships

- Shared assumptions with PCTs and SHAs
- Coordination of information systems with PCTs and SHAs
- Commissioning relationships

Captured in business plan and governance sections

^{*} Based on model used in Monitor's assessment process

THE SHA-WIDE ANALYSIS WILL IDENTIFY STRUCTURAL ISSUES THAT AFFECT NHS ACUTE TRUST PERFORMANCE

Objectives of analysis

- Identifies key structural issues that cannot be addressed by NHS acute Trusts alone
- Provides common fact base for SHA's stakeholders to work from to develop NHS Trusts, including NHS Foundation Trust application
- Facilitates development of action plans for each NHS acute Trust to develop towards NHSFT application

Guiding principles for developing analysis

- Analyses structural challenges in order to inform implications for specific NHS acute Trusts. Will identify challenges for other stakeholders (e.g., PCTs) but only to the extent that these challenges impact NHS acute Trusts' performance
- Accommodates current and future operating environments (e.g., patient choice, PbR)
- Complements NHS acute Trust analysis by providing information to challenge and validate NHS acute Trusts' assumptions and projections
- Highlights issues for further analysis and action planning by SHA stakeholders
- All action plans emerging out of findings of the analysis must be planned within current allocations

THE SHA-WIDE ANALYSIS HAS FIVE COMPONENTS

	Elements	Analysis tool
Underlying financial position	Historic and current underlying financial position of PCTs and NHS trusts, with forward projections	 SHA-wide financial model, based on PCTs and NHS Trusts
Service performance	National targets and standards – SHA and PCT relevant: • Current record and plans to close existing gaps to targets and standards • Cost to achieve	 Existing data and literature Targeted interviews Assurance Framework Comparison with NHS Trust analysis assumptions
Capacity	Current capital plans and other planned expansion/contractions Historic performance against capital plans ISTCs – current and future	
External relationships	 Evidence of implementation of and/or plans for regional initiatives (e.g., cancer network) Indicators of relationships between providers (e.g., frequency/ magnitude of contract/claims disputes, coordinate plans to achieve national targets) 	
Risks	Top risks SHAs and PCTs perceive How SHA and PCT monitor and mitigate risks	