

# Health and Wellbeing Board

## 15 February 2017

<b>Report title</b>	<b>Mental Health Services: Revised Provider Trust Arrangements</b>	
<b>Cabinet member with lead responsibility</b>	Cllr Paul Sweet Public Health and Wellbeing	
	Cllr Val Gibson Children and Young People	
<b>Wards affected</b>	All	
<b>Accountable director</b>	Jo Cadman, Black Country Partnership NHS Foundation Trust (BCP)	
<b>Originating service</b>	BCP on behalf of the Transforming Care Together (TCT) Partnership	
<b>Accountable employee(s)</b>	Jo Cadman Tel Email	Strategy & Transformation Director 0121 612 6996 Jo.cadman@bcpft.nhs.uk
<b>Report to be/has been considered by</b>	This report has not been considered previously, however the content has: TCT Partnership Board BCPFT Board of Directors	
		19 January 2017 25 January 2017

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### Recommendation(s) for action or decision:

The Health and Wellbeing Board is recommended to:

1. Accept the report and highlight any issues for consideration by the partners during integration during 2017

## 1.0 Purpose

- 1.1 The Health and Wellbeing Board have requested an update on the progress of the Transforming Care Together (TCT) partnership between Black Country Partnership NHS Foundation Trust (BCP), Dudley and Walsall Mental Health Partnership NHS Trust (DWMH) and Birmingham Community Healthcare NHS Foundation Trust (BCHC) in the context of understanding what/if the impact on mental health and learning disability services provided in Wolverhampton may be.

## 2.0 Background

- 2.1 In late 2015 the Board of Directors of BCP determined that there was a risk to the long term sustainability of the organisation. Following independently facilitated assessment it was agreed that partnership with an organisation(s) providing similar or a complementary range of services (such as mental health; learning disabilities; children's and community services) with geographical alignment would be sought.
- 2.2 At the end of December 2015, following a detailed and robust process, BCP announced the preferred partners of DWMH and BCHC. During 2016 the partners developed the clinical and back-office opportunities available from working in partnership. This was captured in a Strategic Outline Case (SOC) approved by each Board in September/October 2016, and an Outline Business Case (OBC) approved by each Board in November 2016/January 2017.
- 2.3 The Sustainability and Transformational Plans (STPs) were subsequently set up and the plans developed through TCT contributed to the development of the Mental Health and Learning Disability workstream priorities.

## 3.0 Progress

- 3.1 Following the approval of the OBC by all organisational Boards of Directors in January 2017 and approval at the TCT Partnership Board the programme has moved into an integration phase. A more detailed integration plan over the next three years is being developed, which will build on all of the plans and opportunities identified during 2016. To provide clarity and enable rapid delivery of benefits the partners are aiming to have a combined organisation in place by 1 October 2017.
- 3.2 The programme governance arrangements are being finalised which will ensure that benefits are realised from the partnership. Three key delivery streams will be implemented to identify and monitor the benefits – Business, Culture, and Redesign & Transformation.
- 3.3 **Business** – there are clear guidelines for Foundation Trusts engaging in significant transactions and the TCT partners are being supported by NHS Improvement (NHSI) to ensure that progress can be made as quickly as possible. This aspect will ensure that all legal, HR and financial issues are managed effectively to enable achievement of the integrated 1 October 2017 target date.

- 3.4 **Culture** – at the outset BCP were clear that successful integration/partnership would require shared vision and values, and this has been a recurrent priority for the partnership. Work has already started to ensure that all staff groups are engaged effectively, and supported to manage any transition with clear involvement, communication and an opportunity to influence the development of the combined organisation.
- 3.5 **Redesign & Transformation** – a number of opportunities and plans were developed during 2016 that were included within the business cases presented to Boards. These were a mixture of clinical and back-office opportunities which can be developed further following the clarity on the position of each organisation. The intention is to implement back-office opportunities on 1 October, where possible, with clinical opportunities more likely to extend into the medium to longer term. Each of the organisations are currently developing individual transformational plans to deliver the required efficiency savings separately, however, this allows resources and plans to be shared across the organisations and ensure that transformational schemes meet local needs, Black Country plans through the STP and West Midlands plans through the MERIT vanguard.

#### **4.0 Financial implications**

- 4.1 Each organisation has challenging cost improvement plans (CIPs)/cash releasing efficiency schemes (CRES) due to the financial challenge across the NHS which were being developed in isolation. The increase economies of scale will enable a larger proportion of savings to be delivered through back-office, infrastructure or estates savings which should reduce the impact on front line services,
- 4.2 The business cases approved by Boards only included savings from back-office/integration schemes and therefore there could be improved opportunities to deliver further efficiencies or address gaps in services from joint clinical opportunities.

#### **5.0 Legal implications**

- 5.1 Advice will be sought from legal colleagues as appropriate, and the business stream of the programme will ensure that implications and risks are managed.

#### **6.0 Equalities implications**

- 6.1 An organisational development plan is being developed to ensure that all staff are considered as plans are development moving forward, which will be monitored through the culture stream of the programme. Engagement across all types of service users, carers and the wider public will take place as part of the communication and engagement programme which will also be monitored through the culture stream.

## **7.0 Environmental implications**

- 7.1 The combined estate will be considered as part of the plans, with potential opportunity to rationalise estate once engagement has identified the preferred models

## **8.0 Human resources implications**

- 8.1 There are likely to be implications which will be further analysed over the coming months. Plans to jointly manage vacancies and recruitment will be developed to minimise the risk to existing staff.

## **9.0 Corporate landlord implications**

- 9.1 The combined estate will be considered as part of the plans, with potential opportunity to rationalise estate once engagement has identified the preferred models, however, it is unlikely that this will impact on any Council property.

## **10.0 Schedule of background papers**

- 10.1 None.