



Barnet Clinical Commissioning Group

Potential Acquisition of Barnet and Chase Farm Hospitals

Presented by John Morton Chief Officer
Barnet CCG



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10 Principles for our merger ***Draft for discussion***

These 10 principles will guide everything we do both during the process of joining the two trusts and afterwards.



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Our principles for a successful new organisation

Build the new organisation from our complementary strengths; ensure we are stronger together

Focus on driving improved outcomes for patients at a lower cost to the taxpayer

Reward people on merit, without bias to the organisation they come from.

Ensure those implementing plans understand the rationale for change and their role.

Maintain a firm adherence to these principles in all parts of the organisation





Ways of working during the transaction

Ensure fast, pragmatic and sensible decision-making based on facts that, where appropriate, are backed by independent assessment, to ensure we reflect on choices and identify trade-offs

Communicate openly, honestly and frequently; engage our stakeholders, including BCF, in constructive, two-way dialogues

Manage the transaction as a discrete process – separate from the day job and separate from existing change programmes, e.g. the BEH strategy

Manage the cultural integration with the same discipline and rigour as the operational and financial integration

Start as we mean to go on – clearly planning the future of the three hospitals from the outset – not just once we have created the new organisation





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The Transaction should achieve the following benefits:

- The creation of a larger organisation with the critical mass to improve outcomes for patients, and to provide care for patients more effectively.
- To enable BCF to be part of a successful FT
- To support the delivery of the Barnet, Enfield and Haringey (BEH) Clinical Strategy and in the medium term to help stabilise the local health economies
- Following a rigorous evaluation process, BCF has identified the royal Free as its preferred partner to ensure that BCF is part of an NHS Foundation trust (FT)



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Business Need

Definition of the problem:

Government policy is that every NHS Trust must be, or become part of an NHS FT by April 2014. NHS London's tripartite formal agreement (TFA) process requires all London Trusts to have identified their route to achieve this objective.

An external review commissioned by BCF as part of an FT viability project initiated by NHS London demonstrated strong evidence that BCF was not financially viable as an FT based on current assumptions and its current configuration. Specifically it found that the cost improved programme (CIP) challenge facing the Trust would make a standalone FT application very unlikely to satisfy the SHA and monitor assessment process.





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There are two guiding principles that have been put forward for the integration:

- To take the best from both organisations
- To ensure that the new organisation is greater than the sum of its parts



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January 2014.

| DATE | MILESTONE |
|--------------------------------|---|
| July 2012 | Board approval to proceed |
| July/August 2012 | Soft market testing |
| September 2012 | Options appraisal |
| October 2012 | Finalise SOC and Board sign-off Confirm commissioner support Submission of SOC to SHA |
| 22 nd November 2012 | Approval of SOC by NHS London CIC |
| December 2012 | Establish transaction project board Mobilise transaction Team |
| Jan 2012/Mar 2013 | Complete OBC and Trust Board sign-off |
| April 2013 | OBC approvals (SHA) |
| May/June 2013 | Phase 1 CCP Review* |
| May/July 2013 | Complete FBC |
| August/September 2013 | FBC approvals (SHA/DHTB/SoS) |
| October 2013 | FT authorisation |

