

**Manchester Health and Wellbeing Board  
Report for Information**

**Report to:** Manchester Health and Wellbeing Board – 2 November, 2016

**Subject:** Manchester Single Hospital Services Programme

**Report of:** Peter Blythin, Director Single Hospital Services Programme

---

**Summary**

This report provides an overview of progress of the City of Manchester Single Hospital Service Programme.

**Recommendations**

The Board is asked to note the report.

---

**Board Priority(s) Addressed:**

<b>Health and Wellbeing Strategy priority</b>	<b>Summary of contribution to the strategy</b>
Getting the youngest people in our communities off to the best start	
Improving people's mental health and wellbeing	
Bringing people into employment and ensuring good work for all	Scope for the single hospital services to provide exemplar training, education and employment for the benefit of GM
Enabling people to keep well and live independently as they grow older	
Turning round the lives of troubled families as part of the Confident and Achieving Manchester programme	
One health and care system – right care, right place, right time	Sets an ambition to achieve consistent service and care provision to all no matter where they live
Self-care	

**Lead board members:**

Barry Clare, Chairman, University Hospital South Manchester NHS Foundation Trust (UHSM); Steve Mycio, Chairman, Central Manchester University Hospitals NHS Foundation Trust (CMFT) and Jim Potter, Chairman Pennine Acute NHS Trust (PAHT).

**Contact Officers:**

Name: Peter Blythin  
Position: Director Single Hospital Service Programme  
Telephone: 0161 291 4366  
E-mail: P.Blythin@nhs.net

**Background documents (available for public inspection):**

The Manchester Locality Plan  
Single Hospital Service Review Terms of Reference  
Manchester Single Hospital Service Review Stage One Report  
Manchester Single Hospital Service Review Stage Two Report

## **1.0 Introduction**

The Single Hospital Service Review carried out by Sir Jonathan Michael was received and adopted by the Health and Wellbeing Board at meetings on 27 April and 8 June 2016. A report was also received from Manchester's three acute Trusts on 22 July 2016, setting out how the recommendations of the Review would be implemented. This resulted in the establishment of the Single Hospital Service Programme with the purpose of implementing these recommendations.

## **2.0 Background**

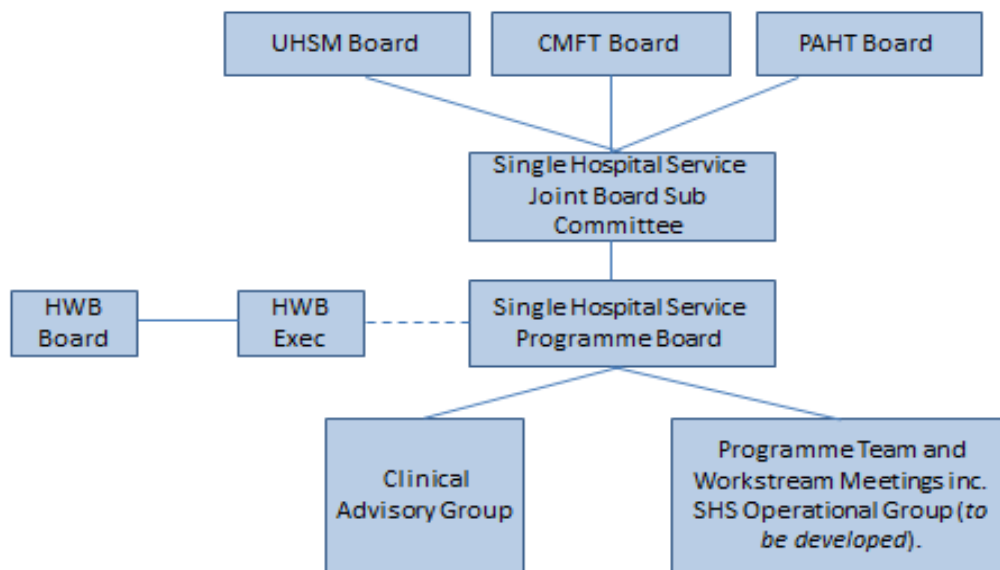
The proposal to establish a Single Hospital Service in Manchester forms one of the three pillars of the Manchester Locality Care Plan. Building on the work of the Independent Review, the Single Hospital Service Programme has been operational since August 2016. Initial activities have focussed on:

- establishing effective programme governance arrangements (including a joint sub-committee of the three Trusts, and a programme board with comprehensive stakeholder involvement)
- securing appropriate programme funding from the Greater Manchester (GM) Transformation Fund
- developing the capacity and capability of the programme team (including recruiting or seconding core team members, identifying clinical and functional leads, and appointing specialist advisers)
- reviewing programme activities and timelines.

## **3.0 Progress**

### **3.1 Programme governance**

The programme governance arrangements are all now in place. The Programme Board met for the first time on 10 October 2016 and the joint sub-committee will meet on 26 October 2016. The structure of the governance arrangements is shown below:



### 3.2 Programme funding

An initial proposal for £2.9m of “seed corn” funding was supported by the GM Transformation Fund, and the associated Investment Agreement is currently being finalised. The Single Hospital Service initiative also formed part of the substantive GM Transformation Fund investment proposal for the Manchester system which was submitted to the GM Team on 12 October 2016.

On the basis of the “seed corn” funding it was possible to progress the development of the programme team during September, and this has allowed all of the main work streams to be initiated in recent weeks.

### 3.3 Programme team capacity and capability

Almost all the key roles within the programme team have now been established. In addition to the core team, this includes clinical leads from the medical, nursing and therapy communities, and functional leads in Finance, HR, IM&T and Estates. Hempsons and Aldwych Partners have been appointed as specialist advisers to provide legal and health economic advice respectively, and this input is central to the management of the key activities described below.

### 3.4 Programme activities and timelines

One of the most significant areas of work in October has been a comprehensive review of programme activities including associated interdependencies and timelines. The initial assessment received at Health and Wellbeing Board on 22 July 2016 disaggregated the programme into two core Projects and defined target timescales as follows:

- Project 1 (creation of new NHS Foundation Trust (FT) encompassing UHSM and CMFT) April 2017
- Project 2 (transfer of NMGH to the new FT) 12—18 months following the establishment of the new NHS Foundation Trust

The key 'progress inhibitor' for the programme has always been the process for gaining clearance for the initial merger of University Hospital of South Manchester Foundation Trust and Central Manchester University Hospitals Foundation Trust from the Competition and Markets Authority (CMA). However the review of programme activities and timelines has benefitted from the input of the specialist advisers recruited to support the programme in negotiating the CMA process. The outcome of this review was considered at the Programme Board meeting on 10 October 2016.

The review confirmed that the CMA process will determine the overall timescale for Project 1 but also highlights the scope and complexity of the work required to develop a business case to satisfy the assurance and decision-making requirements of the Trust Boards and of NHS Improvement (NHS I). The conclusion of the review was that optimal management of the key processes would result in a CMA decision in June and completion of project one by September 2017. This position has been agreed by the Programme Board.

#### **4.0 Next Steps**

The main work streams around CMA and Trust Board/NHS I processes now need to progress rapidly. To achieve the planned timescale the programme will have to be managed in a highly effective manner to control any risk of delay both in the CMA process and in all other activities. The review of timelines has focused on Project 1 but we now need to assess in more detail the timeline for Project 2. A communications and engagement strategy has been developed and agreed and the coming weeks will also require the progressive implementation of relevant communications and stakeholder engagement activities.

#### **5.0 Conclusion**

The Single Hospital Service Programme is progressing well. Baseline funding for the current year has been established but achieving an appropriate outcome from the Manchester system submission to the GM Transformation Fund will be fundamental to delivering the benefits originally identified in the Independent Review.

#### **6.0 Recommendation**

The Health and Wellbeing Board is asked to note the content of this report.