

Subject:	Foundation Trust Pipeline Update
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Sponsored by / Presented by:	Ursula Ward, Chief Executive
Purpose of paper	To update the Board on progress.
Key points for Trust Board members <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i>	The Board is asked to note: <ul style="list-style-type: none"> ▪ the comments that have been received on the latest version of the Integrated Business Plan which was submitted to the Strategic Health Authority on 21 September 2012 ▪ Updates on Historical Due Diligence Phase 1, Quality Governance External Review and Board Governance Assurance Memorandum External review
Options and decisions required <i>Clearly identify options that are to be considered and any decisions required</i>	To note the report
Next steps / future actions: <i>Clearly identify what will follow the Trust Board's discussion</i>	Work will continue, as outlined in the paper
Consideration of legal issues (including Equality Impact Assessment)?	Considered and none applicable
Consideration of Public and Patient Involvement and Communications Implications?	The Director of Strategy and Business Development has produced a draft staff and engagement strategy as part of the ongoing process

Board of Directors: Foundation Trust Pipeline Update

25 October 2012

1. Introduction

- 1.1 This short paper provides an update on progress on delivery of the NHS Foundation Trust Pipeline.

2. Integrated Business Plan and Long Term Financial Model

- 2.1 The Latest iterations were submitted to the Strategic Health Authority on 21 September. Feedback on the Integrated Business Plan was received on 15 October 2012. Feedback on the Long-Term Financial Model is to follow.

- 2.2 The feedback from the Strategic Health Authority is summarised below:

- The document is showing improvement with each iteration.
- The aspiration to grow through “repatriation” remains a key objective, yet there is still an absence of practical application as evidence this can be delivered. Increasing productivity through technology also appears as a gap.
- The final version would benefit from placing in context with the new world, which is the timeline for delivery of this five year plan; for example Health and Wellbeing Boards, influencing strategy, Academic Health Sciences Networks, Health Education England
- The Trust needs to continue to build on its strong relationships with system partners.
- It is not entirely clear whether/how threshold changes in activity will impact upon viability, for example if the demand management strategies in the Clinical Commissioning Groups were to materialise, what would be the income reduction impact for Portsmouth Hospitals NHS Trust.
- Tables and other references are to be updated with the current year financial and performance information.
- Presentational points – need to check for consistency of terminology throughout the document. Flow could be improved and the overall size reduced for the reader through a removal of duplicated paragraphs, narrative in a number of chapters is repeated elsewhere.

- 2.3 The Trust is already working on the next iteration of both documents reflecting on the above feedback and that received from PWC as part of the Historical Due Diligence exercise.

Action: The Board is asked to note progress and the area where further work is required

3. Readiness Meeting

- 3.1 The Readiness meeting, one of the milestones set out in the Tripartite Formal Agreement, was held on 5 October. Feedback from the Strategic Health Authority on the Readiness Review is expected in the next week or so, and will be shared when received.

4. External Assessments

- 4.1 Again, as the Board is aware the Trust, as part of the Foundation Trust pipeline, has now completed all the current external reviews, namely:

- External Assessment of the Board Governance Memorandum (KPMG)
- External Review of Quality Governance (RSM Tenon)
- Historical Due Diligence (PWC)

- 4.2 Separate reports and recommendations have been received from all three organisations and action plans drawn up. For ease, and because of the degree of duplication, this has been pulled into a single action plan. This is still in draft form and requires some updating regarding progress and RAG rating. It will be brought to the Board Workshop in November.
- 4.3 In terms of Governance the Integrated Action Plan will, going forward, be a standing item on the fortnightly Foundation Trust Project Committee. The report will then be taken to the Audit Committee who will retain overall control/oversight of the plan

Action: The Board is asked to note the above

5. Conclusion

- 5.1 This paper sets out both current progress along the NHS Foundation Trust pipeline and asks the Board to note and approve the actions highlighted.