

A partnership to deliver integrated drug and alcohol services

Turning Point and Camden and Islington NHS Foundation Trust partnered in 2010 to pool resources to deliver key services helping to turn drug and alcohol dependent patients' lives around. The success of the partnership lies in its careful project management, open consultation and constant board engagement.

BACKGROUND

Turning Point's partnership with Camden and Islington NHS Foundation Trust (CANDI) was developed in 2010 to redesign and integrate drug and alcohol services in South Westminster. This meant complete reconfiguration, bringing together services previously offered by multiple suppliers into one integrated model. Turning Point had expertise across the services, but had limited experience of delivering specialist-prescribing services at that time, and sought out a partnership with an NHS trust.

LAYING THE RIGHT FOUNDATIONS FOR SUCCESS

Turning Point engaged in a scoping exercise to select a partner. It met with a number of NHS organisations to discuss governance arrangements and the vision for substance misuse treatment. Following the decision to work with CANDI, directors met to share and discuss values, review the prospective service specification, and identify key staff to drive forward the collaboration.

The key objective of the partnership was to establish a flexible, responsive service, with minimal disruption for transferring clients. This meant embedding a single, accountable and measurable system for substance misuse support. A joint Service Board oversaw implementation and ongoing delivery. This involved the clinical lead, operations manager, senior directors and an implementation project manager.

Terms of reference were drawn up to establish a safe and innovative service. The Service Board became a key forum for reviewing clinical governance and continuous improvement.

IMPLEMENTING THE PARTNERSHIP: MOVING FROM CONTRACT TO DELIVERY

The implementation took four months of TUPE consultation, two months of training and three months of walk-throughs, all running concurrently. Service delivery was equitably assigned according to specialisms and in line with pre-tender agreements. This was underpinned by a formal contract, signed after the award and designed to mirror the main contract with local commissioners.

“The way we worked together from the start was the key to creating a successful partnership in South Westminster, with open and honest executive discussions before any modelling work commenced. The effort put into that preparation and the clarity of bid leadership roles built the platform for success.”

John Mallalieu, Director,
Turning Point

CANDI led on provision of clinical leadership, specialist addiction psychiatry, psychology and nursing staff. Turning Point's role was to deliver operational management, psychosocial interventions, group sessions, specialist family and housing support and aftercare.

The partnership hosted a series of walk-through workshops, involving all staff. This reviewed the new service through the eyes of service users and their families and enabled systems, processes and specific interventions to be developed. This helped to engage all partners in the process.

A dedicated project manager, who had accountability to lead across both organisations, oversaw this work. The project manager became a key single point of contact for managers from each organisation, as well as local commissioners.

OVERCOMING CHALLENGES

Particular challenges for the partnership included deciding where the responsibilities lay during the TUPE transfer; ensuring effective communication; and enabling information sharing. One of the biggest challenges was the need to re-write policies and procedures for the partnership, which proved time consuming and costly. Other operational challenges were also successfully addressed: bridging the culture between a medical and recovery model; the different pace of working in the two organisations; the different aptitudes for change and innovation; and issues over where line management responsibilities sit.

The establishment of the Service Board to provide a vehicle for sharing information and concerns helped to overcome these problems, along with honesty, flexibility, hands-on management, and an appointed project manager.

LEARNING FROM THE CHALLENGES AND SUCCESSES

This partnership has provided Turning Point with a template of how to work with other NHS organisations. Key learning from the partnership emphasises the need for early and continuous communication, a dedicated project manager, planning and reviewing the service from the eyes of the client, open dialogue between organisations, and good personal relations between key staff.

The partnership now has more people in treatment than ever before. The venture has linked psychosocial interventions with prescribing and education, training and employment support to ensure people are progressing through treatment and achieving recovery.

Turning Point and the trust have excellent close working relationships and daily meetings involve all key staff, from recovery workers to specialist psychiatrists. The partnership has ensured a safe and continuous service. The venture has developed a far more flexible workforce, with nurses now providing recovery support.

“Two years after the partnership began the service continues to innovate, successfully reaching some of the most socially excluded people in London and helping them to turn their lives around.”

**Lord Victor Adebowale,
Chief Executive, Turning
Point and NHS England
Non-Executive Director**

Reconfiguring pathology services through a joint venture

Two trusts in Somerset established a joint venture with a private company to provide new pathology services to the region. The partnership pooled the resources from each party to deliver key outcomes: quicker turnaround of patient results, hi-tech laboratories and financial savings.

BACKGROUND

In 2009, Taunton and Somerset NHS Foundation Trust and Yeovil District Hospital NHS Foundation Trust identified a need for financial and quality improvement in their pathology departments. The trusts wanted to act on Lord Carter's recommendations⁶, which identified an opportunity for efficiency savings through regional consolidation of pathology services.

To reach the desired outcome of a modern, high-quality service, with a quicker turnaround of results, they needed investment of more than £5 million. Reconfiguring services with trust in-house capability carried a considerable financial and operational risk; outsourcing the service would diminish control. Instead, the trusts sought a specialist partner in pathology, to invest in delivering a world-class service for the local population.

FINDING A PARTNER: FROM SOFT MARKET TESTING TO CONTRACTING

- 1 Soft market testing** The trusts began desk research and informal talks with private companies. This helped them to understand the fundamentals of reconfiguring local pathology and articulate what would be required from a partner. The trusts were better able to understand the different elements the market had to offer to solve the problem.
- 2 Defining the specification** The trusts could then specify clearly the requirements from a private supplier (investment, technology and expert knowledge) and what they could deliver in-house (complementary expert knowledge, staff and some infrastructure).
- 3 Engaging stakeholders** The trusts engaged with stakeholders within and between their organisations to ensure the specification covered all requirements.

“This innovative partnership links us with the very latest technology in pathology, further improving the accuracy and swiftness of diagnoses and decision making and helping us secure the very best outcomes.”

Paul Mears, CEO, Yeovil District Hospital NHS Foundation Trust

⁶ Report of the Review of NHS Pathology Services in England; An Independent Review for the Department of Health, Chaired by Lord Carter of Coles, 6 August 2006. <http://www.pathologists.org.uk/publications-page/Carter%20Report-The%20Report.pdf>

4 Issuing a tender and the partner selection process The groundwork enabled the trusts to issue a clear, defined and specific tender. The trusts began competitive dialogue to learn how they could work with individual organisations in a joint venture. The trusts needed to understand how the relationship might develop in practice.

5 Naming the preferred bidder and agreeing the business case In August 2011, Integrated Pathology Partnerships (iPP) was named as the preferred bidder. The trusts and iPP ring-fenced staff to allow them to focus solely on the joint venture. The parties held open discussions to tackle any 'privatisation' myths head-on and to understand each other's drivers.

6 Agreeing governance arrangements In February 2012, Taunton and Somerset NHS Foundation Trust, Yeovil District Hospital NHS Foundation Trust and iPP entered into a joint venture to establish Southwest Pathology Services (SPS). The trusts own 67 per cent of the shareholding, and iPP 33 per cent. The SPS board is comprised of five members, including three voting NHS representatives. The board began by setting realistic targets, measurable through a set of operational and clinical KPIs. This initial activity laid the foundations for day-to-day management of the service.

THE BENEFITS OF POOLING RESOURCES

SPS pools the skills, knowledge and resources from each partner organisation. Working in partnership allows the NHS to keep abreast of latest innovations; the financial investment from iPP means that the SPS service has the latest equipment and technology. iPP leverages considerable purchasing power and is able to negotiate favourable prices for hi-tech laboratory equipment, by virtue of buying laboratory equipment for more than 300 laboratories across Europe.

THE OUTCOME: A REFURBISHED, STATE-OF-THE ART LABORATORY BENEFITING PATIENTS

SPS now delivers a service where most non-urgent and specialist testing is processed in a state-of-the-art lab, while all emergency testing remains on-site. The highly automated 'hub' lab is set to serve a population of 500,000 and more than 100 GP practices.

SPS wants to encourage new partners into the joint venture, to allow other trusts to benefit from the quality service. As a customer, other trusts benefit from the technological innovations; as a shareholder, trusts can use the profit that SPS generates to invest in other patient services. The more volume that goes through these laboratories, the lower the unit cost, helping achieve significant economies of scale.

“This joint venture is a fantastic opportunity for NHS healthcare providers to work alongside a private sector partner in an innovative way.”

Jo Cubbon, CEO, Taunton and Somerset NHS Foundation Trust

“This joint venture combines the ethos and culture of the NHS with the pathology expertise and resources of iPP. Together we will drive value for money and deliver market-leading pathology innovation.”

Simon Scrivens, Chairman iPP

Co-operating to redesign mental health services

Care UK and Sussex Partnership NHS Foundation Trust capitalised on a pre-existing relationship by creating a joint venture to redesign mental health services in the region. The partnership was characterised by the strong informal relationships maintained by both parties, helping them to work together effectively and overcome obstacles.

CAPITALISING ON A PRE-EXISTING RELATIONSHIP

Care UK and Sussex Partnership NHS Foundation Trust had a long-standing, strong relationship developed through their common membership of the NHS Confederation's Mental Health Network. Care UK approached Sussex Partnership to discuss the potential to redesign mental health services. Both Sussex Partnership and Care UK agreed on a single aim: to establish new services that would help people in secure institutional settings to achieve safe independence.

INVESTING TIME IN THE GROUNDWORK

Before entering into formal arrangements, Sussex Partnership and Care UK invested in laying the groundwork for delivery. The partners consulted widely with those involved in delivering frontline services. They brought together a careful combination of clinical and commercial experience to develop an industry-leading model of care. Ensuring commercial representation meant that both parties were getting a fair deal, and engaging clinicians early helped to minimise possible resistance later down the line.

PLAYING TO EACH PARTY'S STRENGTH

Common values helped to start discussions about working in partnership; each organisation was single-mindedly driven by the interest of the residents. The partners took a long-term view and discussed how to divide the work and assets based on core strengths. Care UK had experience of establishing subsidiary companies and therefore led on corporate developments and governance. Sussex Partnership led on clinical governance and stakeholder relationships. Sussex Partnership agreed to supply psychiatry, psychology and occupational therapy services as well as clinical governance support. Care UK agreed to supply all forms of corporate support as well as day-to-day operational management of the facility.

“As with all partnerships, relationships are critical. Both parties rapidly established simple, fast and honest communication channels. Transparency meant we could communicate our common values and strategic objectives and hold a frank discussion about sharing risk and opportunity.”

Jim Easton, Managing Director, Healthcare, Care UK

THE FORMAL CONTRACTING PROCESS: DEVELOPING THE PARTNERSHIP WITHIN A TIGHT LEGAL FRAMEWORK

Both organisations signed a Heads of Terms agreement to ratify the intention for the commercial agreement. Parties signed a non-disclosure and exclusivity agreement and exchanged letters to commit to planning.

Independent financial advice was obtained to ensure the right balance of shareholder equity and loans in the joint venture. Sussex Partnership owned a site that was appropriate for this development, and this became part of its capital contribution to the joint venture. It invested the remainder in cash to achieve 50 per cent ownership.

In 2012 the formal joint venture, Recovery and Rehabilitation Partnership Ltd (RRP), was incorporated. Care UK and Sussex Partnership NHS Foundation Trust signed a shareholder agreement and parent company guarantee from Care UK, agreed the articles of association and service provision contracts, issued a development licence for the site owned by Sussex Partnership, and agreed a 125-year lease for the site.

While these legal processes were taking place, the two partners invested effort to uphold the relationship to nullify any chance of animosity developing during this delicate phase. Both boards of directors received regular updates and full business cases for approval.

BUILDING FOR THE FUTURE

Currently, the partnership is building a jointly developed, financed and owned hospital in Sussex. It will have high quality accommodation for 24 people, to help them safely gain independence. Eight places will be designated for inpatients and provide a high dependency locked service, and 16 places will be 'flatlets' where residents have their own front door and key.

The facility will be registered as a hospital and marks a turning point in the way mental health hospitals are designed to promote recovery. All patients in the unit will receive 24/7 support from a multi-disciplinary team.

In spring 2013 a second hospital in Gosport was acquired by RRP Ltd. The partnership has expanded the service into Hampshire and increased the availability of NHS provision for this kind of recovery-focused care. Sussex Partnership and Care UK are continuing to look at further opportunities both in rehabilitation services and other areas of mental health care.

“Balancing clinical and commercial thinking was key. A joint focus on the experiences of the people we serve came before talk of any commercial aspects. Independent high quality legal, financial and estates advice was also critical in giving us the confidence to proceed.”

Lisa Rodrigues CBE,
Chief Executive, Sussex
Partnership NHS
Foundation Trust