

BUSINESS CASE APPROVAL FORM



Reference Information			
Title:	Special Measures Improvement Director at Norfolk and Suffolk NHS Foundation Trust (the Trust)		
Name of requestor:	████████████████████ ██████████	PCOE Reference:	5137
Directorate/Team /ALB:	Provider Regulation, Monitor	Name of Budget Holder:	Monitor
Tel number of requestor:	██████████	Date submitted for approval:	4 February 2015
E-mail address of requestor:	████████████████████	Total Value (£) (excl VAT):	██████████
Duration (days):	80	For interim and specialist contractors, the Department assumes a contractor year of 220 days, reduced pro rata	
Start date:	23 February 2015	End date:	22 February 2016
Approvals Required (please tick ✓) ¹			
Director General/ALB Chief Executive	DH Financial Approvals Panel	Department of Health Ministers	Cabinet Office or HM Treasury
✓	✓	✓	
Expenditure type (please tick ✓)			
New Business Case	✓	Extension to Business Case	
		Original PCOE Reference	

All Professional Services		Other expenditure types	
Specialist Contractors	✓	ICT	
Interim Manager		Communications	
Consultancy		Digital	
Other Professional services (describe)		Other	

Endorsements, Authorisation and Approvals		
Endorsers/Authorisers/Approvers	Required	Name and Date
PCOE/Procurement Business Partner	✓	By: ██████████ Date: 30 January 2015
HR Business Partner	✓	By: ██████████ Date: 30 January 2015
Finance Business Partner	✓	By: ██████████ Date: 30 January 2015
Director General or ALB Chief Executive	✓	By: David Bennett; Date: 30 January 2015
Finance Approvals Panel	✓	By: [Specify name]; Date: [Specify date]
Department of Health Minister	✓	By: [Specify name]; Date: [Specify date]
HMT (over £500k & programme funded)		N/A
Cabinet Office/ERG		N/A

Note: It is the responsibility of the requestor to ensure that approval information is retained for audit purposes.

¹ To enter a tick in a cell, press shift and p; or copy and paste the ones provided.

Role / Project Information	
<p>What DH or ALB objectives does this request support?</p>	<p>This request supports Monitor’s objective to make sure that providers are well led.</p> <p>In his announcement on 13th September 2013 in relation to special measures the Secretary of State for Health outlined that each of the trusts placed in special measures will have an Improvement Director (ID), appointed and accountable to either Monitor or TDA. They form part of a suite of support for the Trust to help improve the quality and safety of its services for patients promptly.</p> <p>This case requests approval for an external appointment of an ID for Norfolk and Suffolk NHS Foundation Trust (the Trust) for 12 months (80 days work across this period).</p> <p><u>Background information</u></p> <ol style="list-style-type: none"> 1) The Trust has been deemed inadequate by the CQC, following a recent inspection; 2) The CQC has recommended that Monitor place the Trust into special measures; 3) In line with policy, Monitor is taking action to implement the special measures policy, including by <ol style="list-style-type: none"> a. Appointing a designated Improvement Director; and b. Finding suitable “buddy” trust(s) to support the Trust.
<p>What outputs or specific deliverables are required, and how do they support the overall objectives?</p>	<p>The ID will assist Monitor in ensuring that the Trust improves the quality and safety of its services for patients promptly. The key outcome will be a significant improvement in quality and leadership within the Trust, as measured by the CQC recommending the Trust exits from special measures in, approximately, 12 months time.</p> <p><u>Job Purpose:</u></p> <p>The purpose of the ID is to provide Monitor with assurance about the Trust’s approach to improving performance. They will also support the Trust, using their experience to provide constructive challenge. They will administer the ‘Buddy Trust’ arrangement, another key element of the special measures programme.</p> <p>They are engaged to (a) understand the root-cause of the problem and ensure the Trust focuses on key issues (they are to focus on delivering outcome as opposed to diagnosing a problem), (b) drive change and (c) provide quality assurance to Monitor as required.</p> <p><u>Main Accountabilities:</u></p>

	<p>The ID will be accountable for:</p> <ul style="list-style-type: none"> • <i>Assurance of the special measures trust’s action plan</i>: the ID will oversee the trust’s development and implementation of a credible turnaround plan to improve the quality and safety of its services for patients; • <i>Assurance of the special measures trust’s implementation of this action plan</i>: the ID will act on behalf of Monitor, and in concert with the relevant Regional Team of Monitor, to oversee delivery of the required improvements in the trust; • <i>Assessing Risk</i>: the ID will report to Monitor on progress with improvements, barriers and risks preventing the achievement of plans, the working relationships within the Trust and relationships with stakeholders in the wider sector (e.g. NHS England or CCGs); • <i>Assuring the accuracy of progress reporting</i>: the ID will promote transparency and public accountability through validating the accuracy of each trust’s reporting against its action plan; • <i>Providing support through constructive challenge</i>: the ID will employ their knowledge and experience to provide constructive challenge on a trust’s approach to improving performance; and • <i>Administer ‘Buddy Trust’ arrangement</i>: the ID will be expected to help their trust identify a suitable buddy, agree a useful plan of work, and monitor delivery against this.
<p>What skills are required to deliver these outputs or deliverables?</p>	<p><u>The key skills and experience require by an Improvement Director role are:</u></p> <ul style="list-style-type: none"> • experienced, senior leader in the healthcare field drawn from either the NHS or private sector; • experienced in relation to handling complex major change; • experienced in relation to the handling of Board effectiveness, governance and leadership; • acknowledged and respected for their judgement in this field; • immediate availability. <p>We ideally need someone with a high level of experience in mental health, particularly as this will be the first mental health trust entering special measures. In addition there is a high degree of local public and political interest in the Trust and we need an improvement director who is of high calibre, credible to all stakeholders and who understands these challenges.</p> <p>An appropriately skilled individual has been identified; this is Alan Yates who has extensive experience within mental health. He has been a Chief Executive of healthcare providers for 24 years, including 12 years as the Chief Executive of Mersey Care NHS Trust. He has experience of embedding patient focussed organisational behaviour, quality improvement through planning, delivery and governance and transformational change management.</p>

	<p>This case includes the requirement for up to two days per week of support, starting 23 February 2015, over the 12 month period (total of 80 days). [REDACTED]</p> <p>The arrangements proposed will enable the ID to be in place until a re-inspection is carried out by the Chief Inspector of Hospitals.</p>
<p>Why do you need external resources to deliver these outputs or deliverables?</p> <p>What skills can or will be transferred to permanent DH or ALB staff?</p>	<p>We do not currently have the capacity or capability within Monitor to field an ID with the requisite skills and experience.</p> <p>The ID will work closely with the Trust’s relationship team within Monitor and will share learning about the root cause of issues within the Trust and potential solutions. This learning will enhance the skills of the relationship team and will be shared more widely within Monitor.</p>
<p>What will the impact be on DH or ALB objectives if approval is not given for this business case?</p>	<p>It the DH does not approve the appointment of an Improvement Director at the trust the impact will be:</p> <ol style="list-style-type: none"> 1) probable prolonged inadequate patient care at the Trust; 2) a failure to implement the DH policy on special measures (and an inconsistency with other special measures trusts) resulting in reputational damage; and 3) possible further deterioration in the Trust’s performance.

BUSINESS CASE APPROVAL FORM



Procurement route (please tick ✓)			
Framework (Insert which one if known)	<input type="checkbox"/>	Open tender	<input type="checkbox"/>
		<input type="checkbox"/>	Other (speak to PCoE)
<p>Procurement Method: <i>Provide details of the proposed procurement/resourcing method (or specific sourcing strategy) as agreed with PCoE², including the basis of payment (e.g. details of fixed fee) and explain why this will achieve best value.</i></p> <p>The issues at the trust are complex and will be high profile, as it is the first mental health trust entering special measures. The resource required for this type of engagement is highly specialised. We have used our network of contacts within Monitor and across the sector to identify a candidate who both capable and willing to take on the role.</p> <p>This extensive search has led us to the conclusion that Alan Yates is the most suitable candidate due to his level of experience; particularly his experience in mental health and turning around troubled organisations.</p> <p>The appointment will be made via a recruitment agency, Michael Page, which will handle the administration of the appointment. Michael Page are contracted with Monitor through the Temporary/Permanent Staff framework (RM464/B).</p>			
Category Code:	Professional Services/specialist contractors		
General Ledger Code:			
Selected provider (if known):	Alan Yates		

Approvals:

² If the value of the service changes after the initial discussion with PCoE, requestors MUST go back to PCoE as the procurement route may have to change. This will save time in the long run.

1. Except as set out below, final financial approval for all expenditure requested within this Business Case Approval Form will be given by the Department of Health Finance Approvals Panel. This panel exercises the authority of the Director General, Strategy, Finance & NHS.
 - Requests which require ministerial approval;
 - Any proposal to extend a consultancy agreement beyond 9 months; or
 - Procurement-related consultancy greater than £20k.
2. Ministerial approval is required for all cases in respect of:
 - A contract value in excess of £200k (for any other category of professional service); or
 - Any case for interim or specialist contractors with a contract value that would, if the applicable daily rate were applied for a year, exceed £200k (i.e. £900 per day).

Commercial case/Procurement route

3. **Basis of payment** – as far as possible, the Department prefers prices to be fixed on appointment. You should provide details of an agreed fixed fee, or provide an explanation as to why you are proposing an alternative pricing structure (including the extent to which expenditure caps should apply).

Financial case

4. If the value of the service sought exceeds £500k, and funded from a programme budget, you will need to work with your Finance business partner to obtain HM Treasury approval for this category of expenditure. This is to be undertaken after the DH Finance Approvals Panel has approved the case.
5. In the case of all types of specialist contractor, DH assumes a contractor year of 220 days, reduced *pro rata* for shorter appointments (e.g. 110 days for six months). You will need to justify any appointment that exceeds this limit. You should also identify any risks associated with the use of an external provider (including your plans to mitigate such risks). Provide details of internal resources that will assist with the provision of the service.