

<b>HEALTH SCRUTINY COMMITTEE</b>
<b>16 JANUARY 2020</b>
<b>TREATMENT CENTRE MOBILISATION</b>
<b>REPORT OF HEAD OF LEGAL AND GOVERNANCE</b>

**1 Purpose**

- 1.1 To receive a written update on the transition of providers for the Treatment Centre.

**2 Action required**

- 2.1 To consider the written update provided and whether there is a need for any further updates or recommendations.

**3 Background information**

- 3.1 The Committee has considered the proposals for the procurement of a provider for the Treatment Centre on a number of occasions over the last two years.

- 3.2 The latest update was at the meeting on 13 June 2019, when Lucy Dadge, Director of Commissioning at Nottingham City Clinical Commissioning Group (CCG), gave a verbal report on the change of contract for the operation of the Nottingham Treatment Centre from Circle Healthcare to the Nottingham University Hospitals Trust (NUH), and provided the Committee with the following information:

- (a) the contract procurement process was subject to significant legal proceedings that were not fully concluded, but it had reached the stage where it was lawful to award the contract to NUH. The CCG was fully committed to working with both the new and departing provider and was confident that an effective handover would be achieved within the two months available, with the change taking effect from 29 July 2019. This included ensuring that the existing staff were engaged in the transition to the new provider, that the IT system transfer was managed effectively, and that the right equipment was in place, so there was no disruption to the continuity of appointments or to patient safety;
- (b) it was not proposed to make any changes to the current staffing, roles or terms of employment as part of the process, and staff were being kept fully informed. The provision of support services (such as cleaning and café staff) would be discussed between the providers, but some of these services were supplied to the Centre by NUH already. NUH would need to bring the new contract in line with its other core services, but it would consider continuing any existing, positive measures in the workplace that improved staff satisfaction and wellbeing. The primary focus of the CCG was on patient wellbeing, but it would discuss with the new provider measures for how staff satisfaction could improve outcomes for patients;

- (c) the award of the contract to a new provider did not change the expected outcomes for patients, which were set by the CCG, though NUH could choose to deliver them in a different way. There would be a strong focus on the continuity and maintenance of the standards of outcomes for patients, particularly at the point of transition. The contract transfer would go ahead in the context of difficult relationships in an intensive period, but the set handover date provided a strong point of focus and full measures were in place to ensure that there were no issues for patient safety;
- (d) if any bedding-in measures were required on a temporary basis, such as meeting existing appointments at an alternative delivery centre, there would be a requirement for strong and effective communication. However, no services would stop as part of the transition process. The CCG was fully committed to ensuring that effective medical provision was in place up to and across the handover date, and that the right skills and competencies were deployed to ensure success in an evolving healthcare environment;
- (e) the ultimate legal fees relating to the procurement for the Centre provider would be published when the process was fully concluded. The CCG had ensured that the necessary resources were available to ensure that the transition was successful. A specialist IT team had been put in place to ensure that all patient records were transferred accurately and successfully. The new and outgoing providers were in discussion relating to the current medical equipment present in the Centre. It was hoped as much of it as possible would remain in place, to minimise disruption. All costs relating to the management and operation of the Centre would be met by the new provider through the contracted tariff awarded to it by the CCG;
- (f) the current procurement process for the Nottingham Treatment Centre had been long and difficult. A general consultation was underway on the award of NHS contracts, and this was an active policy area on a national level. As such, it remained to be seen what the overall context would be when the new contract came to an end in five years' time.

3.3 The Committee resolved to receive a written update on the transition of providers from the CCG within 4 to 6 months, which is attached to this report.

#### **4 List of attached information**

4.1 Written update on the Treatment Centre mobilisation from the CCG.

#### **5 Background papers, other than published works or those disclosing exempt or confidential information**

5.1 None.

#### **6 Published documents referred to in compiling this report**

6.1 Health Scrutiny Committee reports and minutes dated:

23 November 2017  
24 May 2018  
19 July 2018  
13 June 2019

**7 Wards affected**

7.1 All.

**8 Contact information**

8.1 Laura Wilson  
Senior Governance Officer  
0115 8764301  
[laura.wilson@nottinghamcity.gov.uk](mailto:laura.wilson@nottinghamcity.gov.uk)