

North Central London

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Dr Yi Mien Koh Chief Executive Whittington Hospital NHS Trust Magdala Avenue London N19 5NF

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Dear Yi Mien

Whittington Foundation Trust Application

Following the work that has taken place between the Trust, NCL and its Clinical Commissioning Groups, and with input from NHS London, I can confirm we have now completed our review of the Trust's IBP, LTFM and planning assumptions on which they are based. I know that as part of the FT application process the Trust requires a letter of support from commissioners to accompany the application and on behalf of NHS NCL and its clinical commissioning groups I am happy to provide this support.

Strategic Alignment

There is a strong strategic alignment between your plans and that of commissioners. Your strategic goal of improving the health of the local people is consistent with our aims of addressing health inequalities and improving care provided to the most vulnerable.

We are both committed to providing the right care in the right place at the right time. Our major programme of work on developing integrated care is consistent with your plans for developing integrated models of care. As an integrated care organisation you are ideally placed to develop patient pathways across the health and social care settings and your plans reflect this. Achieving a programme increasingly focussed on prevention and early intervention will put you in an improved position to deliver both high quality care and value for money, both of which will be essential to become a successful Foundation Trust.

Planning Assumptions

We have jointly agreed that the demographic growth rates that the Trust has applied are reasonable planning assumptions, recognising the variance in growth by service area that reflects both a changing population and managed demand through the QIPP programme, which we are jointly committed to delivering. Should our plans not deliver the anticipated levels of activity in our exit run rate for the contract value of £212m then additional mitigations would need to be put in place to reduce activity back down to the agreed figure.

We recognise that to deliver change will require additional growth in specific areas, especially in the development of integrated care, and expect the Trust to work with the CCGs jointly to agree the specific areas of investment to be funded through the CCGs integrated care development funding.

We also expect that further information will be provided to the CCGs detailing how services will be transformed whilst enhancing quality. The CCGs will require a high level timetable setting out the programme of planned service change together with clarity as to the shift of resources from acute to community services.

The plan also includes a number of specific market growth initiatives. These have been developed in consultation with Haringey and Islington CCGs and, as with demographic growth, while the risk of these not materialising will sit with the Trust I can confirm that NCL CCGs believe the growth related to these represents realistic planning assumptions.

In addition, although not related to Haringey and Islington, we believe that based on current demand levels for the service the projections for Simmons House services are realistic.

<u>Affordability</u>

We have reviewed the summary details of the Trust cost improvement plans and sought opinion from NHS London, and to reconcile these with the LTFM. With the exception of the agreed levels of market and demographic growth plans we are pleased that the remainder of the financial pressures are being managed through your focus on cost reduction and your cost improvement programme rather than income growth.

You have established good governance arrangements both for initiating and delivering CIPs that give confidence that quality will not be compromised while delivering these savings. For community CIPs we are also confident that these can be delivered without an adverse impact on other parts of the health economy.

You have consistently shown a shared commitment to addressing the issues across the health economy, both through your approach to contract negotiations and working collaboratively with commissioners. As such we have confidence that the further development of your CIP programme will be consistent with the health economies QIPP plans.

Performance

We are pleased to see your commitment to targeting the performance levels that match the best performing hospitals nationally, this is consistent with our own programme of improving clinical and cost effectiveness and will be necessary to succeed in what is going to be a challenging environment.

Delivering high levels of quality and efficiency will be necessary to give confidence in your development of services going forward and we are therefore encouraged by your commitment to addressing those community services that are currently of most concern to GPs.

We would also expect current performance issues, such as those in A&E and diagnostics, to be addressed as part of demonstrating the solid performance necessary to be a Foundation Trust.

Downside Mitigations

Our review of your downside scenarios shows that they do not include any increased income generation or service growth that is out of line with the plans of the clinical commissioning groups. In addition you have no stated service withdrawals that would result in the local market being short of capacity. Although we have not seen the detailed project initiation documents for your downside mitigations we are confident from our conversations and review of your IBP that there is no adverse impact on the local health economy of your downside planning

In conclusion we are happy to support your application. We look forward to working with you to ensure a continued alignment of our plans and to support the transformation of services to better meet the needs of local people.

Than was

Yours sincerely

Caroline Taylor

Chief Executive

Sarah Price
Accountable Officer
Haringey CCG

Alison Blair
Accountable Officer
Islington CCG

cc: Paula Kahn