

<b>HEALTH &amp; ADULT SOCIAL CARE SCRUTINY COMMITTEE</b>	<b>Agenda Item No. 7</b>
<b>November 25th 2008</b>	<b>Public Report</b>

**Report of:**

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**FUTURE ORGANISATIONAL ARRANGEMENTS FOR PETERBOROUGH COMMUNITY SERVICES**

**1. PURPOSE**

The purpose of this report is for Committee to note the decision of the PCT Board regarding the long-term organisational model for Community Services.

**2. BACKGROUND**

2.1 NHS Peterborough asked for a business case recommending the preferred long term organisational form for the majority of services provided by Peterborough Community Services, to be produced for the PCT Board by November 2008.

2.2 A report outlining the process for identifying the preferred long term organisational model was presented to the Committee on September 2<sup>nd</sup> 2008.

2.3 A further report, confirming the outcome of the process and the recommendation going to the PCT Board on November 5<sup>th</sup> 2008, was presented to the Committee on October 14<sup>th</sup> 2008.

2.4 A Business Case was presented to the PCT Board on November 5<sup>th</sup> 2008 recommending that:

2.4.1 The preferred organisational model for Peterborough Community Services is a Community Foundation Trust for Peterborough

2.4.2 Peterborough Community Services, supported by NHS Peterborough and NHS East of England and in partnership with Peterborough City Council, will prepare to seek the Secretary of State's support to apply to become Peterborough Community Health and Social Care Foundation Trust.

2.5 The PCT Board agreed the recommendations subject to Cabinet approval.

2.6 Cabinet will be asked to agree the recommendations at its meeting on December 1<sup>st</sup> 2008.

**3. KEY ISSUES**

3.1 The Business case assessed three organisational models: Arms Length Trading Organisation, Community Foundation Trust and Social Enterprise.

3.2 Based on the evaluation of benefits and costs, the community foundation model scored the highest and is the recommended model.

3.3.1 Social care assessment and care management functions can only be delegated to statutory organisations. Social Enterprises are not statutory organisations and if this model had been chosen, Peterborough Community Services would not be able to provide fully integrated health and social care services.

## **4. IMPLICATIONS**

- 4.1 By pursuing the CFT model the aim would be to achieve:
- Services which deliver the best possible outcomes for local people
  - Increased contestability in the market resulting in higher quality and more cost effective services
  - Assurances that the PCT's 'duty of care' to its staff is fulfilled
  - Continuation of and further building upon the extensive partnership arrangements with the City Council
  - Delivery of key performance indicators
  - Further improvement in performance ratings
  - Sustainable service delivery

## **5. CONSULTATION**

- 5.1 The findings of the Next Steps Public Consultation, approved by the Board in November 2007, were taken into account in the process to identify the preferred organisational model.
- 5.2 As part of the process for applying to become a CFT, two public consultations will be required:
- Consultation by the PCT for the provider services to be established as an NHS Trust.
  - Consultation by PCS to move from the NHS Trust status to a Community Foundation Trust
- 5.3 Both of these consultation processes will provide the Committee, the public, staff and other key stakeholders with the opportunity to support or reconsider the decision to apply to become a CFT.

## **6. EXPECTED OUTCOMES**

This report is to ensure that the committee is aware of the PCT Board's decision subject to Cabinet approval on 15<sup>th</sup> December 2008.

## **7. NEXT STEPS**

It is proposed to bring further reports to the committee and the progress towards CFT status as requested by the Committee.

## **8. BACKGROUND DOCUMENTS**

Commissioning a Patient-Led NHS, (2005) Department of Health.

NHS Peterborough Business Case Recommending the Future Organisational Model for Peterborough Community Services

## **9. APPENDICES**

None.