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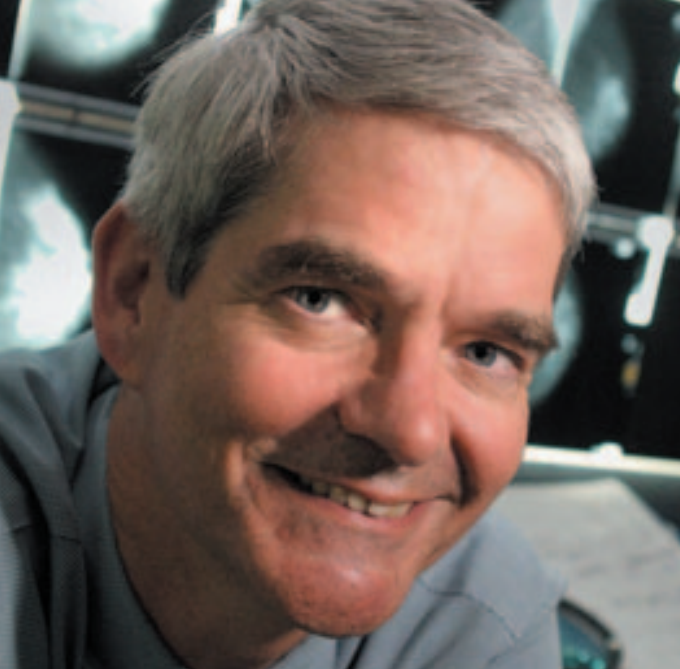
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# Staff-Specific Question & Answers **NHS Foundation Trusts**





**‘More local involvement is one of the most exciting things about foundation status. We need to engage local people and local groups and organisations to work in concert with us in finding the best way of shaping services for the future’.**

Dr Peter Gill, Deputy Medical Director and Radiologist,  
North Tees and Hartlepool NHS Trust

The creation of NHS Foundation Trusts is a key step in public sector reform – giving greater freedoms to NHS organisations, as part of the wider programme of moving from an NHS controlled nationally towards an NHS where standards and inspection are national but delivery and accountability is local.

NHS Foundation Trusts will remain fully a part of the NHS and will have a primary purpose of providing NHS services to NHS patients. They will be subject to NHS standards, NHS performance ratings and NHS systems of inspection. NHS Foundation Trusts will pioneer a new model of social ownership, giving local communities real opportunities to get involved in the stewardship of their local hospitals.

**This Q&A is designed for staff working in the NHS who will be affected by NHS Foundation Trusts.** It forms part of a series of guides which provide useful information on NHS Foundation Trusts.

### **What is an NHS Foundation Trust?**

NHS Foundation Trusts are a completely new kind of NHS organisation. They are about the NHS being run locally by local people rather than by politicians in central government. They will still be accountable to Parliament, but local people will have a real say in running their local hospital.

They will be different from existing NHS Trusts in three important ways. They will:

- Have new freedom to decide locally how to meet their obligations;
- Be accountable to local people, who can become members and Governors; and
- Be authorised and monitored by an Independent Regulator for NHS Foundation Trusts.

Transferring ownership and accountability from Whitehall to the local community will mean that NHS Foundation Trusts will be able to tailor their services to better meet the needs of the local population and to tackle health inequalities. But the freedoms given to NHS Foundation Trusts will be underpinned by a framework of national standards which will safeguard quality and protect the public interest.

### **Why do we need NHS Foundation Trusts?**

The Government wants the NHS to be a service that is properly responsive to patients’ needs and provides fast, convenient, high quality care.



**‘The presence of staff on the Board of Governors will generate a greater feeling of involvement and influence from the staff on the whole trust agenda – and on the reverse side of the coin a greater understanding by staff of the wider agenda and the pressures behind management decision-making. It will also give directors more responsibility and accountability to actually listen to, and respond to, staff’.**

Irene Scott, Director of Nursing,  
Guy's and St Thomas' Hospital NHS Trust

More money is being invested in the NHS than ever before – £59 billion in 2003/04, up from £54 billion the previous year. But alongside this extra money, the NHS must reform to become a service shaped around the needs of patients and the skills of clinical staff.

If the reforms are to succeed, they need to be led by local communities and by the NHS professionals delivering services on the ground. So, having put a system of national standards and inspection in place, the Government now wants to liberate the talents of staff. Patients, public and staff will be more involved in running NHS Foundation Trusts.

### **Who can become an NHS Foundation Trust?**

The Government wants to give the new freedoms and flexibilities to organisations that are best placed to use them well. Eligibility for NHS Foundation Trust status is therefore being restricted to those NHS Trusts with a track record of good performance - those with three stars in the NHS Performance Ratings. The NHS Performance Ratings give a high level summary of the overall performance of NHS Trusts against a number of key targets and important indicators of progress.

However, the test for NHS Foundation Trust status does not rely solely on performance ratings. Suitability to become an NHS Foundation Trust will depend on an evaluation of financial performance as well as management, vision and leadership potential.

### **How can I get involved?**

Local people, patients and **NHS staff** will all be eligible to become members of their local NHS Foundation Trust. Members will be able to stand for election to the Board of Governors of the NHS Foundation Trust. Membership will strengthen the link between hospitals and local communities.

### **What does being a member mean?**

Members of an NHS Foundation Trust will have a number of important roles, including:

- Electing their representatives to serve on the Board of Governors;
- Standing for election to the Board of Governors; or
- Putting themselves forward for appointment as non-executive directors – including the chair – of the NHS Foundation Trust; and
- Being consulted on plans for future development of the NHS Foundation Trust and its services.

### **Will being a member take up a lot of extra time?**

No, not necessarily. Members will receive a variety of information but won't have to attend meetings if they don't want to. They will however be able to give their views on relevant issues to Governors to act on. Governors will have to commit more time to their responsibilities but this isn't expected to be excessive.



**‘There can be no doubt that the service to patients will improve. The trust has a very good reputation but we have always striven to improve services. There is no standing still for us and the new Foundation Trust status will help us to achieve more, faster and, with the voice of the membership and the community, enable us to meet their needs in a greater capacity’.**

Christine Russell, Clinical governance and risk management administrator,  
Papworth Hospital NHS Trust

### **What’s the benefit of NHS Foundation Trust status for staff?**

Staff will have new opportunities to plan and develop locally based services in line with development plans agreed at Trust level. They will be free to deliver the healthcare that is most appropriate to their local circumstances without Whitehall interference or bureaucracy. Staff will have rights to be represented and have their say in how the hospital is run and will have the right to elect and stand for election to the Board of Governors.

### **If a patient asked me, what would I be able to say that explained the real benefits to patient care?**

**Patients** will for the first time have a way to direct and shape the organisation and to really influence how it is run. Giving patients and the public a voice in the organisation will mean that local decisions will be more responsive to what is most important to their patients. For example, if a MRI scanner will improve the service provided to patients, then the NHS Foundation Trust can use existing funds or borrow money to purchase one without the need to refer to a central hierarchy for approval.

**The public** will have true social ownership of their local hospital, with accountability devolved from Whitehall to the local community. They will have a say in how that hospital is run. Local people will have the opportunity to become involved in the running of their NHS Foundation Trust, with rights to elect or become Governors.

### **Will this impact on my day to day to job?**

Not necessarily. However, the freedoms which NHS Foundation Trusts have will mean that they can negotiate with staff to develop new ways of working for staff.

### **How will it affect my pay and conditions?**

All staff working in NHS Foundation Trusts will have the opportunity to move on to Agenda for Change terms and conditions. NHS Foundation Trusts will continue to be able to benefit from national agreements negotiated by, or on behalf of, NHS employers collectively. Agenda for Change provides for basic pay based on Job Evaluation and pay progression using the NHS Knowledge and Skills Framework. In addition there are flexibilities for local NHS employers to use mechanisms such as the recruitment and retention premia, where appropriate, to recruit staff into hard to fill vacancies. NHS Foundation Trusts will have extra freedoms to use these flexibilities, like all 3 star hospitals.

### **Will it affect my pension?**

No. As an employee of an NHS Foundation Trust, you will continue to have access to the NHS Pension Scheme and the associated benefits.



**‘Nurses are well placed to safeguard the general public because they are at the very front end of care. We will encourage many nurses to put themselves forward for election to the governing board’.**

Barbara Tassa, Sister at Selly Oak Hospital and RCN Council Member for the West Midlands

### **Will the NHS still employ me?**

Yes. You will still be part of the NHS family, employed by an NHS Foundation Trust.

### **Does my contract have to go to the NHS Foundation Trust?**

Yes, if an application for foundation status is approved, the old NHS Trust will cease to exist and will be replaced by the NHS Foundation Trust – but you won’t notice the transfer – your contract will simply be with the new organisation.

### **Will NHS Foundation Trusts poach staff away from other NHS Trusts?**

No. It is important that all NHS organisations have the flexibility to recruit and retain staff. This is why, within Agenda for Change, all NHS organisations will have a range of pay flexibilities, for example to help to recruit staff to hard to fill vacancies. NHS Foundation Trusts will implement Agenda for Change. They will not be able to use unfair competition to attract staff.

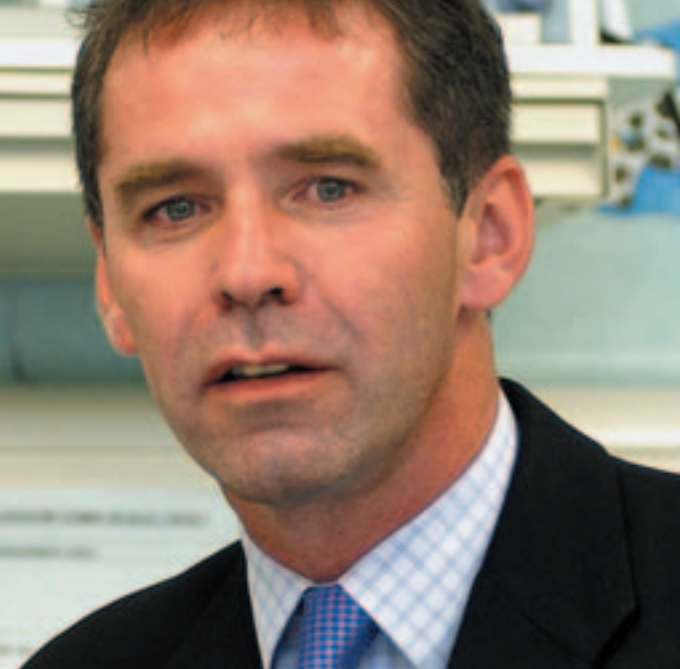
### **What will happen if an NHS Foundation Trust performs poorly?**

As is the case now if something goes seriously wrong it will be the responsibility, initially, of the Trust itself to take appropriate remedial action. If the situation continues or becomes more serious the Independent Regulator will have the statutory power to intervene.

### **What will be the relationship with the Primary Care Trust?**

Primary Care Trusts will be represented on the Board of Governors. The main function of the Board of Governors will be to work with the Board of Directors to ensure that the NHS Foundation Trust acts in a way that is consistent with its objectives and with the conditions under which it is authorised to operate, and to help set the strategic direction.

In their role as commissioners, Primary Care Trusts will continue to take the lead in needs assessment and specifying service requirements, with NHS Foundation Trusts developing and providing services in partnership with other providers in the local health economy. NHS Foundation Trusts will have long term legally binding contracts with Primary Care Trusts to provide NHS services.



**'I see this as an exciting opportunity for the NHS to break away from the strings of Whitehall. To be more accountable to the people we serve is an opportunity for us and it's an opportunity for the local residents to become involved in the planning and delivery of health care – I think that's exciting, particularly as I'm a resident too'.**

Stephen Groves, Emergency Services Manager,  
North Tees and Hartlepool NHS Trust

### **How will NHS Foundation Trusts relate to the Strategic Health Authorities?**

Strategic Health Authorities will not performance manage NHS Foundation Trusts. As the local headquarters of the NHS, they will still retain responsibility for setting the strategic direction for the local health economy, in which NHS Foundation Trust will play a full part.

### **Will NHS Foundation Trusts still be involved in clinical networks like the Cancer Network?**

Yes. NHS Foundation Trusts will continue to work across clinical networks to deliver services along integrated care pathways.

### **Will NHS Foundation Trusts lead to privatisation of the NHS?**

No. This is about devolving power from the centre to local people. NHS Foundation Trusts will be set up with a new form of social ownership, with a Board of Governors elected by local people, patients and staff. NHS Foundation Trusts will exist to provide NHS services to NHS patients: they will still be part of the NHS. There will be no shareholders, no dividends and the NHS Foundation Trust will be prevented by law from being taken out of the NHS or sold.

### **Will NHS Foundation Trusts be able to 'opt out' of the NHS?**

Becoming an NHS Foundation Trust is not opting out of the NHS. An NHS Foundation Trust will be fully part of the NHS family, subject to NHS systems of inspection. They will treat NHS patients according to NHS principles and NHS standards, but they will be controlled and run locally, not nationally. NHS Foundation Trusts will continue to co-operate with the rest of the NHS.

### **Will NHS Foundation Trusts lead to a two-tier health service?**

No. NHS Foundation Trusts will uphold the values and principles of the NHS and protect high standards for the NHS. They will have to meet the same national standards as the rest of the NHS and they will be paid at the same national tariff rates as other NHS hospitals.

All hospitals will have the opportunity to apply for NHS Foundation Trust status within 5 years.



**Will NHS Foundation Trusts encourage competition between hospitals?**

No. NHS Foundation Trusts will remain fully a part of the NHS family; they will provide health services in line with the requirements of NHS commissioners (Primary Care Trusts). NHS Foundation Trusts will not compete within the NHS; they will be expected to co-operate and collaborate with other NHS and social care bodies.

**Will NHS Foundation Trusts be able to pick what services they provide?**

No. NHS Foundation Trusts will exist to provide NHS services to NHS patients. The legislation which will establish them will allow for special protections to be applied to essential NHS services, such as A&E, provided by NHS Foundation Trusts. Under the terms of authorisation (similar to a licence), each NHS Foundation Trust will have to continue to provide these services to NHS commissioners (Primary Care Trusts). They will only be able to change these protected services if the Independent Regulator supports their proposals.

**Will NHS Foundation Trusts treat more private patients?**

No. There will be limits on the amount of private work an NHS Foundation Trust can carry out. NHS Foundation Trusts will be subject to strict limits on private patient work based on the amount of private work they currently do. If an NHS Foundation Trust wishes to treat more private patients, it will need to treat more NHS patients *first*. This will ensure that NHS Foundation Trusts continue to focus on NHS work.

**Shouldn't the Government be concentrating on helping poorly performing hospitals rather than best performers?**

NHS Foundation Trusts form part of a wider reform programme designed to raise standards across the NHS as a whole. The Government is committed to raising performance right across the NHS, bringing all NHS Trusts and Primary Care Trusts up to the standard of the best. NHS Trusts will be supported through a £200 million investment programme over the next four to five years to help them achieve the required standard in order to be able to submit an application for foundation status.

**Further information about NHS Foundation Trusts can be found on the Department of Health website:  
[www.doh.gov.uk/nhsfoundationtrusts](http://www.doh.gov.uk/nhsfoundationtrusts)**