

LONDON BOROUGH OF CAMDEN	WARDS: All
REPORT TITLE Update on Merger of Royal Free London NHS Foundation Trust and North Middlesex University Hospital NHS Trust	
REPORT OF Group Chief Executive Royal Free London NHS Foundation Trust; Chief Executive North Middlesex University Hospital NHS Trust	
FOR SUBMISSION TO Health and Adult Social Care Scrutiny Committee	DATE 9 th September 2024
SUMMARY OF REPORT <p>This paper provides an update on progress with the merger of the Royal Free London NHS Foundation Trust and North Middlesex University Hospital NHS Trust and development of the full business case for the Health and Adult Social Care Scrutiny Committee’s information.</p> <p>Local Government Act 1972 – Access to Information</p> <p>No documents that require listing have been used in the preparation of this report.</p> <p>Contact Officer:</p> <p>Dan Wood Communications Lead North Mid and Royal Free London Partnership Communications Team, Staff Education and Development Centre, 50 Lawn Road, London, NW3 2XB dan.wood8@nhs.net</p>	
RECOMMENDATIONS <p>The Committee is asked to note the update.</p>	

Signed:



Emma Kearney, Chief Communications Officer, Royal Free London NHS Foundation Trust

Date: 19/08/2024

1. Introduction

- 1.1 In January 2024, following several years of closer working, North Middlesex University Hospital NHS Trust (North Mid) and Royal Free London NHS Foundation Trust (RFL) announced that they were exploring how they could merge, with North Mid joining the RFL group.
- 1.2 In February 2024, the chief executives of RFL and North Mid briefed members of the North Central London Joint Health Overview and Scrutiny Committee (JHOSC) on the rationale and plans for merger. They were subsequently invited to brief the Camden Health and Adult Social Care Scrutiny Committee.
- 1.3 This paper provides an update on progress with the merger and development of the full business case for the committee's information.

2. Merger progress

- 2.1 The full business case for merger was completed and approved by both trust's boards in July and has been submitted to NHS England for approval as part of the standard formal process. NHS England has indicated it will review the business case in autumn 2024. Subject to its approval, and that of the Secretary of State for Health and Social Care, North Mid and RFL expect to bring their organisations together around the end of the year with a planned formal merger date of 1 January 2025.

3. Patients will still be referred to their usual local hospital

- 3.1 Patients will still be referred to their usual local hospital and North Mid and RFL hospitals will continue to provide the same routine services for their local patients. At North Mid, these include accident and emergency (A&E), maternity, intensive care, paediatrics, acute surgery (i.e. trauma and emergency surgery), acute medicine and community services.
- 3.2 As the plans do not currently involve any significant change to where the vast majority of patients would access their routine care, there will be minimal impact on patient travel or choice. North Mid and RFL recognise the importance of having accessible and convenient travel links to their hospitals, for patients and staff, and remain mindful of any potential travel implications as they develop plans for merger. Separately from the merger process, they

continue working with their partners, including elected representatives, local government and Transport for London, to improve accessibility where there is an identified need and to support the development of sustainable transport and travel plans that promote health and wellbeing.

4. The benefits of merger

4.1 For patients:

- North Mid and RFL can go further and faster in providing better, more sustainable and equitable services, including working together beyond hospital and organisational boundaries.
- faster reduction in waiting times through combining and sharing resources to treat more patients.
- more specialist care locally and more joined up community services supported through a single electronic patient record.
- increased opportunities for patients regardless of location or background to participate in research and trials of new clinical treatments.

4.2 For local communities:

- more co-ordinated action to improve the health of the local population through greater focus on understanding and addressing inequalities in care.
- more support to help people stay healthy, with tailored screening and expanded early diagnostic and intervention services.

4.3 For North Mid and RFL staff:

- improved learning and career opportunities with the ability to develop and diversify their careers without having to change organisations.
- enhanced recruitment and retention offer with greater opportunities for development and learning.
- new employment opportunities for local people as a combined and significant employer in both local clinical and supporting services.

5. Integrating specific clinical services

5.1 North Mid and RFL have identified the first four services that they will prioritise for early integration. These are areas where, as a group, they will be able to accelerate the delivery of the benefits for patients, staff and our communities:

- **Cancer:** The group will establish itself as a world-class cancer centre, working together as one specialist oncology team across all its sites to ensure a patient's cancer treatment journey is consistently excellent whatever type of cancer they have, directing resources where they are needed the most to cut down on the time patients wait for treatment and provide access to the most advanced and effective cancer care close to home.

- **Research and development:** The group will tackle the current inequalities in access to research trials and new treatments, where legal and regulatory barriers limit the collaboration that is possible at present. This will allow greater access to potentially life-changing innovative treatments for North Mid patients and a more diverse patient base for RFL trials.
- **Colorectal surgery:** The group will realise its vision to become a centre of excellence for bowel cancer and complex surgical treatment, focused on innovation through the use of robotic technology, early screening and integrating our service as one to provide 24/7 specialist care close to home.
- **Surgical hubs:** The group will draw on the success of existing surgical hubs for orthopaedics and ophthalmology to create a network of centres of surgical excellence across the group. This will mean patients will be seen more quickly for common procedures and receive consistently excellent care.

5.2 See appendix A for more detail of North Mid and RFL plans for each of these services, which illustrate the kind of benefits they want and expect to achieve across a wider range of clinical services.

6. Urgent and emergency care (UEC)

6.1 The merger will support existing plans to address UEC pressures and will enable North Mid and RFL to work in a more effective way with wider services to streamline access for patients, improving performance across the merged trust.

7. Corporate governance

7.1 The Royal Free London (RFL) group model was designed to ensure strong local clinical leadership at site level and a focus on local relationships and identity, with a robust framework for clinical and operational governance across multiple sites.

7.2 North Mid will join the RFL group as a fourth health unit alongside Barnet Hospital, Chase Farm Hospital and the Royal Free Hospital. All health unit chief executives will be voting members of the board. North Mid will continue to be supported by a local executive team responsible for its performance and local services and relationships, in the same way as the other existing RFL health units.

7.3 As an NHS foundation trust, RFL has a patient, public and staff membership that elects a council of governors to hold the board to account. They will expand this membership and reconstitute the council of governors to ensure the voices of North Mid communities are included.

8. Digital integration

- 8.1 Establishing a single electronic patient record (EPR) across the group is a critical enabler for many of the benefits of merger. The longer term plan is to deliver a single hospital EPR. In the interim, North Mid and RFL have a clear plan for how they will safely manage different EPRs across the same trust, building on RFL's previous experience in managing multiple digital systems across different sites.

9. Financial impact of merger

- 9.1 While the purpose of merger is to provide benefits for patients, staff and the wider population, merger also will bring a limited number of financial benefits through reduced duplication in corporate support services; lower combined insurance premiums; efficiencies of scale in purchasing; and, once implemented, reduced license costs from having one EPR plus fewer duplicate clinical and support systems.
- 9.2 After allowing for any additional costs caused by the merger, there is an overall positive revenue impact from the merger from 2025/26 onwards, with increased opportunities to identify further savings to reinvest in patient care and staff development.

10. Engagement with our staff, stakeholders, patients and communities

- 10.1 North Mid and RFL have engaged extensively and continue to engage and involve staff in the merger planning work. While there has been understandable anxiety reported by some staff from both trusts about what merger might mean for them, reassurance has been provided from the trusts that they are not expecting any significant changes for most people from day one and staff report being motivated by the opportunities to both improve patient care and further develop their own careers.
- 10.2 Overall staff are positive about the proposals, citing the potential benefits they can see for patients and services. Importantly the group model through which the merged organisation will be run, enables the retention and celebration of local identities, cultures, and services – but strengthening these through joint working, sharing of resources, and standardisation where appropriate.
- 10.3 Where colleagues will be affected as the organisations come together, this will be managed through North Mid and RFL agreed formal change processes.
- 10.4 North Mid and RFL have engaged extensively with stakeholders, including health overview and scrutiny committees; councillors; local authority leaders; voluntary and community sector forums; Healthwatch; primary care forums; and local partnership boards. Feedback indicates that they are largely relaxed about the proposed merger and broadly supportive. They have been reassured that the group model supports strong local leadership and relationships, the merger is not motivated by cost-cutting, and that closing or relocating services is not part of the plans.

10.5 Community engagement has been delivered with support from Healthwatch Enfield and Healthwatch Haringey. As the merger plans do not involve any specific proposals that require formal consultation, community engagement has focused on raising awareness, providing reassurance and listening to any questions or concerns so they can be addressed. Feedback has shown that people recognise and welcome the benefits of transfers of care being quicker and more streamlined within a single trust and of the potential for a greater choice of sites to attend for outpatient tests and appointments.

11. Finance Comments of the Executive Director Corporate Services

11.1 The Executive Director of Corporate Services has been consulted on the contents of the report and has no comments to add to the report

12. Legal Comments of the Borough Solicitor

12.1 The Borough Solicitor has been consulted on the contents of the report and has no comments to add to the report.

13. Environmental Implications

13.1 There are no environmental implications from the proposals in this report.