Call for evidence on smaller acute providers in England
Background

1. Providers of NHS services face a significant challenge: to deliver high quality services to meet growing patient needs, alongside continued tight funding.

2. On top of this, providers of acute services face additional challenges in maintaining clinical sustainability as clinical trends shift towards 24/7 consultant-led care, the concentration of specialist services on fewer sites, and the transfer of services into community settings.

3. There is the potential for disruption to patient care if providers are unable to meet the growing challenges to delivering services. Monitor’s job is to protect and promote the interests of patients by ensuring that the whole sector works for their benefit. To achieve this, we are issuing a call for evidence to get a better understanding of the full extent of the challenges that acute providers face.

4. The initial focus of our project is on smaller non-specialist acute providers, as our preliminary work suggests that some of these are facing particular challenges.

5. Smaller acute hospital trusts are one of the main points of access to health care services for many patients. In addition to a range of elective services, these trusts provide important services such as maternity and A&E care, as well as services for frail and elderly patients who need integrated health and social care that is close to home.

6. Such services can be central to meeting patients’ needs in local areas, and represent a significant amount of NHS spending. There are just over 140 non-specialist acute trusts in England. Together these receive in the region of £50 billion per year for all their services.

7. Monitor and the NHS Trust Development Authority will work together on this research project to ensure that there is alignment across our organisations. The results of the research will contribute to an evidence base around what high quality and sustainable services will look like in the future. It will inform ongoing work by Monitor and NHS England on the future of the provider landscape and the support needed to ensure that it is fit to meet the challenges that lie ahead. It also forms part of Monitor’s response to the Francis Inquiry, where we have committed to work with partners to improve our understanding of what makes NHS providers clinically sustainable.

8. This is an exploratory research project to understand the factors that may influence the care delivered by smaller acute providers. We are not pre-disposed to any particular outcome or solution.
Call for evidence

9. The current evidence base about the challenges that smaller acute providers face is not comprehensive and would benefit from further investigation and clarification.

10. For the purpose of this study, we have defined smaller providers as those with an annual income of £300 million or less. However, we would like information from acute providers of all sizes, as this will help us to determine whether smaller providers face significantly different challenges to larger ones.

11. We would like evidence on:

- Whether smaller non-specialist acute providers are facing particular difficulties in delivering high quality, sustainable services.

- If they are, whether these smaller acute providers are facing any specific factors that:
  - increase their costs (eg, providing services at small scale);
  - decrease their revenue (eg, concentration of specialist services on fewer sites); and/or
  - affect their ability to respond to issues and to deliver services (eg, thinner staff rotas).

- The means and opportunities that smaller acute providers have to address potential challenges and to demonstrate innovative, high quality service delivery.

12. We are also open to evidence that factors other than scale pose challenges to providers.

13. Although the study is focused on acute providers, we are keen to receive evidence from anyone interested in the services they provide. This includes patients and patient groups, all providers of NHS-funded care, general practitioners, commissioners, local authorities, health care experts, academics, and professional and representative bodies.

14. We will engage widely and openly with interested parties throughout the call for evidence. In addition, we plan to send a questionnaire to all non-specialist acute hospital trusts to ask them about any challenges that they are facing. We will be contacting these providers directly but they are also welcome to respond to the call for evidence.

15. We will analyse the evidence we gather and publish a report setting out the findings of our research in spring 2014.
**Timetable**

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<tr>
<th>Event</th>
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<tr>
<td>Monitor issues call for evidence</td>
<td>29 October 2013</td>
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<tr>
<td>Deadline for responses to call for evidence</td>
<td>10 December 2013</td>
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<tr>
<td>Publication of findings</td>
<td>Spring 2014</td>
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**To submit your views**

16. If you wish to submit a response to this call for evidence, or if you have any feedback or queries in relation to this work, please email or write to us by the deadline above at:

   smalleracutes@monitor.gov.uk

**Challenges facing smaller acute providers**

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