

Leicestershire Partnership and Northamptonshire Healthcare Group

Purpose of the report

The purpose of this paper is to provide an overview of the work of the Group Model and the benefits it is delivering, and to present Terms of Reference for its Committee in Common and Joint Working Group for approval.

Analysis of the issue – Developing a Group Model

Across the NHS in England, organisations are being increasingly encouraged to work together within and across different health economies. This is in advance of a change in legislation (scheduled later in 2022) which will bring into being the Integrated Care Systems (ICS) and a formal legislative requirement for NHS and other organisations to work collaboratively to improve services for patients in a defined geographical region.

NHFT has already embraced this new way of working. Angela Hillery was appointed as joint CEO of both NHFT and LPT in 2019. At the time, this arrangement underpinned a formal buddy relationship between both Trusts, supported by NHSE/I.

NHFT and LPT have developed a strong bond through this arrangement and in April 2021 the buddy relationship transitioned into a Group Model (the Leicestershire Partnership and Northamptonshire Healthcare Group).

Developing a Programme of Joint Strategic Priorities

A key principle underpinning the establishment of the Group Model is the intention to benefit and improve both organisations through partnership working. By working together, each is stronger and can build greater resilience; in addition they can strive for excellence to better develop and share good practice.

One of the early tasks for both Trusts was together to identify a number of joint priorities which would enable them to strengthen their respective position, scope, reach and influence within each Integrated Care System, the East Midlands and beyond.

As a result the Group Model has developed a three year programme starting with eight strategic priorities which both organisations believe can create significant benefits for our stakeholders from the two organisations working so closely together. Each priority is led by a member of our executive teams and the strategic ambitions of each plan are summarised here:

- **Innovation & research** - Create centres of academic excellence that grow our contribution to innovation and funding income
- **Together against racism** - Be nationally recognised leaders on race equality and anti-racism in the NHS and employers of choice.
- **Talent management** – As inclusive employers, widen opportunities for our workforce to develop and progress across our Group
- **Leadership & organisational development** – Have great leaders at all levels within both organisations, skilled and trained to meet the needs of our joint workforces, leading compassionately and inclusively to create a culture that supports Trusts individual missions
- **Strong governance** - Be outstanding Well Led organisations, delivering best practice governance across the Group and contributing to system governance and enabling agile and effective decision making
- **Strategic finance** - Use our financial strength to build back better for the benefit of our populations
- **Strategic estates** - Build new therapeutic environments which improve outcomes for people using services by supporting joined up, person-centred care, a positive, effective working environment for NHS staff and stronger and greener NHS buildings.
- **Quality improvement** - Be outstanding organisations in the quality of the care we provide and all that we do to enhance our patient and populations' health.

Building on Existing Joint Work

The strategic priority programme builds on joint working from the buddy relationship between LPT and NHFT. We want to grow this type of collaboration and the benefits it can deliver to us as a Group. Appendix 1 showcases some of our work to date.

Some of the benefits colleagues have highlighted about their joint work

- Fresh ideas
- Access to new or helpful insight
- Gaining a different perspective
- Building confidence and connections
- Reducing duplication and optimising use of our limited resources
- Colleagues in each Trust can contribute their knowledge, learning, talent and skills
- Enhanced solutions through joint problem solving and support
- Identifying and growing new ideas together
- Learning from each other
- Optimising opportunities for change and improve together at an accelerated pace than we would individually

Our buddying relationship and Group model has given rise to a number of shared Directors in addition to the joint Chief Executive, namely joint Chief Finance Officer, joint Director of Strategy and Partnerships and joint Director of HR & OD/Director of Governance, and plans are underway to create more joint posts in the future to further cement the relationship between each Trust.

At each Board meeting, a highlight report (Appendix 2) will be presented which will formally document the progress of each of the eight joint priorities and also showcase other joint working initiatives underway between both Trusts. In addition, each Trust Board will annually review the programme of joint work and make recommendations for change – for example the addition of new priorities.

Our Governance Arrangements

The Group Model is governed through two identical Committees in Common (CiCs), one in each Trust, that come together as a Joint Working Group (JWG) to oversee the delivery of the programme of joint priorities which have been previously agreed by both Boards. The JWG is accountable to each Board through each Trust's respective CiC and the members of the JWG are comprised of the membership of each Trust's CiC and include:

- Both Trust Chairs (at each JWG meeting, one Chair will take the lead in chairing the meeting)
- The Joint Chief Executive
- Both Trust Deputy Chief Executive Officers
- An equal number of Non-Executive Directors from NHFT and LPT
- The Joint Group Model Directors, namely:
 - Director of Governance & Risk (LPT) and Director of HR & OD (NHFT)
 - Director of Strategy & Partnerships
 - Chief Finance Officer

All of these governance arrangements are enshrined in a Memorandum of Understanding between LPT and NHFT and the terms of reference for both the CiC and the JWG are presented at Appendices 3 and 4 respectively.

As the relationship between the two Trusts develops and matures and the delivery of the Group Model strengthens, more opportunities for joint working will be identified. Priorities can be updated at any time and formally agreed through a recommendation to each Trust Board via its respective CiC. The Group Model programme of work will be formally revisited at least annually by each Trust Board.

The CiCs, operating as a JWG, are responsible for overseeing the Group priorities and have no delegated authority to exercise powers of LPT or NHFT.

Proposal

- The updated Terms of Reference for LPT's Committee in Common and the LPT – NHFT Joint Working Group be approved by Trust Board.
- Be assured and the progress and benefits of Leicestershire Partnership and Northamptonshire Healthcare Group programmes of work.

Decision required

The Board is invited to receive assurance that good progress is being made on the delivery of the Group Model between LPT and NHFT and a number of benefits are emerging. The

highlight report attached at Appendix 2 formally documents the delivery of eight strategic priorities identified for joint delivery by both Trusts over the next three years and will form part of the suite of assurance reports presented to each Board meeting.

The Board is also invited to approve the Terms of Reference for the CiC and the JWG which underpin the transformation programme of the Leicestershire Partnership and Northamptonshire Healthcare Group.

Governance Table

For Board and Board Committees:	Trust board 25 th January 2022	
Paper sponsored by:	David Williams	
Paper authored by:	Amanda Johnston, Fiona Barr	
Date submitted:	18 January 2022	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	None	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	LPT-NHFT Committees in Common Joint Working Group 10 th January 2022	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	LPT-NHFT Committees in Common	
STEP up to GREAT strategic alignment*:	High Standards	x
	Transformation	x
	Environments	x
	Patient Involvement	
	Well Governed	X
	Reaching Out	X
	Equality, Leadership, Culture	X
	Access to Services	
	Trustwide Quality Improvement	X
Organisational Risk Register considerations:	List risk number and title of risk	
Is the decision required consistent with LPT's risk appetite:		
False and misleading information (FOMI) considerations:		
Positive confirmation that the content does not risk the safety of patients or the public		
Equality considerations:		