

NB Tracked changes reflect the proposed changes to the original wording made by both Boards following their annual effectiveness reviews

Appendix 1

Memorandum of Understanding

Dated ~~25th March 2021~~ 29 November 2022

This Memorandum of Understanding (MoU) is made between Leicestershire Partnership NHS Trust (LPT) and Northamptonshire Healthcare NHS Foundation Trust (NHFT) (each a Trust and together the Trusts) for the formulation of a group model between the Trusts

1. Background

- 1.1. Since 1 October 2019 the Trusts ~~have~~ had a buddying relationship which ~~will~~expired on 31 March 2021.
- 1.2. ~~In March 2021, both The Trusts'~~ boards ~~have both~~ resolved to build on their buddying arrangement and to continue to collaborate through the partnership arrangements set out in this MoU by establishing a Group Model.
- 1.3. The Trusts agree that the Group Model should retain individual organisational identity and accountability but enable the delegation of agreed specific strategic programmes, which enable and develop closer collaboration between the two organisations.

2. Duration and termination

The Trusts agree that:

- 2.1. The arrangements set out in this MoU shall remain in force unless and until they are terminated in accordance with this clause 2
- 2.2. Their boards will undertake an annual review of the working arrangements and delivery of the Group Model
- 2.3. One Trust may terminate the arrangements set out in this MoU by giving the other Trust not less than 12 months written notice.
- 2.4. In exceptional circumstances, if either Trust should identify that group partnership work is impacting in a detrimental way, the MoU can be terminated by either Trust giving the other Trust 30 clear days written notice.

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3. Principles

The Trusts' agreed principles of their Group Model and the guiding principles for the Joint Working Group are as follows:

- The need to maintain the distinct identities of the Trusts within the group
- Retained decision making in each Trust
- The need to maintain separate organisations to ensure that performance and financial issues are considered by the regulator as separate entities, enabling each to maintain and develop its levels of financial performance

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- The need to have local accountability to key stakeholders through NHFT's Governors or similar in LPT
- A group model which concentrates on best practice solutions and shared learning, and realises the benefits of a ~~combined partnership~~ approach to key strategic issues and challenges and places both organisations in a stronger place than if they were to deal with issues in isolation.
- A group model which attracts the very best clinical and managerial staff
- A group model which, via the delegated strategic programmes, facilitates the necessary improvements, at a pace which maintain sustainable local healthcare solutions for the communities served
- Complies with current NHS guidance regarding the structuring of NHS providers.
- Will continually be cognisant of and take opportunities, which exploit:
 - Economies of scale;
 - Strategic advantage;
 - The sharing of best practice and learning;
 - Pooling of resources;
 - Mutual aid; and
 - The benefits of a blended approach between the two organisations.

4. Establishment of committees in common

The Trusts have resolved to establish committees in common operating as a joint working group to establish their group model structure without delegating board decision making authority to it; the group would focus on agreed strategic areas in common (grown from the work that the Trusts have completed in their strategic transformation programme) and then review and grow this over time according to experience and the developing relationship.

5. Key focus of the committees in common

The priorities for the Group Model ~~during 2021/22, as set out in annex B. ... These~~ will be revisited and agreed on an annual basis.

Working in partnership under the Group Model is to provide the opportunity to identify, develop and deliver joint programmes of transformation that are of benefit to both LPT and NHFT.

6. Key features of the committees in common

The Trusts agree that key features of the committees in common are that:

- The committees in common will be accountable to their respective boards
- Commissioning contracts will remain with the respective Trusts
- Assets will remain in each Trust's ownership

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- Establishment of the committees in common will not affect the Trusts' regulatory framework

- The committees in common will be non-decision making
- Both committees in common will develop a terms of reference consistent with the template.

7. Membership of the committees in common

Members of the committees in common shall include or be drawn from the Trusts' Chairs, the joint CEO, [managing directors](#), executive directors, directors, senior managers, and Non-Executive Directors.

8. Terms of reference of the committees in common

Both Trusts have agreed to utilise the terms of reference template for their committee in common.

9. Confidentiality

- 9.1. The Trusts acknowledge that they may exchange confidential information with each other in connection with the arrangements set out in this MoU
- 9.2. The Trusts agree they will not use each other's confidential information for any purpose other than to comply with this MoU and to facilitate the functioning of the committees in common.
- 9.3. Both Trusts undertake that they shall not at any time during the period for which this MoU applies, and for a period of five years after its termination, disclose to any person any confidential information concerning or in connection with the Trusts, the committees in common or this MoU except as permitted by clause 9.4.
- 9.4. The Trusts may disclose confidential information:
 - to their employees, agents or consultants who need to know such information for the purpose of discharging their obligations under this MoU provided that they will ensure that their employees, agents or consultants to whom they disclose confidential information comply with this clause 9; and
 - as may be required by law, a court of competent jurisdiction or any governmental or regulatory authority.

10. Legal status

The Trusts do not intend this MoU to be legally binding or enforceable by them or by virtue of the Contracts (Rights of Third Parties) Act 1999 by any person who is not a party to it.

Signed

Signed

Cathy Ellis, Chair

Crishni Waring, Chair

for Leicestershire
Partnership NHS Trust

for Northamptonshire Healthcare
NHS Foundation Trust

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