

PAPER A

Group Trust Board 29 May 2025

Group Trust Board Terms of Reference

Purpose of the Report

To provide the Group Trust Board Terms of Reference

Analysis of the Issue

The Group Trust Board Terms of Reference provided below has been received by each individual Trust Board in May 2025 as part of the partnership agreement. It is provided here as a contextual framework to this first meeting of the Group Trust Board.

Proposal

Terms of Reference is provided in Appendix A.

Decision Required

To acknowledge the Group Trust Board Terms of Reference

Appendix A

Group Trust Board Terms of Reference 2025/26

Version	2025/26 v1
Executive Lead	Director of Strategy and Partnerships
Date Approved	
Review Date	Group Trust Board May 2026

1. Introduction

- 1.1. The Group Board is a statutory joint committee of the boards of Leicestershire Partnership NHS Trust and Northamptonshire Healthcare NHS Foundation Trust, who have established it to exercise Joint Functions in accordance with the Partnership Agreement dated 29 May 2025.
- 1.2. In these terms of reference 'Joint Functions' mean all the Trusts' functions that the Trusts have agreed in this Partnership Collaboration Agreement (PCA) to exercise jointly subject to any variation of the PCA that the Trusts have agreed in accordance with it.

2. Authority and Accountabilities

- 2.1. The Group Board is authorised by the Boards to exercise the Joint Functions.
- 2.2. The Group Board shall be fully and equally accountable to both Trust Boards for the exercise of the Joint Functions and shall at all times comply with the PCA and NHS England guidance when exercising Joint Functions.
- 2.3. The Group Board may authorise one of the Trusts to contract with a third part on behalf of itself alone or both Trusts jointly and severally subject to compliance with the Trusts' Standing Orders and Standing Financial Instructions.
- 2.4. The Group Board is authorised by the Boards to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.
- 2.5. The Group Board shall transact all business in accordance with the policies of the Trusts on openness and conformity with the Nolan principles and values of Public Services.

3. Reporting arrangements

- 3.1. The minutes of the Group Board shall be formally recorded and submitted to each Trust's Board.
- 3.2. The Group Board shall provide to each Trust's Board an Annual Report of the activities of the Group Board.

4. Frequency of meetings

- 4.1. Meetings of the Group Board shall be held not less than six times a year.
- 4.2. Extraordinary meetings may be called for a specific purpose at the discretion of the Joint Chair. Where possible a minimum of seven working days' notice will be given when calling an extraordinary meeting.

5. Membership

- 5.1. The voting members of the Group Board shall include all the Voting Directors of both Trusts during their terms of office.
- 5.2. Additionally, the Trusts may appoint Non-Voting Directors of the Trusts to be voting or non-voting members of the Group Board.
- 5.3. The proceedings of the Group Board shall not be invalidated by any vacancy in its membership or by any defect in the appointment of a member of the Group Board.
- 5.4. In line with both Trusts' Standing Orders, members of the Group Board must attend at least two thirds of meetings annually, subject to annual review and appraisal process.

6. Attendance

- 6.1. The Group Board will be supported by the respective Directors responsible for Corporate Governance (and Trusts' Secretariats) to ensure business is transacted as per this Terms of Reference, the Partnership Agreement and the relevant Standing Orders and any documents referred to in them.
- 6.2. In the absence of a member a nominated deputy may attend with the agreement of the Chair and will be formally nominated with the same rights and privileges.

7. Quorum

- 7.1. No business shall be transacted at a meeting of the Group Board unless:
 - 7.1.1. The voting members present include (in addition to the Joint Chair) at least one Voting ED of LPT and one Voting ED of NHFT (who in the case of a joint director may be the same person) and at least one Voting NED of LPT and one Voting NED of NHFT (who in the case of a joint NED may be the same person).

8. Chair and Deputy Chair

- 8.1. The Joint Chair of the Trusts shall preside at any meetings of the Group Board.
- 8.2. If the Joint Chair is absent, one of the Deputy Chairs from one of the Trusts shall preside. If a Deputy Chair is presiding at a meeting instead of the Chair, then references in this Terms of Reference to the Joint Chair shall be construed as the Deputy Chair.

9. Decision Making

- 9.1. The Group Board will generally operate on the basis of forming consensus on all issues considered, taking account of views expressed by all members. The Joint Chair will seek to ensure that any lack of consensus is resolved amongst members.
 - 9.1.1. If the Group Board is unable to reach a consensus on an issue, the Joint Chair may put the issue to a vote. The vote will be carried if:
 - 9.1.2. A majority of voting members present and voting are in favour (and in the event of a tied vote the Joint Chair shall have a casting vote), and
 - 9.1.3. The voting members in favour include not less than half the LPT Voting Directors present and not less than half the NHFT Voting Directors present.

10. Admission of the public to meetings

- 10.1. Meetings of the Group Board shall be held in public.
- 10.2. But the Group Board may, by resolution, exclude the public from a meeting (whether during the whole or part of the proceedings) whenever publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings.

11. Conflict of Interest

- 11.1. Each member of the Group Board must abide by all policies of the Trust of which they are a Director or Officer in relation to conflicts of interest.
- 11.2. Where any member of Group Board has an actual or potential conflict of interest in relation to any matter under consideration at any meeting, the Joint Chair (in their discretion) shall decide, having regard to the nature of the potential or actual conflict of interest, whether or not that member may participate in meetings (or parts of meetings) in which the relevant matter is discussed.

12. Administrative Arrangements

- 12.1. The LPT and NHFT corporate governance offices shall jointly provide administrative support to the Group Board.

13. Annual Workplan

- 13.1. The Group Board will agree an annual workplan and cycle of business prior to the beginning of each financial year. The reporting cycle will form part of the agenda alongside the standing agenda items.

14. Frequency of Meetings

- 14.1. Meetings of the Group Board shall be held not more than six times a year.
- 14.2. Extraordinary meetings may be called for a specific purpose at the discretion of the Joint Chair. Where possible, a minimum of seven working days' notice will be given when calling any extraordinary meeting.

15. Papers Publication

- 15.1. All papers will be made available at least 3 days prior to the meeting. A progress report of outstanding/pending Group Board actions will be presented to each meeting of the Group Board.

16. Standards

- 16.1. The Group Board shall comply with the following standards:
 - 16.1.1. NHSE Code of Governance for NHS provider trusts
 - 16.1.2. NHSE Risk Assessment Framework
 - 16.1.3. NHSE Annual Planning Guidance
 - 16.1.4. The Healthy NHS Board – Principles of Good Governance
 - 16.1.5. Corporate Governance – Principles of Public Life (GP01)

17. Standard Agenda

- 17.1. Agendas will be built around the Group Board annual workplan, and most of the following will appear on each agenda,
 - 17.1.1. Declarations of interest,
 - 17.1.2. Minutes of previous meeting,
 - 17.1.3. Action list
 - 17.1.4. Other items as per agreed cycle of business

18. Committees

- 18.1. For the purpose of assisting the exercise of Joint Functions, the Group Board may appoint one or more additional committees.
- 18.2. The voting members of a committee of the Group Board may only be individuals who are voting members of the Group Board.
- 18.3. The Group Board may authorise a committee to exercise joint functions that the Group Board expressly sub-delegates to the committee in its ToRs.

19. Review

- 19.1 These Terms of Reference will be reviewed on an annual basis, in line with the review of the Partnership Agreement. The Terms of Reference may only be amended by variation in accordance with Clause 17 of the Partnership Agreement.

Governance Table

For Board and Board Committees:	Group Trust Board 29 May 2025
Paper sponsored by:	NHFT and LPT Directors of Governance
Paper authored by:	Richard Smith, Director of Corporate Governance NHFT Kate Dyer, Director of Governance and Risk LPT
Date submitted:	21 May 2025
Name and date of other committee / forum at which this report / issue was considered:	
Level of assurance gained if considered elsewhere	<input type="checkbox"/> Assured <input type="checkbox"/> Partially assured <input type="checkbox"/> Not assured
Date of next report:	To be confirmed
THRIVE strategic alignment:	<input checked="" type="checkbox"/> Technology <input checked="" type="checkbox"/> Healthy communities <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Including everyone <input checked="" type="checkbox"/> Valuing our people <input checked="" type="checkbox"/> Efficient and effective
Board Assurance Framework considerations:	All
Is the decision required consistent with the Group's risk appetite:	The Group risk appetite has yet to be determined. The decision is consistent with individual LPT and NHFT risk appetites

False or Misleading Information (FOMI) considerations:	None
Positive confirmation that the content does not risk the safety of patients or the public:	Confirmed
Equality considerations:	None

PAPER B

Group Trust Board 29 May 2025

Review of 2024-25 outturn overseen by the Joint Working Group

Purpose of the Report

To provide a summary of the achievements and work overseen by the Joint Working Group (JWG) during the financial year 2024-25. This report also includes a short summary of the joint working that led to the establishment of the JWG and the decision to cease the JWG and form the Group Board.

Analysis of the Issue

In 2019 at the same time as the appointment of a joint CEO LPT and NHFT commenced a buddying arrangement to provide support to each other. In 2020 joint board discussions considered the benefits of developing this relationship further. Both boards identified their aspirations and goals and these included:

- Have a common culture focussed on patient and population health and care
- Together against racism in everything we do
- Challenge ourselves further to be socially responsible organisations
- Group work is about what we do over and above our own work

In 2021 we formed the Leicestershire Partnership and Northamptonshire Healthcare Group. To oversee the joint group work we established the Joint Working Group (JWG). In 2023 both boards agreed to work with the University of Leicester to seek to become a university group, changing our name and adding associate university to our group name.

Our JWG has been chaired by the deputy chair of LPT and NHFT on a rotating basis. The group has agreed annual priorities, assured the respective trust boards on delivery of those priorities, reviewed the Memorandum of Understanding between LPT and NHFT and made recommendations to both boards on how to progress the partnership working.

During 2024-25 the JWG oversaw the delivery of the following group priorities:

- Governance and Risk including the group strategy
- Group Value
- Provider Collaboratives
- Quality Improvement
- Research and Innovation including Associate University progress
- Social Value
- Talent Management & Organisational Development
- Together against Racism

Proposal

A brief summary of some of the achievements during the year is include below

Priority	Summary
Governance and Risk including the group strategy	<p>Delivered a joint group strategy THRIVE</p> <p>Delivered a joint improvement plan for the Trust's Well-led Reviews</p> <p>Developed common ways of working and improvements to our governance and oversight</p>
Group Value	<p>New shared roles and functions have included Health and Safety, Emergency Preparedness Resilience and Response, digital and procurement</p> <p>We have formed the Group Digital Transformation Programme Board, to share learning, deliver greater digital effectiveness and efficiencies. This will deliver in 2025/26</p>
Provider Collaboratives	<p>Supported new partnerships to develop in LLR and Northamptonshire</p> <p>Formalised the transition of the Mental Health Partnership in LLR into a formal collaborative</p> <p>Reviewed our own partnership and made recommendations for the development of a group board meeting</p> <p>Increased the maturity and roles of our existing collaboratives across the East Midlands and within our places</p>
Quality Improvement	<p>Further established our QSIR training and approach</p> <p>Worked together to further reduce pressure ulcers</p> <p>Jointly developed processes for enhancing therapeutic observations in mental health in-patient areas</p> <p>Worked together to support staff further recognise the signs of a deteriorating patient and their response</p>
Research and Innovation including Associate University progress	<p>Progressed our journey to University status through the establishment of 3 work streams, improving our training and learning, our research and creating a centre of excellence for innovation</p> <p>Expanded our research portfolios</p>
Social Value	<p>Worked with the University of Manchester to benchmark our impact</p> <p>Completed our first social value impact report</p> <p>Agreed a social value procurement policy</p>
Talent Management & Organisational Development (OD)	<p>Bring together an agreed joint approach to identify talent</p> <p>Share our single approach to OD across both trusts</p>
Together against Racism	<p>Delivered 18 Inclusive Recruitment Training days to over 180 members of the Senior Leadership Team.</p>

	Addressing Racist Abuse from Patients, through information campaigns, policy and process changes and staff discussions Career Development course exclusively for colleagues from ECM backgrounds delivered
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Decision Required

The group board note the achievements in LPT and NHFT across 2024-25 overseen by the JWG

Governance Table

For Board and Board Committees:	Group Board
Paper sponsored by:	David Williams (Group Director of Strategy and Partnerships)
Paper authored by:	David Williams
Date submitted:	24 May 2025
Name and date of other committee / forum at which this report / issue was considered:	This is a summary from the JWG
Level of assurance gained if considered elsewhere	<input checked="" type="checkbox"/> Assured <input type="checkbox"/> Partially assured <input type="checkbox"/> Not assured
Date of next report:	N/A
THRIVE strategic alignment:	<input checked="" type="checkbox"/> Technology <input checked="" type="checkbox"/> Healthy communities <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Including everyone <input checked="" type="checkbox"/> Valuing our people <input checked="" type="checkbox"/> Efficient and effective
Board Assurance Framework considerations:	The JWG has overseen key areas of work that do have an impact on all our BAF areas
Is the decision required consistent with the Group's risk appetite:	Yes
False or Misleading Information (FOMI) considerations:	Nothing identified

Positive confirmation that the content does not risk the safety of patients or the public:	Confirmed
Equality considerations:	Our joint work is seeking to improve equity

PAPER C

Group Trust Board 29 May 2025

Proposal for areas prioritised for group delivery and oversight in 2025-26

Purpose of the Report




This report summarises key areas within our thrive strategy that have greater benefits to both organisations through their group delivery. Once agreed these will be reported through to group board for assurance of delivery.




Analysis of the Issue

Together we thrive, starts our shared vision *building compassionate care and well being, for all*. Our mission statement is *making a difference, together*. Our effectiveness and efficiency are improved by doing things once and the outcomes for patients, service users and our communities can be improved by doing some things together. The areas of work that benefit from this approach are identified in this document.

Proposal

The group board should oversee key areas of delivery that have been identified as being of importance and benefit to both trusts, together. For 2025-26 the following areas are recommended for group board oversight and assurance.

THRIVE Priority	Recommended Group Board Focus
 Technology	<ul style="list-style-type: none">Digital Transformation ProgrammeDigital plan and delivery of outcomes
 Healthy Communities	<ul style="list-style-type: none">Social value and social justiceCollaborative working including partnerships within our communities (places)
 Responsive	<ul style="list-style-type: none">Research and our progress to university statusShared Quality Improvements across our group

 Including Everyone	<ul style="list-style-type: none"> • Our together against racism programme • Reducing health inequalities and improving equity
 Valuing our People	<ul style="list-style-type: none"> • Talent Management • Organisational Development including common culture
 Efficient and Effective	<ul style="list-style-type: none"> • Further corporate opportunities for efficiency and improved effectiveness, • Exploring HR, legal, procurement and payroll

Decision Required

The group board discuss and confirm the proposed areas prioritised for group delivery and oversight in 2025-26

Governance Table

For Board and Board Committees:	Group Board
Paper sponsored by:	David Williams (Group Director of Strategy and Partnerships)
Paper authored by:	David Williams
Date submitted:	24 May 2025
Name and date of other committee / forum at which this report / issue was considered:	N/A
Level of assurance gained if considered elsewhere	<input type="checkbox"/> Assured <input type="checkbox"/> Partially assured <input type="checkbox"/> Not assured
Date of next report:	N/A
THRIVE strategic alignment:	<input checked="" type="checkbox"/> Technology <input checked="" type="checkbox"/> Healthy communities <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Including everyone <input checked="" type="checkbox"/> Valuing our people <input checked="" type="checkbox"/> Efficient and effective
Board Assurance Framework considerations:	These prioritised areas will have an mitigating impact on our BAF

Is the decision required consistent with the Group's risk appetite:	Yes
False or Misleading Information (FOMI) considerations:	Nothing identified
Positive confirmation that the content does not risk the safety of patients or the public:	Confirmed
Equality considerations:	Our prioritised areas are supporting our aspiration to increase equity

PAPER D

Group Trust Board 29 May 2025

Group Trust Board Development Programme

Purpose of the Report

To provide an outline of the Group Trust Board development programme.

Analysis of the Issue

The Group Trust Board development programme is designed to support the Group Board in excelling at governing effectively, by providing a programme of development and learning throughout the year which applies across the Group. This list is not exhaustive but is a compilation of topics prioritised for development which is subject to continuous review to ensure that it remains fit for purpose. The programme links to priorities identified in the Group strategy 'THRIVE' for 2025/26.

The development programme for the Group Trust Board will be complementary to the respective development programmes of LPT and NHFT. Areas in common for both Trusts will be delivered via the group development programme to maximise opportunities for shared learning and to deliver best value.

The list is subject to ongoing review and prioritisation during the year and will be primarily based on topics identified for priority for oversight by the Group Trust Board, and the following key areas of consideration for an NHS Board, this list is illustrative;

- NHSE Insightful Provider Board and other forms of best practice guidance
- National, regional and system guidance and frameworks
- Regulatory standards and training including CQC and well led
- Learning and development (including from internal and third-party reports)
- Collaboratives and partnerships
- NHS Leadership Competency Framework
- Group arrangements and opportunities
- Strategy Development
- Governance and risk

Proposal

Outline Group Development Programme – topics for consideration by the Group Trust Board

- THRIVE strategic objectives for Group
- Priorities for Group delivery
- Group Board Assurance Framework and risk appetite
- Group Trust Board arrangements

- Collaboratives and Partnerships
- CQC State of Care
- Mental Health Act Training
- Effective Challenge
- NHSE Insightful Board Learning
- Group Trust Board Reflection
- Quality Improvement
- PSIRF
- Patient and Carer Race Equality Framework
- Annual Review of Group Arrangements
- Strategic refresh 2026/27
- Value programme

Board members will be invited to contribute items to the Group Trust Board Development Programme using the existing processes in place for the two Trust Board Development Programmes.

Decision Required

To approve the outline development programme

Governance Table

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Paper authored by:	Richard Smith, Director of Corporate Governance NHFT Kate Dyer, Director of Governance and Risk LPT
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Board Assurance Framework considerations:	All
Is the decision required consistent with the Group's risk appetite:	The Group risk appetite has yet to be determined. The decision is consistent with individual LPT and NHFT risk appetites
False or Misleading Information (FOMI) considerations:	None
Positive confirmation that the content does not risk the safety of patients or the public:	Confirmed
Equality considerations:	None