

EXECUTIVE SUMMARY

Structure of the Programme

The Better Care Together (BCT) Programme Board is responsible for the production of the 5 year strategic plan for the Leicester, Leicestershire and Rutland (LLR) health and social care system (2014/15 – 2019/20).

The Programme Board includes local social care and health commissioners and providers, and public and patient representatives e.g. three LLR local authorities (Leicester City, Leicestershire County, Rutland County), three LLR Clinical Commissioning Groups (Leicester City, East Leicestershire and Rutland, West Leicestershire), NHS England Lincolnshire and Leicestershire Area Team (commissioner for primary care and specialist health care), the three local Healthwatch organisations (Leicester, Leicestershire, Rutland), University Hospitals of Leicester NHS Trust and Leicestershire Partnership NHS Trust.

It is supported by a structure of clinical, patient and public, and political reference groups, who all have had pivotal roles in the development of the draft plan, and by enabling groups e.g. Estates, Workforce, IM&T and Communication and Engagement.

The BCT Programme is taking a phased approach to the production of the 5 year strategic plan as follows:

- Development phase (to June 2014);
- Discussion and review phase (June to September 2014);
- Implementation phase, including formal consultation where required (October 2014 onwards)

Approach to Engagement and Involvement

Chief Executive colleagues, strategy and finance leaders, clinicians and many other colleagues, from Leicester City CCG, East Leicestershire and Rutland CCG, West Leicestershire CCG, Leicester City Council, Leicestershire County Council, Rutland County Council, Leicestershire Partnership NHS Trust, University Hospitals of Leicester NHS Trust and NHS England Lincolnshire and Leicestershire Area Team have been actively engaged in the development of the draft plan.

This involvement has been at an organisational level, through formally established groups, through workshops and summits, and through a wide range of informal and individual discussions.

The Clinical Reference Group and Patient and Public Involvement Reference Group have also been actively involved in the development of the plan, including developing the health and care case for change, and reviewing criteria for service change prioritisation.

All three Health and Wellbeing Board chairs have been actively engaged as a political reference group, and as members of the LLR BCT Programme Board.

The Estates, Workforce, IM&T and Communications and Engagement Enabling Groups have all been involved in developing the enabling requirements for delivering the plan.

The Programme has benefited from the facilitation and support of Ernst & Young (EY) in the development of the plan.

EY's support has been funded by NHS England (NHSE) and the Trust Development Authority, both of whom are represented on the Programme Board.

As detailed above, a significant amount of engagement work has already taken place in developing the draft plan. This will continue during the discussion and review period. Once the final plan is approved, formal consultation may be required as implementation progresses, but this is not expected until later in 2015.

Timescales including Approach to Consultation

NHSE requires LLR, as a 'unit of planning' to submit:

- An outline of the 5 year strategic plan by 4th April 2014. (completed)
- A draft 5 year strategic plan by the end of June 2014. (completed)
- An approved final plan by the end of September 2014 (pending)

The plan must be fully integrated and triangulate with the individual organizational level plans of local CCGs, local NHS providers, Local Authorities and the Area Team, as well as with existing partnership strategies such as local joint health and wellbeing strategies and better care fund plans.

The attached strategic plan is in the development phase, and is therefore to be regarded as draft and directional.

It is proposed to undertake local discussion and review of the plan between June and September, with a wide range of organisations and stakeholder groups, prior to formal presentation to Health and Well Being Boards (and the respective Boards of the partnership's constituent local organisations) during September 2014.

NHSE will undertake an assurance review of the draft plan, which will inform the final submission.

Any major service change will need to meet the four government tests for health service reconfigurations. i.e. strong public and patient engagement; consistency with patient choice; clear clinical evidence base; and, clinical commissioning support. See: <http://www.england.nhs.uk/wp-content/uploads/2013/12/plan-del-serv-chge1.pdf>

Formal consultation may be required on elements of the final plan, following local discussion. Any consultation will not take place before May 2015.

NHSE will also review the plan's requirements for consultation, to agree any areas where formal consultation is proposed.

Further information can be found at www.bettercareleicester.nhs.uk