

Trust Board 30 July 2024 LLR UEC Partnership

Purpose of the report

This paper provides an update on the Urgent and Emergency Care Partnership actions recommended by the recent review from Teneo. This paper also provides a specific update on the progress towards the proposed new governance structure for UEC.

Analysis of the issue

To support the Leicester, Leicestershire and Rutland Integrated Care System's work on Urgent and Emergency Care (UEC) an external review of how the UEC programme governance and partnership working was undertaken in Quarter 1 2024/25. This review gathered information from all partners and through a series of workshops. A number of recommendations were made and this paper reports on progress.

Progress to date and key highlights from the past month

The key highlights from the past month are:

- Director of UEC: An Interim Director Urgent and Emergency Care Julie Frake-Harris has commenced in post and is currently undertaking a period of introduction and information gathering.
- **Clinical Director**: The advert for the Urgent and Emergency Care Clinical Directors post has gone out to advert with interviews planned over the next month.
- **Resources**: Information has been gathered from UHL LPT and the ICB on the resources currently working on Urgent and Emergency Care transformation.
- Governance: A proposal for the new governance structure is being finalised based upon the recommendations of the external review – which will include a recommendation for a UEC Joint Committee for LPT, UHL and LLR ICB. This will come through Board formally within the next quarter.

Key deliverables for the next month

The following deliverables are planned for the for next month:

- Clinical Director: Complete the recruitment of the Urgent and Emergency Care Clinical Director
- Resources: Continue the discussion in relation to alignment of resources including discussion of areas such as Business Intelligence support.
- **Financial Arrangements**: Discussion to take place with Chief Finance Officers in relation to the recommendations relating to an understanding the full UEC spend within health, alignment and or pooling of budgets.
- **Governance:** Continue to finalise governance arrangements- see paragraph 7 for more detail.
- Work Plan: The System Director has proposed an Urgent and Emergency Care Workshop in September 2024 that considers plans in place and any additional actions required in the immediate to medium term.
- Data Sharing: Work to commence on improving data sharing arrangements.



• **Long Term Plans**: Within the workshop above initial discussions will be held to determine areas of focus for the longer-term plan.

Governance Progress

- 1. Our vision is to provide, timely, high-quality urgent and emergency care, in the right place for our patients and communities. It is essential that our governance structure supports this vision.
- 2. As part of the recommendations from the review it is proposed to establish a Joint Committee between LLR ICB, LPT and UHL to oversee UEC work across LLR. A Joint Committee provides a statutory basis for a group of NHS organisations to take collective responsibility for one or more of their statutory functions, enabling such things as joint decision making, risk sharing and pooled budgets. The Joint Committee exercises the functions on the individual organisation's behalf and as such constituent organisations of a Joint Committee agree to abide by the decisions made jointly.
- 3. Work has commenced on developing the proposals for the Joint Committee this includes:
 - Draft Terms of Reference this needs further refinement as the detail of the Joint Committee is developed.
 - Discussions with governance leads to identify what needs to be considered (both for the Joint Committee and the individual organisations) and developed.
 - Consideration of the governance that supports the Joint Committee i.e. the groups that feed into the Joint Committee.
- 4. Over the next two months further work will be undertaken to develop the proposals further this will include:
 - Discussion about the remit of the Joint Committee in order to determine the level of delegation required from individual organisations the discussions with the Chief Financial Officers and governance leads will support this.
 - Seek advice about the level of delegation that is possible at this moment in time and any issues for individual organisations to consider from legal advisors.
 - Engage with NHS England to ensure any proposals for are supported.
 - The remit from the above three actions will then enable the Terms of Reference to be finalised and the membership of the committee agreed.
 - The development of a Collaboration Agreement or similar document to support the work of the Joint Committee.
- 5. The aim is to have the proposals developed sufficiently that they are considered by individuals organisations in September 2024 and then for formal approval at the ICB Board in October 2024. However, if this is not possible than consideration will be given to whether shadow arrangements can be put in place while formal proposals are finalised.
- 6. Proposals on governance will include wider UEC Partnership governance which will report into the Joint Committee and we hope to enact these changes in the next two months.

Recommendations

The LPT Board is asked to:

RECEIVE and NOTE an update on the Urgent and Emergency Care Partnership



Governance Table

For Board and Board Committees:	Trust Board 30 July 2024	
Paper sponsored by:	Jean Knight, DCEO and MD	
Paper authored by:	Jean Knight, DCEO and MD	
Date submitted:		
State which Board Committee or other	N/A but regular updates via SEB	
forum within the Trust's governance		
structure, if any, have previously		
considered the report/this issue and		
the date of the relevant meeting(s):		
If considered elsewhere, state the	n/a	
level of assurance gained by the		
Board Committee or other forum i.e. assured/partially assured / not		
assured:		
State whether this is a 'one off' report	Regular updates as required	
or, if not, when an update report will	regular apaates as required	
be provided for the purposes of		
corporate Agenda planning		
STEP up to GREAT strategic	Great Outcomes	All
alignment*:		
	Great Care	
	Great Care Great Place to Work	
Board Assurance Framework	Great Place to Work	
	Great Place to Work Part of the Community	
Board Assurance Framework considerations: Is the decision required consistent	Great Place to Work Part of the Community	
Board Assurance Framework considerations: Is the decision required consistent with LPT's risk appetite:	Great Place to Work Part of the Community List risk number and title of risk Yes	
Board Assurance Framework considerations: Is the decision required consistent with LPT's risk appetite: False and misleading information	Great Place to Work Part of the Community List risk number and title of risk	
Board Assurance Framework considerations: Is the decision required consistent with LPT's risk appetite: False and misleading information (FOMI) considerations:	Great Place to Work Part of the Community List risk number and title of risk Yes None	
Board Assurance Framework considerations: Is the decision required consistent with LPT's risk appetite: False and misleading information (FOMI) considerations: Positive confirmation that the content	Great Place to Work Part of the Community List risk number and title of risk Yes	
Board Assurance Framework considerations: 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	Great Place to Work Part of the Community List risk number and title of risk Yes None	
Board Assurance Framework considerations: Is the decision required consistent with LPT's risk appetite: False and misleading information (FOMI) considerations: Positive confirmation that the content	Great Place to Work Part of the Community List risk number and title of risk Yes None	