LEICESTER, LEICESTERSHIRE AND RUTLAND (LLR) SUSTAINABILITY AND TRANSFORMATON PLAN (STP) - GOVERNANCE

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Trust Board paper K

Executive Summary

- 1. The Leicester, Leicestershire and Rutland Chief Officers have developed proposals to establish a 'System Leadership Team' which will have two main purposes:
 - to act as a programme board to exercise oversight of the implementation of the LLR STP;
 - to serve as a joint committee of the three LLR CCGs, to enable certain decisions to be taken jointly.
- 2. Further details are set out in the attached paper which:
 - was endorsed by LLR Chief Officers at its meeting on 15th December 2017,
 - is now being submitted to all LLR health Boards for formal consideration and approval.
- 3. The proposals set out in the attached paper have been developed with the benefit of external legal advice.
- 4. In terms of UHL membership of the SLT, this will be the Chief Executive and Medical Director and they have nominated (respectively) the Director of Marketing and Communications and Deputy Medical Director (Mr M Metcalfe) to deputise for them in their absence.

Recommendations:

The Trust Board is recommended to:

- approve the LLR STP governance proposals set out in the attached paper, including the establishment of the SLT,
- Agree that the Chief Executive and Medical Director will represent UHL in the LLR SLT and, in their absence, that the Director of Marketing and Communications and Deputy Medical Director (Mr M Metcalfe) will deputise for them;
- Note that the SLT will also act as a formal joint committee of the three LLR CCGs when the need arises and, on such occasions, the Trust's representatives will not have decision-making authority.

Stephen Ward Director of Corporate and Legal Affairs

29th December 2016

For Reference

Edit as appropriate:

1. The following **objectives** were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes]
Effective, integrated emergency care	[Yes]
Consistently meeting national access standards	[Yes]
Integrated care in partnership with others	[Yes]
Enhanced delivery in research, innovation & ed'	[Yes]
A caring, professional, engaged workforce	[Yes]
Clinically sustainable services with excellent facilities	[Yes]
Financially sustainable NHS organisation	[Yes]
Enabled by excellent IM&T	[Yes]

2. This matter relates to the following governance initiatives:

a. Organisational Risk Register

[Yes /No /Not applicable]

If YES please give details of risk ID, risk title and current / target risk ratings.

Datix Risk ID	Operational Risk Title(s) – add new line for each operational risk	Current Rating	Target Rating	CMG	
XXXX	There is a risk			XX	1

If NO, why not? Eg. Current Risk Rating is LOW

b.Board Assurance Framework

[Yes /No /Not applicable]

If YES please give details of risk No., risk title and current / target risk ratings.

Principal	Principal Risk Title	Current	Target
Risk		Rating	Rating
No.	There is a risk		

3. Related Patient and Public Involvement actions taken, or to be taken: [N/A]

4. Results of any Equality Impact Assessment, relating to this matter: [N/A]

5. Scheduled date for the **next paper** on this topic: []

6. Executive Summaries should not exceed **1 page**. [My paper does comply]

7. Papers should not exceed **7 pages.** [My paper does comply]

DRAFT TERMS OF REFERENCE

THE SYSTEM LEADERSHIP TEAM

November 2016

Purpose

- The System Leadership Team ("SLT") has been established to oversee all aspects of the development and delivery of the Sustainability and Transformation Plan ("STP") for the Leicester, Leicestershire and Rutland ("LLR") footprint. The SLT serves two core purposes:
 - to provide system wide governance and oversight in respect of the STP; and
 - function as a joint committee of the three LLR Clinical Commissioning Groups, to enable joint decisions to be made by NHS Commissioners.
- 2. In relation to the STP, it will have three aims:
 - to set the direction and oversee delivery of the STP for LLR;
 - to provide collective problem solving and decision taking for system wide issues; and
 - to provide oversight to and monitoring of performance against the system control total.
- 3. The SLT will also be a formally constituted joint committee of the Clinical Commissioning Groups within LLR and will exercise decision making authority on behalf of commissioners. The CCG members of the SLT will be 'decision making members'. Decision made by the SLT shall be binding on the CCGs.
- 4. It will also bring together the clinical and executive leadership of the health and local authority organisations within LLR, to provide collective governance and oversight to delivery of the STP.
- 5. The NHS statutory providers and three local authorities within LLR will be represented on the SLT as 'non-decision making members'. Decisions made by the SLT will not be binding on these organisations. Where an issue considered by the SLT requires a formal decision or approval by a non-decision making member organisation, the SLT will agree recommendations for consideration and approval by the relevant board or executive.

Context

6. Partners recognise the importance of the LLR STP as the only vehicle, at least in the short term, to take forward key issues for the LLR health and social care community on which accelerated progress has to be made. The requirement to follow the process set out by NHS England may present challenges to the decision-making processes of LLR partners, which will need to be overcome in a pragmatic way particularly when national and local timescales do not correspond.

Role & Duties

- 7. The duties of the SLT will include the following:
 - Assurance of system level national submissions and returns associated with the STP
 - Ensuring alignment of other key plans that underpin STP delivery e.g. individual organisations' operational plans, the local digital roadmap, and Better Care Fund Plans
 - Consideration of significant service and pathway changes
 - Monitoring delivery of the STP and challenging partner organisations in their accountability for performance
 - Identifying and resolving barriers to implementation
 - Ensuring adequate plans are in place to recover and maintain delivery against key access and performance standards
 - Consideration of materials for local consultation exercises where there are implications for the wider system, prior to approval by individual governing bodies
 - Consider feedback from consultations and sign off recommendations for consideration by governing bodies
 - Collective consideration of total place based budget approach, to inform members' own budget setting
 - Exercise oversight of financial performance against the system control total
 - To consider and make recommendations regarding the investment of transformation funding by individual organisations (for approval by those organisations' governing bodies or boards)
 - To consider business cases for capital expenditure prior to approval by individual governing bodies and executives.
 - Oversight of any LLR leadership/OD programme/resources for improving system leadership
 - Providing assurance via two way dialogue with each HWB Board in LLR on STP implementation and outcomes
- 8. There are specific areas where the SLT shall take decisions on behalf of its decision making member organisations (the CCGs) following consultation with governing bodies:
 - Approval of system level plans developed by member organisations which are supportive of the objectives of the STP
 - Approval of consultation materials and process for system wide proposals following review by governing bodies
 - NHS Commissioner approval of system level service and pathway changes.
- 9. The SLT will not take decisions in the following areas, which remain reserved to individual governing bodies, boards or executives:
 - Budgets and operational plans for individual organisations
 - Local consultation

- Contract award or preferred bidder
- Approval of individual organisations commissioning intentions
- Approval of capital expenditure business cases (the SLT may review business cases and make recommendations, but it will remain the responsibilities of individual organisations to approve the business case)
- Approval of section 75 arrangements

Membership

Decision making members

- Managing Director of each of the LLR Clinical Commissioning Groups
- Clinical Chair of each of the LLR Clinical Commissioning Groups

Non-decision making members

- Chief Executive Officer of each NHS Trust (including East Midlands Ambulance Service) within LLR
- Medical Director of each NHS Trust (including East Midlands Ambulance Service) within LLR
- Chief Operating Officer of Leicester City Council
- Chief Executive of Leicestershire County Council
- Chief Executive of Rutland County Council

Attendees

- 10. NHS England and NHS Improvement will receive copies of all papers circulated to the SLT. Both NHS England and NHS Improvement shall attend meetings where appropriate to inform the SLT's consideration of specific matters relating to their role.
- 11. The meeting will also be attended by other senior officers responsible for specific aspects of STP delivery and the Programme Management Office to support it in its work. Where the SLT is to consider the system total or financial performance, a finance officer shall be invited to attend.

Quoracy

12. For decision making purposed, a quorum shall be one representative from each decision making member organisation. SLT Members shall be entitled to send a nominated deputy. Deputies shall be nominated in advance. A list of current membership and deputies is appended as Annex A to this document.

Role of members

13. Members of the SLT represent their organisations, and the views of their governing bodies and/or boards. It is expected that, where necessary, members shall ensure that recommendations to be presented to the SLT for decision are considered by the appropriate body within their own organisation, to establish the shared view of the organisation which they represent when attending SLT.

14. Members shall also provide visibility within their own organisations of the considerations of the SLT, and ensure that issues and proposed solutions are discussed by the appropriate bodies within member organisations.

Chair (role)

15. The SLT shall be chaired by the STP leader for LLR. The role of the Chair is to convene the SLT, work with organisations to achieve consensus and to identify areas where escalation may be required to either governing bodies or external regulatory or assurance organisations as appropriate.

Decision making

- 16. When making decisions the decision making members of the SLT will work constructively and pragmatically to reach a consensus position where all agree (i.e. voting arrangements will not apply to the decision making of the SLT).
- 17. Where members don't feel they are in a position to support the consensus position reached by the SLT they reserve the right to refer the issue back to the governing body of their organisation for further consideration before the issue comes back to the SLT to take a decision.
- 18. Decision making member organisations shall ensure that their own constitutions and schemes of reservation and delegation provide members of SLT with sufficient authority to take decisions on matters presented to the SLT on behalf of their organisations.
- 19. Where a decision has been made by the SLT, it shall be reported to the governing body of each of the CCGs.
- 20. Where an issue presented to the SLT for consideration requires a decision by or the agreement of a non-decision making organisation, the SLT will agree a recommendation for consideration and approval of the relevant board(s) or executive.

Meetings

- 21. The SLT shall meet on the third Thursday of every month. Where an additional meeting is required outside of the established meeting pattern it shall be for the Chair to convene the meeting, providing five clear working days' notice.
- 22. Papers will be circulated one week in advance, to enable organisations to consider the implications for their own operations in advance of the SLT meeting. Where this is not possible, any later circulation must be agreed with the Chair in advance.
- 23. The meetings of the SLT will be supported by a screening panel. The panel will review agendas and papers in advance of each meeting of the SLT to identify those items where a decision may be required and confirm whether the decision sought is within the powers delegated to the SLT by the 'decision making members'.

- 24. The meetings will make the distinction between items for discussion and those where decision, to allow conflicted members and attendees to withdraw if necessary.
- 25. Where the SLT is invited to take a decision as a joint committee of the three CCGs it shall seek to do so in public session, unless there are factors which require the decision to be made in confidential session. Where decisions are made in confidential session the reasons for this will be clearly documented.

Conflicts of Interest

26. To ensure that conflicts of interest are appropriately managed, where a decision is to be made by the CCG members or where a conflict of interest is declared or identified, non-decision making members of the SLT may be asked to withdraw from the meeting.

Accountability

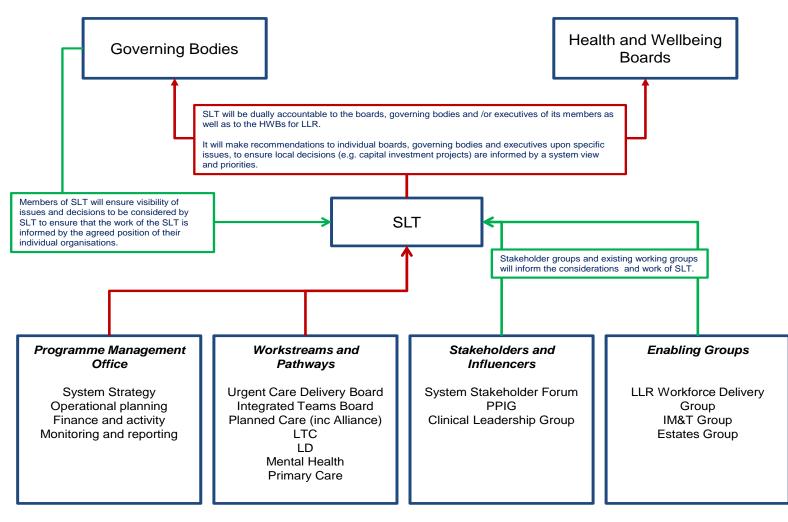
- 27. The SLT does not usurp or replace any existing statutory accountabilities of member organisations. Individual member organisations retain their statutory accountabilities to their respective regulatory and oversight bodies.
- 28. The SLT will be accountable to both the boards and executive bodies of its members and the Health and Wellbeing Boards for LLR. It will provide a monthly report of progress against agreed plans and any issues. It will be supported in its role by a Programme Management Office (PMO). The PMO will meet weekly to monitor progress, manage risks and identify and escalate any issues affecting delivery of the STP priorities.
- 29. The SLT will be supported in its role by a Programme Office and workstreams established to support the delivery of the STP shall report to the SLT.
- 30. These reporting and accountability relationships are shown at Annex B.

to be reviewed November 2017

Annex A – Members and Named Deputies

[to be completed]









Roles and Duties of SLT and Individual Governing Bodies and Boards

Duties (from ToR)	Role of SLT	Individual Governing Bodies
;Assurance of system level national submissions and returns associated with the STP.	To review and agree any submission being made on behalf of the system as a whole regarding the STP.	To inform SLT's consideration by discussing key issues to inform the return in advance.
Ensuring alignment of other key plans that underpin STP delivery e.g. individual organisations' operational plans, the local digital roadmap, and Better Care Fund Plans	To discuss and reach a system level view on priorities and requirements, and make recommendations where required to individuals boards, governing bodies or executives to inform member organisations' own planning and implementation.	To inform the SLT's consideration – e.g. by discussion at governing body prior to the SLT meeting, to ensure organisation representatives on SLT can speak to specific concerns or issues for the CCG. Consider and adopt any recommendations from SLT regarding local plans, to ensure alignment
Consideration of significant service	Consider proposals from a system perspective	with system level plans and priorities. To inform SLT's consideration (therefore would
and pathway changes	and ensure alignment and integration with STP priorities and other workstreams.	be consulted in advance of SLT to ensure views were reflected).
		Consider any recommendation from SLT when approving changes locally.
Monitoring delivery of the STP and challenging partner organisations in their accountability for performance	Consider monthly progress report, and provide constructive challenge to individual member organisations	Escalate issues to SLT via their representatives. Consider and respond to any recommendations
	organioadorio	to address issues where necessary.

Roles and Duties of SLT and Individual Governing Bodies and Boards

Duties (from ToR)	Role of SLT	Individual Governing Bodies
Identifying and resolving barriers to implementation	To give collective consideration to how to address any barriers. To make recommendations to individual governing bodies where it feels specific action may be required.	To inform SLT consideration. Where necessary to discuss issues relevant to their own organisation at the appropriate forum (governing body, committee or senior management team).
Ensuring adequate plans are in place to recover and maintain delivery against key access and performance standards	Exercise oversight of system and individual organisation plans to assure itself that plans are adequate. Where members agree that further action may be required, to make recommendations for consideration by individual organisations.	Retain existing role and accountabilities for individual organisations performance. (applies to CCG and Providers)
Consideration of materials for local consultation exercises where there are implications for the wider system, prior to approval by individual governing bodies	To review materials prior to approval, and identify implications for system. To make recommendations to individual governing bodies.	To approve materials for public consultations related to services commissioned or provided by their organisation.
Consider feedback from consultations and sign off recommendations for consideration by governing bodies	To consider feedback from consultation exercises to identify and agree implications for system. Where required, make recommendations to inform consideration of feedback by individual governing bodies or boards.	To formally consider feedback from consultation exercises, and consider any recommendation made by SLT. To ensure organisation's planned actions in response to consultation are informed by system level considerations and support priorities of STP.

Roles and Duties of SLT and Individual Governing Bodies and Boards

Duties (from ToR)	Role of SLT	Individual Governing Bodies
Collective consideration of total place based budget approach, to inform members' own budget setting	Agree priorities for LLR Health system. Receive updates and reports on financial planning from individual organisations to identify implications for system.	Ensure that priorities agreed at system level are incorporated into organisations budgets and financial plans. Approve organisation's financial plan.
Exercise oversight of financial performance against the system control total	Provide oversight of financial performance across the system. Provide collective consideration to any issues affecting performance, and agree recommendations to individual organisations as required.	Exercise oversight of organisation's own financial performance. Consider system priorities and issues in planning and managing finances.
Approval of investment of transformation funding	To agree the priorities for the use of funds which are made available for use within the LLR wide system	To approve use of transformation funding by individual organisation.
To consider business cases for capital expenditure prior to approval by individual governing bodies and executives.	To ensure that business cases support agreed priorities and are aligned with the aims of the STP. Endorse and recommend business cases for consideration and approval by individual boards or governing bodies.	To consider views of SLT when receiving business cases for approval. To approve business cases for capital expenditure.
Oversight of any LLR leadership/OD programme/resources for improving system leadership	Agree priorities to be addressed by programmes. Consider whether planned approach meets these.	Ensure appropriate governance and support within own organisation for OD and leadership programmes.

Areas where SLT may take decisions

Duties (from ToR)	Role of SLT	Individual Governing Bodies
Providing assurance via two way dialogue with each HWB Board in LLR on STP implementation and outcomes	Provide regular report into HWB.	To receive and consider regular report from STP Programme Office.
Approval of system level plans developed by member organisations which are supportive of the objectives of the STP	To give system level agreement to plans.	To approve plans application to their organisation. To inform SLT consideration by discussing and agreeing key implications for their own organisation.
Approval of consultation materials and process for system wide proposals following review by governing bodies	To approve consultation materials for any consultation taking place on 'system wide' basis. To review local consultation materials, and comment from a system perspective.	To inform consideration of system wide consultation materials. To ensure local consultation materials reflect agreed system priorities and requirements. To approve local consultation materials.
NHS Commissioner approval of system service and pathway changes.	To approve service and pathway changes.	To consider and agree service and pathway changes in advance (either at governing body or by appropriately constituted committee/sub-group.)

Matters reserved to individual governing bodies

Duties (from ToR)	Role of SLT	Individual Governing Bodies
Budgets and operational plans for individual organisations	To consider and agree system priorities to inform local planning and budget setting.	To approve organisation's financial and operational plans.
Approval of local consultation materials	To consider and agree system issues and priorities for local consultation exercises.	To approve, considering any recommendation or comments from SLT regarding wider system implications and alignment.
Approval of individual organisations commissioning intentions	To ensure local plans are aligned with system and STP priorities.	To approve
Contract award or preferred bidder	None	To approve
Approval of capital expenditure business cases (The SLT may review business cases to provide a system perspective and ensure alignment with system priorities. It will make a recommendation to the governing body.	To approve capital expenditure business cases.
Approval of section 75 arrangements		To approve.