

Fit for the Future

Working together to keep people well

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By email
Sue Lock
Accountable Officer
Leicester City CCG

Tel: 01223 725404
Email: contact@fitforfuture.org.uk
Web: www.fitforfuture.org.uk

12 November 2018

Dear Sue

Thank you very much for the letter setting out the acute reconfiguration proposals in Leicester, Leicestershire and Rutland, which was sent by Toby Sanders on the 26 October. Apologies in the delay in getting back to you.

I have discussed with colleagues from Peterborough City Hospital (North West Anglia Foundation Trust) and can confirm the Cambridgeshire and Peterborough STP is supportive of the acute reconfiguration proposals.

Yours sincerely



Roland Sinker
Interim STP Accountable Officer

Cc: Caroline Walker, Chief Executive, North West Anglia Foundation Trust
Keith Reynolds, Assistant Director of Strategy and Planning, North West Anglia Foundation Trust



Headquarters
Ash Green Learning Disability Centre
Ashgate Road
Ashgate
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01246 565000
www.dchs.nhs.uk

8th November 2018

Dear Sue

LLR Acute Reconfiguration Proposals

I am writing in response to Toby's letter dated the 26th October.

We would generally support the acute reconfiguration proposals in Leicester, Leicestershire and Rutland. We are not aware of any service developments or proposals within our STP area that will impact on your proposals.

Yours sincerely

A handwritten signature in black ink that reads "Tim Broadley".

Tim Broadley
Associate Director of Strategy

STP Office
Toll Bar House
1 Derby Road
Ilkeston
Derbyshire
DE7 5FH
T: 0115 931 6244

13th November 2018

Dear Toby

re: LLR Acute Reconfiguration Proposals

Thank you for your letter dated 26th October 2018 regarding the above.

Firstly, please accept my apologies for the delay in responding. This was due to the fact that I did not return from annual leave until 12th November 2018.

Derbyshire STP have considered the LLR reconfiguration proposals in detail and as a result I can confirm on behalf of the system:

1. General support for the acute reconfiguration proposals in Leicester, Leicestershire and Rutland.
2. Derbyshire STP does not believe there are any current service developments or proposals within our STP footprint which may impact on your proposals. However we await publication of the NHS Long Term Plan and will need to consider the impact of any service development requirements as a result of this publication.

I hope the above is helpful in clarifying the Derbyshire STP position. Please do not hesitate to contact me should you require any further details.

Yours sincerely



Vikki Taylor
Derbyshire STP Director



Trust Headquarters

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Our Ref: RH/AP

Your Ref:

Private and Confidential

Toby Sanders

MD West Leicestershire CCG/STP

Lead

55 Woodgate

Loughborough

LE11 2TZ

5 November 2018

Dear Toby

Re: Approval of University Hospitals Leicester Acute Reconfiguration Pre-Consultation Business Case

I am writing to you to confirm our strong support for University Hospitals of Leicester (UHL) Acute Reconfiguration Pre-Consultation Business Case (PCBC) for the £367m capital investment required in Leicester, Leicestershire and Rutland (LLR) in order to transform health and social care services.

The Leicester, Leicestershire and Rutland Better Care Together (BCT) partnership has set out a programme of transformation that will ensure patients are treated in the most appropriate settings by redesigning care pathways so that only those patients who require treatment in an acute setting come into the hospitals. Transformation of a number of clinical pathways is largely dependent on reconfiguring services, especially those provided by UHL. The acute reconfiguration programme has therefore been prioritised by the STP/ BCT Partnership as being the top priority for capital investment in Leicester, Leicestershire and Rutland.

Yours sincerely

Richard Henderson
Chief Executive



Leicestershire Partnership
NHS Trust

From the Executive Office
Direct dial: 0116 295 0816

Our Ref: PM/sw/L615

29 October 2018

Toby Sanders
MD West Leicestershire CCG/STP
Lead
55 Woodgate
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LE11 2TZ

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Bridge Park Plaza
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Dear Toby

Approval of University Hospital Leicester Acute Reconfiguration Pre-Consultation Business Case

I am writing to you to confirm our strong support for University Hospitals of Leicester Acute Reconfiguration Pre-Consultation Business Case (PCBC) for the £367m capital investment required in Leicester, Leicestershire and Rutland (LLR) in order to transform health and social care services.

The Leicester, Leicestershire and Rutland Better Care Together partnership has set out a programme of transformation that will ensure patients are treated in the most appropriate settings by redesigning care pathways so that only those patients who require treatment in an acute setting come into the hospitals. Transformation of a number of clinical pathways is largely dependent on reconfiguring services, especially those provided by UHL. The acute reconfiguration programme has therefore been prioritised by the STP/ BCT Partnership as being the top priority for capital investment in Leicester Leicestershire and Rutland.

Yours sincerely

Dr Pete Miller
Chief Executive

Chair: Cathy Ellis Chief Executive: Dr Peter Miller

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Please visit www.leicspart.nhs.uk/smokefree for details



Toby Sanders
Managing Director
NHS West Leicestershire
Clinical Commissioning Group

NHS England, Midlands & East
2 – 4 Victoria House
Capital Park
Fulbourn
Cambridge
CB21 5XB

Sent via email

Tel: 0113 825 1141
Email: sarah.king43@nhs.net

20 September 2018

Dear Toby

RE: UHL Services Reconfiguration – Pre-Consultation Business Case

I am writing as Regional Director of Specialised Commissioning (Midlands & East) to express my support for the Reconfiguration of Acute and Maternity services at University Hospitals of Leicester (UHL) NHS Trust as described in the Pre Consultation Business Case (PCBC).

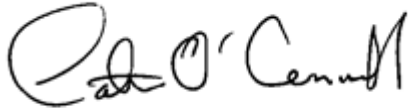
Strategically the reconfiguration from three to two sites is a top priority within the Leicester, Leicestershire and Rutland (LLR) Sustainability Transformation Partnership (STP): Better Care Together and is coherent with the direction of NHS England Midlands and East (Specialised Commissioning).

The reconfiguration should improve the quality of specialised services and the experience and outcomes our patients receive. As well as driving efficiencies and addressing the existing structural deficit UHL incurs from operating out of three sites.

NHSE Specialised Commissioning will seek to work with the Trust within the existing financial envelope. The long term reconfiguration solution, described in the PCBC, captures assumptions in relation to the impact of demand and demographic changes across all services. These assumptions will be subject to individual confirm and challenge and at this stage NHS England would not commit to any investment over and above existing levels.

I would also expect assurance in the development of the Full Business Case (FBC) that the Trust will maintain service and quality standards during the period of transition to consolidate from three sites to two.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Catherine O'Connell'. The signature is fluid and cursive, with the first name 'Catherine' written in a larger, more prominent script than the last name 'O'Connell'.

Catherine O'Connell
Regional Director Specialised Commissioning
Midlands & East

CC. J Adler, Chief Executive, Univ. Hospitals of Leicester NHS Trust
J Currington Hd. of Partnerships & Business Development Univ. Hospitals of
Leicester NHS Trust
S Bowler, Assistant Director of Specialised Commissioning (East Midlands)

20 November 2018

Sue Lock
Accountable Officer
Leicester City CCG
Sent via email to: sue.lock@leicestercityccg.nhs.uk

Dear Ms Lock

Acute Reconfiguration Proposals in Leicester, Leicestershire & Rutland

I write in response to Toby Sanders' letter regarding the above dated 26th October 2018.

I note that the national process requires that you seek support from neighbouring STP areas.

We understand that the PCBC has concluded that the proposals do not have a material impact on patient travel times.

The two documents sent to me have been circulated to KGH, NGH and the CCG. Comments received can be summarised as follows:

NGH

I can confirm that we have received the briefing, discussed the implications & have fed back to Leicester. We do support the proposal but it doesn't really affect us at NGH.

CCGs

I can confirm that NENE and Corby CCGs are entirely supportive of the proposed acute hospital reconfiguration and capital investment proposals at University Hospitals of Leicester. Whilst the proposals are relatively contained within the Leicester, Leicestershire and Rutland health system with no significant assumptions about changes in patient activity flows, there would be a positive impact for Northamptonshire patients particularly around the north of our Country and on some more specialist pathways who receive treatment in Leicester. The proposals would not only deliver a

significantly improved environment for patients and staff, the reconfiguration across the sites would improve patient flow and the separation of elective and non-elective activity which would also support delivery of improved access times for patients. Whilst the relocation of some clinical services from the Leicester General site would slightly increase travel times for some patients on the Leicestershire/Northants border the improvements in quality, safety and efficiency on balance outweigh these. The need for significant capital investment to modernise the acute environment in Leicester has long been recognised so these latest proposals are entirely welcome and from a local commissioner perspective get out full support.

KGH

We considered the LLR Acute Reconfiguration Proposals at EGM, however this was without the benefit of the business case. The proposed consolidation of acute services colocation makes sense as current configuration is not ideal and is clinically misaligned. As the proposal is largely focused on clinically coherent adjacencies and effective consolidation we do not see this as having a material impact on the services we provide on our footprint but would hope that this will translate into better coherent care for the patients we transfer who require tertiary care. So while it is not possible to consider every ramification of the change, we do not see this as negative, or impacting on the care delivered within our footprint.

Given these comments, I can confirm that:-

- Partners in the Northamptonshire STP generally support acute reconfiguration proposals in LLR
- There are no service developments or proposals in the local STP area which we think will impact on your proposals.

Yours sincerely



Angela Hillery
STP Lead for Northamptonshire

c.c.

Toby Sanders – AO Corby & Nene CCG

Sonia Swart CEO - NGH

Simon Weldon CEO - KGH

Tim O'Donovan- STP Assistant Programme Director

This matter is being dealt with by:
David Pearson
Reference:
T 0115 977 3919
E david.pearson@nottscc.gov.uk
W nottinghamshire.gov.uk

Private and Confidential
To be opened by addressee only

Sue Lock
West Leicestershire CCG

Via email

9 November 2018

Dear Sue

Acute Reconfiguration Proposals in Leicester, Leicestershire and Rutland

Thank you very much for your letter dated the 26th October 2018 regarding the above.

We discussed this matter at our Clinical Services Strategy meeting on the 5th November 2018. You ask for our view in relation to the following:

1. General support for the acute reconfiguration proposals in Leicester, Leicestershire and Rutland.

We have reviewed the implications for Nottingham and Nottinghamshire both in terms of any impact on our population and secondly, in relation to providers in Nottinghamshire. We agree with your assessment of the impact and therefore do not have any objections from this perspective. I think beyond this the service changes proposed and the capital required are matter for the statutory organisations in Leicester, Leicestershire and Rutland, the public consultation and national bodies. Whilst we entirely recognise the drivers for change I am not sure that we are in a position to formally "support" the proposals beyond confirming that we are not concerned about the impact on Nottingham residents and organisations.

2. Whether there are any service developments or proposals in your STP area which you think may impact on our proposals.

We are developing our Clinical Services Strategy and therefore our service developments and proposals are evolving. Having said this, we are not aware of any service development or proposal that materially affects this proposal.

I hope these observations are helpful.

Yours sincerely

David Pearson

David Pearson CBE
Corporate Director, Adult Social Care and Health
Deputy Chief Executive
Nottinghamshire County Council

STP Lead for Nottingham and Nottinghamshire

CC: Wendy Saviour, STP Managing Director
Tracy Taylor, Chief Executive, NUH NHS Trust