

NHS Transformation – Leicester, Leicestershire & Rutland and Northamptonshire Clustering 2025/26

Leicester City HOSC 09/09/2025

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Background

Changes to the NHS nationally announced earlier this year involve the integration of NHS England and the Department for Health and Social Care.

The aim is for a leaner, simpler NHS with clear roles, accountability and focus on prevention.

The plan sets out a vision to guarantee the NHS will be there for all who need it for generations to come – shaped by public, patients and partners and health and care workforce.

As part of these plans Integrated Care Boards (ICB) functions and geography are to change with the aims of:

- reducing management costs
- focussing more money on the front-line

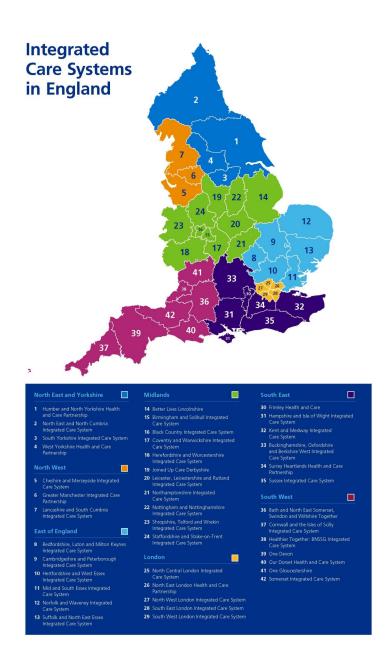
Digital solutions Prevention first Emphasises proactive Utilises technology t healthcare strategies to reduce reactive treatments. experience and NHS efficiency. NHS Community services Focuses on delivering care closer to patients' homes.

All ICBs are being asked to significantly reduce running costs, assume different responsibilities and focus more on their role as a 'strategic commissioner'

National context

NHS Clustering Across England

- As part of a national plan a number of ICBs will working together as clusters. There will be 26 of these across the country.
- NHS England and government ministers have approved our new cluster which covers Leicester, Leicestershire and Rutland (LLR) and Northamptonshire
- National confirmation of clusters



What clustering means

LLR and Northamptonshire ICBs remain separate statutory bodies

Working in partnership

However over time they we will work as one cluster with

- Single Board Governance
- Unified Leadership Team
- Shared staffing structure





Building a transformational cluster between NICB and LLR ICBs provides us the opportunity to drive forward the Ten-year-Plan within our communities and neighbourhoods, continue to improve health outcomes, while at the same time rise to the very real financial challenges we face.

We are still at the early stages of building this cluster and there are still many details yet to be finalised including how individual functions - such as CHC, Safeguarding and SEND to name but a few - will operate within it.

Leadership and Transition



Toby Sanders –
Interim Chief
Executive for LLR
ICB and permanent
Chief Executive for
Northamptonshire
ICB



Paula Clark– Interim Chair across both ICBs from 1 July

Permanent leadership roles are pending national approval

These roles are central to shaping our future operating model, providing continuity and stability during this period of change. We are now developing our structure and implementation plan, aligned with the national Model ICB Blueprint that was published in May.

Model ICB Blueprint

- The Blueprint outlines the core roles and functions that ICBs will be responsible for with a significantly reduced running costs budget – a 33% reduction for NHS LLR and 29% for NHS Northamptonshire.
- National work is also underway to clarify how the new NHS operating model will function, and more details are expected to follow.

Model ICB - System leadership for improved population health

4. Evaluating impact

Day-to-day oversight of healthcare usage, user feedback and evaluation to ensure optimal, value-based resource use and improved outcomes

 Delivering the strategy through payer functions and resource allocation

Oversight and assurance of what is purchased and whether it delivers outcomes required 1. Understanding local context

Assessing population needs now and in the future, identifying underserved communities and assessing quality, performance and productivity of existing provision

2. Developing long-term population health strategy

Long-term population health planning and strategy and care pathway redesign to maximise value based on evidence

Implications for patients and partners

PATIENTS

- Our focus remains on the health and wellbeing of our population
- Our priority is to continue to provide high quality care and reducing waits whether that is waits for:
 - Surgery
 - An ambulance
 - In an emergency department
 - Being discharged from hospital

PARTNERS

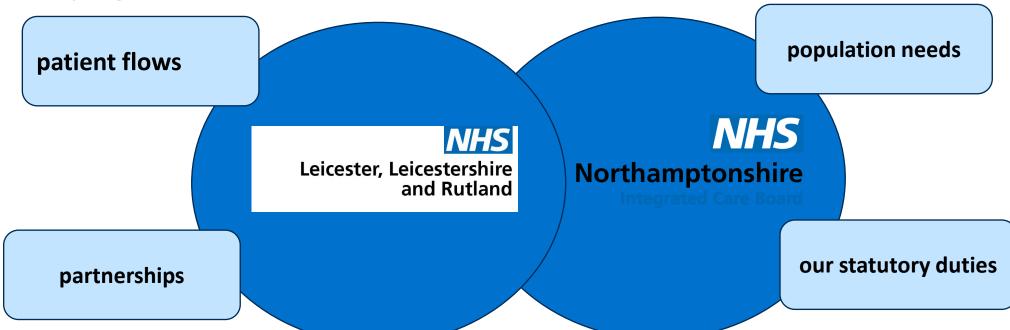
We will continue to work with:

- Local Authorities
- Voluntary Organisations
- Community leaders

This work will continue to make sure that services are designed and delivered around the needs of our communities – especially those who are most vulnerable or face health inequalities

Cluster design

- Designing a new cluster for LLR and Northamptonshire will need to meet population needs while reducing running costs
- Functions of the ICB are under review what to keep, grow, reduce, transfer or stop
- Underlying all of the decisions are:



Next steps

 Cluster design work will continue and we will work with partners and share updates

Our overall priority is to service the populations in Leicester, Leicestershire and Rutland and Northamptonshire

in the best possible way, working closely with and remaining accountable to all local health and care partners.

Useful links to find out more about the changes

10 year plan

Easy Read version of the plan

Video explaining the vision

Kings Fund – CEO comment

QUESTIONS