

An aerial photograph of Leicester City at dusk. The city is densely packed with buildings, many of which are illuminated with warm lights. The sky is a mix of orange, pink, and blue. In the foreground, a large, curved red brick building with many windows is prominent. To its left, a white van is parked on a street. In the background, several church spires are visible against the sky. The overall scene is a vibrant and detailed representation of the city's urban landscape.

Leicester City Our Neighbourhood Approach

Defined Geography | Partnership Working | Healthier Communities

An aerial, slightly hazy view of a city street. The street is lined with multi-story red brick buildings. A prominent church spire is visible in the background. The overall tone is warm and slightly desaturated.

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1) What is a Neighbourhood?



A Neighbourhood refers to a **defined local area** — typically aligned to geographic boundaries, where **partners** across health, social care, community, and voluntary services coordinate and **deliver care closer** to people's homes and communities.



They offer a **new way of working** for partners and recognizes and endorses that **communities and people** have an active role in the design and delivery of neighbourhood health and care.



The aim is to **create healthier communities**; helping people of all ages live healthy, active and independent lives, improving their experience of health and social care, and increasing their agency in managing their own care.

2) Why do Neighbourhoods Matter?



Care closer to home

You can get more help and support you need in your local area — not just at hospitals.



Joined-up support

Local doctors, pharmacists, nurses, social care, and community groups work together.



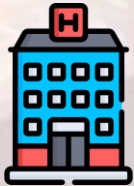
Better health for everyone

Working together helps spot problems early and keeps people well for longer.



Stronger communities

Neighbourhoods build on local strengths — people, places, and groups that already make a difference.



Less strain on hospitals

More care in the community means hospitals can focus on people who need specialist treatment.



Helping you stay well

Neighbourhood teams focus on prevention — things like check-ups, advice, and support to live a healthier life.



Fair access for all

Services designed around the needs of each community, so everyone gets the right care and support.



Your voice matters

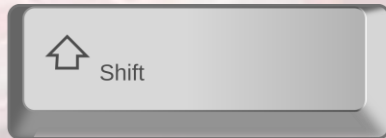
People living in the community help shape how local services work and improve.

2) Why do Neighbourhoods Matter?

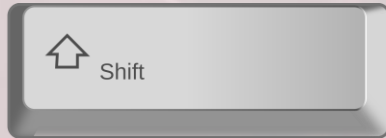


Neighbourhoods are central to the NHS 10 Year Plan and the three shifts.

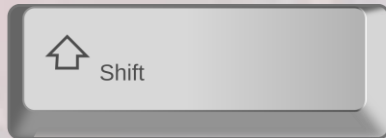
Aims for all neighbourhoods over the next 5 to 10 years



Hospital to Community



Analogue to Digital



Sickness to Prevention

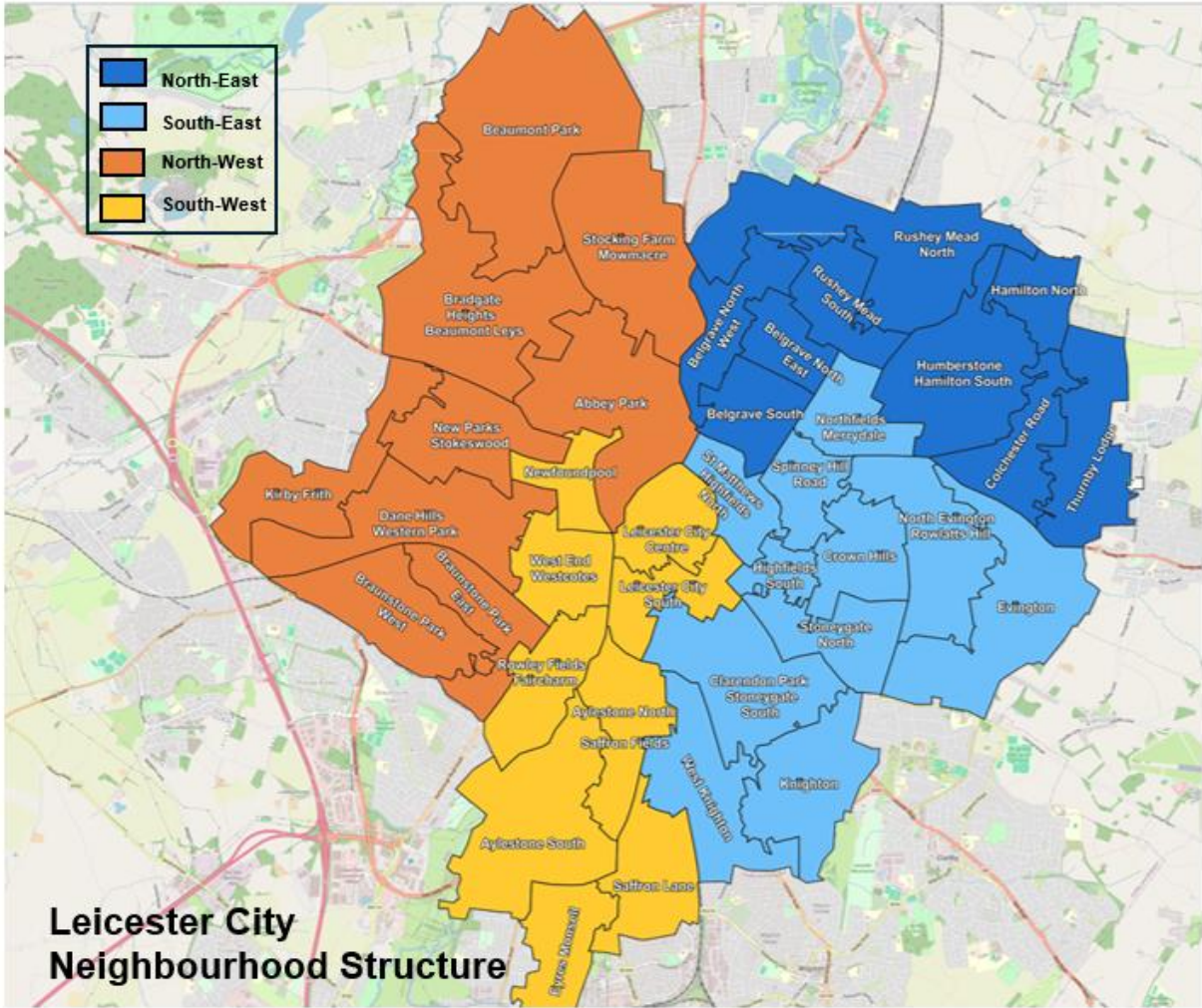
3) What are the challenges in the city?

- **Deprivation** – Strong links to poorer health. 72% of the city Population live in quintiles 1 and 2. (1= most deprived, 5=least deprived)
- **Life Expectancy** – Leicester City residents have significantly lower life expectancy than the England average and live more of their lives in poor health.
- **Cancer** - Leicester City has significantly worse screening coverage for all 3 screening programmes (breast, bowel, cervical)
- **Vaccination** - Lower uptake and rates (childhood imms/C19/Flu)
- **Obesity/Activity** - Leicester City has significantly worse Year 6 obesity rates, Adults meeting 5 a day and Physical activity levels for adults.
- **CYP** - Leicester City has significantly worse health outcomes than England for infant mortality, MMR vaccines, school readiness, low-income not in education, employment or training, children in 5-year-olds families, homelessness, low birth weight, under 18 conceptions, year 6 obesity, 5-year-olds with dental decay, breastfeeding rates.

4) What are the City Neighbourhoods?

Four City Neighbourhoods, rational for configuration based on:

- Loosely based on previous working arrangements that worked well pre-pandemic.
- Ensures population of least 50k (national steer)
- Supported by health and care partners across the system.
- Align with Middle layer Super Output Areas (MSOAs) as unit of geography to support datasets/ analysis/ interventions.
- It is likely that these neighbourhood structures will evolve in the future as local government reorganisation
- Naming and Leadership of Neighbourhoods (TBC)
- ICBs to commission but delivery is a provider function



N'hood	Population (GP Practice List Size)	Number of GP Practices	Number of PCNs
1	56,824	8	5
2	170,803	17	7
3	63,754	7	3
4	117,045	19	8
TOTAL	408,426	51	-

5) What next and how can I get involved?

- We plan to establish **Neighbourhood-level Steering Groups**, made up of both professional leaders (such as health and social care staff) and community representatives. These groups will be responsible for leading, shaping, and delivering action tailored to the needs of each neighbourhood.
- We also plan to hold one **workshop** per neighbourhood in the new year to engage local stakeholders, canvass buy-in, discuss priorities, and co-produce neighbourhood plans.
- We are awaiting national **Neighbourhood Planning Guidance from the DHSC**, which will provide additional direction to shape and steer our local approach. This guidance will help ensure our plans align with national priorities and best practice.
- To support decision-making, we will produce a **Neighbourhood-level Intelligence Packs**, providing robust data and analytics. This will help identify local needs, inform priorities, and guide action across the neighbourhoods.

Medium Term Planning Framework 2026/27 – 2028/29

Purpose

- Shift to **multi-year, locally-led planning** to improve access, quality, and population health.=
- Strengthen NHS, local authority and VCSE partnership working through the Neighbourhood approach.

Key Priorities

- Local empowerment: More autonomy for ICBs and neighbourhood teams to design services.
- Prevention focus: Tackling obesity, smoking, CVD, and improving community-based urgent care.
- Better access: Reduce elective waits, improve cancer pathways, strengthen same-day primary care.
- Digital & data: NHS App growth, shared records, and modernised operating systems.
- Productivity & finance: Deliver 2% annual improvement, reduce variation, and improve efficiency.

What will change

- More services delivered closer to home.
- More proactive care and early intervention.
- Simpler, more coordinated pathways across NHS, public health, and social care.
- Greater transparency on quality, outcomes, and costs.

Key operational performance areas

- Elective, Cancer and Diagnostics
- Urgent and Emergency Care and Primary Care
- Community Health Services, Mental Health and Learning Disabilities

Next steps

- Organisations to submit 3-year numeric returns and 5-year Strategic Plans to deliver 10YP three shifts