

## Current situation – 22 March 2024

The Leeds Committee of the West Yorkshire ICB is required to set a balanced plan for the year 2024-25.

The overall financial challenge for 2024-25 is about **£200m**, which is **7-8%** of the overall gross turnover. This is without doubt the most challenging position the NHS in Leeds has faced in recent years and comes at a time when there are increases in demand and remaining post-COVID recovery in areas such as obesity, mental health, neurodiversity, cancer and elective activity.

We remain committed to working with partners across the city to improve health outcomes and address health inequalities, as set out in our Healthy Leeds Plan. In the work we are doing now, we will be seeking to protect some investment in genuinely transformational approaches that will help us to reach our shared goals.

We all know that difficult decisions are being made and that these will impact across all sectors funded through the NHS, affecting service users, our workforce, and our partners.



## Approach to setting balanced plan for 2024-25

The [initial financial plan](#) was taken to the Leeds Committee of the ICB on 13<sup>th</sup> March. The paper describes the current financial plan for the NHS in Leeds in 2024/25. It asked members to note the scale of the challenge, the progress to date and further reviews and other work proposed. It also describes the process of engagement and proposes the way forward for public involvement and communication. The committee was asked to consider next steps and approve some aspects of the plan that are being proposed.

The committee approved the initial financial plan, subject to the appropriate levels of review and involvement being undertaken in the small number of areas where there is a material cut to services.



## Communications and Involvement



We take seriously the duty we have to involve the public in service changes. We also need to ensure that we effectively communicate these changes.

Whilst there are only a small number of schemes that will result in a material cut to services, it is important that we effectively assess the impact on the people of Leeds. Therefore, we will initially be focusing on identifying the schemes that have the potential for the highest impact, particularly to those facing the greatest health inequalities. Quality Equality Impact Assessments (QEIAs) are being completed for each scheme and overarching population to give us a high-level view and to help us to identify where a particular group or groups of people may be more adversely affected by a number of schemes being put into action. Equality Impact Assessments (EIAs) are also being undertaken for those schemes where it is deemed necessary.

Schemes may be rated more high risk if they;

- have the highest impact on communities facing the greatest health inequalities,
- impact on a large number of people,
- mean a significant change to the way services are being provided,
- mean a significant change to the range of service that are being provided,
- have a high risk of controversy with partners and the public.

After the summary of schemes was shared at the Leeds Committee of the ICB, we published a [finance update](#) on the Leeds Health and Care Partnership website to lay out to the public the scale of the challenge facing us. Due to the pre-election period, which begins on 26<sup>th</sup> March, we will not undertake any further proactive communications with the public until after 6<sup>th</sup> May.

We are also not planning to begin direct involvement with the public until the pre-election period ends after the local elections. We will use the time in between to continue to involve and communicate with our partner and provider organisations, including primary care, to understand the impact of the schemes on the people of Leeds, from their perspective, and to understand the impact the schemes will have on the organisations who provide health and care across the city.

We will also use this time to identify the insight we have already collected from people regarding the services affected by the schemes and undertake a gap analysis of our understanding. Many discussions regarding the schemes have already taken place using insight previously collected and in discussion with service providers who understand the potential impact on the people of Leeds.



We need to be very clear with this involvement about the level of influence people have on the decisions being made and the purpose of any involvement we have with the public. It is envisaged that the purpose of most of the involvement will be to understand, in more detail, the impact of the schemes and any mitigation that can be put in place to reduce that impact. Although, we will take seriously our obligation to review and understand this impact, particularly at a population level and for those groups facing the greatest health inequalities, and we will make changes to the schemes if necessary.

QEIAs and EIAs will continue to be updated throughout this involvement and review period and these will be reviewed by the Quality and Delivery subcommittees.

We will seek assurance on our overall approach by running the second of our assurance workshops with public representatives in Leeds and by running the approach past the Consultation Institute for external feedback. This work will take place in March/April.



## We need to work together – can you help?

As CEOs and Finance Directors, we have worked with our senior teams to identify where we might be able to make these savings. Partners as a result have had to absorb inflation and other pressures to commit to remaining within their existing budgets. This challenge is affecting the budgets of all organisations working as part of the LHCP, including NHS trusts, Primary Care and the third sector.

Following this intensive period of focus on our finances, we still have savings to make across the system in Leeds for 2024-25 (between £20m - £25m). You are our greatest asset, wherever you work, your views are valuable to us. You may have ideas about how we make services more efficient and now is the time to share those ideas with colleagues and leaders within your respective organisations.

We know working in a period of uncertainty is a challenge. It is something we are all dealing with, whilst also managing the consequences of the cost-of-living crisis in our own lives. Your wellbeing remains of paramount importance to all of us, and if you feel like you are struggling, we urge you to access the support available from within your respective organisations. We know that we have one of the most committed workforces, and we are extremely proud of that. By working as a team, we can support each other through this challenging period, whilst continuing to meet the needs of the people of Leeds.

## Leeds Health and Care Partnership

