

**Report to:**

## **ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE**

**Relevant Officer:**

Karen Smith, Director of Adult Services, Blackpool Council and Director of Health and Care Integration (Blackpool), Lancs and South Cumbria ICB

**Date of meeting:**

Thursday 16 November 2023

## **NHS LANCASHIRE AND SOUTH CUMBRIA INTEGRATED CARE BOARD UPDATE**

### **1.0 Purpose of the report**

1.1 To provide Committee Members with an update about NHS Lancashire and South Cumbria Integrated Care Board, including the development of the vision and strategy.

### **2.0 Recommendation(s)**

2.1 Members of the Committee are asked to note this report.

### **3.0 Reason for recommendation(s)**

3.1 N/A

3.2 Is the recommendation contrary to a plan or strategy approved by the Council? No

3.3 Is the recommendation in accordance with the Council's approved budget? N/A

### **4.0 Other alternative options to be considered**

4.1 N/A

### **5.0 Council priority**

5.1 The relevant Council priority is:

- 'Communities: Creating stronger communities and increasing resilience'

### **6.0 Background and key information**

#### **6.1 A note regarding this report**

The following report provides an overview of the continued development of the NHS Lancashire and South Cumbria Integrated Care Board (ICB) and NHS Lancashire and South Cumbria Integrated Care Partnership (ICP), as requested at the Adult Social Care and Health Scrutiny Committee on 23 February 2023. It also provides an update with regards to:

- The work of the Blackpool place-based partnership.
- An overview of the aim of the ICB in relation to delegating authority to Lancashire and South Cumbria Places (which includes Blackpool) and progress to date.

The NHS Lancashire and South Cumbria ICB is a statutory NHS organisation which is responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in a geographical area.

The Integrated Care Partnership is a group of partners, of which the NHS is one, in Lancashire and South Cumbria working together to address the health, social care and public health needs of their communities. Blackpool Council is a partner within the Integrated Care Partnership.

## **6.2 Establishment of Lancashire and South Cumbria Integrated Care Board**

NHS Lancashire and South Cumbria Integrated Care Board (ICB) was established on 1 July 2022 as a result of the Health and Social Care Act 2022. The eight CCGs in Lancashire and South Cumbria, including Morecambe Bay CCG, were closed.

The ICB took on the CCG commissioning functions as well as some of NHS England's commissioning functions and is accountable for NHS spending and performance within the system. The strategic aims of the ICB are to:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

In a workshop held with Councillors on 30 November, more information was requested regarding decision making at the ICB.

NHS Lancashire and South Cumbria Integrated Care Board (ICB) is governed by a unitary Board of executive, non-executive and partner organisation members. The ICB Board chair is David Flory and the non-executive members are locally appointed and bring a wealth of experience from different sectors, services and local communities to decision making. Full details on Board membership is available in the [members section](#) of the ICB

website and within the [ICB constitution](#). This is set out in the Health and Social Care Act 2022 which went through Parliamentary processes to be agreed and implemented prior to ICBs being established.

The Board makes sure there are appropriate arrangements in place to carry out its functions effectively, efficiently, economically and in accordance with the principles of good governance. Board meetings are held in public and papers are published on the ICB website. More information is available in the [meetings and papers](#) section of the ICB website.

In late July 2023, we received a letter from NHS England with the annual assessment of our performance in 2022-23. The letter acknowledged that it was a year of transition and there will be many challenges ahead. The feedback was split into the four fundamental purposes of an ICS.

➤ Improving population health and healthcare:

Performance in areas such as 104-week waits, 78-week waits and plans to eliminate 65-week waits by March 2024 were praised. Urgent and emergency care was noted as more challenged, though it was highlighted that performance exceeds the national average.

Our Quality Committee was also observed as delivering its functions in a way that secures continuous improvement in the quality of services.

Our working with people and communities strategy, along with the establishment of our Public Involvement and Engagement Advisory Committee, was highlighted as ensuring the voice of local people and resident is actively embedded and valued in decision making. On 15 October, this included a detailed update on engagement for the Blackpool place and partnership work to listen to communities.

➤ Tackling unequal outcomes, access and experience:

It was recognised that we include prevention and improving population health as a cross-cutting priority and that we are focused in driving down inequalities in access, outcomes and experience for people in Core20plus communities.

➤ Enhancing productivity and value for money:

We were recognised for remaining within our cash limit and within our capital resource limit, as well as maintaining within our running cost allowance. Unsurprisingly, it was acknowledged that the year ahead is already proving challenging from a financial aspect, with the need for all system partners to work together. We were also encouraged to begin developing our medium-term financial plans to achieve our system clinical ambitions in a sustainable manner.

➤ Helping the NHS support broader social and economic development:

The ICB's work with providers and place-based partners to embed anchor approaches and share good practice was recognised.

The main recommendation for us as an ICB was the need to focus on driving continued improvement in access to services, both physical and mental health, and in both primary and secondary care – alongside a relentless focus on productivity and value for money.

### **6.3 The NHS Joint Forward Plan (JFP)**

The NHS Joint Forward Plan (JFP) is a mandatory five-year plan that Integrated Care Boards (ICBs) and their partner NHS Trusts must produce. The plan sets out how the ICB and its partner trusts will arrange and/or provide services to meet the needs of their local populations. Informed by the ICP strategy, a joint forward plan has been agreed for Lancashire and South Cumbria with engagement from partners and the public as part of this development.

In parallel with the finalisation of the plan we have worked with provider and Local Authority colleagues to:

- Ensure that all strategies and plans across all partner organisations and all ICB teams and functions align.
- Develop detailed delivery plans with measurable goals, annual milestones, targets, performance ambitions and trajectories, including deliverables for places and neighbourhoods.

Some of the delivery of the plan will be delegated to place and neighbourhood levels. The final plan was signed off by the ICB Board at its meeting on 5 July 2023 and is available here: <https://www.lancashireandsouthcumbria.icb.nhs.uk/our-work/forward-plan>

### **6.4 Recovery and Transformation**

We are acutely aware that we face some big challenges across Lancashire and South Cumbria health and care system. We are working hard to respond to those challenges, and we have a good plan in place for recovery and transformation which aims to improve the quality of our care provision and outcomes for people in Lancashire and South Cumbria. There is much to be proud of, but this is also a good time to review our progress. There is more that we need to focus on across our health and care system and fundamentally change the way we deliver care to ensure that our health and care system is affordable in the future.

We received strong support for the recovery approach that we have adopted, with a focus on clinical and non-clinical transformation and a three-to-four year timeframe. It is recognised that there is a significant amount of change and a high degree of risk in some aspects of the programme. The budget remains very challenging for the ICB and for the wider system.

## 6.5 Acute Trust Performance

Blackpool Teaching Hospitals NHS Foundation Trust entered the NHSE enhanced surveillance process due to being identified as a challenged trust for quality. At the meeting in September 2023, based on the progress made in key areas of quality such as culture, workforce, specific clinical interventions and pathways, it was formerly agreed that Blackpool Teaching Hospitals NHS Foundation Trust be recommended to move from the regionally-led system Improvement Board to the ICB-led oversight, with effect from November 2023.

Blackpool Teaching Hospitals NHS Foundation Trust is in segment 3 of the National Oversight Framework (formerly the System Oversight Framework), which means a level of enhanced surveillance and support is required. This level of oversight will step down when the trust reaches a demonstrable and sustainable position. These criteria are outlined in a Sustainability and Improvement Plan for the trust which is supported by the ICB.

The ICB governance for enhanced surveillance and support is transacted through a monthly executive to executive Improvement and Assurance Group with the trust which will work with the trust to monitor and support improvements.

## 6.6 New Hospitals Programme

The Lancashire and South Cumbria New Hospitals Programme has taken a big step forward following His Majesty's Government announcement in May 2023 that confirmed the decision to build two new hospitals to replace Royal Preston Hospital and Royal Lancaster Infirmary. Following the Government's announcement, the local NHS was delighted to welcome confirmation of two new hospitals as part of a rolling programme of national investment in capital infrastructure beyond 2030.

Being able to build two new hospitals on two new sites will be truly transformational, giving us the freedom to design our services and facilities around the needs of our patients, future-proofing services for the next generation. This once-in-a-generation opportunity will be a huge contribution to our recovery as a health and care system, bringing new facilities and much needed investment into our area for the benefit of patients and colleagues. The

LSC NHP gives us a real opportunity to achieve our ambitions for being an exemplar health and care system by transforming the way we work across our hospitals in Lancashire and South Cumbria, enabling us to improve quality, safety and patient experience for our whole population and have a positive impact for our NHS colleagues, who undertake incredible work to support our communities every day.

The NHP programme also provides a rare opportunity to be a significant contributor to

wider socio-economic development bringing much needed investment into our region for the benefit of patients, staff and communities and enabling an innovative and transformative approach to workforce, education and training, digital technologies, and research.

The existing Royal Lancaster Infirmary and Royal Preston Hospital sites will remain in place and deliver services to our population until the new hospital facilities are opened. What this means for future hospital services needs to be worked through. The local NHS will continue to keep communities involved and provide further updates as more information becomes available.

The New Hospitals Programme timeframe marks out the progress we need to make in the next 12 years. By then, we need to have transformed our delivery model to fit the growing needs of the population; so that the demand for services does not overwhelm the system.

## **6.7 Access to GP services**

In May 2023, NHS England published its delivery plan for recovering access to primary care. The plan sets out measures for ICBs, PCNs and practices to work together to make a difference to staff and patients, focusing efforts on taking pressure off teams, and supporting general practice to restore patient satisfaction with improved experience of access.

In Lancashire and South Cumbria the following initiatives are taking place to improve GP access:

**Moving to Cloud Based Telephony** – Advanced Cloud based telephony (ACBT) is an essential part of any modern primary care system and has significant benefits for patients and practices, helping to manage demand and improve access. We are currently working with practices to assess their telephony provision and eligibility for funding. We have an ambition to move all existing analogue system users to a cloud based system by 31 December 2023.

**The Additional Roles Reimbursement Scheme** - Funding which is available to Primary Care Networks to recruit to a range of roles within primary care to meet the needs of patients. Roles vary across PCNs bespoke to locally assessed needs. These roles include:

- Clinical Pharmacists
- Pharmacy Technicians
- Health and Well-being Coaches
- Dieticians
- Podiatrists
- Paramedics

- Health Practitioners
- Nursing Associates

**Comprehensive GP Access Communications Campaign** - This will build on the campaign the ICB launched in 2022 and will support patients to understand access to a range of health professionals within primary care. The messages will also closely align to our winter communications campaign and will include information on self-care, vaccination uptake, community pharmacy, NHS 111 and bank holiday pharmacy/repeat prescriptions.

- Care navigation training for staff working in primary care
- GP Improvement programme which will offer support to practices to implement modern general practice during 23/24 and 24/25.
- NHS App – supporting practices to encourage greater use of the NHS App
- Improving the primary and secondary care interface
- Expanding self-referral pathways which is also underway

## 6.8 Dentistry Services and Access

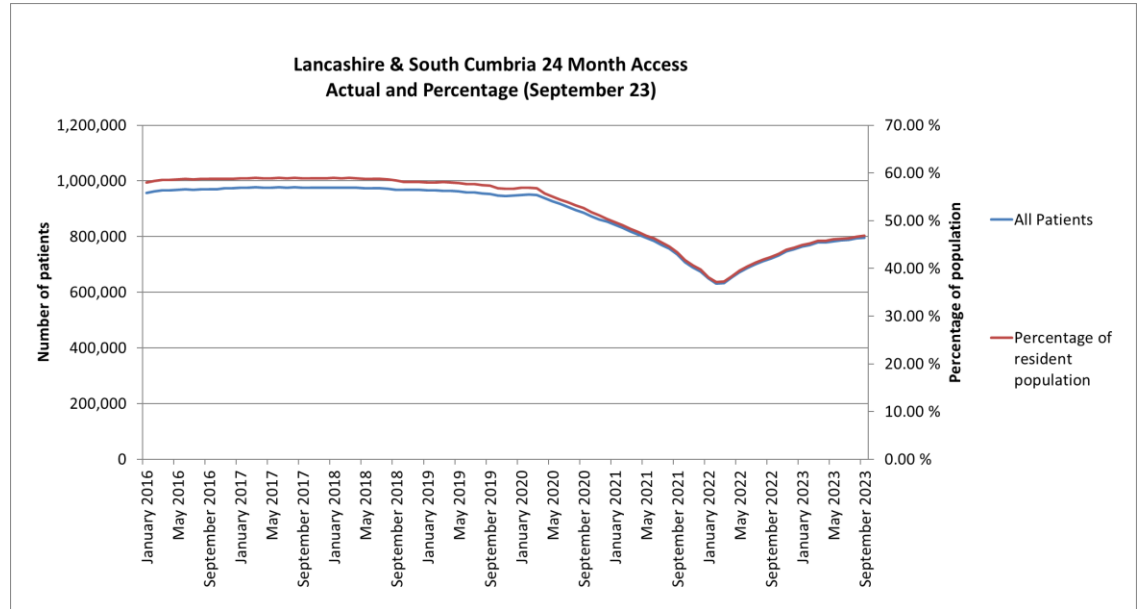
The ICB became responsible for the commissioning of all dental services following delegation from NHS England on the 1 April 2023. NHS dental services cover those delivered within primary, community and secondary care settings.

Access to NHS dental services is challenged nationally and locally across all sectors, with pressures in primary care services being well publicised.

Primary care NHS dental services cover a range of mandatory services as defined in the national legislation. These are:

- examination,
- diagnosis,
- advice and planning of treatment,
- preventative care and treatment,
- periodontal treatment,
- conservative treatment,
- surgical treatment,
- supply, and repair of dental appliances,
- the taking of radiographs,
- the supply of listed drugs and listed appliances, and the issue of prescriptions.
- access to primary care NHS dental services is challenged due to five key factors:
  - reduced care during the pandemic
  - worsening oral health of the population
  - funding
  - dissatisfaction with the national contract
  - workforce challenges

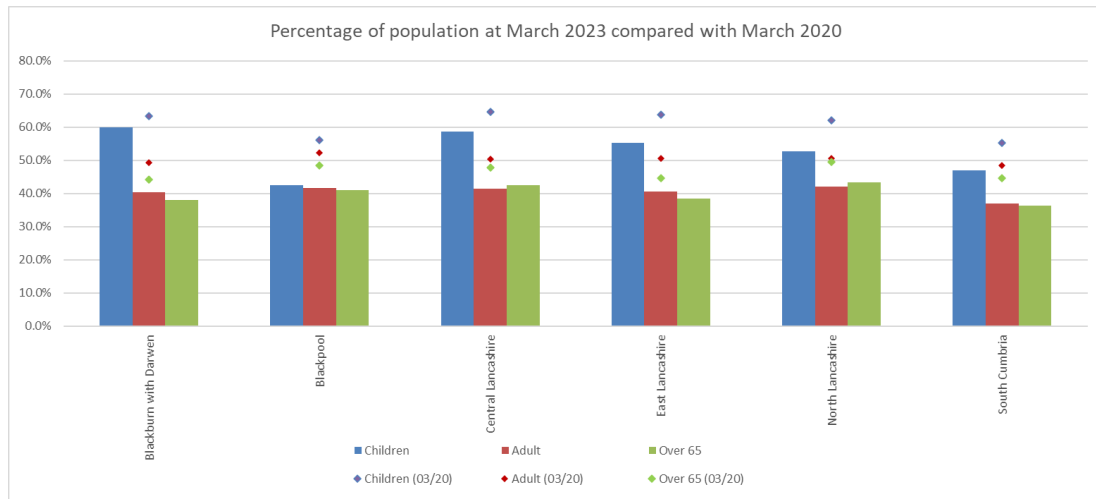
Dental access is measured by counting the number of unique patient contacts in the previous 24 months for adults and previous 12 months for children- in line with NICE guidelines. The table below shows the latest dental access figures:



This data shows the lag in the dental access figures (two years for adults, one year for children), as dental access is a historical look back of how many unique patients have been to the dentist prior to the current month. The rate at which the figures reduce is not matched by the rate of recovery.

The following graph shows the access rates across Blackpool and the other places within Lancashire and South Cumbria, comparing them against the pre-pandemic levels:





Recovery is happening at different rates across the ICB and to support this an additional 490 urgent care slots per week have been commissioned.

A dental access and oral health improvement programme has been designed by the ICB primary care team with the dental profession. It is a two year programme that aims to address the current challenges facing NHS dental services. Outcomes achieved through the programme are constrained by national factors outside of local control and they require close working with local authorities to reduce the local oral health disease burden. The programme aims to improve dental access to members of the population with the greatest oral health inequalities, by using objective measures to help prioritise the limited flexibilities available to the ICB to invest funds in the areas of Lancashire and South Cumbria with the greatest needs which includes Blackpool.

There are five projects that make up the programme:

- **Prioritising resources-** Developing a framework through which resources can be prioritised for specific geographies/patient groups based on objective measures.
- **Care pathways-** Developing evidence-based care pathways that underpin the dental access programme including access to urgent and follow-up care to the whole population (pathway one and two), targeted to care for those whose oral health is important to meet physical health needs (pathway three) and the targeted enhanced childcare pathway.
- **Communications-** For patients and other health and social care providers explaining what services are available, how to access services, oral health and selfcare messages, making every contact count, fostering an oral health prevention focussed culture.
- **Workforce-** Developing and implementing workforce transformation to support the delivery of pathways commissioned/transformed.
- **Contract management-** Reviewing current provision ensuring that dental contracts are as efficient as possible and explore and flexibilities within the existing contract to

## support transformation

The community dental service is a specialised service which provides treatment for children and adults who have additional health care needs which mean that routine primary care NHS dental services are not suitable for their treatment. These needs may include physical or learning disability, complex medical history, children who are pre-cooperative and severe dental phobia. The contract is held in collaboration with Lancashire and South Cumbria Foundation Trust, Blackpool Teaching Hospital and Fylde Coast Medical Services.

The contract is based upon historic Primary Care Trust service specifications which need to be updated to reflect the recently undertaken special care (adults) oral health needs assessment and the soon to be undertaken paediatric assessment.

The children's and young persons' elective care recovery group currently has oversight on the waiting lists for child extractions under general anaesthesia. Harm reviews have been carried out for all children on the waiting list and no significant concerns have been found.

The secondary care services provided by local trusts are: oral surgery, maxillofacial surgery; orthodontics; and restorative dentistry. All of these services are considered fragile with particular pressures being seen within orthodontics and restorative dentistry.

Orthodontics services are commissioned from all four trusts, with services at Blackpool Teaching Hospitals currently suspended. The ICB is working with the Provider Collaborative to develop a sustainable model to secondary provision alongside utilising specialist skills that are available within primary care. It is expected it will take 12-18 months to implement the new model. Work has taken place to move as many Blackpool patients as possible to a primary care setting and finding an alternative trust for those that do need to be seen in secondary care. Orthodontic services are fragile across the ICB (and nationally) therefore there is no quick solution to getting the service in Blackpool Teaching Hospitals up and running.

Restorative dentistry is provided by East Lancashire Hospital Trust, Lancashire Teaching Hospital Foundation Trust and University Hospital Morecambe Bay Trust (UHMB). All three trusts only receive referrals internally from other consultants within the trust, with UHMB recently suspending referrals from primary care providers. Similar to orthodontics, the ICB is working with the Provider Collaborative to agree a sustainable and resilient provider model; this is being supported by the development of a clinical network for the speciality. It is expected it will take 12-18 months to implement the new model.

### **6.9 Lancashire and South Cumbria Workforce Plan**

Lancashire and South Cumbria ICB is working in partnership with NHS, local authority and partner organisations to develop a new five-year workforce strategy and training plan that will cover health, social care and the VCSFE sectors.

It is being created through system and placed based engagement approaches and a multi professional steering group is overseeing its development. This new strategy will be aligned to the new NHS Long Term workforce plan and will enable Lancashire and South Cumbria to make a step change in the way that we attract, retain and develop our current and future workforces. The plan will be discussed at the ICB People Board in January 2024 and will be implemented from April 2024.

## **6.10 Lancashire and South Cumbria Integrated Care Partnership**

As part of the Health and Social Care Act 2022, the Integrated Care Partnership (ICP) was also established as a statutory committee on 1 July 2022. The ICB and the unitary and upper-tier local authorities hold a statutory duty to coordinate Lancashire and South Cumbria ICP together. The partnership sees health and care partners work together by agreeing joint priorities and a joint health and care strategy.

Blackpool Council is a statutory member of this partnership, as are other Lancashire and South Cumbria local authorities, NHS organisations, businesses, education, Healthwatch and voluntary, community, faith and social enterprise (VCFSE) organisations. Councillor Jo Farrell, Blackpool Council Cabinet Member for Levelling up and Chair of Blackpool Health and Wellbeing Board is a representative on the ICP.

Tracy Hopkins is also a representative on the ICP. Tracy is CEO of Citizens Advice Blackpool and holds positions on Blackpool's Health and Wellbeing Board, Safeguarding Adults Board, Lancashire Association of Council for Voluntary Services Board and is working on the further development of the VCFSE Alliance across Lancashire and South Cumbria.

The Integrated Care Partnership meets in public with the most recent meeting on 16 October. The webcast of the meeting and papers are available here:

<https://council.lancashire.gov.uk/ieListDocuments.aspx?CId=1851&MId=13295>

## **6.11 Blackpool Place-Based Priorities – Progress and Alignment**

- **Community Services Local Transformation**  
Following an initial visioning session, conversations continue with partners to assist in shaping the scope and remit of this work. Recent sessions have included discussions with both the Fylde Coast VCFSE Leadership Group and the Fylde Coast GP Leadership Group.
- **Active into Autumn Event**  
Following the success of the Blackpool place-based partnership event, 'Spring into Spring' in March 2023, the Partnership, in conjunction with our Public Health colleagues, followed this with another, even larger scale marketplace event in September 2023, 'Active into Autumn'.

'Active into Autumn' is a fantastic example of our partnership working across Blackpool, including listening to, and working with our communities. The purpose of the event was to encourage people to get out and about and connect to their communities. It showcased the multitude of great activities and support which are available across the town, including health and fitness activities, educational classes and volunteering and job opportunities.

The event had a strong presence from over fifty VCFSE and statutory organisations in Blackpool, supporting the full spectrum of needs and demonstrating practical partnership working in action. The insight gained by coming together was incredibly useful, with two brief examples highlighting the benefits of working together:

We had a GP who was made aware of a locally run service which is able to collect residents and bring them to GP appointments, which he hadn't been aware of until 'Active into Autumn'. He is now promoting awareness of this with colleagues.

We were able to consider plans to advertise a local dental service on the radio. This service is available to parents of children aged 4 and under where they can gain access to dental services for their children.

The event provided a great opportunity for organisations to network and make their own connections to better support our residents. It was wonderful and inspiring to see so many organisations together under one roof and to hear about the abundance of activities and support which is available to the local community.

Blackpool Place-based Partnership plan to host both events, 'Spring into Spring' and 'Active into Autumn', in 2024.

➤ **Blackpool's Joint Local Health and Wellbeing Strategy**

Health and Wellbeing Boards have a responsibility to produce a joint local health and wellbeing strategy and at the request of the Blackpool Health and Wellbeing Board members, a task and finish group was established to take forward the development of a new strategy for Blackpool. A specific ask of that group was to ensure that what was developed both aligned and complemented other existing strategies and work across the Blackpool place. Following a desktop review of existing strategies and associated priorities, which includes the LSC Integrated Care strategy and the Joint Forward Plan (JFP), a workshop was held recently to consider the areas of focus for this emerging, new strategy. An update was provided at the June 2023 Blackpool Health and Wellbeing Board, further conversations will continue so that this strategy continues to reflect what is important to Blackpool.

➤ **Priority Wards**

Partners in Blackpool have been engaging and working with communities in some

of our wards with the highest levels of socio-economic deprivation and poorer health outcomes. These wards are where there is a higher number than expected of attendances and admissions into the urgent and emergency care department and where there are high levels of deprivation within the community. There are 5 Priority wards in Blackpool – Claremont, Park, Talbot, Tyldesley and Bloomfield.

NHS and local authority teams worked with local Healthwatch to reach out to these areas and ask what they think the main factors that contribute to unplanned hospital admissions. The key themes of the responses included mental health, lack of confidence in health and care services, GP access, lifestyle related risk factors and long-term conditions support.

More work is taking place in partnership to implement and demonstrate progress against recommendations from the community which include:

- Improving access to primary care
- Increased community support
- Enhanced communication and coordination
- Targeted support for specific groups within the community
- Mental health support
- Residents understanding of services available

6.12 Does the information submitted include any exempt information? No

**7.0 List of appendices**

7.1 N/A

**8.0 Financial considerations**

8.1 N/A

**9.0 Legal considerations**

9.1 N/A

**10.0 Risk management considerations**

10.1 N/A

**11.0 Equalities considerations and the impact of this decision for our children and young people**

11.1 N/A

**12.0 Sustainability, climate change and environmental considerations**

12.1 N/A

**13.0 Internal/external consultation undertaken**

13.1 N/A

**14.0 Background papers**

14.1 N/A