

ICB responses to questions from Wyre Scrutiny Committee – February 2024

1. Can we have an update on the progress of the ICB one year on?

NHS Lancashire and South Cumbria ICB was established on 1 July 2022 as a result of the Health and Social Care Act 2022. The eight Clinical Commissioning Groups (CCGs) in Lancashire and South Cumbria were closed down. 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.

In summer 2023, the ICB received a letter from NHS England with the annual assessment of ICB 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 strategic aims of an ICB:

1. Improving population health and healthcare

Performance in areas such as the amount of time patients are waiting for planned procedures (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.

The ICB's Quality Committee was also recognised as delivering its functions in a way that secures continuous improvement in the quality of services.

The ICB's working with people and communities strategy, along with the establishment of the Public Involvement and Engagement Advisory Committee, were highlighted as ensuring the voice of local people and resident is actively embedded and valued in decision-making. The Committee is keen to maintain a focus on local place developments. For example, on 25 October, the Committee received a detailed update on engagement for the Blackpool place and partnership work to listen to communities, which is available to download [on the ICB website](#).

2. Tackling unequal outcomes, access and experience

It was recognised that the ICB includes prevention and improving population health as a cross-cutting priority and is focused on driving down inequalities in access, outcomes and experience for people in Core20plus communities ([a national approach](#) to reducing healthcare inequalities).

3. Enhancing productivity and value for money

The ICB was recognised for remaining within its cash limit and within its capital resource limit, as well as maintaining within its 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. The ICB was also encouraged to begin developing medium-term financial plans to achieve system clinical ambitions in a sustainable manner.

4. 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 the 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.

NHS Joint Forward Plan

Another requirement of the Health and Social Care Act 2022 is for the ICB and its partner NHS Trusts to have an NHS Joint Forward Plan for Lancashire and South Cumbria. 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 [Integrated Care Partnership \(ICP\) strategy](#), the joint forward plan was agreed with engagement from partners and the public as part of its development.

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>

Recovery and Transformation

There are some big challenges across the Lancashire and South Cumbria health and care system. Work is ongoing within the ICB to respond to those challenges, and the ICB has a good plan in place for recovery and transformation which aims to improve the quality of local care provision and outcomes for people in Lancashire and South Cumbria. There is much to be proud of, but there is also more to be done to fundamentally change the way care is delivered to ensure that the Lancashire and South health and care system is affordable in the future.

Building on a significant improvement in relationships with local government and the voluntary sector, the ICB Board discussed in September 2023 the need to re-set the Provider Collaborative Board (PCB) – which is the joint committee of the five NHS Trusts in Lancashire and South Cumbria, alongside the ICB, working together to deliver joint priorities to improve health and healthcare.

A system-wide Recovery and Transformation Board was also set up to provide an organisational oversight and assurance role, oversee system-wide transformation workstreams and, on a bi-annual basis, review the portfolio of system-wide transformation workstreams.

The ICB received strong support from the regional and national NHS teams for the recovery approach that has been 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.

Redesign of clinical services

Senior leaders across the NHS Trusts and the ICB met in autumn 2023 to consider how the system will work effectively on issues relating to the sustainability, recovery and redesign of clinical services over the next few years. A set of principles were agreed as to how clinical

and managerial colleagues will be supported to work together on some of the most fragile services over the next 1000 days, starting from now.

The group considered how to unblock some of the challenges that have been encountered in reaching agreement about major service reconfigurations in recent years, such as vascular, head and neck, urology, cardiac. The group is committed to the agreement and implementation of new models of care in these services with an aim to be in place during 2025/26.

Haematology, orthodontics and gastroenterology were agreed as the priority areas to develop and implement rapid networked solutions. It was recognised there are areas with existing networks or programmes across commissioners and providers which are being progressed in fragile services, such as stroke, child and adolescent mental health services, autism and cancer where progress needs to continue. Other clinically fragile services will continue to be supported to develop networked arrangements and work together across the system.

This work will also inform the overall clinical model for Lancashire and South Cumbria and make the most of the entire estate across the NHS as well as the opportunities that two new hospitals provides. A focused three-to-six-month process will be developed to articulate the vision and roadmap for clinical configuration and estates utilisation strategy. This aims to ensure a sustainable and viable future for all hospitals balanced with the evidence of what is clinically appropriate, whilst meeting the needs of the population.

The ICB will continue to communicate widely across the system with residents, colleagues and partners.

Reviewing commissioning and contracts

As part of the process of establishing the ICB in July 2022, hundreds of contracts and grants were transferred from the CCGs to the ICB. In recognition of the scale of the work required to review the detail behind them, all contracts were rolled over for a further 12 months to end on 31 March 2024. During 2023, the ICB has worked to collate all contracts and grants to understand the funding streams, variations and outcomes. The time required to undertake this work cannot be underestimated.

To support recovery and transformation, the ICB now needs to review commissioning arrangements to resize contracts to meet the needs of the population within the available financial envelope. This is going to mean some difficult decisions, and these will be made with robust impact assessments, with an understanding of outcomes for patients across Lancashire and South Cumbria and with an aim to reduce health inequalities.

This review of contracts may mean differences in how the ICB delivers or configures services, now and in the future which needs to support recovery and transformation.

The ICB is working with all partners who it holds contracts and grants with to make sure there is full understanding of the next steps, to finalise the review of the contracts and the assessment of any impacts that may result from a contractual change. The next step will be to communicate formally the commissioning intentions with individual organisations.

2. How has the introduction of place-based partnerships impacted on NHS services? Have GP practices reported a reduction in inappropriate issues being dealt with?

It is the ICB's ambition to have a world class, all age, community centric, integrated care system with its four places at the heart, driving the transformation and changes that is needed to improve health and care outcomes and experiences for the population.

Delivering improvements in health and wellbeing and putting the population's needs at the heart of everything requires health and care organisations, including the ICB, to organise and deliver care at the most appropriate level and closest to the residents they serve. Lancashire and South Cumbria's four places will be a key driving force in ensuring residents have healthy communities, high quality services, and a health and care service that works for them.

The ICB's aims are:

- A much stronger focus on prevention, transforming health and care services from being reactive to proactive, and designing new and improved prevention strategies.
- A step change in community-based services, with much greater integration of planning and provision between the NHS and local councils.
- Delivering world class care for priority diseases, conditions, population groups and communities.
- Getting better value from collective resources – money, people, buildings and digital assets.
- Using data and intelligence to focus on local needs, making better use of what is available across different organisations to inform planning and delivery.
- Strengthening of places and neighbourhoods to ensure decision-making happens closer to and with local people, moving resources and changing the way organisations invest in, provide and manage services.

These aims will be delivered more effectively through the implementation of our 'Place Integration Deal', where resources from the ICB and other partners over time are embedded further into our neighbourhoods and places. In the future, delegated decision-making will support further aligning and/or pooling of resources with local authorities, ensuring a targeted approach to local need and making better use of collective resources.

Each of the places has developed a set of priorities, for Lancashire these are:

- Creating health communities
- Integrated Neighbourhood Team (INT) development
- Enhanced care in the community

Across the Lancashire Place, the team works with partners through ten Health and Wellbeing Partnerships (HWBPs). The HWBPs play a vital role in setting priority areas of work in accordance with the needs of their local residents to encourage a deeper level of collaborative working between partners at a local level whilst providing a forum to discuss the strategic and operational coordination in the delivery of services.

They also report into the Lancashire Place Partnership upon delivery against their agreed priority areas. The Fylde and Wyre Health and Wellbeing Partnership held a series of workshops to identify their priorities, and the following areas of focus have been agreed:

Priority area	Focus
Children and young people	Mental health and wellbeing
Living well/ageing well	Supporting older people to stay
Lifestyles	Prevention activity
Clinical services strategy (BTH)	2024-2031 / QI
Urgent and emergency care	Winter planning
Integrated Neighbourhood Team (INT)/HWBP development	Alignment through HWBP

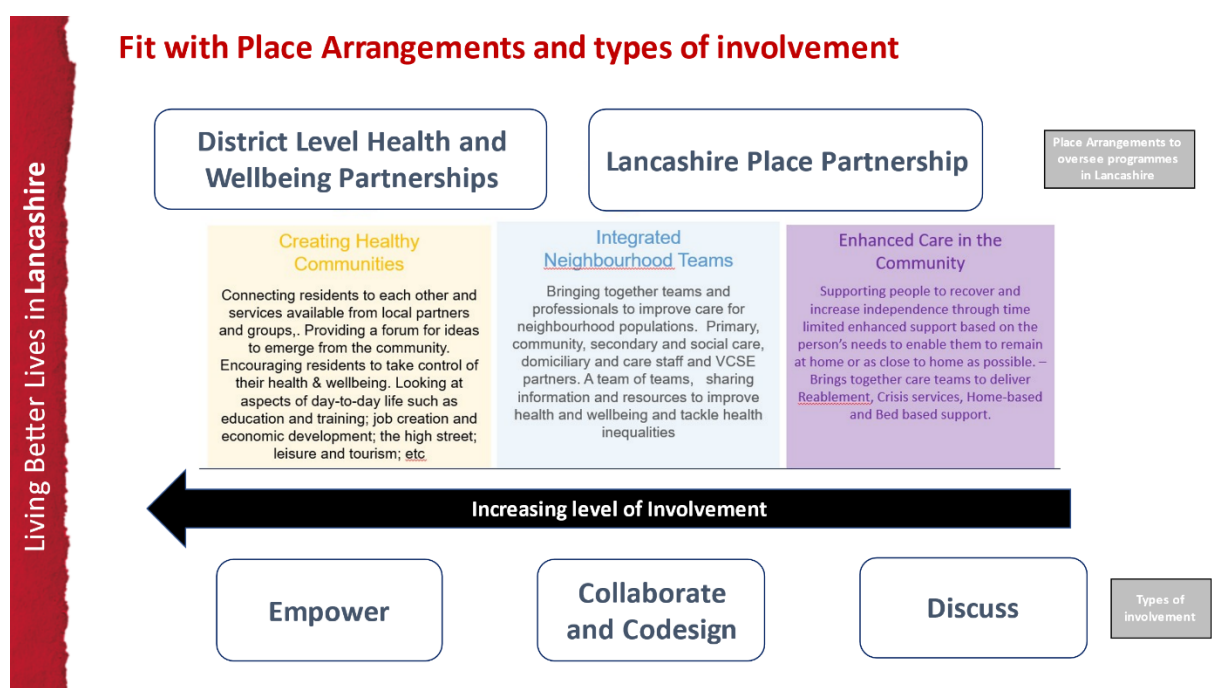
Please note, in relation to the query about inappropriate issues at GP practices, this is not a widely-raised issue, however the below information may provide further information in relation to general practice.

The NHS England delivery plan for recovering access to primary care (published in May 2023) attempts to take pressure off general practice and make it easier and quicker for patients to get the help they need. It is largely based on practical rapid improvements to how general practice works. NHS England asked all ICBs to present detailed progress updates to their public boards in autumn 2023 and you can read the [ICB's report at the November Board meeting](#).

Within the report, one of the headline messages is that general practices across Lancashire and South Cumbria are delivering more appointments than ever, with fewer qualified general practitioners but with bigger multidisciplinary teams.

The director of health and care integration (DHCI) for Lancashire is the senior responsible officer for the transforming care programme which is responsible for driving the three workstreams.

The Lancashire DHCI has hosted some workshops with all district CEXs and a smaller agreed working group which includes the chief exec of Wyre Borough Council. It was decided at a recent meeting that districts should be involved and the slide below illustrates what was agreed.



3. Is there a plan to address the high vacancy rates at Blackpool Teaching Hospitals?

Blackpool Teaching Hospitals (BTH) is actively recruiting to their vacancies with a particular focus on nursing and medical. Recognising the national workforce shortages, the Trust has been actively engaging with international recruitment campaigns for both medical and nursing.

Based on BTH's nursing trajectory, the Trust hopes to have full establishment within 2024. In relation to medics, some of the vacancies are linked to hard to recruit specialities, so the Trust is working with clinical leads to understand how services can be delivered differently.

A Lancashire and South Cumbria five-year workforce strategy is currently being developed, underpinned by a training and education strategy, and linking closely with existing people strategies across the system and in partner organisations. For Blackpool, this includes, but is not limited to, BTH and Lancashire and South Cumbria Foundation Trust.

This will be the first time a strategy has been developed for Lancashire and South Cumbria to describe how partners will work together on workforce as a whole system comprising health, social care and our voluntary, charity, faith and social enterprise partners. There is excellent work already ongoing in Lancashire and South Cumbria to support our people and the health and care system is rightly proud of our progress. However, whilst many of the challenges faced are common across the whole health and care system, much of the work to date has been localised to specific sectors, geographies or organisations.

There is now the opportunity to develop and embed a co-ordinated, aligned and truly cross-sector approach involving health, social care and our voluntary, charity, faith and social enterprise partners to address our workforce challenges. Adopting this joined-up cross-sector ethos will benefit everyone who lives or works in Lancashire and South Cumbria and will help us to deliver our workforce ambitions as well as our system's NHS Joint Forward Plan.

We will deliver this step-change in our approach by:

- Working together to deliver a One Workforce ethos and approach.
- Working as one to attract and retain a diverse and skilled workforce.
- Working as one to train and grow our own workforce.

Shifting our approach, our focus and our mindset in this way will require us to be brave and bold. We will not be able to deliver our priorities without changing the way we approach our work. We need to embrace new and innovative ways of working, breaking down traditional barriers and mindsets, to achieve our common goals. This five-year workforce strategy will outline how we will approach and implement this fundamental change.

In developing the draft and priorities within the strategy, a wide-ranging engagement strategy and series of workshops have been held. In November 2023, the Blackpool place workshop was attended by 31 staff from partners organisations across health and care.

The strategy will be finalised in the first quarter of 2024. Delivery of the strategy will be developed through a place-based partnership approach. This will finalise workstreams to benefit the "One workforce" of Blackpool such as initiatives around staff retention, resilience and recruitment of hard to fill posts.

4. In the Chief Executive report of September 2023, it was reported that the ICB was preparing for intervention from NHS England. Can you update us on this.

The Chief Executive report that was published in November 2023 described the ICB's preparations for potential intervention from NHS England based on the financial challenges that the ICB is facing. This is not a new problem and the ICB is working closely with the regional and national NHS teams to agree a multi-year plan to eliminate the deficit.

As part of the ongoing discussions, there has been no confirmation of intervention required, and the regional and national teams have been very supportive of the plans and progress that the ICB has already made. If any formal intervention does occur at any point in the future, the expectation is that it will be targeted to specific areas of concern whereby an external specialist would be able to make the maximum impact.

5. How is the ICB improving its partnership with NHS dental care and what is being done to tackle the challenge of accessing NHS dentistry in Wyre?

Unfortunately, locally and nationally there are challenges in accessing NHS dental care. We are working to improve access but acknowledge that in some areas patients are finding it difficult to access routine NHS dental care.

Dental services were delegated from NHS England to the ICB from 1 April 2023. The ICB must work within a national contractual framework which some dental providers do not find attractive. The NHS nationally receives funding based on around 60 per cent of the population being able to access NHS dental services. All dental practices are now required to deliver their full contractual levels of activity, the decline in oral health since the pandemic means the level of funding received in reality is currently only sufficient for around 50 per cent of the population to be able to access routine NHS dental care.

The NHS last year announced the first reforms to dentistry services since 2006, which aim to support practices to improve access and ensure everyone seeking NHS dental care can receive it when they need it.

Initial contract reforms (July 2022) sought to address the challenges associated with delivering care to higher needs patients and making it easier for patients to access NHS care. These included:

- Enhanced Units of Dental Activity (UDAs) to support higher needs patients.
- Monitoring of and adherence to personalised recall intervals.
- New minimum UDA value.
- Removing administrative barriers preventing dental care professionals from operating within their full scope of practice.
- Taking steps to maximise access from existing NHS resources.
- Improving information for patients by requiring more regular updating of the Directory of Services.

The ICB has recently launched its dental access and oral health improvement programme to improve access to primary care dental services in the high street and to improve oral health. The programme will prioritise the areas with the greatest need for dental access and

oral health support, aiming to reduce inequalities in dental access and oral health across Lancashire and South Cumbria. One of the ways access to dental services has already been improved is through the launching of a phone line which guarantees urgent NHS dental support to anyone who needs it. This service is available by calling 0300 1234 010 (standard local telephone charges apply). More information about the dental access and oral health improvement programme can be found in the report provided to the ICB board meeting on 8 November 2023 ([click here to view the report](#)).

From the access programme, using some of the objective measures relating to child oral health and child access, we are planning to work with our wider stakeholders in the local authorities and Integrated Neighbourhood Teams to progress a child oral health promotion scheme in addition to increased access to clinical care for children. The evidence suggests that if children are kept decay or caries free up to the age of 5, they will remain decay or caries free for life. The scheme is in its early stages of being planned but the aim is to have expressions of interest from the priority areas during the autumn.

12 February 2024