

Blackburn with Darwen Health and Adult Social Care Scrutiny Committee – 7 August 2023

Report to accompany a presentation by:

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1. A note regarding this report

The following report provides an overview of the NHS Lancashire and South Cumbria Integrated Care Board (ICB) and NHS Lancashire and South Cumbria Integrated Care Partnership (ICP).

It also provides an update with regards to –

- the work of the Blackburn with Darwen place-based partnership and
- an overview of the aim of the ICB in relation to delegating authority to Lancashire and South Cumbria Places (which includes Blackburn with Darwen) and progress to date.

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 Blackburn with Darwen CCG, were subsequently 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.

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

3. Establishment of 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. From its first meeting in September 2022, partners have worked collaboratively on the development of the ICP, including membership and terms of reference.

Blackburn with Darwen 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 Damian Talbot, Blackburn with Darwen Council Executive Member for Public Health, Prevention and Wellbeing up and Chair of Blackburn with Darwen Health and Wellbeing Board is a representative on the ICP.

The ICP draft strategy proposed the following priority areas –

- **Starting well:** Supporting children and their families in the first 1000 days of a child's life, with a holistic consideration of factors influencing health, well-being and school readiness.
- **Living Well:** Preventing ill health and tackling inequalities, recognising the importance of mental well-being as well as physical health, and addressing the factors that cause inequality in access and outcomes.
- **Working well:** Supporting people into employment and staying in work, maximising the role of large-scale organisations and local businesses in contributing to the health and wellbeing of individuals and the social and economic development of communities.
- **Ageing well:** Delivering high-quality care that supports people to stay well in their own homes, with radical and innovative approaches to integrating care provision.
- **Dying well:** supporting people to choose their preferred place of death and that their families and their carers plan for and improve end of life and provide excellent bereavement support to our communities.

In Autumn 2022, the ICP engaged with local people and partners on these draft priorities. This included nine focus group sessions with various community groups to ensure insight and feedback from Blackburn with Darwen residents was included.

The findings were reviewed by the ICP and partners have since further refined the priorities and produced a draft strategy. This draft strategy was approved the Integrated Care Partnership Board on 17th April 2023.

4. The Integrated Care Board Joint Forward Plan (JFP)

The Joint Forward Plan (JFP) is a mandatory five year plan that Integrated Care Boards (ICBs) and their partner NHS Trusts must produce. The plan, signed off by the ICB at their Board meeting on 5 July, sets out how the ICB and its partner trusts will arrange and / or provide services to meet the needs of their local populations.

National guidance sets out a flexible framework for JFPs to build on existing system and place strategies and plans, in line with the principle of subsidiarity. It also states specific statutory requirements that plans must meet:

- Informed by the ICP strategy, a joint forward plan is in development in L&SC
- We have been engaging with partners and the public as part of this development

In parallel with the finalisation of the plan we have been working 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 for implementation of the plan, 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 devolved to place and neighbourhood levels and will be coordinated by the Place-based Partnerships.

5. Blackburn with Darwen Place-based Partnership an overview

The Health and Care Act 2022 and subsequent national commentary (Thriving Places Guidance, Sept 2021; Hewitt Review of ICSs, April 2023) paved the way for collaborative working arrangements between partners, of all sectors, to be convened in “places”, in the form of Place based Partnerships (PBPs).

Within the Lancashire and South Cumbria Integrated Care System, it has been agreed that there will four “places”, where commitment has been made to grow and support thriving PBPs, aligned to Upper Tier Local Authority boundaries - Blackburn with Darwen, Blackpool, South Cumbria and Lancashire.

Place-based Partnerships are intended provide a vehicle for collaborative working and delivery of health and care services within local places, connecting all partners to make joint recommendations as to the effective deployment of resources to drive integration and improved health outcomes. PBPs are expected to:



Plan and deliver local health and care services



Listen to and work with, local people to understand what good looks like for them



Focus on preventing ill health and reducing inequalities



Join up services so that people are better supported and receive care that is right for them



Check whether the services we deliver are good quality and are making a difference for people



Plan to use our resources (staff and money) better by working together



In time, our Partnership will be able to make decisions on what and how, local health and care services are provided

Health and care partners in Blackburn with Darwen, including the VCFSE and Healthwatch, have a long history of working together to improve service delivery for

residents, with a BwD Local Integrated Care Partnership (LICP) being established in 2018 to oversee such collaborative working. This partnership, amongst other things, drove the development of strong, cohesive, multi-agency neighbourhood working arrangements, which have since been recognised as good practice within Lancashire and South Cumbria. The LICP has now been evolved to form an interim Place-based Partnership Board which will report into the Health and Wellbeing Board in order to provide the board with assurance that actions are being delivered to address the key health and wellbeing priorities for Blackburn with Darwen.

To drive the convening of the Place-based Partnership and facilitate strategic alignment, priority-setting and decision-making between organisations within the places, that ICB worked with the Upper Tier Local authorities to appoint four Directors of Health and Care Integration. Claire Richardson was appointed to fulfil this role for Blackburn with Darwen.

Key priorities and workstreams

A number of immediate priorities and workstreams have been identified through discussions with all partners. In identifying these, consideration was also given to the priorities outlined by the Health and Wellbeing Board in their Joint Local Health and Wellbeing Strategy, along with the priorities outlined by the ICP in the Integrated Care Strategy and the ICB in the Joint Forward Plan. The key areas of focus are outlined below:



6. Lancashire and South Cumbria Integration Place Deal

Following the establishment of the four L&SC place-based partnerships, a programme of work has been underway recently with the ICB, to consider delegations to Place.

The Lancashire and South Cumbria Place Integration Deal, was agreed by the ICB Board on 5 July, sets out the way in which places will operate within the Integrated Care Board's operating arrangements.

It describes:

- The expectations of places - what we agree should be planned and delivered in places
- The resources that places will receive from the ICB to deliver these expectations – delegations, people and funding allocations
- The ways of working that will enable the primacy of place and the principle of subsidiarity to be enacted successfully – how places will interact with the ICB directorates and how decision-making will happen between partners in each place

Underpinning the Deal, is the assumption that planning and delivery will happen at place unless required as one of these three subsidiarity tests:

- Working at scale is necessary to achieve a critical mass to get the best outcomes.
- Where variation in outcomes is unacceptably high and working together will help to reduce variation and share best practice.
- Where working at scale offers opportunities to solve complex, intractable problems.

Delegations are to be enacted in a staged way through a series of phases, with the ICB's Better Care Fund and Population Health resources flowing first (by April 2024).

Key practicalities, such as what exactly is in scope for each of the areas which are being identified, how this will actually be implemented and what this means in terms of resource to support, is still being considered and worked through, acknowledging the scale and complexities of this work.

Delegations and authority to act, from the ICB in this first instance, will allow Blackburn with Darwen Place Based Partnership to be more agile in terms of mobilising transformation and be more responsive to local need, through its collective decision making. This will ultimately ensure more effective delivery of the Partnership's key priorities of neighbourhood integration, community services transformation, population health, care sector quality and the focused interventions across start, live, age and die well.

Following agreement with the ICB Board, discussions are now commencing with local council and other place partners, to consider their ambitions for integration.

ENDS