

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Claire Richardson, Director of Health and Care Integration, Blackburn with Darwen
DATE:	Tuesday, 5 March 2024

SUBJECT: Blackburn with Darwen Place Based Partnership and Lancashire and South Cumbria Integrated Care Board Update

1. PURPOSE

This paper provides the Health and Wellbeing Board with an update on progress in developing Place Based Partnership arrangements for Blackburn with Darwen. It intends to ensure that the Health and Wellbeing Board are fully sighted on our progress during the development and subsequent phases of the partnership arrangements. It also includes a brief summary of areas of work that have been undertaken since the last report to the board.

The report also provides an update from the Lancashire and South Cumbria Integrated Care Board.

2. RECOMMENDATIONS FOR THE HEALTH AND WELLBEING BOARD

The Health and Wellbeing Board is recommended to:

- a) Note the update provided in this report on the development of the Blackburn with Darwen Place Based Partnership and the collaborative delivery that is underway to integrate health and care for the residents of Blackburn with Darwen
- b) Note the update in regards to the financial recovery work underway within Lancashire and South Cumbria Integrated Care Board.

3. BACKGROUND

The Health and Care Act 2022 introduced radical changes to the NHS health and care commissioning landscape, the key change being the formal creation of Integrated Care Systems across the country. They are made up of two parts – an Integrated Care Board (ICB) which is an NHS organisation with responsibility for allocating the NHS budget and commissioning services for the population, taking over the functions previously held by clinical commissioning groups (CCGs) and an Integrated Care Partnership (ICP) which is a statutory joint committee of the ICB and local authorities in the area.

Within the Lancashire and South Cumbria Integrated Care System, it has been agreed that there will be 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.

4. RATIONALE

The approach to collaborative planning and delivery of health and care services, through a Blackburn with Darwen Place based Partnership, provides an opportunity to strengthen the Health and Wellbeing Board's influence in prioritising prevention of ill health and ensuring joined provision of high-quality community services; promoting integrated funding/commissioning to ensure best value and deliver improved outcomes.

5. KEY ISSUES

Blackburn with Darwen Place-based Partnership update

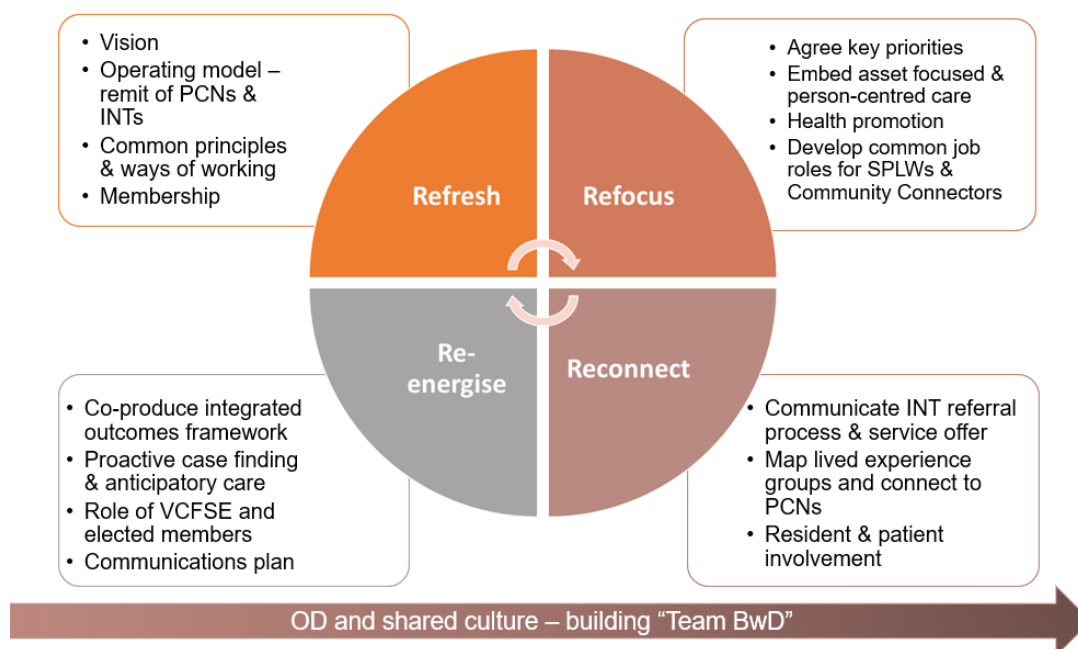
Blackburn with Darwen continues to build on its long history of joined up working, resetting its arrangements through the development of the Place Based Partnership, including refreshing ambitions and priorities, a leadership development programme for system leaders and facilitating delivery of joined up service provision to meet the needs of our communities.

Key areas of focus for the PBP over recent months are now outlined in this report.

Neighbourhood review outcomes and next steps

Phase 2 of the neighbourhood review culminated on 17 November with a whole system workshop attended by external Local Government Association (LGA) colleagues who presented their findings from stakeholder engagement that had been undertaken. Findings from phase two of the neighbourhood review provide a clear steer and opportunities for moving our integrated neighbourhood working arrangements to the next level of effectiveness.

During December 2023 and January 2024, the themes from phase two have been shared with stakeholders for any initial feedback and refinement. Following this period of engagement, detailed feedback is being used to enable the development of a Neighbourhood Evolution Action Plan which is co-produced, owned and delivered by BwD system partners. A high-level summary of the Evolution Plan is outlined below.



The delivery of this Neighbourhood Evolution plan will drive BwD forward in terms of integrating health and care services within neighbourhoods, it provides an opportunity to re-engage key stakeholders on a common agenda and ultimately, aims to ensure BwD residents have better access to health and care support to improve their health outcomes.

Public involvement and co-production across Blackburn with Darwen

The Blackburn with Darwen PBP have agreed an ambition for their “Delivering with our People” workstream as follows:

“we will work with our residents to improve health outcomes and quality of life, for a happier population”.

Since inception in 2023, the PBP, have undertaken a number of pieces of public involvement work which have shaped/are shaping future service delivery in the borough.

These include:

- Commissioned priority wards insight work - driving change in the neighbourhood model of care and supporting greater understanding of population need and behaviour;
- Utilisation of community insight (through priority wards and Family Hub parent groups) to develop winter communications and an engagement plan – focused on deep engagement, focus group discussions, messages targeted to insight and community demographics;
- Established relationship with Family Hub parent carer groups – committed to routine engagement and listening, myth busting and raising awareness of key services;
- Subsequent development of a family hub engagement and insight report to summarise key areas of feedback for health and care services;
- Partnering with Healthwatch and parent carer groups to refresh Healthwise booklet;
- Commissioned Dying Well insight work to inform improvements in end of life care and the delivery of the Getting to Outstanding Framework in BwD.

A BwD partnership communications and engagement task group was also established, initially with a view to undertaking engagement with members of the public on key winter messages and supporting partnership wide communications throughout the period. This group has representatives from ICB, BwDBC, VCFSE, Healthwatch and ELHT currently and has recently agreed to take on a more substantive role of coordinating all engagement and involvement on behalf of the PBP going forward. Initial conversations have also commenced as to whether this group could act as a “critical friend” in ensuring the PBP takes action on insight generated. Future proposals on this will be brought back to the PBP in due course.

In order to help the PBP further shape its ambitions, an engagement and co-production working group was established to look at current work and good practice taking place across the PBP, with a particular focus on the ICB and local authority (due to CQC requirements). This working group presented key reflections to the PBP Board in January and as a result the following approaches have been agreed:

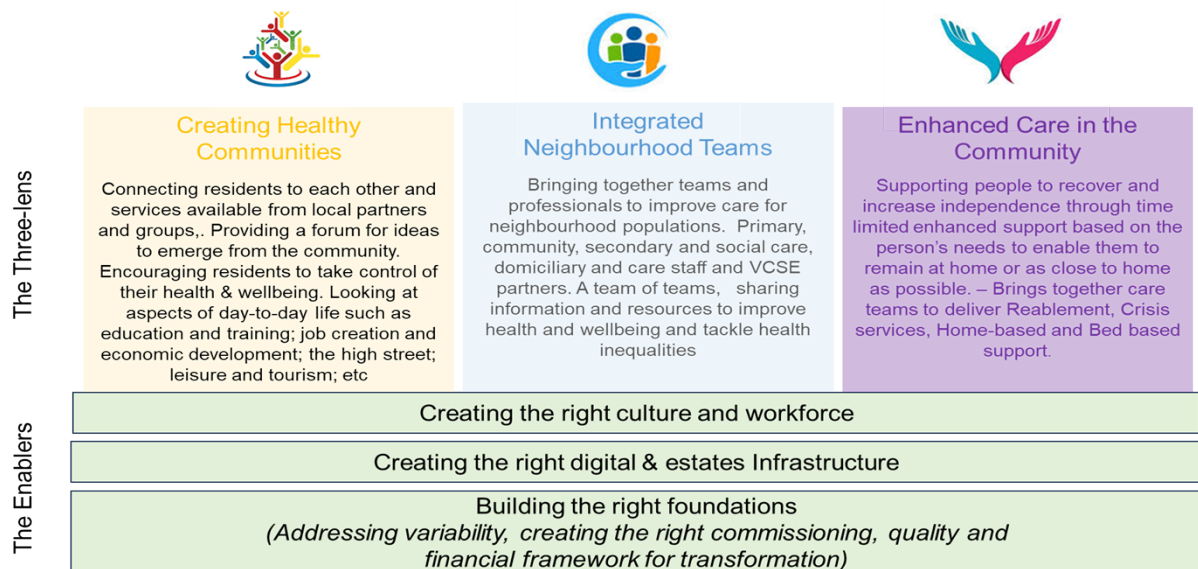
- Commitment to identifying 1 or 2 new programmes of ICB Place / PBP work (e.g Community Services transformation), where a collaborative approach to co-production could be tested;
- Establish a mechanism for capturing and monitoring how pieces of insight work are actioned by the PBP;
- Task the PBP Insight, Communication and Engagement Group with co-ordinating approaches across all organisations;

- Explore whether any resources/capacity could be dedicated to support PBP and adult social care coproduction.

The PBP have also agreed to adapt the NW Coproduction Benchmarking toolkit to be relevant to health and care partnerships and subsequently complete the toolkit in order to drive an action plan to strengthen co-production.

Transforming community care

The PBP are also supporting the development of a Transforming Community Care programme for Lancashire and South Cumbria, which aims to deliver the ICB's ambition to have world class, community-based health and care provision. The structure of the programme is outlined below and work is underway to consider what plans need to be delivered in BwD in order to achieve these ambitions, including how the emerging transformation programme currently aligns with our own Health and Wellbeing Strategy and target operating model of adult health and care service delivery. The Health and Wellbeing Board will continue to be updated on this programme as it progresses.



Coordinating operational delivery

Other key pieces of work the PBP have been coordinating includes:

- Working to ensure mental health teams are embedded in neighbourhoods during 2024-25;
- Driving the delivery of the wider community mental health transformation programme, including working with ICB and local authority commissioning leads to ensure any commissioned services are relevant to the population need of BwD;
- Overseeing development of proposals to transfer adult physical community health services from LSCFT to ELHT, in order to reduce variation in service provision between Blackburn with Darwen and East Lancashire; provide a more resilient service offer and improve patient outcomes by reducing fragmentation across community, urgent care and secondary care support;
- Joined up approach to winter planning with acute colleagues;
- Focus on frailty including planning to roll out frailty identification training across primary care and neighbourhood teams;
- Targeted communications messages using population health insights;
- Working to deliver reconfigured operating model for Albion Mill intermediate care facility, with ambitions to have 35 beds fully operational by September 2024.

Life course developments

Our life course developments align well to both the BwD Health and Wellbeing Board and Lancashire and South Cumbria Integrated Care Partnership strategies. A focus to date has been on the following activities:

- **Start Well** – Continued work with Family Hubs including delivery of vaccinations and immunisations, Emotional and mental health and wellbeing. Preparation for SEND review, strong partnership working was recognised in 2019 which has continued to develop.
- **Live/Work Well** – Supporting the development of the BwD Mental Wellbeing, Mental Health, Suicide and Self-Harm Strategy 2024 – 2029 and the BwD Learning Disability and Autism Big Plan
- **Age Well** – Positive Ageing Framework, endorsed by the Place-based Partnership Board. Members of the PBP workforce group are undertaking a self-assessment with the ambition of as many health and care organisations as possible signing up to the Age Friendly Employer Pledge
- **Dying Well** – ‘Getting to Outstanding’ in end-of-life care continued work to develop an action plan

Review of joint commissioning arrangements for Blackburn with Darwen

At their meeting in December the Health and Wellbeing Board receive an update in regards to an intention to review existing joint commissioning arrangements, their membership and purpose, in order to ensure they are fit for purpose with appropriate ICB membership confirmed. Whilst this work has commenced, and relevant ICB commissioning leads are now invited into the group to discuss relevant items of business, the review and proposals for refresh have not yet been finalised. Work is currently underway, with relevant leadership from BwDBC and the BwD place team in order to:

- Refresh the scope of the work-programmes overseen by the Joint Commissioning and Recommendations Group – aligned to the key priorities of BwDBC and ICB
- Ensure accountabilities and reporting arrangements are understood and documented, particularly in relation to influencing commissioning decisions of the ICB
- Consider key opportunities for joint commissioning over the next 12-24 months
- Recommend a membership that is relevant to ensuring the deliver of the agreed scope and accountabilities

Proposals regarding this refresh will be brought back to the Health and Wellbeing Board in due course.

Lancashire and South Cumbria Integrated Care Board Update – Financial recovery

The ICB inherited a complex mix of legacy issues from the 8 CCGs, as well as being formed during a difficult operational period. Different arrangements within the CCGs have led to too many different services being delivered in too many places, with different staffing and funding models. This has been further compounded by higher than anticipated inflation, industrial action and loss of COVID funding.

As at the 30 November 2023 (month 8), the Integrated Care Board (ICB) is reporting a system deficit of £172m which is £82m worse than plan. This represents a current deficit of £122m for the Provider Trusts with the ICB reporting a year-to-date deficit of £50m. The month 8 deficit position is being driven by in-year cost pressures and undelivered savings schemes for Provider Trusts and the ICB. The system is still forecasting to deliver a full year £80.0m deficit in line with plan, however it is unlikely this will now be achievable given the level of cost pressures in the system. The current trajectory would suggest a year end deficit position nearer £258m deficit but a reassessment of the plan in November has submitted a

reviewed deficit target of £198m. This requires several actions to enable the system to meet this revised plan and address the £60m risk.

A formal recovery and transformation board has been developed with dedicated governance involving providers, the ICB and local government. This will fulfil three distinct roles:

- An “organisational oversight and assurance role”: under the transitional arrangements from NHSE to ICBs (with the Recovery and Transformation Board providing assurance to the ICB Board), assuring the ICB Board of organisation-level progress on financial, performance and quality metrics, including progress along each organisation’s trajectory to CQC “Good”, and including to spot and prevent potential deterioration. This will be routinely reported on separately to main body of Recovery and Transformation Programme.
- A regular “system-wide transformation workstream oversight role”, for a small number of workstreams, holding workstream leads and associated stakeholders to account for high quality, timely delivery of agreed plans.
- A role in reviewing, on a bi-annual basis, the portfolio of system-wide transformation workstreams. The System Recovery and Transformation Board, supported by its Programme Management Office, will have a role in ensuring coherence between the objectives of system-wide transformation workstreams. The Board’s role will include ensuring that the highest priority system-wide transformations are scoped, governed and resourced effectively.

Controls and measures have been put in place across the system for the ICB and NHS Trusts to make recurrent and non-recurrent savings whilst attempting to maintain patient safety. Priority programmes have been identified to develop new models of health and social care and a number of these are underway, including -

- New place arrangements
- Integration deal agreed and being implemented
- Transformation programme underway
- Big expansion of virtual wards
- Continuing health care change underway
- Changes to community health in Blackburn with Darwen and Central Lancashire

Within these, there are a number of opportunities to further improve efficiency and effectiveness including shared services, clinical reconfiguration and better primary and social care to keep people out of hospital. Ultimately, this will support the move from an acute to a community centric health and care system and support the mitigation of the financial risk.

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.

6. POLICY IMPLICATIONS

Driving integration, the key remit of the Place-based Partnerships an ambition which aligns with the key statutory functions of the Health and Wellbeing Board as well as setting the strategic direction to improve health and wellbeing (Department of Health and Social Care (2022) Health and Wellbeing Boards – Guidance. Available at: Health and wellbeing boards – guidance - GOV.UK (www.gov.uk)).

7. FINANCIAL IMPLICATIONS

There are no financial implications resulting from this report. The financial matters of the ICB that are referenced within this report are subject to relevant management within their own organisation.

8. LEGAL IMPLICATIONS

There are no legal implications resulting from this report.

9. RESOURCE IMPLICATIONS

There are no resource implications resulting from this report.

10. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below.

Option 1 Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision.

Option 3 In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision.

11. CONSULTATIONS

Members of the Health and Wellbeing Board have been engaged as part of the Place-based Partnership development, particularly through their own development sessions in February and June. An update on health and care integration was also presented to BwD Health Oversight Scrutiny Committee in August and in February.

VERSION: 0.1

CONTACT OFFICER:

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DATE:	20.02.2024
BACKGROUND PAPER:	

