

## **NHS Lancashire and South Cumbria Integrated Care Board**

### **Update to health overview and scrutiny committees – May 2024**

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#### **1. Introduction**

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 Clinical Commissioning Groups (CCGs) in Lancashire and South Cumbria, 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.

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, Lancashire and South Cumbria local authorities are statutory members of this partnership, as are other NHS organisations, businesses, education, Healthwatch and voluntary, community, faith and social enterprise (VCFSE) organisations.

The ICP strategy identifies the following priority areas:

- **Starting Well:** Give our children the best start in life, supporting them and their families with problems that affect their health and wellbeing, and getting them ready to start school.
- **Living Well:** Reduce ill health and tackle inequalities across mental and physical health for people of all ages by understanding the cause of these unfair differences.
- **Working Well:** Increase ambition, aspiration and employment, with businesses supporting a healthy and stable workforce and employing people who live in the local area.
- **Ageing Well:** Support people to stay well in their own homes, with connections to their communities and more joined-up care.
- **Dying Well:** Encourage all our residents to feel comfortable in talking about planning for dying, and to be well-supported when a loved one dies.

This update provides an overview of the continued development of the NHS Lancashire and South Cumbria Integrated Care Board, including recent updates on primary care, mental health, system recovery and transformation, New Hospitals Programme and clinical reconfiguration.

## **2. Transfer of physical and mental health services in Blackburn with Darwen and East Lancashire**

One of the ICB's aims is to ensure consistency of services across Lancashire and South Cumbria, and for everyone to experience the same high-quality care, regardless of where they live.

With that in mind, over the past year, the ICB, together with colleagues at Lancashire and South Cumbria NHS Foundation Trust (LSCft) and East Lancashire Hospitals NHS Trust (ELHT) have been looking at how, and by whom, adult community physical health services and children and young people's mental health services are delivered in Blackburn with Darwen and East Lancashire.

It is clear from this work that these services are provided by hard-working and experienced colleagues who are committed to delivering excellent care, but that the current model is disjointed and could work better for our patients and their families.

- In Blackburn with Darwen, most of the service provision for adult community physical health services currently sits with LSCft, with other elements provided by ELHT.
- For children and young people's mental health services (often referred to as CAMHS), some elements are provided by ELHT and others by LSCft, across both Blackburn with Darwen and East Lancashire.
- This leads to differing levels of service provision for our residents, as well as a lack of resilience for the teams delivering those services.

As such, the three organisations proposed the following:

- The transfer of NHS adult community physical health services in Blackburn with Darwen from LSCft to ELHT – including the transfer of existing colleagues.
- The transfer of children and young people's mental health services in Blackburn with Darwen and East Lancashire, known as ELCAS (East Lancashire Child and Adolescent Services), from ELHT to LSCft – including the transfer of existing colleagues.

A robust due diligence process has been undertaken and a business case developed to support both transfers. In April, the business case received formal approval by the Boards of all three organisations. Formal TUPE and mobilisation plans are now underway, the ambition is for both transfers to take place on 1 July 2024.

### **3. New children's mental health contracts**

The ICB has awarded new contracts to four providers to deliver children and young people's mental health and emotional wellbeing services. In September 2023, the ICB invited providers to bid for the following contracts as part of a competitive tender process:

1. THRIVE getting help, therapeutic one-to-one and counselling support
2. Peer support
3. Parenting support
4. ADHD support
5. Digital support

There were 20 contracts in total which providers could bid for. The first three services had six contracts each, covering Blackpool, Blackburn with Darwen, South Cumbria, Lancashire East, Lancashire Central and Lancashire North. Meanwhile, the

ADHD and digital support services were both a single contract covering the whole of Lancashire and South Cumbria.

Following a robust evaluation and moderating process, the successful providers were:

- Barnardo's
- Spring North
- ADHD North West
- Kooth

It should be noted the digital support offer has been commissioned jointly by the ICB, Blackburn with Darwen Borough Council, Blackpool Council, Lancashire County Council and Westmorland and Furness Council.

Find out more: [Healthy Young Minds: Mental health and emotional wellbeing services](#)

#### **4. Specialised commissioning: 59 specialised services delegated to ICB from 1 April**

On 1 April 2024, 59 specialised services were delegated to Lancashire and South Cumbria ICB from NHS England (NHSE).

Specialised services support people with a range of rare and complex conditions. They often involve treatments provided to patients with rare cancers, genetic disorders or complex medical or surgical conditions.

Specialised services are not available in every local hospital because they have to be delivered by specialist teams of doctors, nurses and other health professionals who have the necessary skills and experience.

Before 1 April, all 177 specialised services were planned nationally and regionally by NHSE. Now, the responsibility for a third of those services has been transferred to Lancashire and South Cumbria ICB.

The main reason for moving to ICB-led commissioning is to improve patient health and care, by supporting joined up care, and providing the opportunity to focus on population management, improving the quality of service, tackling health inequalities and ensuring best value.

This is part of the long-term plan to giving integrated care systems (in our case Lancashire and South Cumbria) responsibility for managing local population health needs, tackling inequalities and addressing fragmented pathways of care.

You can find out more about specialised services and see the full list of specialised services that Lancashire and South Cumbria is now responsible for: [LSC Integrated Care Board: Specialised services.](#)

## **5. Primary Care**

### **Improving access to community pharmacy programme**

The objective of the programme is to improve access and uptake of community pharmacy services. The advanced services included in the programme are the following:

- Pharmacy First
- Hypertension case finding
- Oral contraceptive service

Within the programme the following approaches have been developed to ensure delivery of the objectives:

- ICB support offer for both community pharmacies and GP practices.
- Communications and engagement plan
- Use the available data to drive change

Key stakeholders are involved in the programme, including the Local Professional Network Chair, Local Pharmaceutical Committee, ICB place representatives and population health colleagues.

### **So far**

The Pharmacy First service has been successfully implemented across the ICB, providing better access to community pharmacy services for the population and reducing GP and emergency care appointments. The uptake in terms of GP referrals has been particularly positive in Preston and Blackburn with Darwen.

### **Next steps**

- Work with place colleagues to encourage those GP practices who are not using the service to start to refer patients.
- Use the data to identify which conditions are being presented at the pharmacy to assist with general information sharing (comms) about those conditions.
- Move towards promoting both the hypertension case finding and oral contraception service ready to support winter pressures.

### **Dental access and oral health improvement programme**

At a local level, the ICB has recently approved a number of new initiatives and pilots across Lancashire and South Cumbria to deliver a dedicated Dental Access and Oral Health Improvement Programme to make improvements to dental access across Lancashire and South Cumbria.

The aim of the programme is to improve access to primary care dental services in the high street, alongside improving oral health by:

- Using objective measures to help prioritise which areas of Lancashire and South Cumbria are in most need to dental access and oral health support.
- Aiming to improve dental access and reduce oral health inequalities across Lancashire and South Cumbria.
- Taking advantage of a wider approach to integrate primary care services in neighbourhoods.

The new initiatives that will be implemented over the coming months will:

- Continue to secure access to urgent dental care for those in immediate need of support, such as dental pain.
- Target routine care for the most vulnerable patients who require a check up and any follow up care to make sure they are orally fit.
- Promote oral health improvement measures aimed at supporting the population to maintain good oral health

As a result of local and national initiatives we are seeing an increase in dental access for our local population.

As always should any patient have an urgent care need the local dental helpline 0300 1234 010, (charged at local rate) can provide advice, support and an appointment where this is required.

Please note, a more detailed update on the Dental Access and Oral Health Improvement Programme can be found in appendix 1.

## **6. Urgent and emergency care draft strategy**

The first draft of a new urgent and emergency (UEC) care strategy for Lancashire and South Cumbria Integrated Care System has been shared for feedback.

Emergency care involves life-threatening illnesses or accidents which require immediate treatment from the ambulance service and an emergency department (A&E).

Urgent care involves any non-life-threatening illness or injury needing urgent attention which might be dealt with by phone consultation through the NHS111 Clinical Assessment Service, pharmacy advice, out-of-hours GP appointments, and/or referral to an urgent treatment centre.

The purpose of this strategy is to guide how we transform our UEC services over the next five years to enable people to easily access the right care and support which meets their needs. It describes our challenges and the opportunities for the future; it sets out our vision and priorities. Core to this strategy are:

- Expanding and transforming services in the community to help people stay well and deliver urgent care closer to home.
- Eliminating unfair and unwarranted variation between what services are available and how they operate in different parts of Lancashire and South Cumbria.
- Making sure that services have the right capacity to meet the needs of our population and support our New Hospitals Programme.
- Future-proofing our services so they are safe, resilient and affordable in the long term and provide high quality care with the best health outcomes for our population.

This first draft of the strategy has been developed through with system partners, engagement with patients, as well as national strategy, targets and guidance.

Read the draft strategy: [DRAFT\\_UEC\\_strategy\\_2024\\_updated.pdf](#)

Provide feedback on the draft strategy: [Lancashire and South Cumbria Integrated Care System Urgent and Emergency Care Five Year Strategy](#)

## **7. Lancashire and South Cumbria Secure Data Environment**

NHS data has immense value beyond the direct care of patients. It accelerates the discovery of new treatments by supporting research by academia and industry and helps the NHS to plan better and more effective services. When data is used beyond the direct care of patients it needs stricter controls and conditions, which is why the Department of Health and Social Care is committed to moving towards 'Data Access as Default'. This transition will be supported by the investment in Secure Data Environments (SDE) across England.

The use of Secure Data Environments represents a strategic move away from a model of sharing NHS data to one that is based on access. The approach is endorsed by a wide range of experts, including being recommended by the [Goldacre Review](#) (an independent review: Better, broader, safer: using health data for research and analysis) into how the efficient and safe use of health data for research and analysis can benefit patients and the healthcare sector.

The Lancashire and South Cumbria Secure Data Environment will enhance healthcare for local people through secure access to high-quality healthcare data, eliminating the need to share data externally and thus enhancing data confidentiality and security. The platform supports healthcare improvements by integrating data from various NHS sources, and is crucial for developing a more efficient, sustainable healthcare system in the region.

The initiative is part of a broader collaboration across the North West with Cheshire and Merseyside and Greater Manchester and is part of a national network of SDEs who received a £200 million investment aimed at delivering goals in the UK's "Life Sciences Vision" and "Data Saves Lives" strategies. The Data Saves Lives strategy includes a commitment to national public engagement on the use of health data. We will be mirroring this engagement locally to make sure people are fully informed on the benefits of allowing their health data be part of the SDE, the security and confidentiality measures in place, as well as clear information on how to opt out of the programme.

## **8. ICB performance and recovery and transformation update**

### **ICB performance**

The following summary of key performance metrics has been taken from the [performance report for the board](#) meeting on 15 May.

**Elective Recovery** (the approach of increasing the volume of elective, or planned, consultations and procedures to tackle the backlog of waiting times) – Growth in the overall number of patients waiting appears to have slowed and plateaued although the number of patients waiting remains high (243,913). 65+ week waiters are reducing although the ICB position is above its original planning trajectory. Independent Sector and NHS out of area providers account for over 20% of our long (65+ week) waiters.

Lancashire and South Cumbria ICB is performing well above average for day-case procedure rates (British Association of Daycase Surgery [BADS] specific



procedures) and for capped theatre utilisation rates when compared to peer systems and national performance.

**Diagnostics** (tests or procedures used to identify a patient's disease or condition) – The performance in February 2024 has improved significantly over the previous month and now stands 74.9% for the 4 main providers and 75.9% for L&SC ICB. Performance is below North West and National performance. There is an increasing waiting list, which may put pressure on future performance.

**Cancer** – In February 2024, all four local providers met the faster diagnosis standard. In addition, Blackpool Teaching Hospital also met the 31-day first treatment, although no providers met the 62-day to first treatment standard. The number of patients waiting over 62-days for cancer treatment reduced in March and remained ahead of trajectory (358 actual vs 514 plan).

**Urgent and Emergency Care (UEC, see descriptions in item 7)** – Performance against the 4hr target in March 2024 was 76.05%, which was an improvement on the previous month and resulted in L&SC ICB achieving the national 4hr target. L&SC ICB performed better than the North West and national average. The percentage of patients spending more than 12 hours in an emergency department deteriorated but remains better than the North West position.

**Mental Health** – The number of out of area bed placements continue to be well above plan. The dementia prevalence target continues to be met with L&SC ICB being above the national position, but now lower than the North West figure. The number of people receiving an health check on a Learning Disability (LD) register for L&SC ICB is below both the regional and national positions but is increasing in line with plan. The latest access figure for Talking Therapies shows that L&SC ICB has now moved out of the lowest quartile with significantly improved performance.

**Children and Young People** – The levels of smoking at time of delivery are higher than national levels and significantly above those levels in Blackpool. The population vaccine coverage (MMR) for children under 5 continues to be above both the regional and national figure. The elective recovery for children shows that the number over 65 weeks waiters is continuing to fall.

**Primary Care** (services that provide the first point of contact in the healthcare system, acting as the 'front door' of the NHS, including general practice, community pharmacy, dental, and optometry services) - In February 2024, general practice in L&SC delivered a volume of appointments in line with our planned expectations. The L&SC rate of general practice appointments per 10,000 population remains below the national average. The proportion of general practice appointments offered within 2 weeks and the proportion of same day appointments are in line with national averages though there are variations at sub-ICB level. General Practice Doctor

workforce FTE per 10,000 weighted patients remains well below regional and national averages.

A more detailed report of performance can be found in the Integrated Performance Report, published as part of the ICB Board meeting papers for 15 May 2024: [Item 8- Board Performance Report May 24 v3.pdf](#)

## **System recovery and transformation**

The System Recovery and Transformation Board met on 22 April to review proposals for the Lancashire and South Cumbria Integrated Care System's (ICS) recovery and transformation priorities.

This will provide improvements for 2024/25 and enable the system to make progress against the 2024/25 financial recovery plan and in future years. The plan focuses on:

1. Reducing waste and duplication
2. Improving quality
3. Transforming services to meet the needs of the people we serve.

A Recovery and Transformation Programme Board will commence in May, chaired by the ICB's chief finance officer, to oversee delivery plans and track progress through a number of key measures of performance.

This will build on the good progress in 23/24 establishing the foundations for some of the recovery and transformation projects and assurance framework, and provide more coherence between the ICB and Provider Collaborative Board, and between ICB and Trust savings plans, as we seek to deliver better use of resources while improving quality and outcomes at the same time.

You can read more in the system recovery and transformation update report, published as part of the ICB Board meeting papers for 15 May 2024: [Item 10- Recovery Transformation Programme v1.3.pdf](#)

You can find all the reports published for ICB board meetings here: [LSC Integrated Care Board: Meetings and papers](#).

## **9. Media interest**

Issues that have been of particular interest to local media outlets in the early months of the year include the LMC report, access to primary care services, the search for a

long-term provider for Withnell Health Centre, a national measles outbreak, and the continuation of NHS industrial action.

Further detail on each item can be found in appendix 2.

## 10. Latest place updates

A place-based partnership is a collaboration of planners and providers across health, local authority and the wider community, who take collective responsibility for improving the health and wellbeing of residents within a place. Most people's day to day care and support needs will be met within a place and delivered in neighbourhoods.

In Lancashire and South Cumbria, we have four place-based partnerships. Each of our four places shares a regular newsletter update.

- Blackpool – [read the latest update](#) / [sign up to the updates](#)
- Blackburn with Darwen – [read the latest update](#) / [sign up to the updates](#)
- Lancashire – [read the latest update](#) / [sign up to the updates](#)
- South Cumbria – [read the latest update](#) / [sign up to the updates](#)

## 11. Other news from Lancashire and South Cumbria ICB

[More than 210,000 people have benefited from health tests at Community Diagnostic Centres in Lancashire and South Cumbria](#)

[Women and families in parts of Lancashire and South Cumbria can now seek the support of a maternity and neonatal independent senior advocate](#)

[Changes to community pharmacy mean that patients in Lancashire and South Cumbria are now able to get treatment for seven common conditions at their high street pharmacy](#)

[Measles, mumps, and rubella \(MMR\) vaccines are available for children in a number of local community pharmacies as part of a regional initiative](#)