

Lancashire Health Overview and Scrutiny Committee 19th September 2017

Healthier Lancashire and South Cumbria



2 Delivering change across Lancashire and South Cumbria

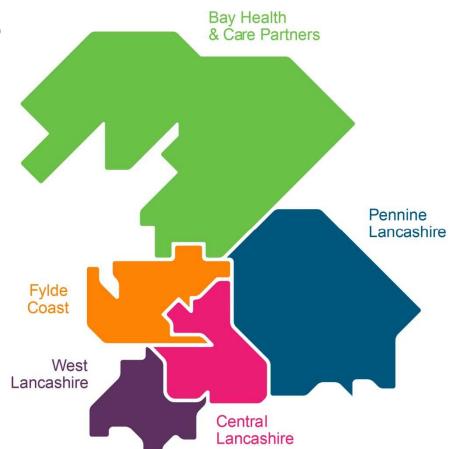
Five Local Delivery Partnership areas

One Sustainability and Transformation Partnership called **Healthier Lancashire & South Cumbria**

Three major gaps:

- Health and Wellbeing
- Care and Quality
- Finance and Efficiency

Eight priority workstreams

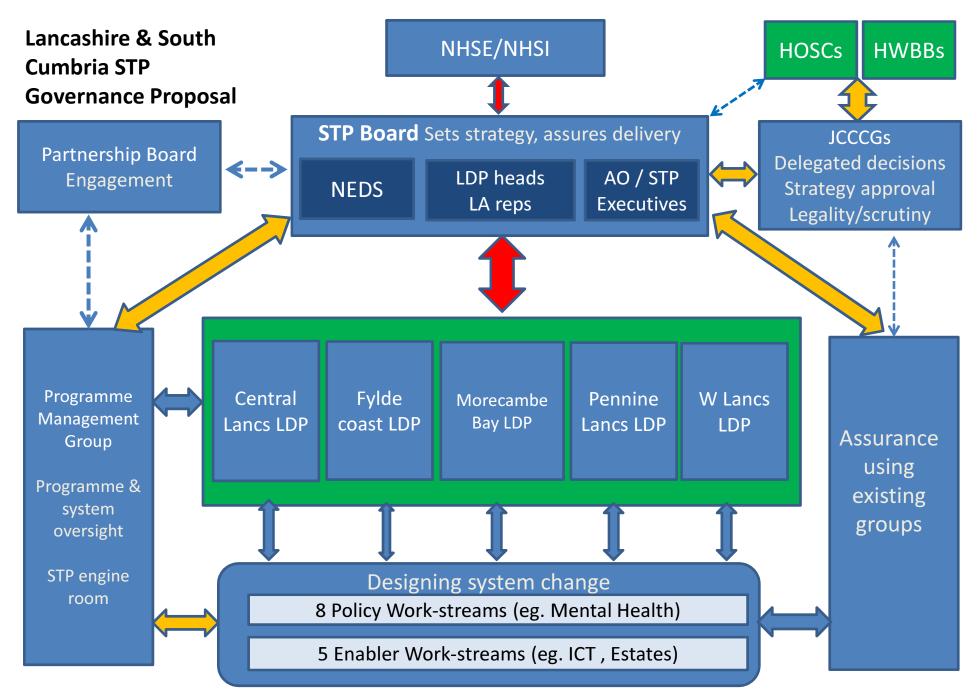




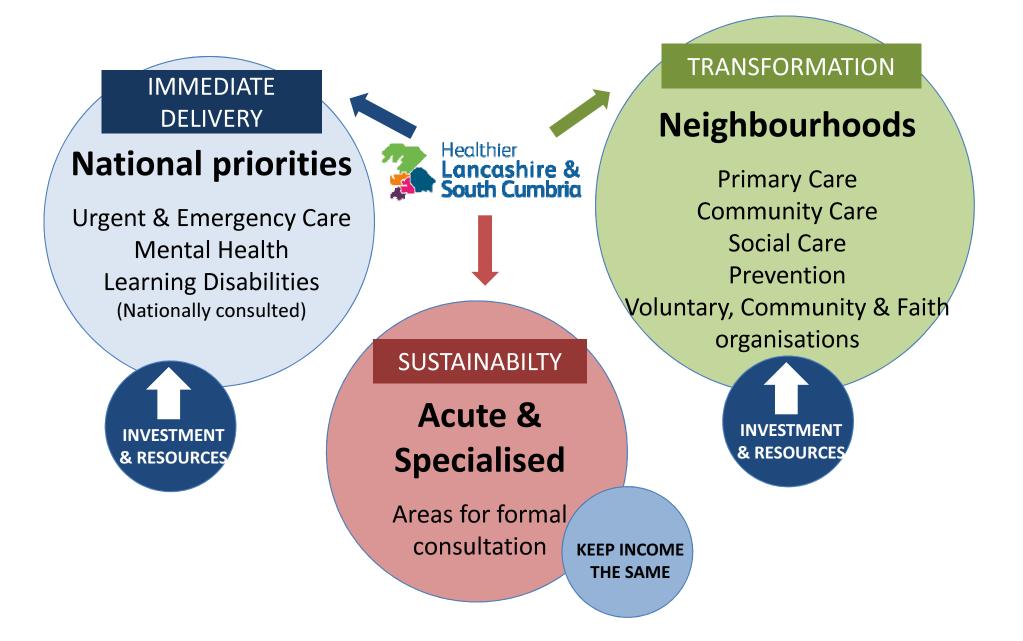
In July, NHS England compared STPs nationally:

- Lancashire and South Cumbria identified as 'Advanced'
- Demonstrates the strength of the collective efforts of organisations in the region to maintain and improve performance
- Strong platform to build on





Whole system focused on sustainability; transformation; design of future state



6 Finances





5. If we do nothing and carry on providing services as we are by 2020/21 there will be:



6. What do we need to do?

Change the way we provide primary, community and mental health services with extra resources reduce growing demand in hospitals Areas of extra spending

Primary Care

Continuing healthcare

Community services







7. Use the NHS RightCare approach reduce the growth in elective activity by £53m over the next three years with an early emphasis on interventions of limited clinical value and other elective changes

The RightCare approach makes sure that the right person has the right care, in the right place, at the right time, making the best use of available resources. Find out more at england.nhs.uk/rightcare



saving

£23m

on prescribing



8. Use the NHS RightCare approach to reduce the growth in prescribing over the next two years by £23m in savings.

The RightCare approach makes sure that the right person has the right care, in the right place, at the right time, making the best use of available resources. Find out more at england.nhs.uk/rightcare 9. Delivery £176m of efficiency savings Deliver £176m efficiency savings within NHS providers. Identified through the national methodology developed by Lord Carter which has prioritised savings in areas like surgical supplies and drugs, as well as reductions in the use of agency staff and staff sickness levels.

DWERGENCY

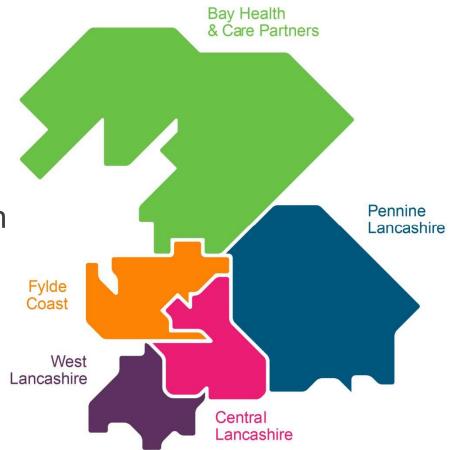
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10. Keep income for acute services the same for two years.

Most involvement with the public will take place at local level

Involvement with Councillors, Voluntary, Community and Faith Sector, wider partners are a priority for STP team

Strong emphasis on developing the Communications and Engagement network, involving current workforce, raising standards



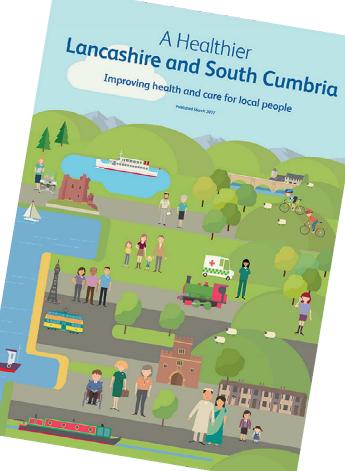


We worked with public, workforce and Councillors to develop a plain English guide to support conversations with local people.

Local people will be involved through the Local Delivery Partnerships.

There will be targeted public and patient engagement taking place as the programme develops.

Information available online at www.healthierlsc.co.uk Follow on Twitter @HealthierLSC





Understanding change in the NHS public events with local Healthwatch – public Q&As:

- 26th September in Blackpool
- 25th October in Kendal

Drop in sessions ahead of Joint Committee of CCGs:

• Thursday 2nd November – 11am - 1pm (venue TBC)

Involving community, voluntary, faith sector, education wider partner organisation in priority areas events:

- 15th November at Turf Moor, Burnley Digital Health
- 8th December in Barrow (details to be confirmed)
- 9th January in Carnforth (details to be confirmed)
- 30th January in Fylde Coast (details to be confirmed)



- How much will be cut from national funding from the prevention and public health grant across the STP footprint by 2021?
- How is the STP trying to readdress this to ensure increase in prevention spend? Are they going to restore this funding locally?
- How do you balance books as well as integrate healthcare, especially looking at adult social care and acute discharge?

- What work is happening on unnecessary bed occupancy rate?
- Can Morecambe Bay CCG tell us about the capped expenditure programme? e.g. what it is, what the implications are for care, whether this may be used in other areas.
- What is the current situation with A&E performance in Lancashire?
- What is the current situation with elective care waiting times in Lancashire? Are they worsening or improving?