**Report to the Cabinet**
Meeting to be held on Thursday, 4 May 2023

**Report of the Executive Director of Adult Services and Health & Wellbeing**

| Part I |
| --- |

| Electoral Division affected: None; |
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| **Corporate Priorities:** Caring for the vulnerable; |
| --- |

**The Lancashire and South Cumbria Integrated Care Partnership and Integrated Care Strategy**
(Appendices 'A' - 'C' refer)

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**Brief Summary**

The Integrated Care Partnership is a statutory partnership established by the Lancashire and South Cumbria Integrated Care Board and the upper tier local authorities in the area. Cabinet is asked to approve the revised Terms of Reference for the Board and endorse the Integrated Care Strategy, approved by the Partnership in April 2023.

**Recommendation**

Cabinet is asked to:

(i) Approve the revised Terms of Reference for the Lancashire and South Cumbria Integrated Care Board, as set out at Appendix 'A'.

(ii) Endorse and support the Lancashire and South Cumbria Integrated Care Strategy, as set out at Appendices 'B' and 'C'.

**Detail**

At its meeting in July 2022, Cabinet considered the development of the Lancashire and South Cumbria Integrated Care Partnership and approved draft Terms of Reference for the body.

The Integrated Care Partnership is a statutory partnership established by the Integrated Care Board and the upper tier local authorities in the area. It is a broad alliance of organisations and representatives concerned with improving the care, health and wellbeing of the population, and forms an essential part of the health and care system in the Lancashire and South Cumbria area.

The Integrated Care Partnership has the responsibility of developing and agreeing an Integrated Care Strategy for the area. Developing this strategy has been the focus of the work of the partnership to date.

Alongside developing the Strategy, the Partnership has also sought to clarify and refine its own approach and ways of working. This has resulted in the original draft Terms of Reference being reviewed and refreshed. The new Terms of Reference are presented at Appendix 'A' and were considered and recommended for adoption at the meeting of the Partnership on 17 April 2023.

The Strategy itself was approved by the Partnership at the same meeting and is now presented to Cabinet for endorsement.

**Terms of Reference**

The Key elements of the Terms of Reference are:

- There will be at least four meetings of the Integrated Care Partnership per year. Additional meetings may be arranged if necessary.
- All meetings will be held in public at venues around the Lancashire and South Cumbria area.
- The Chair of the partnership will be drawn from the Upper Tier Local Authority representatives. Initially this will be the Lancashire County Council. Representative, who will serve until May 2024, and this will then rotate through the other councils, changing in May of each year.
- The Deputy Chair will be drawn from the Voluntary, Community, Faith and Social Enterprise sector, again on a rotational basis changing in May each year.
- Membership is otherwise as set out in the Appendix.
- The Integrated Care Partnership will always seek to reach decisions by consensus. Where this is not possible, voting will be on a "one member one vote" basis, with a simple majority required on all matters.
- The Terms of Reference will be reviewed at least annually, or as required.
- Administrative support will be provided by Lancashire County Council until at least May 2024.

**Integrated Care Strategy**

The integrated care strategy has been in development since September 2022. Initial work focused on the agreement of key themes structured around a life course approach, with scoping work undertaken to identify a small number of priorities in each theme. This was followed by various iterations of a full strategy document during the period December 2022 to early March 2023 (ahead of the resident engagement), with key additions and updates during this period including:

- Overarching updates to language and increased use of infographics to improve readability for our residents.
- Inclusion of quotes from our residents on living and working in Lancashire and South Cumbria.
- Summary of the geography and demographics of our places.
- Updates to the vision and inclusion of proposed measures of success.
- Refreshed descriptions of our life course priorities and inclusion of case studies.
- Addition of a section on key underpinning themes, including our workforce; supporting unpaid carers; digital resources and use of information; our buildings; and our commitment to sustainability.
- Addition of a more user-friendly glossary.

Based upon the feedback from residents in March 2023 on the readability and understandability of the document, additional changes in late March/early April 2023 have included:

- Updates to the overall design and layout.
- Further simplification of language used throughout the document where possible.
- Re-ordering of sections to improve the flow.
- Clearly describing the audience for the strategy, linking to the short summary for a wider audience.

This full strategy document will be available to residents. However, it is envisaged that this document will be of greater relevance to partner sectors / organisations within the integrated care system and to our places as they consider alignment of other strategies and development of implementation plans.

The full integrated care strategy is provided as Appendix 'C'.

**A short summary of the integrated care strategy**

In direct response to feedback from residents, a short summary has been produced. This aims to identify the key points from the integrated care strategy in simple language.

The short summary of the integrated care strategy is provided as Appendix 'B'.

**Additional formats**

In direct response to feedback from residents, the intention is to produce the following additional formats once the strategy has been formally agreed by the Partnership:

- Video format – a combination of animation and Integrated Care Partnership members talking to camera.
- Web-based format – the text from the strategy will be created on web pages which means that the 'Recite me' software can be used to support a variety of accessibility needs, including reading the text out loud, increasing the font size or

changing the colour/contrast, changing the language, and using a virtual magnifying glass.

Any other required formats will be available on request.

**Specific response to recommendations from the resident engagement findings**
The table below sets out the response to the recommendations that were made for consideration in the creation of the final strategy document:

| Recommendation | Response |
|---|---|
| Produce a shorter, simpler summary version | Short summary version produced for agreement (see above) |
| Move the glossary to front or make it clear where it is | Glossary has remained at the end of the document to maintain the overall flow when reading. However, there is increased signposting to the glossary and key terms are underlined to indicate their inclusion in the glossary. |
| Include a clear diagram of The Integrated Care Partnership and other organisations | This has not been included as it was felt that it would be too complex. Any references to individual organisations have been removed and instead the document mentions system, places and neighbourhoods. |
| Ensure alternative versions available (large print, other languages, braille) | Once the strategy has been formally agreed by the Partnership, additional formats will be produced |
| Create a video | |
| Produce a printable version | |
| Provide each priority lead with feedback which relates to the content of the priorities rather than whether the strategy is easy to understand | Comments to be considered in the next phase of work linked to implementation plans. |
| Create a short, resident facing document for each priority that explains the actions that we are taking to deliver the strategy content | To be developed as part of the next phase of work linked to implementation plans. |

**Implementation plans**

Following agreement of the integrated care strategy, it will be important to create implementation plans for each theme and indicators of success, identifying where delivery will take happen (for example through alliances/collaboratives that operate at system level or in our places and neighbourhoods), which groups will oversee progress, and how this progress will be reviewed by the Partnership during 2023/24 and beyond.

This work will take place during quarter one of 2023/24.

**Next Steps**

In January this year, Cabinet agreed arrangements for the Executive Director for Adult Services and Health and Wellbeing to take up the role of Director of Health and Care integration.

The Director of Health and Care Integration has been hosting a series of workshops across Lancashire to agree the approach to delivering on the priorities of the Integrated Care Strategy and the most important actions for partners within Lancashire, including the county council.

Further reports will be brought to Cabinet as necessary, including a report on proposed arrangements for the delegation of functions from the Integrated Care Board.

**Appendices**

Appendices A, B and C are attached to this report. For clarification they are summarised below and referenced at relevant points within this report.

| Appendix | Title |
| --- | --- |
| Appendix 'A' | Terms of Reference for the Lancashire and South Cumbria Integrated Care Partnership |
| Appendix 'B' | The Lancashire and South Cumbria Integrated Care Strategy Summary |
| Appendix 'C' | The Lancashire and South Cumbria Integrated Care Strategy |

**Consultations**

Wide consultation has been undertaken by the Integrated Care Partnership in the development phase of the Strategy.

**Implications**:

This item has the following implications, as indicated:

**Risk management**

The county council is a statutory partner in the Integrated Care Partnership. The Partnership has a statutory responsibility to produce an Integrated Care Strategy.

**List of Background Papers**

Paper                          Date                          Contact/Tel

None

Reason for inclusion in Part II, if appropriate

N/A