

Report to the Cabinet

Meeting to be held on Thursday, 6 July 2023

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

Part I

Electoral Division affected:
(All Divisions);

Corporate Priorities:
Caring for the vulnerable;

Lancashire Place Integration Deal

(Appendices 'A' and 'B' refer)

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Brief Summary

This report is provided to Cabinet to update on the recent decision of the Integrated Care Board (which has responsibility for the budget and performance of the NHS in Lancashire and South Cumbria) to delegate responsibility for some NHS services to all four Places in the Lancashire and South Cumbria Integrated Care System including Lancashire Place. It provides information on the rationale and content of the delegation arrangements, including an outline of the phased approach, as well as the benefits and opportunities with further detail included in the attached appendices.

This is a significant decision for the Integrated Care Board, with implications for the county council, which will also be expected in the spirit of supporting deeper integration between health and care, to adopt a similar approach in order to achieve better outcomes and experiences for Lancashire residents as well as value for money.

There are no immediate consequences for, or actions required of the county council following the decision of the Integrated Care Board, although the county council needs to be alive to these developments due to the potential implications for future service delivery.

Recommendation

Cabinet is asked to:



- (i) Receive an update on the outcome of the decision made at the Integrated Care Board meeting on 5 July 2023.
- (ii) Welcome the delegation as the first step toward closer integration between health and care, recognising that further delegations from other partners will be expected, including from the county council, and that this will require further decisions from Cabinet including decisions in relation to governance.

Detail

Introduction

This report signals a new opportunity in the developing landscape of health and care integration, the Place Integration Deal (Appendix 'A' refers). This deal sets out the proposed delegation from the NHS to the four Places to manage and deliver improved outcomes as well as improve integrated performance and efficiency. In this instance, 'Place' refers to the four place-based partnerships within Lancashire and South Cumbria (Lancashire, Blackburn with Darwen, Blackpool and South Cumbria). A partnership to prepare for this delegation has already been put in place for Lancashire Place comprising representatives from the county council including the Cabinet and Lead Members for Health and Wellbeing, the Director of Health and Care Integration, a district council Chief Executive plus colleagues from the Integrated Care Board, Healthwatch, and the Voluntary and Care sectors.

This is the first stage of the Place Integration Deal, focusing on how the NHS, via the Integrated Care Board, will work with the Places. However, it lays the foundations for more formal arrangements for integrated working with local government which are expected to follow in a future stage. This will allow partners on the Lancashire Place Partnership to jointly determine how these resources are used to prioritise prevention, address inequalities in access and provision and strengthen high quality care and support in the community.

This delegation from the NHS will be from the Lancashire and South Cumbria Integrated Care Board (which includes the county council's Chief Executive as the representative of the local authorities), to the Director of Health and Care Integration. The Director is a joint employee of the Integrated Care Board and county council, in a dual role, which is intended to accelerate collaborative decision making and delivery.

Context - Lancashire Place

Following the commencement in post of the Director of Health and Care Integration for Lancashire, a core team has been working with partners to develop the Lancashire Place Partnership, commonly referred to as the Lancashire Place. This includes an Interim Lancashire Place Partnership which meets monthly, to oversee this development phase.

The Interim Lancashire Place Partnership has had oversight of the development of this delegation to Place and has advocated for a measured and considered approach.



It will be necessary for the Interim Lancashire Place Partnership to evolve to ensure that it can hold delegations from the Integrated Care Board and enact place-based decision-making. This will include formalising the governance arrangements, the links with the Lancashire Health and Wellbeing Board and the locality level arrangements (including district level Health and Wellbeing Partnerships). The existing governance is shown at Appendix 'B'.

Lancashire, as the largest of the four places, has split into the following three localities:

- East Lancashire
- Central and West Lancashire
- North Lancashire

There are three Integrated Place Leaders (one for each locality) supporting the Director of Health and Care Integration. Their role is to coordinate, plan and support delivery of agreed priorities at a more local (district) level. These local priorities have been informed by a series of workshops to draw on local intelligence and data as well as making sure that the priorities in the Integrated Care Strategy are delivered.

This collaborative work in localities is managed via district Health and Wellbeing Partnerships which it is hoped could be a critical vehicle for managing devolved funding and decisions. They will have accountability up to the Lancashire Place Partnership as part of the formalised governance arrangements.

The Place Integration Deal

Key to the Place Integration Deal is the principle that the majority of planning and delivery will happen at a more local level, with most day-to-day care for individuals and families being delivered in neighbourhoods. Delegation to Place, initially by the NHS, is designed to localise decisions about service provision and spend. This localised decision making should drive deeper integration of all age health and care to create a more joined up and responsive experience for the public that reflects their diverse needs. Although these changes relate to all ages, this first stage concerns adult social care with health.

All four Places are working together and focused on their state of readiness to ultimately receive delegated responsibility from the Integrated Care Board for Population Health, Primary Care, Community Services, Continuing Health Care, Better Care Fund and services that support avoidance of hospital admission and effective hospital discharge.

The sequencing of delegations will vary between Places according to state of readiness and some will require further transformational work (e.g. Continuing Health Care) or financial rebalancing prior to delegation being accepted. Those functions/services that are fundamental to the delivery of key operational priorities for our places will happen first. Detail of the above is provided in Appendix 'A'. The design and implementation of the Place Integration Deal is likely to be a 2 - 3 year development journey. Readiness at each stage to accept delegations will be assessed by local partners within a Lancashire and South Cumbria system framework.



Good progress has already been made on accelerating developments between the Integrated Care Board and the county council, for example commissioning of care at home services, in advance of the delegation decision by the Integrated Care Board. This will help to stabilise the care market and exercise greater control over costs through a shared approach.

A phased approach is proposed by the Integrated Care Board to financial delegations, with accountability and responsibility managed through appropriate governance arrangements via the Directors of Health and Care Integration in the first instance, with the following to be implemented by April 2024:

- Better Care Fund
- Population Health

Consultations

In preparation for the Integrated Care Board decision on 5 July, the following consultations have taken place:

a. *Integrated Care Board and Lancashire upper tier council Chief Executives (ongoing)*

These have included the Directors of Health and Care Integration to consider the scope of the Place Integration Deal.

b. *Health and Adult Services Scrutiny Committee - 11 May 2023*

Director of Health and Care Integration attended to discuss the scope of the Place Integration Deal.

c. *Lancashire Chief Executives (including District Councils) - 8 June 2023*

The Director of Health and Social Care Integration (Lancashire) met with the Chief Executives of the Lancashire District Councils to discuss the Place Integration Deal and within that, the proposal for how Lancashire will work with the District Councils to operationally delivery improvements to health and wellbeing outcomes. There is a further workshop proposed for 13 July.

Implications:

This item has the following implications, as indicated:

Financial

The financial allocations made to Places will be driven by the agreed scope of our Places. NHS budgets will be identified that are most appropriate to be managed at Place level (or in neighbourhoods). Detailed work will be required to determine allocation methodologies, with various options for consideration including historic budgets (based on Clinical Commissioning Group footprints/spend), population size (resident/GP registered), or health inequality/deprivation adjusted.

In the first instance, this delegation from the NHS will be via the Lancashire and South Cumbria Integrated Care Board, to the Director of Health and Care Integration as a



joint employee of the Integrated Care Board and Lancashire County Council. They will utilise the Lancashire Place Board to discharge this duty with partners.

It is likely that the budgets that transfer will be already committed against contracts for service provision. In time, it is expected that these budgets and services can be reviewed alongside other services commissioned by other partners to drive greater efficiency, value for money and improved benefits for residents. This may be achieved through delegation from other partners into a pooled fund which will facilitate even more cohesive integrated decision making. The exact process will be developed over time including the necessity for the appropriate governance which will need to be agreed by the Integrated Care Board and county council.

This will allow all partners, including Lancashire County Council, to jointly maximise opportunities by enabling more cohesive, collective decision making regarding the shape of local services and integrated delivery to drive improvements in health and wellbeing outcomes and to best support our communities to thrive.

Risk Management

Within the Place Integration Deal presented to the Integrated Care Board, key risks have been identified, grouped into three themes:

- People – this aspect relates to the alignment or transfer of staff from centralised Integrated Care Board teams into Place-based teams and the need for the cultural shift required to operate differently from the former Clinical Commissioning Groups.
- Finance – the significant movement of budget and decision making into places requires decisions around allocations to places and place contribution to financial recovery and sustainability.
- Variation - The two-tier nature of Lancashire Place presents a set of circumstances that need to be worked through, so not all Places will follow the same transitional journey, but this cannot inadvertently introduce unwarranted variation in access or outcomes.

Detailed mitigation plans for all these aspects are in development.

Legal

As this report concerns the arrangements for the provision of health services that the Integrated Care Board intends to implement, there are no immediate implications for the county council.

The future shape of joint decision making and pooled budgets has not yet been agreed; and further work is required to develop appropriate governance arrangements. When these have been established, any resulting delegations would be subject to the usual legal mechanisms such as Section 75 or Section 256 agreements which set out the responsibility and liability of partners to that agreement.



Human Resources

Cabinet approval was given in January for the Executive Director for Adult Services, Health and Wellbeing to also undertake the role of Director of Health and Care Integration for Lancashire Place. Currently this is managed via a secondment agreement between the county council and Integrated Care Board. Additional resource in the form of a Deputy Executive Director of Adult Services, has been introduced in recognition of this change and to ensure there is no detriment to the county council's adult services directorate. This has been matched with 3 place leads, one for each of the East, Central and North Lancashire localities within Lancashire Place, to support the Director of Health and Care Integration and are NHS funded posts and employees.

Although other Integrated Care Board staff will be aligned to Lancashire Place working under the direction of the Director of Health and Care Integration they will remain within the employment of the NHS. Whilst it is understood that the council in time might delegate some services or functions to Lancashire Place which will require further Cabinet approval, it is unlikely that this will involve the transfer of staff between organisations.

List of Background Papers

Paper	Date	Contact/Tel
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None

Reason for inclusion in Part II, if appropriate

N/A

