

Report to the Cabinet

Meeting to be held on Thursday, 11 July 2024

Report of the Executive Director of Adult Services

Part I

Electoral Division affected:
(All Divisions);

Corporate Priorities:
Delivering better services;

Lancashire Place Plan

(Appendices 'A' - 'C' refer)

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Brief Summary

In January 2023, Cabinet approved a proposal for the county council's Executive Director of Adult Services to combine her county council role with that of Director of Health and Care Integration for Lancashire Place until December 2025. In early 2023 the Lancashire Place Partnership was established aligning Lancashire Place with the geography of Lancashire County Council. Being one of the two primary statutory partner organisations to the Lancashire Place, Cabinet should be made aware of the service plan and be assured in relation to the delivery against this.

Following a foundational year, the Lancashire Place is now in a position to deliver improvements for Lancashire residents. To this end, the Lancashire Place Plan has been drawn up in collaboration with colleagues from Lancashire County Council, Lancashire and South Cumbria Integrated Care Board, the Lancashire Health and Wellbeing Board and wider partners, to act as a service plan with associated targets for delivery. Data from the district level Health and Wellbeing Partnerships has been used to help frame and direct the priority areas of work and Delivery Boards and associated working groups established where necessary to ensure work on the priority areas is advanced. Lancashire Place will measure its progress against the identified metrics set out in the plan and will be looking to maintain or improve outcomes and services for Lancashire residents.



Recommendation

Cabinet is asked to:

- (i) Agree and support the implementation and delivery of the Lancashire Place Plan.
- (ii) Approve the governance established to oversee and drive delivery of that plan.

Detail

Foundational Year

In January 2023, Cabinet approved the proposal for the county council's Executive Director of Adult Services to combine her county council role with that of Director of Health and Care Integration for Lancashire Place. In early 2023 the Lancashire Place Partnership was established aligning the Lancashire Place with the geography of Lancashire County Council. Lancashire Place operates across three distinct locality areas of:

- North Lancashire, comprising the district council areas of Lancaster, Fylde and Wyre.
- Central Lancashire, comprising the district council areas of Preston, Chorley, South Ribble and West Lancashire.
- East Lancashire, comprising the district council areas of Burnley, Hyndburn, Pendle, Ribble Valley and Rossendale.

2023/24 acted as a foundational year for Lancashire Place, with governance and organisational arrangements developing following engagement with partners including the Health and Adult Services Scrutiny Committee and District Health and Wellbeing Partnerships. This culminated in the Cabinet Member for Health and Wellbeing assuming the role of Chair and the Chief Nurse from the Integrated Care Board serving as Deputy Chair of the Lancashire Place Partnership.

Lancashire Place Plan

This foundational year has put Lancashire Place in a strong position to begin to deliver changes for residents and at the beginning of 2024 it was decided by the Director of Health and Care Integration for Lancashire that a Place Plan would be drafted to outline the vision for the Lancashire Place, its priority delivery ambitions and associated targets for 2024/25 and the workstreams which will contribute to this delivery.

It was agreed that in setting priorities for Lancashire Place, the approach would be to use a data driven exercise with an aim of delivering practicable and measurable outcomes for Lancashire residents. To this end, work has continued with the ten Health and Wellbeing Partnerships to evaluate data from the districts and determine key priorities to progress, (Chorley and South Ribble holding a combined Partnership along with Fylde and Wyre). In conjunction with this approach, the Place Team has



engaged with relevant county council services to ensure alignment of the Lancashire Place Plan with directorate service plans where applicable.

The Place Team has also ensured connectivity with the county council and Integrated Care Board's corporate strategies as well as the Health and Wellbeing strategy and the Integrated Care Strategy which is overseen by the Lancashire and South Cumbria Integrated Care Partnership. There has been a concerted effort to distil the key priorities from these documents to make advancements in 2024/25 that are significant but not contingent upon financial delegated permissions which have been delayed due to the current system financial position.

It had been anticipated that formal financial delegations would be received by the Lancashire Place from both Lancashire County Council and the Integrated Care Board, this is not yet the case. The Lancashire Place Plan is also underpinned by extensive engagement including the views of people with lived experience and aims to address key concerns such as the number of people in the hospital system and waits for discharge.

In accordance with Lancashire County Council's Adult Social Care directorate, the vision of 'Living Better Lives in Lancashire' was adopted by the Lancashire Place and broken down into two constituent parts of:

i. Improving health and care services through integration – the Lancashire Model

There are potential benefits of working collaboratively with partners to deliver the Lancashire Model of care such as financial and process efficiencies driven through jointly commissioning of care support. This will help to stabilise the prices that are paid in the market and will provide more resilience to those who provide care by offering a rate which facilitates paying the living wage, thus allowing them to attract and retain staff.

Developing joint roles, joint appointments and single processes which are recognised by all staff, will create more efficient systems to help get residents into and out of services more quickly. It is initiatives like this that will be pursued as part of improving health and care services through integration work.

ii. Improving health and wellbeing outcomes through addressing inequity

It is recognised that there are distinct differences across Lancashire in terms of resident's health, and their general wellbeing. This includes differences from area to area (coastal, rural, urban) as well as in different population groups. Improving health and wellbeing outcomes across the board in Lancashire will be looked at, by delivering programmes of work focusing on prevention and reducing health inequalities.

Two groups reporting to the Lancashire Place Partnership have been established to drive delivery of the Place Plan and ensure progress is made and the partnership arrangements are included at Appendix 'C'. These will be chaired by the county



council's Deputy Executive Director of Adult Services and the Director of Public Health contributing their significant subject-matter expertise and knowledge of delivery. The priority areas of work within the Lancashire Place Plan have been clustered under three key themes of Enhanced Care in the Community, Integrated Working and Creating Healthy Communities which will all report into the two established groups.

Enhanced Care in the Community will support people to recover and increase their independence so they can remain at home or as close to home as possible. The workstream will focus upon:

- Developing a Lancashire model for short term support.
- Improving the management of the demand for care and support across Lancashire.
- Maximising the use of the Lancashire pound and ensuring greater value for money.
- Being able to identify frailty within our residents earlier to provide proactive intervention and prevent deterioration.
- Developing a vision for community health and care services and delivering this consistently across Lancashire.

The Lancashire and South Cumbria Integrated Care Board has prioritised urgent and emergency care recovery to eradicate corridor care across Lancashire and South Cumbria, which is a key priority for all four of their place based partnerships of Blackpool, Blackburn with Darwen, Lancashire and South Cumbria. Within Lancashire, the Enhanced Care in the Community element of the Place Plan will contribute in two key ways:

- i. Through effective discharge planning linking into services, for example, reablement and keeping the number of people who do not meet the criteria to reside at no more than a target outcome of 5% across hospital sites, over which performance levels currently vary between rates of 5% to 30% across hospital sites within the Lancashire Place.
- ii. Through continued roll out of the short-term care at home service which includes emergency support provision to avoid a step up into and a step-down from hospital.

Integrated Working will focus upon teams and services working together in an integrated way to improve health and wellbeing and tackle health inequalities. The workstream will focus upon:

- Developing and implementing a Lancashire model for integrated working.
- Agreeing principles for integrating as system partners.
- Defining functions that will be delivered through integrated working.
- Jointly commissioning solutions that embody integrated working.
- Linking effectively with the established district level Health and Wellbeing Partnerships.
- Working collaboratively with system partners to continue developing Integrated Neighbourhood Teams and better integrate mental and physical health.



Creating Healthy Communities will connect residents to each other and local support so they can take control of their own health and wellbeing. The workstream will focus upon:

- Delivering the agreed district level Health and Wellbeing Partnership priorities.
- Delivering ten district level Health and Wellbeing Partnership 5-10 year strategies.
- Delivering a pan-Lancashire Disabled Facilities Grant programme, based on local need to maximise efficiency of the programme.
- Improving and integrating leisure, health and activity offers by developing an agreed way of working between the NHS and local authorities.
- Creating a joint unit between Lancashire County Council's Public Health and the Integrated Care Board's Population Health teams focusing upon prevention and reducing health inequalities.

It is anticipated that in delivering this work programme across the 2024/25 financial year, residents of Lancashire will benefit from not only the tangible improvements to the associated outcome measures but also from improvements to integrated ways of working.

The above priority areas are depicted within a plan on a page at Appendix 'A'. This service plan synthesises the key priority areas across the three locality areas of North, Central and East Lancashire, the geographical areas across which the Lancashire Place operates. In practice, the plan will be delivered across the twelve district council footprints recognising that all 10 of the district level Health and Wellbeing Partnerships hold more detailed plans to enact delivery. The more detailed slides for the localities are set out within Appendix 'B' should members wish to delve further into the detail. Some aspects will be common across all for example, the ambition to create a consistent way of approaching integrated working with residents and standardising discharge arrangements. However, as the approach has been informed by the data analysis at the district level some elements will vary according to issues that are specific to that geography.

To illustrate this point, across the Health and Wellbeing Partnerships, Preston has prioritised homelessness as part of the work to create healthier communities whereas Wyre has selected frailty and Pendle are focussing upon families who are frequent attenders within Accident and Emergency departments in an attempt to understand the root cause of their issues. In Wyre earlier identification and proactive support is being given to older people who may have increased vulnerabilities. Actual targets and improvement trajectories are expected to be set in the next month.

In Preston, a multi-disciplinary team will be set up to develop robust referral pathways that recognise that people who are sleeping rough with multiple complex needs cannot always access health services via the mainstream route. This recognises the growing numbers of people who are sleeping rough in Preston, and that their health needs require services to be provided in a more joined up and cohesive way. The outcome measures associated with this work include increasing the numbers of rough sleepers accessing the appropriate health service by March 2025, seeing a reduction in their



emergency call outs or their attendance within Accident and Emergency departments and an increase in self-reported health outcomes.

The Lancashire Director of Health and Care Integration has prioritised working with the 12 district councils committing to working through their existing ten Health and Wellbeing Partnerships in recognition of the fact that they have a pivotal role in identifying and addressing the determinants of health. The Director also meets regularly with 6 nominated district council Chief Executives to drive forward work relating to housing and leisure, this group having now confirmed its request to be empowered to lead on the Creating Healthy Communities workstream, to be involved on co-designing Integrated Working and informed on the Enhanced Care in the Community workstream. There are already some tangible examples of better joined up working with district councils, for example the agreement by adult services to work through districts on reducing, delaying and preventing unnecessary referrals to adult social care by a managed investment programme with the Voluntary, Community, Faith and Social Enterprise sector managed on behalf of the council by the districts.

Assurance, Oversight and Governance

Lancashire Place operates in a complex partnership environment and is committed to providing assurance, transparency, and accountability over its activities.

As referenced above, the governance arrangements for the Lancashire Place were developed during the foundational year with representatives from Lancashire County Council, the Integrated Care Board, district councils, the voluntary sector, and wider partners sitting as members on the Lancashire Place Partnership. The Partnership meeting is chaired by the county council's Cabinet Member for Health and Wellbeing and is currently seeking an additional elected member from the district councils to increase democratic oversight. The Partnership will now meet quarterly with the Lancashire Health and Wellbeing Board to discuss matters of mutual interest which is a unique first step across the Lancashire and South Cumbria System.

Lancashire Place will continue to engage with Cabinet and the Integrated Care Board Executive team, seeking approval on significant activity and decision making such as the Place Plan and showcasing deliverables and key achievements. In addition to this, the Director for Health and Care Integration meets regularly with the Chief Executive Officers of both Lancashire County Council and the Integrated Care Board, to whom she is jointly accountable, to feedback upon the activities of Place. The Director of Health and Care Integration also meets regularly with all councillors involved in health meetings and weekly with the Cabinet Members for Adult Social Care, Health and Wellbeing and their Lead Member as part of regular briefings with updates on Lancashire Place being included. A Chairs Forum, involving Chairs from various partnerships across Lancashire, for example the Childrens Safeguarding Assurance Partnership, has also been established across the Lancashire Place where all Chairs come together to focus discussions on key challenges and how they can be resolved with a consistent approach across the Place.



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'	Lancashire Place Plan
Appendix 'B'	Locality Plans
Appendix 'C'	Partnership Arrangements

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Legal

In January 2023, Cabinet approved a proposal for the county council's Executive Director of Adult Services to combine her council role with that of the Director of Health and Care Integration for Lancashire Place, working jointly to the Council and Integrated Care Board. A secondment agreement, initially for three years documents this arrangement, between the county council and the Integrated Care Board and is overseen by the respective Chief Executives to whom the postholder is jointly accountable. Due to the nature of the combined role the postholder is a member of both the county council and Integrated Care Board executive teams and is supported in her statutory role with the council by the introduction of the Executive Deputy Director of Adult Services.

The recently constituted county council Compliance and Assurance Board, which the Executive Director of Adult Services/Director of Health and Care Integration attends, oversees the impact of the combined role and implications for the county council of collaborative recommendations between the two organisations to ensure full adherence to regulatory and financial frameworks. It is recognised that the joint nature of the role can lead to conflicts of interest arising and this was identified in a recent report by the councils' internal audit team. Therefore, the postholder has commissioned a partnership agreement for her role and Lancashire Place to mitigate risks of a conflict of interest and introduce a conflict resolution process. It is also envisaged that the partnership agreement and secondment agreement will need to be reviewed when formal financial delegations apply.

Financial

The combined role of Executive Director of Adult Services/Director of Health and Care Integration is helping to encourage integration between local authorities and health partners. This has extended to coordinated procurement to enable services and support to be bought at an agreed price which represents better value for money as well as support a resilient care market. Examples include the work currently underway



to jointly procure a Community Equipment Service (Cabinet and Integrated Care Board approved) and the adoption of a standardised approach to care fees to avoid unnecessary competition between the council and NHS which contributes to instability in the care market.

A pooled fund between the county council and NHS, namely the Better Care Fund, already exists. The county council and Integrated Care Board have been in discussion regarding the increased allocation from the NHS to social care via this fund, to support for example short-term care to accelerate hospital discharge or prevent hospital admission. It is the desired ambition of the Integrated Care Board to increase investment overtime in community health and care services and to capitalise on the potential of the pooled fund. This will be vital to creating the conditions in which financial delegation can safely and appropriately apply.

The Lancashire Place has been asked to support and deliver elements of the Financial Recovery and Transformation Programme within the Integrated Care Board. This is with the intention of restoring financial stability in order to allow for formal financial delegation to all four Places within the Lancashire and South Cumbria Health and Care System. Legal advice will be sought on the governance arrangements that will require documentation prior to financial decision making delegations.

Risk management

The approach to risk management across the Lancashire Place is currently developing and it is proposed to work with colleagues across the Integrated Care Board and Lancashire County Council to develop formal escalation mechanisms to both statutory partners. The risk register held by the Lancashire Place is reviewed quarterly by the Lancashire Pace Partnership and contains mitigating actions against each risk. The risks are fed into the corporate risk registers for both the county council and Integrated Care Board.

The elements of the Lancashire Plan, as outlined, work to tackle unwarranted variation across the system through integrated working with the county council and the Integrated Care Board and wider NHS partners. One of the primary risks held by the Lancashire Place at present is the capacity within the system to deliver the Lancashire Plan, but there is every effort being made to ensure the best use of available resource and to find, wherever possible, the use of partner resource to support delivery.

List of Background Papers

Paper	Date	Contact/Tel
None		
Reason for inclusion in Part II, if appropriate		
N/A		

