

## Integrated Care Board

<b>Date of meeting</b>	15 January 2025
<b>Title of paper</b>	Chief executive's board report
<b>Presented by</b>	Kevin Lavery, chief executive officer, Integrated Care Board
<b>Author</b>	Kirsty Hollis, Associate Director and Business Support to the Chief Executive
<b>Agenda item</b>	7
<b>Confidential</b>	No

### Executive summary

The purpose of this report is to acknowledge and thank our staff for their hard work of over the past twelve months despite the challenges of increased demand for health and care.

It brings to the Board's attention the programme of work and implications for our system following the formal notification from NHS England of their intention to place the Lancashire and South Cumbria health system into formal turnaround.

The report also describes the on-going work with our staff to build the organisation's culture and values and shares some good news from across the system.

### Recommendations

There are no recommendations within this report.

### Which Strategic Objective/s does the report relate to:

		Tick
SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓
SO2	To equalise opportunities and clinical outcomes across the area	✓
SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	✓
SO4	Meet financial targets and deliver improved productivity	✓
SO5	Meet national and locally determined performance standards and targets	✓
SO6	To develop and implement ambitious, deliverable strategies	✓

### Implications

	Yes	No	N/A	Comments
Associated risks			✓	
Are associated risks detailed on the ICB Risk Register?			✓	
Financial Implications			✓	

<b>Where paper has been discussed</b> (list other committees/forums that have discussed this paper)				
<b>Meeting</b>	<b>Date</b>		<b>Outcomes</b>	
N/A	N/A		N/A	
<b>Conflicts of interest associated with this report</b>				
Not applicable.				
<b>Impact assessments</b>				
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	
<b>Report authorised by:</b>	Kevin Lavery, Chief Executive officer			

# Integrated Care Board – 15 January 2025

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## Chief Executive's board report

### 1.0 Introduction

- 1.1 As I wrote my Chief Executive's report for the January Board meeting twelve months ago, I reflected on the blessings of the previous year and the opportunities that 2024 would bring. Little did we know the challenges that we would face from both an operational delivery perspective and with regards to the scrutiny that we would come under as we attempt to delivery our plans.
- 1.2 Our NHS system has seen record breaking levels of activity through urgent care pathways yet we have continued to make good progress in recovering the elective care position. For that I offer my heartfelt thanks to staff who deliver our services on the front line or in one of the crucial support service functions without which our system could not operate.
- 1.3 The festive period has not seen a slow down in the number of people seeking urgent help for their medical conditions, but hopefully our dedicated staff have been able to spend some quality, restful time with their families.
- 1.4 As we enter the final quarter of the financial year, we are going to be under increased levels of scrutiny from our regulators. Quite simply, the work and schemes we have put in place to improve the quality of service delivered within the financial envelope made available to our system have not delivered at the pace required. As an example, despite a huge amount of hard work and best efforts, we have not yet been able to achieve our ambition to eliminate corridor care in our hospitals and we have not been able to reduce our reliance on expensive temporary staffing. This means that our financial plans, particularly in the acute Trust's are not on track to deliver in this financial year.

### 2.0 Intervention

- 2.1 To that end, at the beginning of December, the ICB received a letter from NHS England to place the Lancashire and South Cumbria Integrated Care System into a formal turnaround process. It stated that "despite practical support instigated through the Investigation and Intervention process, the system has made no progress in reducing the run rate" and that "without immediate and significant action the system is at risk of ending the year with a deficit in excess of £350m".

- 2.2 Stephen Hay, former Managing Director of NHS Improvement and a high calibre team from Price Waterhouse Coopers (PwC) will lead intervention work. This will build on the work of Simon Worthington and PA Consulting who have been working with and challenging our system during the initial intervention period. This support replicates that which has been afforded to other integrated care systems and have a track record of leveraging rapid improvements.
- 2.3 At this time, I am reminded of a quote from Sun-Tzu, the ancient Chinese military general, strategist and philosopher who wrote “in the midst of chaos, there is also opportunity”. We therefore welcome the intervention support for our system. It is really important that whilst we have these experts working with our system, we learn from them, the knowledge they bring from other systems and that extra pair of sharp eyes that may help us see opportunities we have not identified.
- 2.4 Along those lines, Sam Proffitt our Chief Finance Officer and Deputy Chief Executive has been having very constructive conversations with Mr Hay and PwC to ensure that whilst we are attempting to tackle the immediate financial crisis, we are looking to the future operating model of both the ICB and the ICS to ensure we are fit for purpose as a health and care system of the future.

### **3.0 Supporting our Staff**

- 3.1 A formal turnaround programme will be an unsettling for many of our staff and the impact will be felt disproportionately by different teams particularly in the ICB. We therefore want to make sure that our staff are able to access any support they need either through line management routes or the established staff networks. These were brought to staff’s attention during a lively whole staff briefing just before the Christmas break.
- 3.2 Through November and December, we have continued with our series of ICB values and culture workshops. These built on the successful away day in October. The purpose of the workshops is to define the behaviours which will underpin our new set of values and will support us to hold ourselves and each other to account as we continue to develop our organisational culture. By the end of January 2025, we are planning to have engaged with over 800 staff at these workshops which are being delivered either in mixed groups or to individual team sessions. Feedback to date has been very positive and we are really encouraged by staff enthusiasm and engagement in this work.

## **4.0 New Hospitals Programme**

4.1 In December 2024, University Hospitals of Morecambe Bay NHS Foundation Trust and Lancashire Teaching Hospitals NHS Foundation Trust completed the acquisition of and announced potential sites for brand new hospitals to replace Royal Preston Hospital and Royal Lancaster Infirmary:

- The proposed site for the replacement Royal Preston Hospital is land between Stanifield Lane and Wigan Road, south of Stoney Lane in Farington, near to the end of the M65 West.
- The proposed site for the replacement Royal Lancaster Infirmary is Bailrigg East, situated north of and in close proximity to Lancaster University.
- Proposals for investment in Furness General Hospital's infrastructure are also in development and will be shared in due course.

4.2 Prior to acquiring land, a comprehensive review of sites, including plot size, location, motorway access, existing highways infrastructure, public transport, planning and environmental conditions was undertaken to assess sites for their suitability. It is worth noting that while the local NHS has secured the potential new sites, no final decisions have been made, and any such decision would be subject to full public consultation at a later date.

4.3 The two new hospitals are part of a wider programme of work that is considering how clinical services are configured across all acute hospital sites in Lancashire and South Cumbria to meet the needs of the population in the future in a way that makes the best use of all available resources, with the aim of supporting our communities, bringing jobs, skills and contracts to local businesses and residents.

4.4 Over the coming weeks, a range of engagement activities will be announced. Taking place across Lancashire and South Cumbria between January and March 2025, this will be a great opportunity for our public, patients, colleagues and wider population to get involved and share their views regarding the proposed sites for the replacement hospitals.

## **5.0 Reforming elective care for patients**

5.1 On 6<sup>th</sup> January 2025, NHS England published new guidance on reforming elective care for patients. All ICBs and acute trusts are being asked to take action within the current financial year on three aspects, namely:

- name an existing director who will be responsible for improving the experience of care, and the experience of waiting for care.
- review and improve operational processes that affect how patients and their carers receive correspondence and access information on wait times
- make customer care training available to non-clinical staff with patient-facing roles, and ensure take up of training already available on the e-

Referral Service to support effective referral, booking and waiting list management processes.

- 5.2 The ICB has nominated Professor Craig Harris as our responsible executive and together with officers will now consider the implications of this guidance. Prof. Harris will provide an update on the implementation of this new guidance at a future Board meeting.

## **6.0 Listening to our communities**

- 6.1 In my last report I shared that we were actively engaging our communities in a conversation to hear what is important for our population. Listening to the views of our communities as we deliver transformation, improve or change how services are delivered is really important to successfully implementing change – this is because it helps us to understand local perspectives and what is important to those communities and gets people on board.

- 6.2 Between September and December we held 9 public events and met with 15 community groups where we heard from more than 240 people and 1,800 responses to surveys. A report of the findings of the engagement is available on the ICB website which includes key themes from a system and place perspective which will be taken into consideration as we deliver our programme of transformation. The report is honest about the experiences we hear from our public and patients and we are looking at the insights seriously to look at where we can improve services and where we can make a difference to experiences for our population.

- 6.3 I want to thank all those who took part in the events and those who took the time to share their views. I also thank the team who arranged and managed the events and staff who supported the events. There will be more opportunity to hear from more people at public engagement events we have planned from February as part of the New Hospitals Programme.

## **7.0 Targeted Lung Health Checks in Lancashire and South Cumbria reach cancer diagnosis milestone**

- 7.1 I wanted to recognise work being undertaken by our Cancer Alliance, which brings together NHS partners to improve diagnosis and treatment of cancers. More than 300 people in Lancashire and South Cumbria have had cancers diagnosed early because of Targeted Lung Health Checks. This is part of a national initiative, which had its first pilot in Lancashire and South Cumbria in 2021, where people considered to be at risk of lung cancer are invited for health checks with the aims of finding cancer before symptoms appear and improving patient outcomes. This programme is life-saving – being diagnosed with lung cancer at the earliest stages means a near 20 times more likely chance to survive for five years than those whose cancer is caught late.

- 7.2 Across our system more than 45,000 people have participated in the Targeted Lung Health Check programme, and 300 people have benefitted from potentially lifesaving treatment and have a better chance of recovery thanks to an earlier diagnosis. The large majority of people who participate in this initiative will receive the all-clear, giving them peace of mind; those who are scanned are offered follow-up CT scans every two years.
- 7.3 We were one of the pilot areas nationally to roll out Lung Health Checks and now, due to the success of this programme, they are being rolled out across the country and will become part of the national screening remit by 2029, and become known as 'Lung Cancer Screening'. It is currently being offered to patients that meet the criteria in Fylde and Wyre, with plans to roll out the programme in other areas of Lancashire and South Cumbria in the new year.
- 8.0 Football club partnership aims to support people with cancer prepare for treatment**
- 8.1 I want to thank our partnership of football club community organisations who are coming together to help people with cancer to prepare for treatment. From this month, the community organisations of eight English Football League sides in our system will all be offering free 'prehab' training sessions to adult cancer patients with the goal of improving their health and fitness ahead of oncological care or surgery as part of a one-year pilot programme.
- 8.2 The partnership includes the community organisations from Accrington Stanley, Barrow AFC, Blackburn Rovers, Blackpool FC, Burnley FC, Fleetwood Town, Morecambe FC, and Preston North End who will be hosting two-hour sessions aimed at encouraging patients to be more active as well as offering a chance for social and mental wellbeing support.
- 8.3 Thank you to everyone involved in developing the partnership and staff at the football clubs to support this programme as prehabilitation is well documented to improve quality of life for cancer patients and patient outcomes.

**Kevin Lavery**

**07 January 2025**