

## Integrated Care Board

<b>Date of meeting</b>	1 February 2023
<b>Title of paper</b>	Draft Integrated Care Strategy
<b>Presented by</b>	Craig Harris
<b>Author</b>	Carl Ashworth, Jane Cass
<b>Agenda item</b>	5
<b>Confidential</b>	No

### Purpose of the paper

This paper provides the Integrated Care Board with supporting information on the development through the Integrated Care Partnership of the draft Lancashire and South Cumbria Integrated Care Strategy and on the proposed next steps for further engagement and finalisation of the document.

### Executive summary

The Health and Care Act 2022 requires Integrated Care Partnerships to develop an Integrated Care Strategy which details how the assessed needs of the population, as identified in joint strategic needs assessments (JSNAs), will be met by the exercise of functions by the Integrated Care Board, partner Local Authorities, and NHS England.

The attached draft Integrated Care Strategy for Lancashire and South Cumbria has been developed through, and supported by, the LSC Integrated Care Partnership. The Integrated Care Board is required by law to have regard to the ICP's strategy when making decisions, commissioning, and delivering services. The ICB is therefore asked to support the content of the draft strategy and associated actions for further development before finalisation at the end of March 2023.

The 2023/24 Integrated Care Strategy is at a developmental stage and it is recognised nationally that developing relationships and building trust takes time and commitment and that Integrated Care Systems are at varying levels of maturity. It is anticipated therefore that the strategy developed for 2024/25 onwards will be greater in depth and breadth of scope and actions

### Recommendations

The LSC Integrated Care Board is asked to:

- Review, comment upon and support the draft Integrated Care Strategy
- Note the assessment of the plan against national guidance
- Support the proposed roadmap for the further development and finalisation of the strategy

### Governance and reporting (list other forums that have discussed this paper)

Meeting	Date	Outcomes
Integrated Care partnership	12 January 2023	Draft document endorsed with minor amendments.

ICB Executive Team	24 January 2023	Next steps endorsed. Supported the paper for the Board.
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<b>Conflicts of interest identified</b>
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Not applicable
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<b>Implications</b>
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If yes, please provide a brief risk description and reference number	Yes	No	N/A	Comments
Quality impact assessment completed		No		To be undertaken during next stages of development
Equality impact assessment completed		No		
Privacy impact assessment completed		No		
Financial impact assessment completed		No		
Associated risks		No		
Are associated risks detailed on the ICB Risk Register?		No		

<b>Report authorised by:</b>
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Craig Harris
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# Integrated Care Board – 1 February 2023

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## Lancashire and South Cumbria Integrated Care Strategy

### 1. Introduction

- 1.1 This paper supports the presentation of the draft Integrated Care Strategy to the Lancashire and South Cumbria Integrated Care Board (ICB) following support at the Integrated Care Partnership (ICP).
- 1.2 At this stage the scope of the strategy document encompasses the opportunities for collaborative working and integration across the partnership area. The strategy will develop over time as our Integrated Care System matures and in line with national expectations. The detail outlined is the culmination of engagement during the Autumn of 2022 with our population and our partners. The agreement of these priority areas is a huge step forward for Lancashire and South Cumbria and grateful thanks are extended to all individuals and partners for their valuable contributions.
- 1.3 It is important to recognise that while the outline intent for this strategy document was described nationally and there are statutory requirements to be met, it is for local areas to 'blaze their own trail'. The Integrated Care Board is asked to review and support this initial draft and note the outlined next steps, which were developed and agreed at the ICP meeting on the 12 January 2023, with the aim of producing a final strategy at the end of March 2023.

### 2. The national requirement

- 2.1 The Health and Care Act 2022 requires Integrated Care Partnerships to develop an Integrated Care Strategy which details how the assessed needs of the population, as identified in the joint strategic needs assessments (JSNAs), will be met by the exercise of functions by the Integrated Care Board, partner Local Authorities, and NHS England. It must adhere to requirements within statutory guidance including the involvement and engagement of partners and requisite content. It is also advised that the strategy is published and regularly reviewed. The ICB is required by law to have regard to the ICP's strategy when making decisions, commissioning, and delivering services.

### 3. Developmental strategy

- 3.1 The 2023/24 Integrated Care Strategy is expected to be at a developmental stage; it is recognised nationally that developing relationships and building trust takes time and commitment and that Integrated Care Systems are at varying levels of maturity. It is anticipated therefore that the strategy developed for 2024/25 onwards will be greater in depth and breadth of scope and actions.
- 3.2 The process of developing the strategy carries inherent value in terms of relationship building. It is an opportunity for partners who have not historically been directly involved in developing health and care strategies to provide their contributions. The national expectation was for each area to publish its initial strategy by December 2022, although this is not a statutory requirement. Locally, it has been agreed that the final version of the strategy will be agreed at the end of March 2023.

#### **4. Current position for Lancashire and South Cumbria**

- 4.1 A draft of the LSC Integrated Care Strategy was developed for review by the Integrated Care Partnership at its meeting on the 12 January 2023, where the document (with minor amendments) was endorsed, along with a number of next steps for its further development through to March 2023.
- 4.2 An assessment of progress against the national guidance for the development of the strategy is outlined in **Appendix A** of this paper; a RAG rating has been identified together with key areas for development during January-March 2023.
- 4.3 The Public Involvement and Engagement Advisory Committee has received a detailed report describing the engagement process with local people and partners which has influenced the development of the Integrated Care Strategy. This describes how this has been developed using intelligence from JSNAs, Health Equity Commission reports and additional survey and outreach work with staff and local people undertaken by the ICB and local Healthwatch.
- 4.4 The Draft Integrated Care Strategy is attached at **Appendix B**.

#### **5. Proposed next steps**

- 5.1 The ICP, in supporting the draft strategy, set out a commitment to have a completed strategy document by April, which will be launched at a public event led by the Partnership.
- 5.2 The next steps in this process are as follows:
- The comments and changes suggested by the ICP and the Board will be built into the next iteration of the document by early February.
  - Wider meaningful engagement with local communities, individuals and partners in the development of the final strategy. A series of workshops has been planned by to facilitate this.
  - Further engagement with our Health and Wellbeing Boards and wider system partners and sectors. This would be done in conjunction with the VCFSE sector.
  - Progress on key areas including:
    - clearer statement on delivering the strategy in places and neighbourhoods
    - commitment of the system & the resources being put in place to support the strategy
- 5.3 To facilitate oversight of these next steps, a strategy development oversight group has been formed, chaired by Professor Craig Harris. The group will oversee further iterations and development of the strategy.
- 5.4 This work will be supported by a detailed programme of key activities and actions that have been agreed.





#### **6. Recommendations**

- 6.1 The Board is asked to:
- Support the draft Integrated Care Strategy
  - Note the assessment of the plan against national guidance
  - Support the proposed roadmap for the further development and finalisation of the strategy

**APPENDIX A –  
Assessment of draft strategy against national guidance**

The requirements have been taken from the national guidance document; a position statement and RAG rating is detailed alongside each requirement as provided by the Programme Director for System Reform.

Key components of plans referenced in national guidance		RAG	Notes
<b>Raison d’etre</b> <i>Clear Purpose</i>	The joint plan for delivering more joined-up, preventative, and person-centred care for the whole population, across the course of their lives. The partners should encompass the NHS, local authorities, providers, and other partners.		<ul style="list-style-type: none"> <li>• There are some questions from LAs about the need for this strategy, querying whether it is required on top of existing HWB strategies.</li> <li>• Wider partners are clear that this is where the system comes together to (a) pledge to tackle the things that can only be addressed through integration (noting that the ‘how’ will happen in each place); and / or tackle the things that require a system-wide approach.</li> </ul>
Key elements of the strategy			
<b>Clarity on the Health Needs of the Population</b>	Detail on the Health Needs across the geographical area. The assessments incorporate physical and mental health needs alongside the social care needs of the whole population. It is important that JSNA under-represented groups are considered. These include unpaid carers, those in inclusion health groups and others who face social exclusion (such as the homeless, migrants and traveller communities, some of whom are shown in the data because they may not be registered to receive health services, or they are not recognised as having a health or care need.		<ul style="list-style-type: none"> <li>• The Head of Partnership Development has undertaken a detailed review of all JSNAs. This detailed spreadsheet was used to propose a draft set of priorities that was used to inform the discussions with the ICB/LA CEOs and LA DsPH and then the wider ICP partners.</li> <li>• This has also been shared with the public</li> </ul>

<b>Identification of priorities for action</b>	<ul style="list-style-type: none"> <li>• A review with partners of the disparities in health and care outcomes and experiences between parts of the population to understand the opportunities where system wide action could be effective in securing improvement, including addressing the wider determinants of health and wellbeing, and preventing ill-health and future care and support needs. Ideally this exercise would be undertaken in collaboration with communities to gain their perspective, alongside evidence from research about how those needs could be met.</li> <li>• The identification of system-level, evidence-based priorities which drive a unified focus on the challenges and opportunities to improve health and wellbeing of people and communities throughout the area.</li> </ul>		<p>The review of JSNAs was cross referenced with the recommendations from the health Equity Commission to ensure that these were captured within the draft priorities and scoping work.</p> <p><b>Priorities agreed for action</b>  Starting Well  Living Well  Working Well  Ageing Well  Dying Well</p>
<b>Identification of opportunities for collaboration at each level</b>	<ul style="list-style-type: none"> <li>• The strategy is expected to highlight <i>where co-ordination on health and care issues is needed</i>.</li> <li>• It should challenge partners to <i>deliver the action required, at the most appropriate level: neighbourhood, place, or system; in alignment with the principle of subsidiarity</i>.</li> </ul>		<p>This is in various parts of thinking – well defined for neighbourhoods (the Fuller work) and places (the place strategic narrative and place priorities). Not yet set out in a single document.</p> <p><b>Next Steps:</b> Workshops planned Jan – March</p>
<b>Action on the wider determinants of health</b>	<p>The plan offers an opportunity to reach beyond ‘traditional’ health and social care services to consider the wider determinants of health such as employment, environment, and housing issues, and join up health, social care, and wider services.</p>		<p>This is in the scope of the priorities and the scoping work, drawn from the HEC.</p> <p><b>Next Steps:</b> tbc</p>
<b>Personalised Care</b>	<p>Action to place personalised care and support at the heart of health and social care, and help everyone to access outstanding quality care that supports choice, control and independent living as set out in People at the heart of care (2021).</p>		<p>There has been referenced to this in the scoping work, it would be good to see explicit reference to this in the introduction.</p> <p><b>Next Steps:</b> Narrative needed explaining how this has formed part of the work and what next steps are needed</p>

Potential areas for collaboration			
<b>Starting Well</b>	Improving the life chances and health outcomes of babies, children, and young people		In the LSC Starting Well priority
<b>Living Well</b>	Improving people's overall wellbeing and preventing ill-health		In the LSC Living Well priority
<b>Ageing Well</b>	helping people live more independent, healthier lives for longer		In the LSC Living Well and Ageing Well priorities
<b>Working differently</b>	Taking a holistic view of people's interactions with services across the system and the different pathways within it		Implicit in all priorities but would benefit from explicit reference to this in the intro  <b>Next Steps:</b> Narrative needed explaining how this has formed part of the work and what next steps are needed
<b>Addressing inequalities</b>	Action to reduce inequalities in health and wellbeing outcomes, patient experience and access and action to improve the wider social determinants that drive these inequalities, including employment, housing, education environment, and reducing offending. This should include specific ambitions to reduce geographic disparities in wellbeing and healthy life expectancy as outlined in <u>Levelling up the United Kingdom (2022)</u> .		In the LSC Living Well and Working Well priorities
Supported by			
<b>Involvement and engagement of partners</b>	The strategy should detail who the stakeholders are and how they have been engaged with.		Stakeholder engagement undertaken during the development of the strategy. Document shared on working with people and communities.  <b>Next Steps:</b> Further work to do in Q4