

## Integrated Care Board

<b>Date of meeting</b>	10 January 2024
<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>	5
<b>Confidential</b>	No

### Executive summary

This report is a reflection of our achievements over the past twelve months, a position statement of where we are now and a look to the future and the opportunities that are available to drive system recovery and transformation.

The proactive approach to secure support for our system through recovery and transformation will help direct our short to longer term.

### Recommendations

The Lancashire and South Cumbria Integrated Care Board is requested to note the updates provided.

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

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

### Implications

	Yes	No	N/A	Comments
Associated risks			x	<i>Highlight any risks and where they are included in the report</i>
Are associated risks detailed on the ICB Risk Register?			x	
Financial Implications			x	

**Where paper has been discussed** (list other committees/forums that have discussed this paper)

<b>Meeting</b>	<b>Date</b>	<b>Outcomes</b>
Executive Management Team	2 January 2024	Approved

**Conflicts of interest associated with this report**

Not applicable.

**Impact assessments**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Quality impact assessment completed			x	
Equality impact assessment completed			x	
Data privacy impact assessment completed			x	

**Report authorised by:** Kevin Lavery, chief executive officer

# Integrated Care Board – 10 January 2024

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## Chief Executive's board report

### 1. Introduction

- 1.1 As I write this report, it is early December, and I am reflecting on something Oprah Winfrey said, "December is a time to reflect on the blessings of the past year and to embrace the opportunities of the coming one".
- 1.2 When we are in the midst of really challenging times, it is often difficult to look up and appreciate all the excellent work that is going on around us, that despite the pressure and complexity we live with on a daily basis, both in our work and personal lives, our colleagues from all sectors of our system continue to strive to give of their absolute best day in, day out.
- 1.3 And whilst the future might feel like a scary place and we might hesitate to peep around that corner, our system is on the precipice of massive opportunities to change the way we deliver services, to be innovative, to empower our workforce and most importantly, improve the health outcomes of our population.
- 1.4 This report is a reflection of our achievements over the past twelve months, a position statement of where we are now and a look to the future and the opportunities that are there for the taking.

### 2. Reflection - Staff Awards

- 2.1 This year, we launched our staff awards. Based on our PROUD values which are; People; Respectful; Open; Uniting; Delivering. We received over 175 nominations across the nine award categories. The awards were for individuals and teams and not only recognised the work that they do, but also the additional contribution that individuals make to our ICB community. We also celebrated partnership working and how working across organisational boundaries can deliver true quality services to our patients.
- 2.2 I, together with members of this Board including non-executive directors had the pleasure of attending the awards ceremony at which we announced our runners-up and winners. It was truly humbling to sit and listen to the citations for the winners and applaud their achievements. Words such as commitment, outstanding, pride, passion, creativity and innovation ran as themes throughout and it was incredibly uplifting to be able to celebrate with all the shortlisted nominees.
- 2.3 It is not appropriate to single out individuals, but I would like to formally put on record our congratulations and thanks to all those who were either nominated,

who took the time to make a nomination and to those who had the incredibly difficult job of judging. Thank you.

### **3. The here and now**

- 3.1 The Board understands we face a major financial challenge for 2023/2024 and the Integrated Care Board (ICB) had initially agreed a system deficit plan of £80m. Subsequent to the plan, the ICS has faced significant unplanned pressures: individual packages of care volume and pricing, prescribing pricing and industrial action. Throughout the year, we have been in discussion with NHS England regarding the implications that this might have for the year-end financial position.
- 3.2 During November, the ICB was advised of additional non-recurrent funding allocated to it as part of the nationally identified £800m and that there had been a 2% relaxation of the elective activity target requirements. Whilst welcome, the impact of this additional funding had already been anticipated and factored into the assessment of our year end forecast position.
- 3.3 The financial challenge for both the current and future years remains significant, and officers will continue to liaise with NHS England.

### **4. Our Opportunities**

- 4.1 Looking forward and the changing demographic of our population, the Health Foundation predicts that the nature of predominant illnesses / disease areas are likely to be diabetes, mental health conditions and management of long-term conditions. Our aging population with increased acuity in care needs could see the demand for our hospital bed base increase by some 60%. This is both impractical and unaffordable. To respond to this will require a seismic shift in the way we configure the health and care services we commission. There is no other alternative but to turn the dial and move to a more community centric system.
- 4.2 We have well defined and worked up plans for the building and infrastructure components of the New Hospitals Programme. Work is underway to develop new models of clinical care with a tertiary centre and a hub and spoke model for our hospitals. We need to do more to develop our community and primary care services. All three programmes are inextricably linked and need to be moving in tandem as without one, the other two might stumble. As a result, the ICB executive have launched a programme to transform care in the community.
- 4.3 In a bid to achieve our system financial position this year, we need to ensure that the short-term actions we take drive us towards the achievement of our longer-term plans and do not unwittingly set us off on a different path. Whatever actions we can bring forward and gain early benefit from, we should. The system needs to challenge itself to move further faster and to think innovatively about how we speed up delivery.

## **5. National Visits**

- 5.1 We have continued to welcome colleagues from Department of Health and Social Care, NHS England and other Integrated Care Boards who are all keen to understand the challenges we face in Lancashire and South Cumbria and to learn from our experiences.
- 5.2 At the beginning of October, we welcomed Adam Doyle, Steve Russell and Matthew Style. Their visit started in Blackpool with a roundtable discussion involving staff working in services across health and care. Continuing healthcare, learning disabilities team, rapid response team, integration with mental health services and adult social care were all represented and contributed to the discussion. The three senior NHS England leaders then attended County Hall to have a facilitated discussion with system leaders about what help, and support is needed and what barriers could be removed in order to make improvements.
- 5.3 On the same day, NHS England's medical director, Professor Stephen Powis, visited Blackpool, accompanied by the ICB's associate medical director, Andy Curran. Professor Powis was taken to a local dentist and then on to a health centre to look at the innovative approaches being taken in Blackpool to tackle the challenges our population face, especially within the priority wards.
- 5.4 In November, NHS England's chair Richard Meddings and Sir David Behan visited Lancashire Teaching Hospitals NHS Foundation Trust and then spent time with us in County Hall to delve into a little bit more detail on our current position and how we are working with providers, primary care and local government to address the issues. They were then treated to a visit to the University of Central Lancashire to meet with the vice chancellor and other senior leaders to talk about how we inspire the health and social care workforce of the future including the use of cutting-edge teaching methods and technologies.
- 5.5 Later in November, Professor Bola Owolabi joined some of our voluntary, community, faith and social enterprise sector organisations in Blackburn with Darwen and East Lancashire, to see how the national Core20Plus5 strategy is being implemented in a bid to reduce health inequalities. Prof. Owolabi was invited to chair a meeting of a group of local parents to discuss their interest in influencing changes to local services. She was particularly interested to hear their reasons for joining the parent/carer panels and to understand what they hoped to achieve. She also witnessed the work of North Blackburn PCN who are striving to increase flu vaccination uptake for two- and three-year-olds in the area by delivering their service from the local family hub. Uptake in the area is currently reported as the lowest in Lancashire and it was pleasing to see a steady stream of adults and children receiving their vaccinations during the course of Prof. Owolabi's visit.

## **6. Staff Issues**

- 6.1 In recent months, I have been delighted to have been contacted directly by members of ICB staff who have come forward with ideas on where we might look to make further efficiencies and improve the services we commission on behalf of our population. We want to encourage more of this and through our Programme Management team, we are developing a process for taking ideas that are generated through a “hopper” to allow those that show merit to be seen through to the conclusion of benefits realisation.
- 6.2 In early December, Dr Andy Knox gave a presentation to the whole staff briefing on the work tackling health inequity and prevention in Lancashire and South Cumbria. This was the first in a series of sessions which Dr Knox will deliver to our staff to help shift the thinking as we plan, commission and deliver services. It certainly created a buzz in County Hall and has inspired many to look at things through a different lens in the future.
- 6.3 I have recently welcomed Kirsty Hollis into the role of Associate Director and Business Partner to the Chief Executive. This is a portfolio change for Kirsty and she will now be working closely with me to support the day-to-day management of the ICB. Kirsty will focus on preparation for key meetings and supporting our executive team, leading on cross-cutting projects and supporting organisational development.

**Kevin Lavery**

**27 December 2023**