

Integrated Care Board

| Date of meeting | 25 September 2025 |
|-----------------|--------------------------------------------------------------------------------------------------|
| Title of paper | Working with People and Communities - Insight Report |
| Presented by | Neil Greaves, Director of Communications and Engagement |
| Author | Neil Greaves, Director of Communications and Engagement David Brewin, Head of Patient Experience |
| Agenda item | 9 |
| Confidential | No |

Executive summary

Public engagement and involvement is an essential component of making sure that effective and efficient health and care services are provided to people and communities. The ICB hears views from members of the public from a range of different sources including proactive engagement and outreach, general enquiries, complaints, subject access requests and population health approaches to community mobilisation with communities and partners.

This report describes proactive engagement and involvement activity which supports listening to public voices as part of commissioning, transformation and local population health programmes across the organisation and local Healthwatch.

The report describes insights and key themes from public outreach and engagement activities since the previous Board meeting and from partner organisations and national initiatives.

Public and Stakeholder Engagement

Evidence of public and stakeholder engagement is described throughout the report.

Recommendations

The Board is requested to:

• Note the contents of the report and the insight captured from engagement and involvement activities.

| and involvement activities. | | | | | |
|-----------------------------|----------------------------------------------------------------|--------|----------|----------------------|------|
| Whic | ch Strategic Objective/s does the | e rep | port re | late to: | Tick |
| SO1 | Improve quality, including safety, | , clin | nical ou | itcomes, and patient | ✓ |
| | experience | | | - | |
| SO2 | To equalise opportunities and cli | nica | loutco | mes across the area | ✓ |
| SO3 | Make working in Lancashire and South Cumbria an attractive and | | | | |
| | desirable option for existing and | pote | ential e | mployees | |
| SO4 | Meet financial targets and deliver | r imp | proved | productivity | ✓ |
| SO5 | Meet national and locally determine | ined | perfo | rmance standards and | ✓ |
| | targets | | • | | |
| SO6 | To develop and implement ambit | tious | s, deliv | erable strategies | ✓ |
| Implications | | | | | |
| | Yes N | 0 | N/A | Comments | |

| Associated risks | | | ✓ | |
|----------------------------------------------------------------|------------|----------|--------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Are associated risks detailed | ✓ | | | |
| on the ICB Risk Register? | | | | |
| Financial Implications | | | ✓ | |
| Where paper has been discu | ıssed | (list ot | her co | mmittees/forums that have |
| discussed this paper) | | | | |
| Meeting | Date | | | Outcomes |
| ICB Executive Committee | 16.09.2025 | |) | Insights and next steps were noted. |
| Conflicts of interest associa | ted wi | ith this | s repo | rt |
| Not applicable | | | | |
| Impact assessments | | | | |
| Impact assessments | | | | |
| Impact assessments | Yes | No | N/A | Comments |
| Impact assessments Quality impact assessment completed | Yes | No | N/A | Comments |
| Quality impact assessment | Yes | No | | Comments Equality and Health Inequality Impact Assessments are carried out as part of the process for engagement and involvement programmes |
| Quality impact assessment completed Equality impact assessment | Yes | No | | Equality and Health Inequality Impact Assessments are carried out as part of the process for engagement and involvement |

Report authorised by: Sam Proffitt, Chief Executive

Integrated Care Board – 25 September 2025

Working with People and Communities - Insight report

1. Introduction

- 1.1 Public engagement and involvement is an essential component of making sure that effective and efficient health and care services are provided to people and communities. By reaching, listening to, involving and empowering our residents, patients and communities, we can ensure that there is greater understanding of the needs and impact of decision making. The NHS in Lancashire and South Cumbria is committed to putting the needs, experiences and insights of our population at the heart of all we do. This is a key principle of population health improvement and how we work with communities to meaningfully involve them in the design of solutions.
- 1.2 This report provides an update on public engagement, involvement and patient experience activities from the ICB and the insights from patients and communities in Lancashire and South Cumbria since the previous Board meeting and aligned to the ICB engagement and involvement priorities for 2025/26 set out in the Board meeting in May.

2 Shaping Care Together public consultation

- 2.1 On Friday 4 July, the <u>Shaping Care Together</u> joint committee, led by NHS Lancashire and South Cumbria ICB and NHS Cheshire and Merseyside ICB, kickstarted a 13-week consultation on the location of A&E services across Southport, Formby and West Lancashire to allow members of the public and stakeholders views to be heard. This is part of the ICB's legal duty under the Health and Care Act 2022 and the NHS Act 2006 to involve people in planning services.
- 2.2 Working in partnership with Cheshire and Merseyside ICB and Mersey and West Lancashire NHS Trust, a series of events, discussion groups and outreach engagement activities have been put in place to encourage local people to get involved and contribute their views to the consultation. This includes promoting through a range of channels ways in which people can get involved.
- 2.3 In addition to the programme of consultation events, the ICB continues deliver targeted outreach engagement across the whole of West Lancashire, with particular focus on our most deprived communities. These have provided an opportunity to encourage participation in the consultation in addition to providing insights into how services can best support people in their communities as part of our continued ambition for neighbourhood working.
- 2.4 To date, our team has visited more than 42 different venues or services across West Lancashire including family hubs, community centres, libraries, NHS venues and GP practices. Information about the consultation have been shared

with voluntary sector and local authority colleagues, primary and secondary schools and West Lancashire Youth Council. In total more than 1,000 consultation packs have been distributed in West Lancashire alone and as part of the outreach in West Lancashire we have held conversations with nearly 400 members of the public and had contact overall with more than 600 people.

2.5 The consultation will close on 3 October at which point partner organisations will thoroughly analyse all responses and feedback received as part of the consultation process to demonstrate we have both heard, understood and fully considered the views of respondents.

3 Petition regarding provision of critical care at Furness General Hospital

- 3.1 In August, Lancashire and South Cumbria ICB received a petition from Michelle Scrogham MP signed by 13,000 individuals who oppose the opposing proposals to permanently suspend Level 3 intensive care at FGH and to treat and transfer level 3 patients to RLI.
- 3.2 Lancashire and South Cumbria ICB consider petitions to be an important mechanism for local people to have a voice on local matters and represents the expression of the views of the people who sign it. To ensure that the voices are heard appropriately, and to avoid the danger of listening only to active groups, this petition will be viewed as one piece of evidence and information which contributes to an overall picture of public opinion and the consideration of proposals for any clinically-led service change process.
- 3.3 The petition is regarding an independent clinical review of level 3 critical care services at Furness General Hospital. The clinical review recommends the temporary suspension of a Level 3 intensive care unit (ICU) be made permanent to maintain a safe and sustainable service for the patients of South Cumbria. There is no intention to permanently close the ICU at Furness General Hospital, and the proposal is to treat and transfer Level 3 services. The decision to change the model on a permanent basis has not yet been made. The ICU will remain at the hospital as it is a crucial part of the acute services we offer to local communities. The ICB has set out a clinically-led process which will ensure the safest future proposal is agreed for the future model.
- 3.4 There is no intention to permanently close the ICU at Furness General Hospital and the proposal is to treat and transfer level 3 services. The decision to change the model on a permanent basis has not yet been made. The ICU will remain at the hospital as it is a crucial part of the acute services we offer to local communities. The ICB has set out a clinically-led process which will ensure the safest future proposal is agreed for the future model.
- 3.5 The ICB has committed to an eight-week period of engagement to reassure people in South Cumbria about the safety and sustainability of services, to help reduce misinformation and to hear local views about the proposal. More information about the engagement is available on the ICB website.

4 Learning from patient experiences and complaints

- 4.1 The ICB welcomes complaints and concerns about the organisation and about the services we commission. We see this as valuable feedback that will help us learn from patient experiences and make improvements. We aim to make sure we are open, honest, sensitive and transparent in the way we handle complaints and concerns from patients and the public.
- 4.2 For the period 1 April to 31 August 2025, the ICB received 891 complaints and MP letters which is an increase of 18% on the previous period 2024/25. June 2025 volumes were the highest in any single month since the inception of the ICB. The total number of concerns and enquiries was 738, an increase of 77%.
- 4.3 A review of themes from the concerns and enquiries received shows that concerns regarding the future or changes for specific services in GP practices and hospitals were largely attributable to high volumes. Key themes from other complaints included access to services, communications, prescribing rules and quality of services. There is a notable increase in complaints about our All-Age Continuing Care service and as such a detailed review is being undertaken and will report to the Quality and Outcomes Committee.
- 4.4 The overall average (mean) handling time between 1 April to 31 August has reduced to 41 working days compared to the average of 64 days in 2024/25. There were 440 open complaints and MP letters on 10 September 2025. Complaints and concerns are shared with relevant ICB teams to support responses, resolutions and to ensure, where appropriate, action and learning.

5 Community outreach for Know Your Numbers Week

- 5.1 <u>Know Your Numbers!</u> Week is the UK's biggest blood pressure testing and awareness event, organised by Blood Pressure UK, that takes place every year in September. This year's Know Your Numbers! Week took place from 8-14 September 2025.
- 5.2 In preparing for and during the week, the ICB raised awareness about how community pharmacies can support people to know their numbers and helping to avoid serious medical issues such as heart attacks and strokes. In addition, the ICB worked with NHS and community partners to put in place an outreach model and pop-up sites to reach into our communities to encourage people to be more aware of the dangers of high blood pressure and to get familiar with their numbers. Leaflets and informative materials have been designed by patients and carers.
- 5.3 As part of our population health approach to reducing health inequalities, these were arranged by working with community groups and venues in areas with the highest levels of deprivation. This included working with foodbanks, community centres, the deaf community, faith sector, leisure centres, town and city centres and outreach vehicles such as HARRI and PHIL (Promoting Health in Lancashire).

5.4 Taking this approach allowed ICB population health and communications and engagement teams the opportunity to have conversations with residents about access to services, support in communities and how they can best be supported through neighbourhood-based community interventions. Insights from this approach shows that many people in our most deprived communities are more likely to have a blood pressure check through outreach rather than them arranging appointments. Across the week people have received health advice and had appointments arranged to support them where their check indicated they needed to see a GP.

6 Supporting patient voice in general practices

- 6.1 PPGs are a mandatory requirement of GP practices under their national NHS contract. A PPG is a group of volunteer patients, carers and GP practice staff which meets regularly to improve the services and experience of their GP practice for everyone. PPGs give patients a voice to provide feedback, discuss common concerns and contribute to positive changes that benefit the entire patient community.
- 6.2 Feedback from the ICB's group of citizen advisors has been that Patient Participation Groups (PPGs) are valuable to supporting involvement at a local level to support general practice and work in neighbourhoods. The ICB citizen advisor group (Citizen's Health Reference Group) has been vocal in the need for the ICB to look at how GP practices can be supported and encouraged to share best practice for organising and maintaining PPGs.
- 6.3 To support this work, the ICB is undertaking a review of Patient Participation Groups (PPGs) across Lancashire and South Cumbria to align this insight to feedback which has been shared by local Healthwatch. This aims to support GP practices and share good examples where this is working well in Lancashire and South Cumbria and demonstrate how this has helped support improving health and care in local communities.
- 6.4 Since July 2025, 105 of our 195 GP practices have shared responses about their arrangements for PPGs and any support they need to improve engaging with their patients.
- 6.5 Of the 108 responses received so far, the following insights have been captured:
 - 65 per cent reported they have an active PPG
 - 23 per cent have a group but it is currently inactive
 - 12 per cent do not currently have a PPG.
 - The majority of groups that do exist are small. Thirty-two per cent have between one and five members and 33 per cent between six and 10 members.
 - Six per cent of responses report groups with membership in excess of 25 people.
 - Most groups (74 per cent) host meetings face-to-face with their members.

6.6 Once the review is complete, a report will be produced which will help to identify areas where support is required and areas of positive feedback. We are looking to work with our local Healthwatch partners to capture learning and recommendations which aim to help and support general practice whilst recognising the significant demands and pressure on services.

7 Engagement activity between July and September 2025

7.1 The table below highlights additional engagement and involvement activities by the ICB in addition to those mentioned above:

Table 1:

| ICB engagement and involvement activity | | |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Orthodontics model of care | Working with NHS Trusts, the ICB has delivered targeted engagement on a proposed change to the model of care for orthodontics. This involves working with clinicians in their patient clinics to capture their views. 275 people have contributed their views, including those from our virtual citizen's panel. 83 of these are patients with lived experience of using the service which is approximately 6 per cent of the total number of people who typically access the service each year. | |
| Public awareness and informing | The ICB continues to run bespoke health-related campaigns in support of local priorities. Cancer awareness is a local priority and since April 2025 the ICB has urged people to familiarise themselves with bladder cancer symptoms, protect oneself from sun damage and lower the risk of skin cancer and attend cervical cancer screening appointments. A campaign to promote awareness and boost early diagnosis of ovarian cancer has included working with cancer charity Ovacome to bring its eye-catching van to town centres, community events and supermarkets across the region, from 17 September to 18 October. | |

Table 2:

| Public insight report | ts control of the second of th |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>Listening</u> to communities about vascular services | Targeted engagement about a proposed model of care for vascular services heard from 110 people through focus groups with community groups and one-on-one interviews |
| model of care | with patients at out-patient clinics. This means over a number of phases, 1,062 people have had their views considered in the development of the model of care. |
| | The insights will be considered as part of the development of the model as part of the service change process. |

| Listening to communities about secondary care orthodontics model of care | Views have been captured on a proposed model of care for secondary care orthodontics from 2,001 people. The feedback from patients does broadly support the case for change by evidencing that sustainable access to consultants and reducing waiting times were considered most important. The model being based on good practice of the current service and desire for solutions on travel were also important. The insights will be considered as part of the development of the model for the service change process. |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Listening to patient experiences and engagement regarding paediatric audiology | The ICB is supporting a review of paediatric audiology services across Lancashire and South Cumbria. Insights from complaints and Friend and Family Tests of users of the services have been reviewed in addition to findings from public engagement are being used to influence the current stage of the review. This includes views of nearly 1,000 people. |

8 Recommendations

- 8.1 The ICB Board is requested to:
 - Note the contents of the report and the insight captured from engagement and involvement activities

Neil Greaves, Director of Communications and Engagement 18 September 2025