

## Integrated Care Board

<b>Date of meeting</b>	19 March 2026
<b>Title of paper</b>	Case for Change - Managing demand in the community enabling reduction in beds at the Royal Lancaster Infirmary
<b>Presented by</b>	Professor Craig Harris, Chief Commissioning Officer
<b>Author</b>	Lisa Roberts, Senior Programme Manager
<b>Agenda item</b>	15b
<b>Confidential</b>	No

### Executive summary

University Hospitals Morecambe Bay NHS Foundation Trust (UHMBT) have developed a proposal to reduce the number of beds on the Royal Lancaster Infirmary site. This can be found in the Case for Change at Appendix A.

Progressing with the outlined changes constitutes service change under NHS guidance and UHMBT and the ICB will continue to work in collaboration with NHSE NW colleagues to proceed on this basis, to ensure adherence to this guidance.

The ICB Boards approval of the Case for Change is a key milestone in this process, which will include paying particular attention to evidencing proposal meets the requirements for NHS bed closures.

Once the Case for Change has been approved by the ICB Board, it will progress to formal NHS England Stage 1 Assurance, where a strategic sense check will be undertaken.

### Public and Stakeholder Engagement

Section 3.4 of the paper provides an outline of the ICBs targeted patient insight and early engagement planned for during March 2026, supported by the Trust.

Ongoing and proportionate involvement of patients the public, staff, local authorities and wider stakeholders will be undertaken throughout the entire change process.

### Recommendations

The Board is requested to:

- Note the contents of the report.
- Approve the Case for Change, in line with NHS service change guidance.

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

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	✓			Potential cost savings if bed numbers are reduced.

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

Meeting	Date	Outcomes
Executive Committee	03 March 2026	Case for Change endorsed
Service Change Assurance Group	04 March 2026	Case for Change endorsed

#### Conflicts of interest associated with this report

not applicable

#### Impact assessments

	Yes	No	N/A	Comments
Quality impact assessment completed	✓			Undertaken by UHMB 18.11.25
Equality impact assessment completed	✓			Undertaken by UHMB 18.11.25
Data privacy impact assessment completed			✓	

**Report authorised by:** Professor Craig Harris, Chief Commisisoning Officer

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## Case for Change - Managing demand in the community enabling reduction in beds at the Royal Lancaster Infirmary

### 1. Introduction

- 1.1 University Hospitals Morecambe Bay NHS Foundation Trust (UHMBT) alerted the ICB to a proposal outlining a two-phase approach to closing two wards on the Royal Lancaster Infirmary site, equating to a total of 48 beds. Work has started to articulate these proposals, with UHMBT colleagues developing a Case for Change, which can be found at Appendix A.
- 1.2 The Trust are proposing a phased approach with plans progressed to close one ward (24 beds) this year with the second ward (a further 24 beds) closing at a future date yet to be decided, and only when further improvements have been sustained to ensure this can be done safely and effectively.
- 1.3 Considerations have been given to this proposal, and discussions have been held between the Trust, ICBs Service Change SRO and NHSE NW who concluded that implementing this proposal would constitute service change and should proceed on this basis, in line with NHS service change guidance.

### 2. The Proposal

- 2.1 The Trust are proposing to remove a total of 48 beds, within two recently repurposed rehabilitation wards in the Castle View Unit in a phased approach, by closing a rehabilitation ward that is occupied by patients who are Not Meeting the Medical Criteria to Reside (NMC2R) and are either waiting for intermediate care beds or who have ongoing therapy needs.
- 2.2 These patients should have their needs met in a more appropriate setting which is not a hospital bed and there is focused work to reduce the NMC2R to support this. This is also connected to the financial savings that the Trust is required to achieve.
- 2.3 The proposed closure of these beds is not about a removal or reduction in service, but the output of delivering several high impact improvement initiatives. By making these improvements, the Trust will improve Length of Stay, reduce admissions and reduce the number of patients NMC2R; improving quality and delivering better patient outcomes and experience.

- 2.4 The Trust have shared specific improvements they are making to increase the number of virtual ward beds, and to proactively increase the number of patients referred and accepted into a virtual ward. There is a structured improvement programme that will improve Criteria Led Discharge (CLD) to support a reduction in discharge delays, improves patient flow, and facilitates earlier weekend discharges. Effective partnership working with Westmorland and Furness Council is reducing delays for patients requiring reablement and the therapy leads are increasing internal capacity through working more efficiently to again reduce the delays for therapy.
- 2.5 There are no associated job losses resulting from this change, but there would be a reduction in bank spend. As part of the Case for Change development Quality Impact Assessments and Equality Impact Assessments have been undertaken by the Trust.

### 3. **Progress to date**

- 3.1 To support a collaborative, proportionate and responsive approach an early draft of the Case for Change was shared with NHSE North West Subject Matter Experts (SMEs). In response to the informal feedback received, the Case for Change was updated as follows:
- Further information on discharge delays added
  - Addition of equality and health inequalities data / narrative
  - Addition of detailed performance metrics and actions being taken
  - Added narrative regarding communications and engagement actions and plans
- 3.2 The ICB Board should note that although initial feedback from SMEs has been received, NHS England Stage 1 Assurance is pending.
- 3.3 The Trusts Chief Medical Officer and Director of Comms and Engagement have undertaken early engagement with the Lancashire Health Overview and Scrutiny Committee (HOSC) presenting the proposal and citing the collaboration and improvement work undertaken and the measures in place to ensure any changes are carried out safely.
- 3.4 The ICB will lead some targeted patient insight and engagement to support the case for change during March 2026, supported by the Trust. This will include:
- Targeted engagement with current patients, families and carers on the affected wards
  - Direct engagement with relevant community groups - including patients with long-term conditions and frailty

- Desktop review of previous feedback / insight - including previous ICB-led engagement activities, patient and public insights from partners, patient comment and complaints, and data and performance metrics

#### **4. Conclusion**

- 4.1 Progressing the outlined changes to the RLI bed base constitutes service change under NHS guidance. UHMBT and the ICB will continue to work in collaboration with NHSE NW colleagues to proceed on this basis, to ensure adherence to this guidance. The ICB Boards approval of the Case for Change is a key milestone in this process, which will include paying particular attention to evidencing proposal meets the "fifth test" for NHS bed closures. Often referred to as the NHS Bed Test or Patient Care Test, this will ensure that any proposed reduction in hospital beds is justified, safe, and supported by community alternatives.
- 4.2 Following ICB Board approval, the Case for Change will progress to formal NHS England Stage 1 Assurance, where a strategic sense check will be undertaken.

#### **5. Recommendations**

- 5.1 The Board is requested to:
1. Note the contents of the report.
  2. Approve the Case for Change, in line with NHS service change guidance

**Lisa Roberts**

**05 March 2026**