# NHS Lancashire and South Cumbria Integrated Care Board DRAFT Board Assurance Framework 2022/23

Strategic Aims	Emerging Vision: To become a world class community, health and care system with great health outcomes and narrowing health inequalities.
SA1	Improve population health and healthcare
SA2	Tackle inequalities in outcomes, experience and access
SA3	Enhance productivity and value for money
SA4	Help the NHS support broader social and economic development

Strategic Aims	Strategic Objectives 2022/23		Current Risk Score	Risk Movement
SA1, SA2	2022_01	Improve quality, including safety, clinical outcomes and patient experience		$\leftrightarrow$
SA1, SA2,	2022_02	To equalise opportunities and clinical outcomes across the area		$\leftrightarrow$
SA3, SA4	2022_03	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees		$\leftrightarrow$
SA3, SA4	2022_04	Meet financial targets and deliver improved productivity		$\leftrightarrow$
SA1, SA2, SA4	2022_05	Meet national and locally determined performance standards and targets		$\leftrightarrow$
SA1, SA2, SA3, SA4	2022_06	To develop and implement ambitious, deliverable strategies		$\leftrightarrow$

Tiers of responsibility	Description
Level 1	The responsibilities of the ICB as a statutory body
Level 2	The role of the ICB for NHS system oversight
Level 3	The role of the ICB as a system partner to support integration

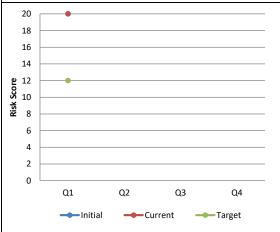
ICB 2022/01	Risk Lead:				Date Adde	ed:	07/1	2/22
	Executive Lead:	Sarah O'Brien			Date Last	Reviewed:	07/1	2/22
	Assuring Committee:	Quality Committee			Target Ris	k Date:		
	Programme Area	Quality			•			
Strategic aims: SA	1, SA2				N	ew	<b>←</b>	<del>&gt;</del>
Strategic objective:	Improve quality, inc	uding safety, clinical outcor	mes and patien	t experience				
System Diagnostic Phase	Recovery (1-3 years)							
Level 1-3	Level 1							
Key risks	•		Ris	sk appetite		Impact	Likelihood	Score
Inadequate capacit	y (major backlog of wait	ers)	Ini	itial Risk Rating				
Cancer performance	e well below target and	deteriorating	Cu	ırrent Risk Ratiı	ıg			
Primary Care Acces	SS		Та	rget Risk				
Delivery againt CHO	key performance indic	ators				•		
Delivery against sta	atutory safeguarding dut	ies		20				
Maternity services				18				
Learning Disability	and Autism inpatient se	rvices						
CTRs				16				
00								

# Areas for opportunities

Streamlining clinical/care networksdelivery programme

To standardise best practice (GIRFT)

Options being appraised for a single delivery model for Continuing Healthcare in LSC



# Controls to Mitigate Risk

ICB Quality Committee oversight

ICB Delivery Board oversight

Improvement Hub

Elective Care Recovery Programme is in delivery phase with clearly defined trajectory

Streamlining clinical/care networks programme in delivery phase with clearly defined trajectory

## Assurances on Controls

System Quality Group

Assurance from Quality Committee Reports/System Quality Group minutes

Findings from deep dive reviews Updates from ICB Delivery Board Safeguarding Assurance Board SEND Partnership Board

# Gaps in Controls Measures

Workforce pressures

Variation

Operational pressures in urgent and emergency care; ambulance performance well below target;

Trajectories for all delivery programmes still to be defined

## Gaps in Assurance

ICB Integrated Performance Report is still being developed

# **Actions Planned**

Defined trajectories to be set for all priority delivery programmes

ICB_2022/02	Risk Lead:		Date Added:	07/12/22
	Executive Lead:	David Levy	Date Last Reviewed:	07/12/22
	Assuring Committee:	Quality Committee	Target Risk Date:	
	Programme Area	Inequalities		
Strategic aims: SA1,	SA2, SA4		New	$\leftrightarrow$
Strategic objective:	To equalise opportu	nities and clinical outcomes across the area		Ţ,

Level 1-3 Key risks

Phases:

Variation on mortality figures

Accessing groups that have traditionally have under-used NHS services Inflexibility of resouce allocation formula

Level 1, Level 2, Level 3

Wide rangiing health inequalities across LSC and these continue to widen depsite focused effort

Cost of living crisis expected to further increase the risks

Root causes largely outside the NHS

Long Covid emerging as a major challenge

Sharp growth in long term conditions

Initial Risk Rating			
Current Risk Rating			
Target Risk			
	-	-	-

Impact Likelihood Score

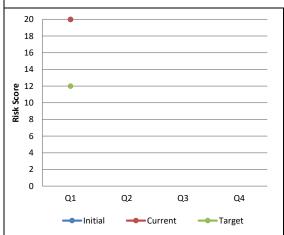
#### Areas for opportunities

Elective Care Recovery delivery programme

Streamlining Clinical/Care Networks

Population Health Programmes

Significant opportunities for deeper integration between health and social care Integration of health equity into plans at both "place" and system levels which are jointly agreed with our partners



#### **Controls to Mitigate Risk**

Extended leadership team roles in medical portfolio appointed to support Population

Health Management

Improvement Hub

Population Health Programme

Elective Care Recovery programme in delivery phase

## Assurances on Controls

Risk appetite: seek

Assurance from Quality Committee Reports

Balanced scorecard includes performance metrics "Tackle Health Inequalities"

Integrated Care Partnership reports

ICP workshop in October to scope priorities for

Public Involvement and Engagement Advisory Committee reports Updates from Delivery Board

# Gaps in Controls Measures

Operational pressures in urgent and emergency care; ambulance performance well below target;

Trajectories for all delivery programmes still to be defined

## Gaps in Assurance

ICB Integrated Performance Report is still being developed Place Based Partnerships not yet formed

#### **Actions Planned**

Defined trajectories to be set for all priority delivery programmes

Integrated Care Strategy in development (due December)

Continue to develop our approach to Population Health Management to

Prevent ill health

Address health inequalities

Use data and analytics to redesign care pathways

Measure outcomes with a focus on improving access and health equity for underserved communities

ICB_2022/03	Risk Lead:		Date Added:	07/12/22
	Executive Lead:	James Fleet	Date Last Reviewed:	07/12/22
	Assuring Committee:	People Board	Target Risk Date:	
	Programme Area	Workforce		
Strategic aims: S	A3, SA4		New	$\downarrow$

Strategic	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential		
objective:	objective: employees		
System	Stabilise (12-18 months)		
Diagnostic	Transformation phase (4-7 years)		
Phases			
Level 1-3	Level 1 and Level 2		

Key risks

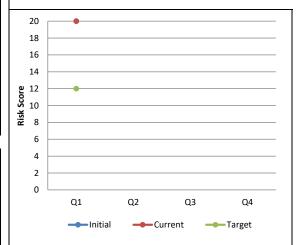
Vacancy rates

Capacity and timescales to train new staff Identifying and enhacing LSC's employment offer Developing a greater sense of ownership Introducing new ways of working

	Risk appetite: seek	Impact	Likelihood	Score
	Initial Risk Rating			
	Current Risk Rating			
	Target Risk			
- 1				

# Areas for opportunity

Partnership working between individual organisations and provider collaboratives Temporary Workforce Optimisation Delivery programme is in mobilisation phase System transformation workforce programme



## Controls to Mitigate Risk

People Board oversight

Workforce transformation is one of the ICB's five priority areas/portfolios during this transitional year to support delivery of major efficiency benefits, improving quality and reducing costs

#### **Assurances on Controls**

System partners have agreed to establish a sustainable workforce model for the system "One L&SC Workforce" Assurance from People Board Reports
Balanced Scorecard Metrics "Workforce"
ICS Workforce Insight Report

Market testing exercise conducted in Oct 22 with full market procurement planned (Nov)
Updates from Delivery Board

# **Gaps in Controls Measures**

Operational pressures in urgent and emergency care; ambulance performance well below target;

Trajectories for delivery programmes still to be defined

# Gaps in Assurance

ICB Integrated Performance Report is still being developed

# **Actions Planned**

Defined trajectories to be set for all priority delivery programmes

Development of the One LSC Workforce initiative (temporary workforce optimisation)

Establish workforce transforamation programme

Establish future workforce model

Create new ways of working

Enhance and expand multidiciplinary roles, creat hybrid roles

Offer flexible career pathways and employment models

ICB_2022/04	Risk Lead:		Date Added:	07/12/22
	Executive Lead:	Sam Proffitt	Date Last Reviewed:	07/12/22
	Assuring Committee:	Finance and Performance Committee	Target Risk Date:	
	Programme area	Financial Sustainability		
Strategic aims: S	A3, SA4		New	$\leftrightarrow$
Strategic	Meet financial targe	ets and deliver improved productivity	<u>.</u>	
objective:				
Sytem diagnostic	Stabilise (12-18 mor	nths)		
phase				
Level 1-3	Level 1			

**Key risks**Current in year financial performance and major financial challenge faced as a system

Absence of an agreed accountability framework

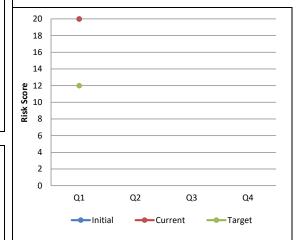
Variations in comparative productivity

Delays in the identification and delivery of recurrent savings plans

Increasing financial pressures associated with CHC, Mental Health and Learning Disability IPC, discharge to assess schemes incurred (funding for hospital discharge reduced but schemes continuing)

Higher levels of Covid activity

Risk appetite: cautious	Impact	Likelihood	Score
Initial Risk Rating	4	5	20
Current Risk Rating	4	5	20
Target Risk	4	3	12



#### Areas for opportunity

Transformation and priority delivery areas identified to support delivering efficiency savings,

Dedicated resources and a clear programme plan for delivery:

unfunded capacity, elective care recovery, streamlining clinical/care networks, corporate collaboration, temporary workforce optimisation/medicines optimisations and CHC

## Controls to Mitigate Risk

ICB Standing Financial Instructions/Scheme of Reservation and Delegation Finance and Performance Committee established

A financial budget for 2022-23 has been agreed

A single LSC system plan has been submitted to NHSE detailing all commissioning and provider plans agreed by individual organisations within the system Additional financial controls have been implemented across the system (with peer review in place)

Delegation to place partnerships delayed whilst financial stability is achieved System wide vacancy control panel

Formal grip on control and agency processes

#### Assurances on Controls

Monthly CFO finance report to the board on progress against plans and key risks

Balanced scorecard metrics "Recover financial position" Audit Committee reports

Report to board on Transformation and Delivery Schemes 5 priority delivery programmes agreed (P1- P5) to help mitigate the risks to in-year financial performance

Finance and Performance Committee established Transformation team in place

MIAA Review of Financial Performance - "Improving Financial Sustainability:are you getting the basics right" Exercise"

# Gaps in Controls Measures

Operational pressures in urgent and emergency care; ambulance performance well below target:

Trajectories for delivery programmes still to be defined

# Gaps in Assurance

ICB Integrated Performance Report is still being developed Limited external assurance due to ICB only being established in July 2022

#### **Actions Planned**

Full review of all investment plans; delivery of savings plans for medicines, CHC; MARS and running cost reduction; transformation reserves ICB technical review

Bringing discharge to assess expenditure in line with available funding

Defined trajectories to be set for all priority delivery programmes

Full review of CHC, Mental Health and LD packages of care is underway; options being reviewed for a single CHC model to improve quality, and ensure that appropriate case reviews are carried out.

To move P1 Unfunded Capacity, P4 Corporate Collaboration, P5a Temporary Workforce Optimisation to mobilisation phase within 2-3 weeks.

ICB_2022/05	Risk Lead:	Date Added:	07/12/22
	Executive Lead: Maggie Oldham	Date Last Reviewed:	07/12/22
	Assuring Committee: Quality Committee	Target Risk Date:	
	Programme Area Performance		
Strategic aims:	SA1, SA2, SA4	New	$\leftrightarrow$
Strategic	Meet national and locally determined performance standards and targets	•	

Strategic	Meet national and locally determined performance standards and targets	
objective		
System Diagnostic	Stabilise (12-18 months)	
Phase		
Level 1-3	Level 2	

Key risks:

Variable trust performance in LSC against national standards (A&E performance, cancer and general waiting times)

LSC system is rated overall as SOF3 (requires improvement)

Gaps in community and social care

Availability of support to assist underperforming trusts

Operational challenges remain and create volatility

Winter pressures could adversely impact on system recovery

Rates of DTOC across LSC are variable (ranging from 5-22%)

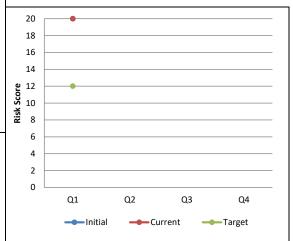
Risk appetite	Impact	Likelihood	Score
Initial Risk Rating	4	5	20
Current Risk Rating	4	5	20
Target Risk	4	3	12

## Areas for opportunity

Unfunded capacity delivery programme

Elective Care Recovery delivery programme

Board to board meetings have enabled positive dialogue with challenged trusts Partnership working between individual organisations and provider collaboratives Making Data Count Workshop in January 2023 to support development of integrated performance report



#### Controls to Mitigate Risks

Finance and Performance Committee established

NHS England and LSC ICB are working with SOF 4 and SOF 3 trusts develop recovery action plans

Lancashire and South Cumbria NHS FT have appointed an Improvement Director Unfunded Capacity Delivery Programme: steering group established, Programme Director in post and plan is mobilisation phase

Elective Care Recovery Programme in delivery phase AEDB oversight

#### Assurances on Controls

Chief Executive's Report to board

ICB Performance Report monthly to board

Balanced scoarecard metrics "Improve and Sustain NHS Trust

Performance"

Assurance from Quality Committee Reports
Updates from Delivery Board

# **Gaps in Controls Measures**

Operational pressures

Trajectories for all delivery programmes still to be defined

# Gaps in Assurance

ICB Integrated Performance Report is still being developed

## **Actions Planned**

Defined trajectories to be set for all priority delivery programmes

A comprehensive and tailored package of support and accountability requirements to support UHMB achieve SOF status 3 by April/May 2023 and SOF 2 within 18-24 months

Planned discussions with LSCFT, BTH and LTH to develop similar support packages

Making Data Count workshop planned for January 2023 and new Integrated Performance Report will be presented at the February 2023 board meeting

ICB_2022/06	Risk Lead:	Date Added:	07/12/22
	Executive Lead: Kevin Lavery	Date Last Reviewed:	07/12/22
	Assuring Committee: The Integrated Care Board	Target Risk Date:	
	Programme Area Strategic direction		
Strategic aims: SA	A1, SA2, SA3, SA4	New	$\leftrightarrow$

Level 1-3 Key risks

Phase

Availablity of capital monies

Determinants of health including poverty/cost of living crisis

System Diagnostic Stabilise, Recover and Transform

Quality and delivery of care is not always good

Level 3

Workforce challenges

Finance and productivity - limited resources

Population and communities disengaged

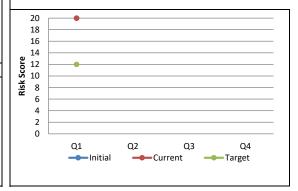
#### Areas for opportunities

Development of a "whole system plan" for Lancashire and South Cumbria; a ten year vision and roadmap (2023 - 2032) setting out ambitions of LSC system partners An Integrated Care Strategy (via the Integrated Care Partnership) aligned to population health needs

The Joint ICB/Trust 5 Year Forward Plan setting out how the ten year vision and integrated care strategy will be delivered

Aligned to three year ICB financial framework

Risk appetite: seek	Impact	Likelihood	Score
Initial Risk Rating			
Current Risk Rating			
Target Risk			



#### Controls to Mitigate Risk

A clearly defined approach to delivery, improvement and transformation to address the immediate, short and medium-term improvement and transformation priorities for the LSC system

System Programme Management Office to oversee programme

management/delivery

Financial framework to ensure greatest benefit from allocation of resources (3 year budget)

Assurance and accountability framework

Balanced scorecard to monitor progress

ICB Public Involvement and Advisory Committee established

#### **Assurances on Controls**

The "whole system plan framework" has been designed to meet the expectations of Joint Forward Plan guidance and inform the ICB initial intentions for implementation at system, place and provider levels

Board workplan outlines clear timescales for key strategies to be presented to board

System diagnostics report

Updates from Delivery Board

Updates from Public Involvement and Engagement Advisory Committee

## **Gaps in Controls Measures**

2022-23 is a transitional year therefore initial system plans will be limited in breadth and depth but will mature and develop over time and will be refreshed annually

## Gaps in Assurance

ICB Integrated Performance Report is still being developed

#### Actions Planned

The development of a LSC "whole system plan" to inform a series of underpinning strategies and plans; the whole system plan will also inform the development and agreement of system and provider operational activity, performance, workforce and financial plans for 2023/24 Quality team undertaking EIA and QIA for system delivery and transformation programmes

Consultation and engagement with primary care providers, local authorities and health and wellbeing boards, people and communities that will be affected by specific parts of the proposed plan o are likely to have significant interest in any of its objectives

An assurance and accountability framework will provide clear responsibilities for delivery against ICB directorate and cross organisational plans (and will inform accountability agreements with provider collaboration board)