

# **Frequently asked questions**

## What is an integrated care partnership?

An 'integrated care partnership' (which is often shortened to ICP) is a number of organisations (commissioners and providers) working together to improve the health and care of the whole population they serve.

Locally we have the Fylde Coast Integrated Care Partnership – known as Healthier Fylde Coast. The local partnership brings together NHS and council organisations. We have agreed joint priorities and we are working together to improve the health and care of people living on the Fylde Coast. The partnership will work together to a common vision: '**improving health and care together**'.

It should be noted that until there is any change in legislation, partner organisations will retain their own statutory status, but they will share responsibility, risks and resources.

## Who is leading the partnership?

A monthly steering group has been set up to oversee this work. The steering group consists of senior colleagues from the boards and governing bodies of partner NHS and local authority organisations.

## How does the Fylde Coast Integrated Care Partnership fit into the wider system?

Our partnership is one of five across Lancashire and South Cumbria – the remaining four being Pennine Lancashire, West Lancashire, Morecambe Bay and Central Lancashire. These five local partnerships sit within the wider integrated care system across Lancashire and South Cumbria. The Lancashire and South Cumbria Integrated Care System (which is often shortened to ICS) is a partnership of NHS, local councils, voluntary, community and faith sector organisations, public sector and local communities. The aims of the partnership are to join up health and care services, to listen to the priorities of our communities, citizens and patients and to tackle some of the biggest challenges we are all facing.

Lancashire and South Cumbria was one of the first areas in the country to be working as an Integrated Care System as set out in the NHS Long Term Plan in January 2019.

#### What are neighbourhoods and primary care networks?

There are eight neighbourhoods across the Fylde Coast. These are geographical areas across which groups of GP practices (primary care networks) and other health and care services work together to ensure joined up care tailored to the needs of their local populations. Neighbourhoods cover populations of typically between 30,000 and 50,000 and will become the bedrock of health and care services in the future.

#### How will practices benefit from this/how will it change working for practices?

Greater integrated working means that GPs and primary care staff are part of a wider community support network which makes best use of all resources available, including those in the voluntary, community and third sector. This will help patients to stay well, manage their conditions when they do become ill, use services appropriately when they need to and frees up GP time for those patients who need it most.

#### What do you mean by an integrated workforce?

An integrated workforce is one that works more collaboratively so that the whole team supporting patients is aware of their needs – meaning that the right professional can provide the right support at the right time. For example, the neighbourhood care teams are made up





of professionals from across different organisations and services. GPs and practice staff work alongside nurses, therapists and wellbeing workers employed by NHS Blackpool Teaching Hospitals Foundation Trust, as well as social workers employed by the council. Working as one team, the professionals put aside their organisational allegiances to make sure their skills and expertise are used appropriately to meet all of the needs of the patients they care for.

# Why do we need to work in this way?

All NHS organisations are facing some very significant challenges. Below are some of the challenges we are facing:

- **Significant levels of deprivation** in some areas of the Fylde Coast which impacts on population health, lifestyle and health inequalities
- A need to improve clinical outcomes and waiting times for our patients when they come into contact with health and care services
- **Future workforce challenges** linked to the age profile of our current workforce and current supply shortages
- An ageing population resulting in changes to the types of services that are needed
- Increasing demand for health and care services
- Limited financial resources with which to deliver services making better use of the 'Fylde Coast pound'

In order to meet these challenges we all need to change the way we work. We need to look at the bigger picture and work better and smarter together – not only for the benefit of patients and their families, but for our staff too. This means considering what is best for the whole Fylde Coast population and healthcare system rather than individual parts. We can achieve this by better working together to improve quality and reduce duplication. We are all responsible for making the best use of the resources available to us.

# What will the future organisational form look like?

For now, we do not know what the organisational form for the Fylde Coast will look like in the future. However, we are keen to work in as seamless a way as possible, with shared priorities, an integrated workforce and collective decision making (where possible).

# Are there plans for a Lancashire and South Cumbria clinical commissioning group?

Integrated care systems are central to the delivery of the ambitions of the NHS Long Term Plan. There are national expectations for a single set of commissioning decisions to be made at a system level – which will typically involve a single CCG for each ICS area. Discussions around a Lancashire and South Cumbria single CCG are currently taking place and we will know more in the next few months.

# What are the benefits for patients?

Patients will receive the support they need closer to home in a community setting, including support to better manage their own health and wellbeing. The way care is provided will be easier to understand, making it easier to use services. Professionals will share relevant, secure information between services, meaning patients and their families will have to give their medical history less frequently. Patient choice will not be affected, they will still have a legal right to choose from a range of locally commissioned services.

# What are the benefits for staff?

Staff will increasingly work more closely with colleagues from other organisations. This should give health and care professionals more time to spend with people who need their help by reducing unnecessary duplication. Improved data sharing and technology will support staff in their roles. New ways of working will create new and flexible roles with development opportunities for staff.

