

Lancashire and South Cumbria ICB update to the North Yorkshire Scrutiny of Health Committee

Introduction

Lancashire and South Cumbria is one of the most financially challenged systems in the NHS. Without support funding in 2024/25, the end of year system deficit would have been approximately £350million.

The ICB's annual budget for 2025/26 is approximately £5.4billion and immediate action is required to reduce spending. The challenge heading into 2025/26 is considerable and will result in the need to plan service provision and work with partners in a different way.

Despite the challenging financial position, the ICB has set out plans to reduce waste and duplication and reconfigure services. This will improve experience and outcomes for people living in Lancashire and South Cumbria and make services fit for the future.

Working with the North Yorkshire Scrutiny of Health Committee is crucial because it ensures that ICB services align with the needs and priorities of the population and enhances the quality of care we provide to the residents of South Cumbria.

Lancashire and South Cumbria ICB Annual Report and Accounts 2024/25

The Annual Report and Accounts for 2024/25 have been published. The report reflects on a period of significant collaboration and dedication across our staff and partners, who have worked tirelessly to meet and exceed targets in service delivery. Throughout the year, the organisation responded proactively to operational challenges and governance requirements, ensuring robust financial management and compliance with reporting standards. Notably, we continued to strengthen our governance structures, introduced new subgroups to support strategic planning, and maintained a secure year-end financial position. The report provides a comprehensive overview of our performance, partnerships, and resource management, affirming our ongoing commitment to transparency, accountability, and service excellence within the integrated care system.

The report is published on our website [LSC Integrated Care Board :: LSC ICB Annual Reports](#), but is also included as appendix 1.

South Cumbria end-of-year review 2024/25

Our four place-based partnerships have now published their 2024/25 end-of-year reviews for the first time. The South Cumbria review highlights significant progress in collaborative health and care initiatives across the region. With a focus on supporting communities to thrive, the partnership tackled complex challenges such as health inequalities, high rates of chronic illness, and workforce shortages. Key achievements include tailored neighbourhood initiatives addressing deprivation and health access, successful reduction in opioid

prescribing, enhanced mental health support through community transformation programmes, and the launch of innovative projects like the Integrated Wellness Centre and Intermediate Care beds. The Bay Anchor Network and WorkWell Partnership demonstrate a commitment to social value, inclusion, and helping residents return to work. Engagement with residents shaped service improvements, particularly in women's health and community resilience. The review underscores the importance of strong partnerships, resident voices, and integrated working, setting the stage for continued focus on prevention, wellbeing, and reducing inequalities in 2025/26.

The review is published on our website [LSC Integrated Care Board :: Place-based partnership end of year reviews](#), but also included as appendix 2.

Lancashire and South Cumbria entered into National Recovery Support Programme

In 2024/25, Lancashire and South Cumbria was one of several systems subjected to an investigation and intervention process. Despite support from NHS England North West, and the hard work of colleagues across our system, we were not able to make the progress we had hoped to with our spending.

As a result, NHS England (NHSE) recommended four organisations were placed into NHS Oversight Framework (NOF) Segment 4 and for each organisation to receive intensive support from the national Recovery Support Programme (RSP). The affected organisations are:

- NHS Lancashire and South Cumbria ICB
- Blackpool Teaching Hospitals NHS Foundation Trust
- East Lancashire Hospitals NHS Trust
- Lancashire Teaching Hospitals NHS Foundation Trust

The main concerns from NHSE centre around our system's difficulty in managing financial deficits and meeting financial recovery plans. We recognise the severity of the situation that we are in – as such we welcome this additional support from NHS England for the ICB and our trusts.

The RSP comprises of five strands:

- The diagnostic (stocktake to identify the drivers)
- Oversight and challenge
 - Appointment of an NHS England employed improvement director
 - Regular board to board meetings
- Financial support to drive the improvement plan
- Targeted support for delivery (access to subject matter experts)
- Continuous review of the plan (review and monitoring meetings)

The ICB has held regular improvement assurance group (IAG) meetings with each of the providers to focus on actions to improve the system's financial sustainability.

Requirements from the ICB in order to be able to exit the RSP are to cover the financial gap that is currently being faced and submit plans to reduce ICB running and programme costs by 47 per cent, in line with the national reforms to ICBs.

For information, the NOF Segments of the other providers that cover South Cumbria are listed below:

- University Hospitals of Morecambe Bay NHS Foundation Trust (UHMBT) – NOF Segment 3
- Lancashire and South Cumbria NHS Foundation Trust (LSCFT) – NOF Segment 2
- North West Ambulance Service (NWS) – NOF Segment 2

Lancashire and South Cumbria (LSC) 2030 Roadmap

There are some real opportunities for effective change, which involves more fundamental transformation and not just a focus on the finances.

The ICB's vision is to have a high quality, community-centred health and care system by 2035. This means focusing on prevention, delivering care in people's homes or as close to home as possible and making the best use of technology.

This is very much in line with Lord Darzi's report on the state of the National Health Service in England and the three 'big shifts' which the government says the NHS must undergo:

- moving care from hospitals to communities
- making better use of technology
- focusing on preventing sickness, not just treating it

In working towards achieving this vision, a Lancashire and South Cumbria Roadmap 2030 is in development. This roadmap will detail what will be done, and by when, over the next five years to create a health and care system fit for the future. It sets out the journey through three lenses:

- Stabilise – improving today's operations
- Recover – delivering emerging opportunities
- Transform – strategic new models of care for LSC 2030

The roadmap's priority areas of transformation for 2025/26 are focused on reducing pressure on the urgent and emergency care system and demand on services and will be supported and enabled through work in places and in integrated neighbourhood teams. The ICB will be working across NHS partners and with the wider health and care partnership to deliver in-year impact on intermediate care, managing long-term conditions in primary care, improving end-of-life and frailty care and service configuration, which includes transformation and early diagnosis of cancer and mental health along with acute services.

National NHS 10-year health plan

On 3 July 2025, the Government's 10 Year Health Plan was published. The 10 Year Health Plan focuses on three big shifts which align with the work we have been doing in our system for some time.

This was built upon previously shared information from April from NHS England regarding ICBs in England: Working together in 2025/26 to lay the foundations for reform.

The 10 Year Health Plan and letter from NHS England set out that although ICBs have a critical role to play in the future as strategic commissioners, there is a requirement to reduce running and programme costs of ICBs by 50 per cent by the end of December 2025.

Lancashire and South Cumbria ICB has been identified as being required to make 47 per cent running cost savings.

The ICB has been carrying out a functions-led approach to make sure the form of the new organisation is appropriate for delivering the future purpose of the ICB and in line with a national Model ICB Blueprint. It is clear that the changes will result in a very different organisation in the future than what is currently in place.

The ICB remains committed to keeping our staff, partners and stakeholders informed and involved as this work progresses.

The 10 Year Health Plan will be used in the work being done to shape the design of the ICB and develop an NHS Joint Plan for Lancashire and South Cumbria.

The Plan can be found on the Government website: [10 Year Health Plan for England: fit for the future - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/100000/10-year-health-plan-for-england-fit-for-the-future.pdf)

Priority intentions for 2025/26

There are a number of national priorities that the ICB will deliver over the next 12 months, as well as the identified local priorities by commissioning area.

National priorities

The operational planning guidance published in January sets out the national priorities for 2025/26. There is a clear and strong expectation that all parts of the NHS must manage within their available resources. The national priorities identified in the guidance to improve patient outcomes in 2025/26 are:

- Reduce the time people wait for elective care, improving the percentage of patients waiting no longer than 18 weeks for elective treatment to 65 per cent nationally by March 2026, with every trust expected to deliver a minimum five per cent improvement.
- Continue to improve performance against the cancer 62-day and 28-day Faster Diagnosis Standard (FDS) to 75 per cent and 80 per cent respectively by March 2026.
- Improve A&E waiting times and ambulance response times compared to 2024/25, with a minimum of 78 per cent of patients seen within four hours in March 2026. Category 2 ambulance response times should average no more than 30 minutes across 2025/26.
- Improve access to general practice, improving patient experience, and improve access to urgent dental care, providing 700,000 additional urgent dental appointments.
- Improve patient flow through mental health crisis and acute pathways, reducing average length of stay in adult acute beds, and improve access to children and young people's (CYP) mental health services, to achieve the national ambition for 345,000 additional CYP aged 0 to 25 compared to 2019.

The Lancashire and South Cumbria system aims to achieve this by working collectively to drive the reform to support delivery of these immediate priorities.

In terms of the transformation programme, for 2025/26 ICBs and providers have been asked to focus on the following:

- Reducing demand through developing neighbourhood health service models with an immediate focus on preventing long and costly hospital admissions and improving timely access to urgent and emergency care.
- Making full use of digital tools to drive the shift from analogue to digital.
- Addressing inequalities and shifting towards prevention.
- Living within the budget allocated, reducing waste and improving productivity. ICBs, trusts and primary care providers are expected to work together to plan and deliver a balanced net system financial position in collaboration with other integrated care system (ICS) partners. This will require prioritisation of resources and stopping lower-value activity.
- Maintaining collective focus on the overall quality and safety of services.

The ICB will work with all system partners to analyse and spread best practice and commission appropriate services to support this transformation programme.

Additional local priorities

In addition to a determination to achieve national priorities as part of the need to respond to system challenges, additional commissioning intentions have been identified to drive efficiencies or service improvements in 2025/26.

The development of these local priorities has been informed by what residents have said is important to them. This includes providing care closer to home, better integration of services, reduced waiting times and receiving the right care, in the right place, at the right time. People also want to see equity in terms of what services are available across Lancashire and South Cumbria, particularly relating to primary care and urgent care. It is believed that the local priorities, as well as the longer-term transformational priorities, reflect these wants and needs.

The commissioning intentions 2025/26 document (appendix 3) provides local intentions for each area on pages 10–16, and place priorities on pages 16–24.

National Neighbourhood Health Implementation Programme (NNHIP) submission

The Government's 10 Year Health Plan for England introduces a new care model featuring 'Neighbourhood Health Service' centres, designed to deliver healthcare within local communities. This will be realised through the NNHIP, which supports and accelerates ongoing work by Places and ICBs via collaboration, shared solutions, and continuous improvement.

NHS England wrote out to NHS and local authority chief executives, encouraging collaboration with local health and care providers, voluntary organisations, and community members to expedite the nationwide implementation of these services. Executives were

invited to submit applications demonstrating examples of integrated working and innovation within their regions as part of phase one of the Neighbourhood Health Programme.

The ICB submitted applications for Blackburn with Darwen, Morecambe Bay, Blackpool and Chorley/South Ribble.

Morecambe Bay and Blackburn with Darwen are among 43 places across the country included in the government rollout of new neighbourhood health services.

The areas will be allocated a programme lead who will work with existing local services to set up the service, drawing together a range of professions to develop a 'neighbourhood health team' consisting of community nurses, hospital doctors, social care workers, pharmacists, dentists, optometrists, paramedics, social prescribers, local government organisations and the voluntary sector – giving people easier access to the right care and support on their doorstep.

They will initially focus on supporting people with long-term conditions such as diabetes, respiratory diseases, cardiovascular diseases and those people who are frail with multiple and complex health and care needs - in areas with the highest deprivation. As the programme grows, it will expand to support other patients and priority cohorts.

The locations of the new services are still to be announced.

Richard Webb, corporate director of health and adult services for North Yorkshire Council, said: "We look forward to working with partners across health and social care to deliver more personalised, community-based care for the patients we serve.

"We're delighted to be part of this successful bid, which covers some of the most rural communities in North Yorkshire, Westmorland and Furness and Lancashire, as well as towns and cities. We look forward to the learning being shared and the opportunity being available for more people to benefit from a preventative and more local approach to care."