Introduction

North Cumbria ICP is a partnership of the following statutory organisations covering a population of 324,000 people:

- One Foundation Trust – North Cumbria Integrated Care NHS Foundation Trust (Formerly North Cumbria University Hospitals NHS Trust and Cumbria Partnership NHS Foundation Trust)
- One CCG – North Cumbria CCG.
- One County Council – Cumbria County Council.
- Four District Councils – Carlisle, Allerdale, Copeland and Eden District.
- One Mental Health Foundation Trust – Cumbria, Northumberland Tyne and Wear NHS Foundation Trust
- One ambulance trust - North West Ambulance Service NHS Trust.

From July 2019, the ICP area also includes 8 Primary Care Networks (Integrated Care Communities). The ICP also has a wide ranging, small and large scale third sector across North Cumbria.

In North Cumbria our health and care providers and commissioners are working in partnership with the County Council, the Third Sector and our community collaborating across all parts of the health and care system to improve outcomes for our local population.

Our Vision is “to build a new integrated health and care system together, using our collective capabilities for a healthier and happier population”.

We will do this by focusing on our three strategic aims:

1. Improve the health and care outcomes of our local communities and support people of all ages to be in control of their own health
2. Build health and care services around our local communities
3. Provide safe and sustainable high quality services across our sparsely populated area

We have already started to make changes, responding to the needs of our communities. Many of the NHS Long Term Plan intentions reflect initiatives already underway and our local needs will help shape how we deliver future national priorities.

In 2016 we held our ‘Healthcare for the Future’ public consultation about some of the services where there were concerns about the sustainability and this gave us clear priorities which we have implemented.

We are working collaboratively with frontline staff and our communities who have ideas about how things could be better.
By working together, we have already made some real improvements such as:

- We have created eight Integrated Care Communities in North Cumbria where teams of Health and social care professionals, GPs, the voluntary sector and the community are working together as one team to support the health and wellbeing of local people. Their focus is to help people manage long term health conditions, improve access to information about healthier lifestyles and provide more care out of hospital so people can stay as well and independent as possible.

- We have developed a Delirium Reach Out Service (Reduce, Educate, Assess and Care with Hope). The service provides proactive management support and intervention so our patients receive the best possible care.

- Preventing strokes - Cumbria Fire & Rescue Service is helping to detect Atrial Fibrillation (AF) - an irregular or fast heartbeat. Copeland Community Stroke Prevention project is holding community health checks.

Our health services, North Cumbria Integrated Care NHS Foundation Trust and NHS North Cumbria Clinical Commissioning Group, have been making shared decisions and setting system priorities for some time. Sharing the challenges of finance, workforce and improvement has enabled us to remove the distraction of organisational priorities, helping us to focus our collective resources on patients and communities.

We are also working in partnership with Cumbria County Council to ensure our plans support the overarching aims of the ten year Health and Wellbeing Strategy for Cumbria as well as working together to ensure that health and care is truly joined up.

Working collaboratively with our out of hours GP service Cumbria Health on Call (CHOC), our 39 GP practices we are supporting our primary care networks. Our partners include; North West Ambulance Service (NWAS), community pharmacies, our vibrant Third Sector and our regulators NHS England / Improvement.

We are listening to our staff to help us innovate and improve the way we do things and we are building co-production as the way we involve our communities in our system improvement and development.

We have a lot to do to tackle historic and ongoing challenges, but we believe that by working together with our communities, we can ensure that North Cumbria will be the better place to ‘Start Well, ‘Live Well’ and ‘Age Well’.

As one of four integrated care partnerships in the North East and North Cumbria Integrated Care System (ICS) we are working closely with our partners recognising the benefits of an ‘at scale’ approach to those priorities to amplify the collective impact and reduce duplication.
Health, Wealth and Wellbeing

Improving the health and care outcomes of our local communities and supporting people of all ages to be in control of their own health is one of our three strategic aims. We need to be better at predicting and preventing ill health. We want all people to stay well for longer by supporting them to make better choices. We also want to ensure that those people with the worst health outcomes get the support they need to have a better quality of life and to live independently for as long as possible.

Prevention

Working with all health and care partners we are building a population health system that focuses on prevention, supporting patients to make the right choices about their health and reducing variation in outcomes that exist across our communities.

The North Cumbria Population Health Programme has identified five prevention ‘high impact’ changes to help reduce the burden of the most prevalent conditions on health and care services:

- Improving stop smoking pathways for high risk groups
- Establishing a weight management pathway for children and adults
- Developing a physical activity pathway
- Maximising the effectiveness of the NHS Health Check programme
- Improving the management of Cardiovascular Disease risk factors

These form part of a wider population health approach that also includes work to e.g. address the wider social determinants of health. All five high impact changes will directly support the developing social prescribing programme (and wider personalised care agenda) in North Cumbria (by strengthening the interventions and referral options for patients/clients into a range of community based services).

In addition, over the next 18 months, North Cumbria Integrated Care Partnership will be providing Population Health Management training to staff involved in the eight Integrated Care Communities (following a successful bid to the Health Foundation’s Applied Analytics Fund). This means there will be a legacy programme to help implement ongoing Population Health Management work when involvement in accelerator programmes end.

Climate Change & Sustainability

Climate Change is now recognised as the biggest public health threat this century and there is a substantial body of evidence around how climate change is affecting our world. We recognise that climate change has significant implications for our current and future health and wellbeing and as an ICP we have a genuine responsibility and opportunity to tackle climate change and influence the health and sustainability of our local community.
As one of the largest local employers, consumers and provider of goods and services, we recognise the need and responsibility to undertake our activities in a way which minimises our environmental impact and ensures we have a wider impact as a Good Corporate Citizen on the local environment, economy and community.

Our Sustainable Development Management Strategy and plan sets out our key commitments, objectives and actions to improve the environmental sustainability of our organisations, deliver real bottom line savings through a combination of quick wins and spend to save carbon reduction initiatives. Underpinning this will be a combined staff awareness and behavioural change campaign.

We are committed to working in partnership and maintaining a positive and on-going dialogue with our key stakeholders to deliver this strategy and the associated actions as part of the broader commitment to the NHS being an Anchor Institution.

**Workforce, Employment and Skills**
The workforce in North Cumbria is also the most valuable asset in health and social care and can be at the forefront of empowering people’s independence, choice and improving their social inclusion and social wellbeing. Delivering this vision for North Cumbria requires a confident, capable, well-trained, motivated and engaged workforce.

We have difficulty in attracting people to work here and pursue their careers in the region. We also have an aging workforce, of which 3.15% could retire now and a further 15.73% within the next five years. Therefore need to consider flexible job plans and roles to enable and encourage individuals to remain working here and be attracted to the area.

Our People Plan identifies the objectives which need to be achieved to ensure that we have the optimum number of the workforce, with the best mix of skills, to support our communities in 2025.
Clinical Strategy and delivery of the Long Term Plan requirements

Building health and care services around our local communities and providing safe and sustainable high quality services across our sparsely populated area are two of our three strategic aims.

We know that at times care can feel disjointed and that people don’t always receive the right support when they need it. By joining up health and care teams around our local communities we can respond and tailor that care and support. This will better meet the changing needs of our communities and the people who live in them.

To meet the changing needs of our communities we need to find innovative ways in which to develop and deliver quality care more sustainably across both primary and secondary care. By working with our partners, both within Cumbria and the North East we will develop our services to deliver the right care to meet our local needs.

For our hospital services this will mean engaging and influencing regionally and nationally on the small rural district general hospitals and how care and workforce models will develop and evolve in the future. It will also include how specialist clinical networks are developed in order to retain core and specialist services as locally as possible, whilst developing specialist pathways of care.

Collaboration across the ICP

RTT / Shorter planned care waits

Currently the overall waiting list is significantly higher than the baseline March 2018 level which, in line with national guidance, is set as the target maximum list size. Concurrent with this is the fact that urgent and routine patients are waiting longer than good practice would recommend, and longer than the constitutional standards.

The intention is that the overall waiting list size brought back to the March 2018 level for 2020/21 whilst work to re-profile the list and address the long wait and urgent patients is phased through into 2020/21. There is a commitment to offering the choice for patients to have their planned care with another Trust if they have waited longer than 26 weeks. There is also a commitment to preventing any 52 week breaches.

Developing Primary Care and Primary care Networks

We have eight PCN which mirror our Integrated care Communities and are working on a programme to significantly support the development of primary care over the next five years by delivering:

- Personalised care including social prescribing
- First contact physiotherapists already working in General Practice
- The enhanced care home model
- Health pathways model improving the pathways between primary and secondary care
- Population Health
• Continue to develop strong partnership working through our Integrated Care Communities, working with; community services, acute hospitals, third sector social care, council services and other local services.
• Develop our primary care networks
• The North Cumbria Advice and Guidance system has been a great success with GPs and reduced unnecessary referrals to secondary care. The use of this system will continue to expand and support GPs across the area.

Cancer

Exciting work is ongoing between Newcastle upon Tyne Hospitals NHS Trust and North Cumbria Hospitals Trust to build and run the new Northern Cancer Centre in Carlisle. This will support the provision of:

• Better local services for the population of North Cumbria which comply with national service specifications for radiotherapy and chemotherapy, and deliver cancer waiting times (CWT) standards
• A resilient, efficient and cost-effective clinical oncology service from a major Cancer Centre
• A modern oncology centre on the Cumberland Infirmary site which integrates day case oncology services for WNE Cumbria

A joined up and system working approach to prevention, early diagnosis and timely referrals/treatment of cancer across our North Cumbria Health and Care ICP provides significant opportunities to help us manage some of the issues and challenges that we face.

Mental Health

Mental Health and Learning Difficulty services for adults and children in North Cumbria have experienced a number of long standing challenges over the years which have not been sustainably addressed. From October 2019, Northumberland Tyne & Wear NHS Foundation Trust has become Cumbria, Northumberland Tyne & Wear NHS Foundation Trust and will provide services in North Cumbria and across the entire ICS.

North Cumbria will make significant progress towards developing innovative and evidence based integrated pathways. These will have been developed by the people who use mental health and learning disability services and their families and carers and will be across all care provision to meet the physical health, mental health and wellbeing needs of our population.

We will have the right staff in the right place and in the right numbers. North Cumbria will be regarded as an excellent place to train and develop.

Mental health will be at the forefront of all decisions around strategy and spending in North Cumbria – there will be no health without mental health.
Stroke

In North Cumbria ICP we are making significant changes to our acute and community stroke services. We will be rolling out a new Hyper Acute Stroke Unit at the Cumberland Infirmary Carlisle. Also, an Early Support Stroke Discharge (ESSD) service will cover the whole area and enable patients to receive the right support in the community. We have a stroke prevention programme which has been co-produced and developed with key partners across health, care, public health and our community which will form an essential part of our stroke prevention programme.

Respiratory

The aim for respiratory care is to move away from a reactive based treatment to a more proactive model of care delivery with the focus on prevention, conservative treatment and managing escalation within the community whenever appropriate.

We will bring Primary and Secondary care much closer together within the respiratory pathway where, for example, GPs will be increasingly supported by hospital based consultants through the use of Consultant Connect and Advice and Guidance. Additionally, “Attend Anywhere” will facilitate the delivery of some outpatient activity in local communities making access for patients easier.

The delivery of pulmonary rehabilitation will change and will integrate the use of health coaches and trans-diagnostic education programmes which will provide support for a wider range of conditions.
Driving up performance where there are known issues across the North Cumbria ICP

Cancer 62 day waits

In common with many parts of England, North Cumbria has seen a significant growth in the demand for cancer services, driven in part by increased public awareness of the symptoms and especially in parts of North Cumbria, the increasing numbers of elderly people who are more susceptible to getting cancer. Cancer treatments are provided locally within the ICP and also through the tertiary centres in the North East.

Recognition of the increases in demand already seen and the expectation that this demand will continue to grow, is reflected in the investment currently being made in the Carlisle Cancer Centre. The resilience and sustainability of the new service is further enhanced by the strengthened partnership with the tertiary centre in Newcastle and the coordination through the Cancer Alliance.

Urgent and Emergency Care – A&E

Whilst there is no single root cause, the impact of increased demand, high acuity patients combined with the challenges of recruiting key clinical staff and managing patient flow, have come together and impacted adversely on A&E.

We have already made significant progress in improving patient flow through reduced delayed discharges, reviewing the internal processes within the hospitals and in recruiting permanent members of our clinical teams to replace short term locums.

There is a clear focus for our ICCs to focus on reducing hospital attendances to A&E and significant progress has already been made in stemming growth in non-elective admissions and A&E attendances by providing enhanced support to patients in our communities.

The greatest opportunity for addressing urgent care performance lies with patient flow and continued focus on how long patients stay in hospital and also making greater use of same day care. We are currently developing an emergency care village on both our acute hospital sites to improve the emergency care flow to provide a better co-ordination of hospital and partner services. This integrated approach builds on the progress already made in working in a seamless manner across the different parts of the service and is intended to improve our use of beds and maximise the alternatives to hospital attendance and overnight admission.

Elective and Diagnostics Waiting Times (RTT)

The current referral to treatment times for outpatients, elective admission and diagnostics are all currently falling below constitution standards. Our intention is to undertake a full review of the clinical and supporting administrative processes for each of these areas, focussing on further improvement to theatre and outpatient clinic scheduling, alignment of medical and other staffing rotas.
It is also intended to review and improve the data quality underpinning the waiting list and the use of patient tracking to ensure that patients are seen based on clinical urgency and time on the waiting list.

It is expected that recovery will be a medium term objective within the life of this plan, with the intention being that the Trust will deliver sustainable waiting times for elective and diagnostic patients with capacity aligned to need.

**Local integration at place**

The North Cumbria ICP has been working as an integrated care system since 2018 and has developed system wide working, relationships and shared priorities.

We have created eight Integrated Care Communities in North Cumbria where teams of Health and social care professionals, GPs, the voluntary sector and the community are working together as one team to support the health and wellbeing of local people. Their focus is to help people manage long term health conditions, improve access to information about healthier lifestyles and provide more care out of hospital so people can stay as well and independent as possible.

Below are some of the specific changes that we plan to deliver to support local integration in our communities:

- Further develop ICCs to include mental health, muscular treatment service and children’s services.
- Develop pathways of care for patients that join together primary, community and secondary care, improve quality and experience.
- Communities will be involved in shaping future services, linked to developing thriving communities
- Utilise technology to monitor people’s health at home and develop interventions and target disease areas across communities
- An increase in use of the Third Sector and social prescribing
- Primary Care Networks (PCNs) delivering significant changes to how care is provided in communities

Our Better Care Fund will continue to support the progression of integration across Health and Social Care in North Cumbria, with a focus on reducing avoidable hospital admissions, reducing delayed hospital discharge and helping people to stay well at home. There will be continued support for our Integrated Care Communities (ICCs). ICCs are the vehicle for delivering integration at place, with more joined up support in our communities, close to where people need it.

**Enablers**

**Finance and Activity**

North Cumbria health and care organisations will work together to ensure that we can live within our means. It is vital that we make the right investments in the right areas that will sustain and improve the quality of health and care services.
This will involve; innovative ways of working, shifting some of our spending to prevention and community settings, working closer together and a robust focus on efficiency and quality improvement. All of which will support our aim to ensure there is efficient use of our resources and that we have financial balance by 2024. This will include oversight of system level efficiency programmes informed by the Rightcare, Model Hospital and GIRFT programmes.

As the system is currently structured, funding levels cannot keep pace. If we accept a conservative estimate of inflation at 1%, new medical developments at 1% and demand rising at 4%, then the health and social care system as currently configured would require at least a 6% budget increase each year to maintain our position.

Delivering against this backdrop will require a considerable programme of work across our system to; reduce demand, invest wisely and making efficiencies based on quality improvements.

**Workforce**

Our planned changes around one of our enabling aims are as follows:

- Development of our culture and values, including how we continuously learn and improve together
- Provide opportunities for them to have a rewarding career
- Develop a workforce with targeted plans to ensure we have the right people and skills to meet future needs
- Develop new primary care roles such as first contact physiotherapists, physician’s associates, social prescribing link workers and community paramedics
- Develop attractive career pathways and programmes
- Focus on Talent Management and Succession Planning
- Develop more confidence in involving patients, the community and third sector in service improvement
- Create more significant opportunities for research and develop innovative roles which will be more attractive / rewarding

**Digital**

We know we need to improve the way we use digital technology across our health and care services. We have pockets of innovation but we need to ensure everyone has access to modern, effective and joined up systems. We will develop the right digital solutions involving the people who will use them.

We want to ensure our staff are supported with the right technology to do their job well and give people the flexibility to access care and support digitally.
Estates

Across the North ICP providers and commissioners are fully engaged with the NENC ICS estates strategy. Our ambition is to provide a more fit for purpose, flexible, greener and more cost efficient estate.

Below are some of the key estates programmes for delivery:

- West Cumberland Hospital redevelopment – the next phase of development
- CIC Emergency Care Village with fully integrated GP’s and Primary Care & diagnostic capacity
- Cancer Centre at Cumberland Infirmary Carlisle
- Community Hospitals redevelopment
- Maintain Core Equipment to support Clinical Services

Conclusion

The strategic direction set out in this narrative is taken from the strategy we have developed for North Cumbria. The aims and enablers identified in our strategy support the ambitions of the NHS Long Term Plan and the critical areas of focus locally in improving health and wellbeing outcomes and sustaining and developing services locally across primary and secondary care.

North Cumbria ICP Strategic Aims:

1. Improve the health and care outcomes of our local communities and support people of all ages to be in control of their own health;
2. Build health and care services around our local communities;
3. Provide safe and sustainable high quality services across our sparsely populated area.

North Cumbria ICP Strategic Enablers:

A. Be a great place to work and develop;
B. Integrate how health and care organisations work together;
C. Live within our means and use our resources wisely;
D. Deliver digitally enabled care.