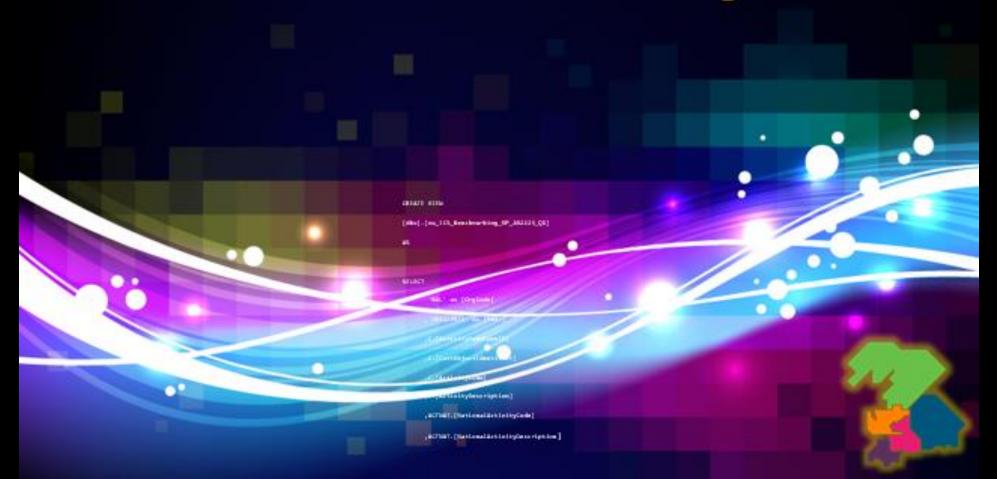
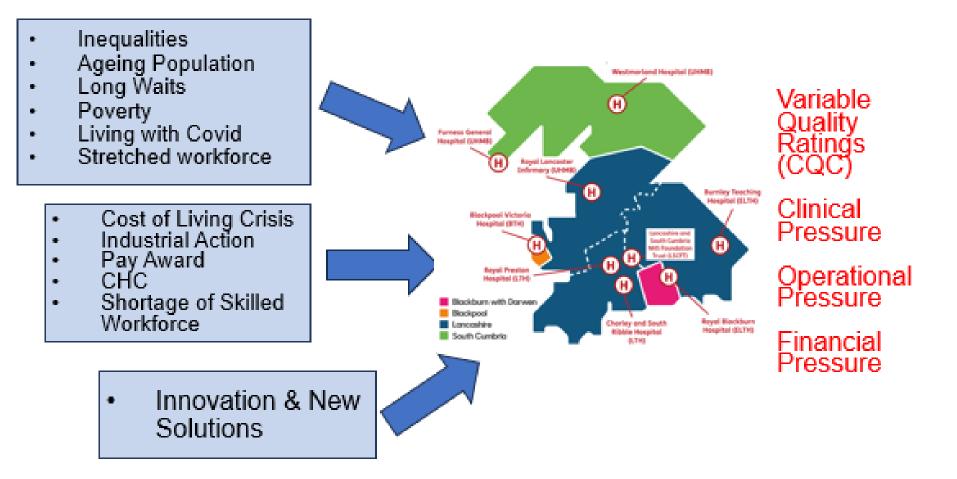
Delivering System-Level PLICS

Lancashire & South Cumbria Costing Teams





Context, Significant pressures in our System





Integrated Care Board

Context, our System (NHS) resources, and how we use them

- 1. 2023/24 the L&SC System receives £4bn for NHS services, which is allocated:
 - £2.2bn (55%) on Acute Services, including the Independent Sector and services in other ICBs.
 - £0.5bn (12.5%) on Mental Health Services
 - £0.4bn (10%) on direct Community Health Services
 - £0.6bn (15%) on Primary Care Services including GP Services and Prescribing
 - £0.3bn (7.5%) on All-age Continuing Care
- In addition to the above, Trusts within the system receives £0.5bn for Specialised and Direct commissioned Services from NHS England

We have a financial challenge of $\pounds 0.5bn$, i.e. planning to spend $\pounds 0.5bn$ more than we receive equating to $\pounds 1.4m$ per day



Lancashire and South Cumbria Integrated Care Board

2023/24 Ratings

Trust	CQCRating	SOF Rating
BTHFT	Requires Improvement (January 2022)	з
ELHT	Good (July 2022)	2
L&SCFT	Good (January 2024)	з
LTHFT	Requires Improvement (July 2022)	3
UHMBFT	Requires Improvement (August 2023)	3

6	Outstanding - the service is performing exceptionally well.	Rating	Trust
	Annual and a second second and		Consistently high performing across the five national oversight themes and playing an active
	Cond. Also and the local condition of the state of the st	-	leadership role in supporting and driving key local place based and overall ICB priorities
	Good - the service is performing well and meeting our expectations.		Plans that have the support of system partners in place to address areas of challenge
		- ²	Targeted support may be required to address specific identified issues
ľ	Requires improvement – the service isn't performing as well as it should and we have told the service how it must improve.	з	Significant support needs against one or more of the five national oversight themes and in actual or suspected breach of the NHS provider licence (or equivalent for NHS trusts)
	Inadequate - the service is performing badly and we've taken enforcement action against the provider of the service.	4	In actual or suspected breach of the NHS provider licence (or equivalent for NHS trusts) with very serious, complex issues manifesting as critical quality and/or finance concerns that require intensive support

Three year clinical, operational and financial recovery plan to get to £££ balance

Collab Bank

(Nurses / AHP)



Transformed Sustain & Wave 1 & Recover & Improve Improve New Models of Care Emerge what we have

Transformation starts now!

We need to make progress this year, next year and every year to ensure we achieve all we need to by 2035

TRANSFORMATION

24/25 25/26 26/27



Lancashire and South Cumbria **Integrated Care Board**



How costing data is supporting the vision



- Cross team collaboration
- Single source of information
- Improving together
- A shared vision

L&SC Costing Collaboration Vision

Innovatively collaborating

to provide a central information source that empowers our services

to improve care across our

system

at the best possible value

for healthier, happier patients



IMPACT ON HEALTH AND WELLBEING

- Support improvement of L&SC patient journey
- Enable standardisation of clinical pathways
- Reduce variation in patient outcomes
- Provide information on demographics and health inequalities, to allow equitable access to care

OUR PRINCIPLES

- Trusting, transparent and open
- Sharing data and best practice across costing teams
- Learning together Innovative and aspirational
- Collaborative and inclusive





SUPPORTING FINANCIAL SUSTAINABILITY

- Working with wider finance teams to increase adoption of costing information
- Support improvement of productivity and cost benchmarks, using WAU and system level costing information
- Support ICB vision and wider population health work
- Continuously improving the financial culture across the system
- Make informed service decisions across L&SC
- Understand cost outliers across L&SC using our data

IMPACT ON WORKFORCE

- Support ICS clinicians' vision
- Collaboration as a catalyst for improvement, increasing job satisfaction for ICS costing teams
- Support skills development within KCS costing teams and across NHS finance
- Support skills development within KCS clinical and operational teams across L8xSC

000

 Share best practice with wider NHS via innovation forums and NHS England

HIGH QUALITY COSTING SERVICE

- Develop a common improvement language and measure
- Central information source to support decision making across the system
- Combine cross sector information, including Community and Mental Health
- Innovatively provide education to service users, to further increase clinical engagement, understanding and usage of costing information

#knowyourcosting

Tips for other costing teams

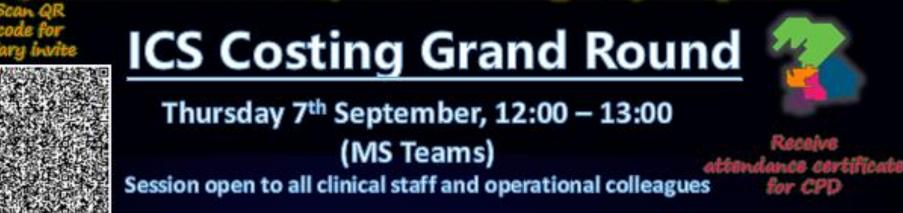
1. Don't wait for perfect data - we all know there is no such thing!

3. Get to know your system's vision 2. Start talking to your system costing teams

4. Get involved in system working groups

Lancashire & South Cumbria

Special Introduction from Dr Paul Buss, Director of Clinical Strategy at Powys Teaching Health Board



Learn about Patient Level Costing and how it can support service change and improvement



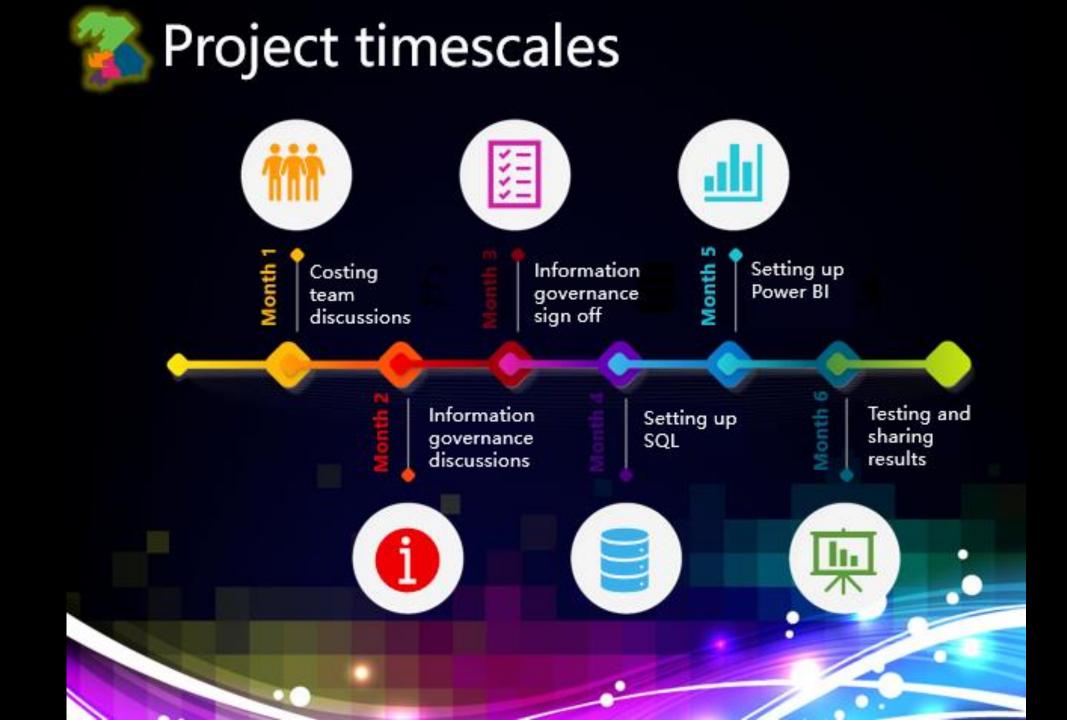
The ICS Costing Teams will provide an overview of Patient Level Costing and introduce their award winning ICS Costing Dashboard hfma Winners Embrac

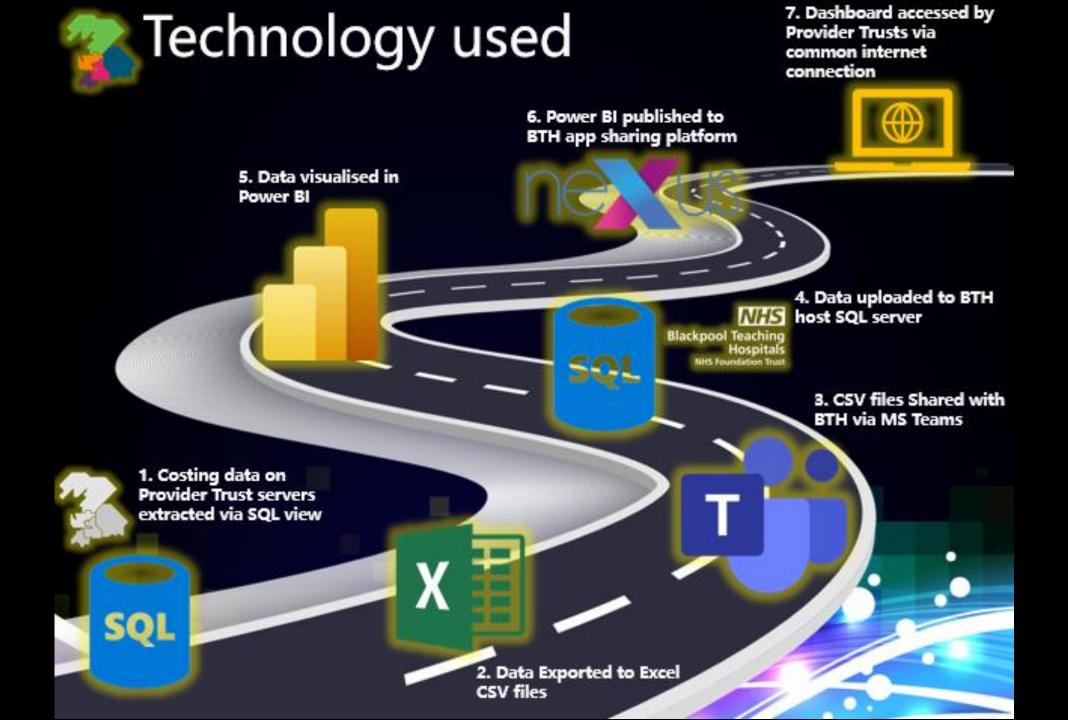
Winners of the HFMA NW Embracing Technology Award 2023!



Granular Information







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Best in System Benchmarking Working with our ICB

- SQL code Cost system activity based on best value organisation in system
- Applies low number suppression
- Cost opportunity analysis Identify 3 services to benchmark
- Review Data Quality/ Costing Methodology/ System variation
- Share findings with service groups



Best in System

T&O Non-Elective Very Major/Major Hip Procedures 2022/23

AV LoS £37m COST OPPORTUNITIES 7m System spend per year against National Av 2,542 NOY £4.8m Cases Best in System AV PROCEDURE TIME THEATRE SPEND BTH £2.2m THE min ELHT £5.1m UHMB £3.7m LTH £2m



Costing System Configuration

T&O Non-Elective Very Major/Major Hip Procedures 2022/23

Ward	Blackpool Average Bed Day Cost
Ward 35	£516
Ward 34	£381
Ward 16	£328

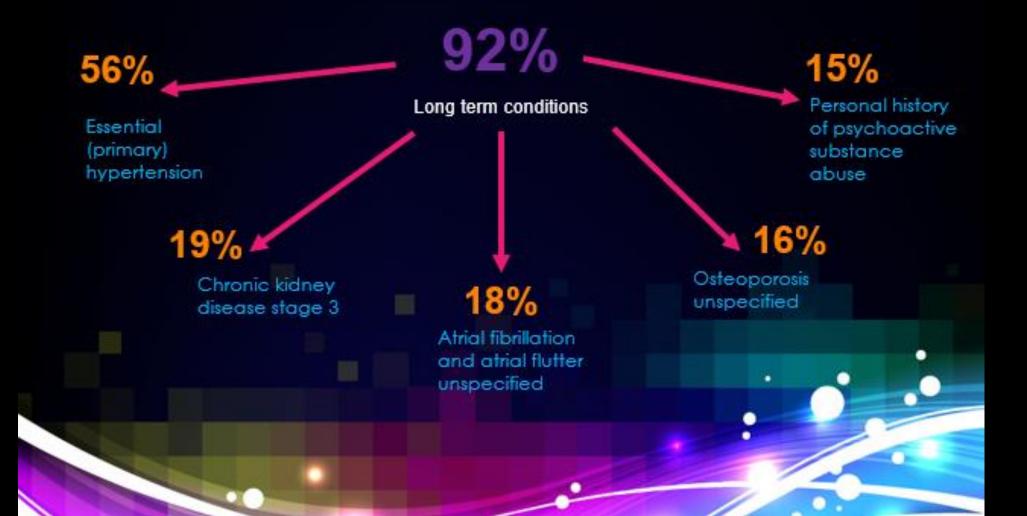
Ward	Morecambe Bay Average Bed Day Cost						
FGH Ward 2	£359						
WGH Ward 6	£341						
FGH Ward 4	£212						

Comparing costing methods and config, allowing us to standardize and improve our costing as a system

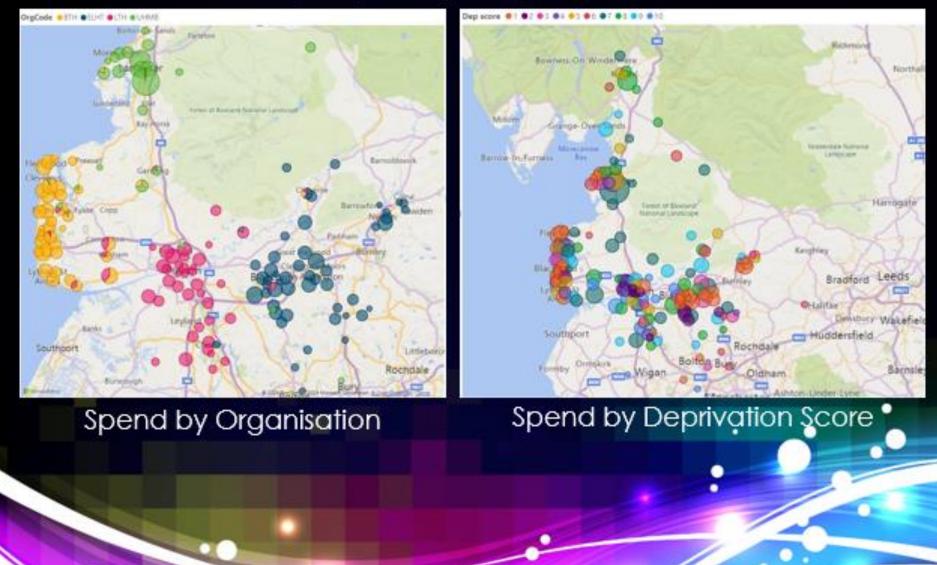


Using other datasets – Long Term Conditions

T&O Non-Elective Very Major/Major Hip Procedures 2022/23



Using other datasets – Demographics & Deprivation Scores **T&O** Non-Elective Very Major/Major Hip Procedures 2022/23





Continued drive towards single platforms for all services across the system





Resources

> Innovation

https://onenhsfinance.nhs.uk/the-finance-innovation-forum/innovation-

programme/innovations/innovation-r6/

Software Skills

https://onenhsfinance.nhs.uk/join-the-network/software-skills-network/