

Fiona Edwards  
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**7th June 2023**

Dear Fiona

### **Annual assessment of Frimley Integrated Care Board's performance in 2022-23**

Thank you for attending the meeting at Wellington House on 10 May with your ICB executive colleagues for the annual assessment of the ICB.

I am writing to you pursuant to Section 14Z59 of the NHS Act 2006 (Hereafter referred to as "*The Act*"), as amended by the Health and Care Act 2022. Under the Act NHS England is required to conduct a performance assessment of each Integrated Care Board (ICB) with respect to each financial year. In making my assessment I have considered evidence from your annual report and accounts; available data; feedback from stakeholders and the discussions that my team and I have had with you and your colleagues throughout the year.

This letter sets out my assessment of your organisation's performance against those specific objectives set for it by NHS England and the Secretary of State for Health and Social Care, its statutory duties as defined in the Act and its wider role within your Integrated Care System across the 2022/23 financial year.

I have structured my assessment to consider your role in providing leadership and good governance within your Integrated Care System as well as how you have contributed to each of the four fundamental purposes of an ICS. For each section of my assessment (see below), I have summarised those areas in which I believe your ICB is displaying good or outstanding practice and could act as a peer or an exemplar to others. I have also included any areas in which I feel further progress is required and any support or assistance being supplied by NHS England to facilitate improvement.

In making my assessment I have sought to take into account the relative infancy of ICBs, having only been statutory bodies for nine months of the 2022/23 financial year. I am also mindful of the developing local strategic aims of ICS' set out in the Integrated Care Strategy for your system and articulated through your recently published Joint Forward Plan.

I thank you and your team for all of your work over the 2022/23 financial year in what remains challenging times for the health and care sector and I look forward to continuing to work with you in the year ahead.

Yours Sincerely,

David Radbourne  
Regional Director of Strategy and Transformation  
NHS England - South East

## Section 1: System leadership

Frimley ICS has historically been a high performing system and the factors which have led to this success are still strong and present across the partnership and its shared leadership team.

We recognised the really good work done to get a good Frimley Integrated Care Board executive team in place given the challenges around starting later than other systems and having to bring three distinct parts together. We also commended the ICB for being the biggest employer in the region of BAME staff and for implementing robust board, clinical and partnership arrangements impacting positively on decision making. The ICB governance arrangements demonstrate how the organisation has built triple aim into the decision making process. We noted that the ICB has been rated as the most improved ICB in the staff survey undertaken last year.

We acknowledged the ICB's commitment to the principle of sharing and scaling innovation across the system. One of the significant activities to underpin this includes the ICB's work using technology, both in terms of population health management to understand and address health needs, and in the use of digital technologies to transform operational delivery. The ICB is also utilising national & international best practice data, research & system analytics expertise to gain insight to population health. A few of the ICB's exemplars are listed below:

- *Nationally leading on a population health intelligence platform used across the system to develop insights for population health management initiatives.*
- *Linked health and care data for a population of 1.4 million residents across Frimley ICS.*
- *Using remote monitoring to manage 20k of most at risk residents.*
- *Implementing ED pilot to notify GPs when their patients present so that urgent GP appointments can be offered where appropriate.*

Frimley is the only ICB to submit a successful proposal for hosting of NHSE SE Regional delegated commissioning staff and we appreciate your work with the region to move at pace with respect to the delegated commissioning agenda.

The ICB leadership demonstrated good resilience and excellent planning in leading and contributing to some significant events over the last year including nursing and junior doctors strikes plus big events such as the Queen's demise and the King's Coronation. We are aware Windsor has become the main Royal residence and this change has contributed to a change in dynamic of the town and contributing to population demographics – changes which the system has had to adapt to.

The pressure in the flow of patients entering and exiting the Urgent and Emergency Care (UEC) sector is a significant issue for the system and the leadership. We noted progress being made including good ambulance handover performance, reduction in length of stay, reduction in 12 hour breaches, robust clinical governance arrangement etc, however, the ICB will need to lead and work with partners to progress further the implementation of the system UEC strategy.

**We will encourage the system to implement the key actions in the recently developed UEC strategy to improve further emergency care pathway performance, share areas of excellence with other systems in the region, and benefit from successful actions from others to progress system challenges.**

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## **Section 2: Improving population health and healthcare**

We acknowledged that over the last year, demand for services have been extremely high, with the residual impact of Covid-19, alongside the objective of delivering recovery against quality and performance standards. We are also aware that other delivery constraints, such as poor quality estates, EPIC (new electronic patient record system) deployment, increasing spend on agency staff and the presence of RAAC planks across the Frimley Park Hospital site are further contributors to pressure and challenge in the system. The impact on patient flow through UEC and elective pathway has been mentioned earlier.

In spite of the challenges mentioned above, we noted that the ICB is a national leader in enrolling patients for pulse oximetry remote monitoring when Covid-19 positive. The ICB and ICS partners have introduced a new service improving access to gastroenteritis medication for children across all localities within the ICS. Gastroenteritis is among the leading causes for patients accessing urgent care and this service is supporting treatment closer to home as well as relieving pressure on urgent care services in Frimley.

Blood Pressure (BP) control has increased across Frimley system through innovative use of technology and huge clinical effort in primary care. The ICB, working with partners, is offering remote monitoring to all care homes to reduce admissions and primary care contacts by spotting deterioration early and linking into community offers. Currently there are 400 patients being monitored with the aim for over 60 homes being monitored in May 2023. From the first 400 patients monitored from care homes, 117 A&E attendances have been avoided and 29 ambulance call outs avoided.

It is noted that these actions are also reducing length of stay and mortality as patients are getting the treatment they need promptly.

**The Frimley Hospital RAAC planks issue is being addressed by the inclusion of RAAC schemes into the extended New Hospital Programme (NHP) programme but this remains subject to formal confirmation and announcement. The region will work with and support the system to develop a system strategy in anticipation for the national announcement of the NHP.**

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## **Section 3: Tackling unequal outcomes, access and experience.**

We are aware that the ICB has maintained its focus on its long term strategic objectives of reducing health inequalities and maximising healthy life years for the population of Frimley. Starting with the most deprived population the ICB have focussed on interventions to manage CVD and diabetes. Diabetes-HBA1c control for patients in the most deprived areas in the system fell from 57% in Feb 2019 to 44% in Feb 2021. This has now improved to above 50% through primary care efforts, education and starting remote monitoring for 366 of the most complex diabetic patients.

Schools Link programmes with the system have brought together education and mental health professionals to improve joint working and communication with the aim of ensuring that children and young people (CYP) get the help and support they need, when they need it. The system established mental health support in schools and the GPs are working with schools in their communities. The system has established Autism/Learning Disability key worker service to support children and families with complex needs.

Primary care providers continue to reach out to the homeless population in the system providing GP clinics in temporary hotel accommodation and weekly drop-in clinics. Asylum seekers and refugees in Slough hotels were registered on arrival and provided with health checks. The system is optimising the use of Better Care Funding (BCF) to provide adaptations to support people in their own homes.

We are aware that the ICB and the predecessor organisation have worked with key stakeholders across the NHS, Local Authorities, voluntary and independent organisations, patients and their family carers to determine and develop plans for improving the health of residents. The pandemic affected interaction with the local people for some time, however, we noted this has been restarted and other online tools have been developed with the voluntary sector now being implemented to maintain partnership with the local people.

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#### **Section 4: Enhancing productivity and value for money**

As required, Frimley ICB managed expenditure within the resources allocated by NHS England and delivered a break-even position in the 2022/23 financial year. We are aware that this achievement required not only careful management of the finances but also strong internal control mechanisms to ensure the resources of the ICB were handled in a way which was up to public standards and can be sustained year on year.

The ICB closed its ledger as at 31 March 2023 with a small surplus of £24k. The Frimley ICS, which comprised of Frimley ICB and Frimley Health Foundation Trust, has an overall surplus of £124k for the 2022-23 financial year. However, we are also aware that this position is materially underpinned by non-recurrent efficiencies, and also reflects a non-recurrent benefit of the proceeds of a land sale following a change in technical accounting guidance. A financial sustainability plan has been developed to ensure the long-term financial stability of the organisations across the system. – agreed by all partners through formal governance mechanisms. The system has submitted a £3.9m deficit plan for 23/24 however this deficit will be covered by a national allocation for inflation funding, bringing the system to a breakeven position, with both the ICB and Trust breaking even. A financial sustainability plan has been developed to ensure the long-term financial stability of the organisations across the system – agreed by all partners through formal governance mechanisms.

The ICB is working collaborative with both the Buckinghamshire, Oxfordshire and Berkshire West (BOB) system and Surrey Heartlands system, in implementing a temporary staffing programme. The work included the review of bank staffing, payment of common rates across the Trusts in the systems, better usage of agency staff etc.

We noted that the system's Medicines Optimisation in Care Homes (MOCH) Team continued to support care homes and health care professionals through the pandemic by providing guidance and support on the safe use of medicines. This has been in the form of written guidance, training webinars, phone calls, a quarterly newsletter, supporting with incidents or concerns, and answering queries. The team has led the rollout of a digital solution (EMIS proxy) which streamlines prescription ordering and reduces workload at both care homes and GP practices. The team also provide various education and training sessions to PCN staff, GPs included, to develop local workforce capability including training on tackling structured medication reviews (SMRs) and sessions discussing specific case studies e.g., polypharmacy and frailty.

The ICB has renewed a commitment to equality, diversity, and inclusion. We acknowledged the ICB's work with communities and partners to tackle inequalities and support workforce (by example establishing a Mirror Board which will create opportunities for a diverse succession pipeline to the Board and ensures diversity of thought in Board discussions) as an inclusive and compassionate employer. The ICB and partners have placed creating an inclusive and compassionate culture at the heart of the ways of working. The ICB adopted and embedded the Frimley Leadership Behaviours as a commitment to building organisational culture.

**We will encourage the system to reflect on their support requirements including the request to place three of the services currently provided by South Central and West CSU into the current NHS England In Housing process.**

**We noted that the ICB had requested resources to support the transfer of NHS England commissioning staff across to the ICB and that discussions were taking place to facilitate this.**

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## **Section 5: Helping the NHS support broader social and economic development**

We noted the strong partnership working between ICB and other partners including the local authorities exemplified by support given to Rushmore to successfully win a £20m bid for regeneration. All the Health and Wellbeing Boards (HWBBs) covering the system have confirmed that the ICB has contributed to the development of their health and wellbeing board's strategies. According to the feedback we received from the HWBB for the Royal Borough of Windsor and Maidenhead, the ICB contributed to the shift of the focus of the system from diseases to the wider determinants of health and living healthily and living well, such as the joint work on addressing fuel poverty for the 56,000 residents living in the deprived areas and in poorly insulated homes across the Frimley population. The system CYP team worked with Housing Associations to identify opportunities to address damp/cold.

The ICB has continued to work with system partners to harness new digital technology to transform how GPs deliver services and at the same time to reduce carbon emissions. Patient information has been created to help the public better understand the tools and technology available to support wellbeing. Online consultations have reduced the need for patients to travel to the surgery. Virtual monitoring and virtual wards have significantly reduced the need for people to travel to hospital and/or clinicians to travel to patients. The ICB's Medicines Optimisation Team joint working with specialist respiratory teams and Primary Care Networks (PCNs) has moved the ICS from being in the highest decile for carbon footprint of salbutamol prescribing to the lowest (best) decile. Gaining national recognition, the ICB was cited as an example of good practice by the Royal College of Pediatrics and Child Health - evaluation of the frailty virtual ward has shown a reduction in ED attendances of between 24-30% and admissions by 55-75%. GP presentations reduced by 15%.

**We will encourage you to continue to work collaboratively with your partners to focus on wider determinants of health such as poverty, asylum seekers, and knife crime to improve health and wellbeing and workforce development.**

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## **Conclusions**

2022/23 has been a year of transition and in making our assessment of Frimley ICB performance we have sought to fairly balance our evaluation of how successfully the ICB has delivered against the demands of establishing a new organisation. Key areas of improvement

for Frimley ICB include elective and emergency pathway performance, reduction in agency cost, full implementation of EPIC deployment and RAAC issues at Frimley Hospital Foundation Trust. The region will continue to work with and support the system to achieve the improvement we want to see.

We ask that you to share our assessment with your leadership team and consider publishing this alongside your annual report at your Annual General Meeting. NHS England will also publish a summary of the outcomes of all ICB performance assessments as part of its 2022/23 Annual Report and Accounts.

Yours sincerely,

David Radbourne  
Director of Strategy & Transformation  
NHS England – South East

CC: Anne Eden, Regional Director – NHSE SE  
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