



Frimley ICS - NHS Joint Forward Plan

Summary Presentation for Boards

2023/24 – 2027/28

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About the Joint Forward Plan and how it relates to other system strategies and plans

Our recently published ICS Strategy - [Creating Healthier Communities](#) - provides the overarching vision for how the Integrated Care System will work together to improve health and wellbeing across the Frimley geography. It sets out the key priorities and ambitions for the next decade and provides a framework for decision-making across the partnership.

This Joint Forward Plan is fully aligned with the ICS Strategy and it outlines how the local NHS will contribute to achieving our shared goals and priorities. In particular, the Joint Forward Plan describes how the NHS will work in partnership together to meet our headline strategic objectives of reducing health inequalities and increasing healthy life expectancy.

The Frimley ICS 2023/24 Operational Plan sets out the detailed plans for how the partnership will achieve its priorities in the first year of implementation. It includes specific actions, targets and milestones for each of the priority areas identified in the Planning Guidance released in December 2022. It represents many of the year one actions of the Joint Forward Plan, although it should be noted that the latter is more ambitious and expansive than the national minimum planning requirements for the year ahead. The Joint Forward Plan also provides a longer-term perspective on how the NHS will evolve its services and workforce over the next five years, to support the achievement of the ICS priorities in the longer term.

Overall, the Joint Forward Plan is an essential document for the implementation of both the longer term ICS Strategy and the year ahead requirements of the 2023/24 Operational Plan. It maps out the NHS contribution to the partnership's goals and provides a clear framework for decision-making and resource allocation over the next five years. By aligning with the ICS Strategy and the Frimley ICS 2023/24 Operational Plan, the Joint Forward Plan ensures that the NHS is working in a coordinated and integrated way with other organisations across the partnership. This document, refreshed on an annual basis, will help to maximise the impact of our collective efforts to improve health and wellbeing across the geography.

In summary, this Joint Forward Plan is an important document that provides a clear roadmap for the evolution of NHS services and its workforce over the next five years. By working in partnership with other organisations across the Integrated Care System, we can ensure that we are delivering the best possible outcomes for patients, while making the most efficient use of our resources.



Creating Healthier Communities – Our 2023 ICS Strategy

The Frimley ICS Strategy

[Creating Healthier Communities](#) was published in 2019 as the first Frimley Health and Care ICS Strategy. This was designed following significant co-production between partner organisations, the third sector, our workforce, patients, and the public. The ICS Strategy was heavily informed by the data and insight available from the Connected Care platform and led to the formation of six Strategic Ambitions which have comprised the programme architecture for delivery between 2019 and 2022. We have recently completed a new partnership-led refresh of the ICS Strategy which sets out our aspiration for long term improvement to the health and care of the population.

Our Integrated Care Partnership

The Frimley Integrated Care Partnership (ICP), established in July 2022, is a joint committee between Local Authorities in the Frimley ICS geography and the NHS Frimley Integrated Care Board. At its core is an ICP Assembly, bringing together clinical and professional leaders of public sector, voluntary sector, and charitable organisations, which have an interest in improving the health and wellbeing of over 800,000 people who reside in the Frimley ICS geography. The ICP provides a platform for a broad range of stakeholders who are committed to making this ambition a reality. Building on our engagement with our partners, the Frimley ICP was established to have a strategic role, considering what arrangements work best in our local area by creating a dedicated forum to enhance relationships between leaders across the health and care system. The agreed remit for the ICP is to:

- Consider and set the strategic intent of the partnership; act as final approver of the ICS Strategy, including the proposed programmes of work, outcomes, and intended benefits
- Act as an objective 'guardian' of the ICS vision and values, putting the population's needs and the successful operation of the ICS ahead of any sector or organisation specific areas of focus
- Provide a forum for consideration of wider determinants of health and health inequalities, taking fullest advantage of the opportunities arising to hear the views and perspectives of the broadest range of local stakeholders and democratic representatives.

The ICP is not an NHS construct and is, therefore, out of scope for this Joint Forward Plan. It will, however, continue to develop and evolve under the direction of a cross system partnership comprised of NHS, Local Government and VCSE expertise.



Our Resident facing services – Strategic Focus Areas for the Next Five Years

Introduction

As we progress our work together, it is essential that our services are equipped to meet the ever-evolving needs of our population. In this chapter of the Joint Forward Plan, we set out a roadmap for how we will develop and adapt our services to best serve the people who live in this geography.

Looking to 2023/24 and the four years beyond we examine a range of services from healthcare to social support, and identify what needs to happen to ensure that they are fit for purpose. We recognize that a one-size-fits-all approach is not sufficient when it comes to meeting the diverse needs of our population, and, therefore, we will take a tailored approach to service development.

To support reducing the disparity in healthy life expectancies and optimise how services are used, we will encourage the integration of services across acute and rehabilitation, and physical and mental health needs.

The key success factors, risks, and dependencies of our service development strategy are explored in this section. We understand that the success of our plan depends on a range of internal and external factors, from securing funding and building partnerships to ensuring that we have the right staff with the right skills in place. We will work collaboratively with stakeholders, including the public, to ensure that we are meeting their needs in a way that is both effective and efficient.

We recognize that there will be challenges and risks associated with service development, particularly in the wake of the Covid-19 pandemic and the recovery of services. However, we are committed to taking a proactive and adaptive approach to ensure that we are able to navigate these challenges successfully.

Ultimately, our goal is to ensure that our services are accessible, inclusive, person-centred and responsive to the needs of our population. By taking a comprehensive and strategic approach to service development, we are confident that we can achieve this goal and make a positive impact on the lives of those who live in our geography. Using this Joint Forward Plan as a base, the Frimley Clinical Reference Group will steward the production of a fully refreshed Service Strategy during the Summer of 2023.

Core20 PLUS 5

We are committed to implementing the Core20PLUS5 methodology to help us achieve our primary objective of reducing health inequalities. We will continue to work with our clinical and professional leaders at Place to identify PLUS groups who would benefit from additional focus on improving health outcomes, as well as accelerating our work to improve the healthcare offer for those in deprivation deciles one and two (the most deprived 20% of the population) and, where appropriate, those in deciles three and four. Further information about this methodology is set out on the following page.

Governance, Leadership and Culture – Strategic Context

Strategic Context

As our system architecture continues to evolve and mature we will continue to develop our approach to governance ('the way we do things') across our system footprint that builds on the core principles of partnership working and distributed leadership. By making decisions together with others and enabling distributed leadership we will be able to mobilise our leaders at all levels of the system, and across our partner organisations, to build capacity for improvement and change in a timely and effective way. We will ensure that our governance reflects a system perspective that:

- Recognises the importance of leadership by expertise (rather than years)
- Builds on high levels of trust, transparency and mutual respect
- Seeks more equitable distribution of decision making and delivery
- Focuses on consultation, engagement and consensus seeking
- Enables change and improvement from the bottom up to flourish

Our approach

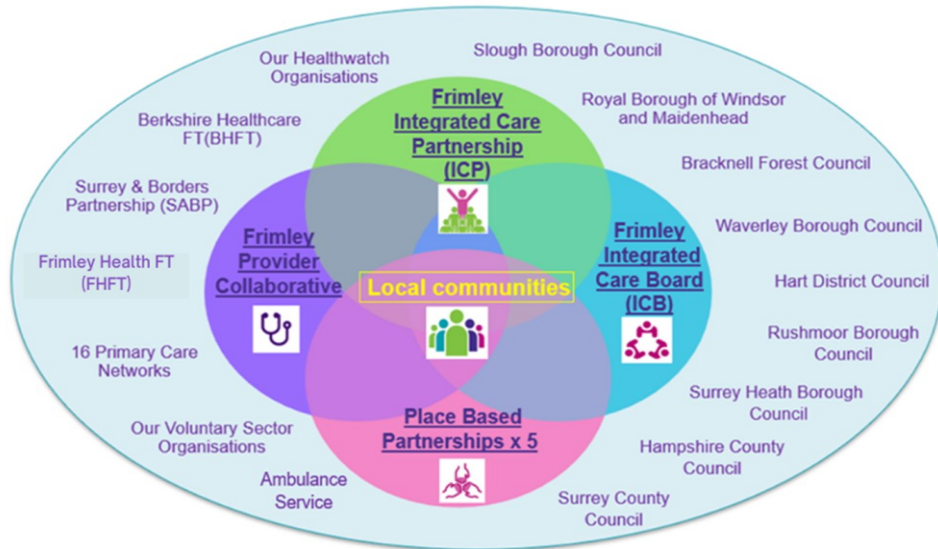
Over the next five years we will ensure that the four key constructs of our system architecture (Integrated Care Partnership, Integrated Care Board, Provider Collaboratives and Place Based Partnerships) are working together to ensure we deliver our six system ambitions as set out in our system strategy, our joint five year priorities and annual plans.

Our governance will be underpinned by arrangements that support:

- Clear and transparent decision making
- Fully informed consideration of the balance of risks across safety, quality, performance, finance, workforce and service sustainability
- Decision making at the most appropriate level and made by consensus whenever possible
- Appropriate assurance on deliver of strategy and plans, use of resources and quality of services

We will have a reflective and flexible approach to the governance framework within which we operate that enables our building blocks to flourish so the right decisions are made by the right people in the right places. AS with all new and emerging complex systems the arrangements for today may need to change for tomorrow but the principles of subsidiarity and distributed leadership underpin our approach.

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Provider Collaborative Development – Strategic Context

Provider collaboratives will be a key component of system working, being one way in which providers work together to plan, deliver and transform services.

By working effectively at scale, provider collaboratives provide opportunities to tackle unwarranted variation, making improvements and delivering the best care for patients and communities.

Significant scope to deliver these benefits already exists within current legislation and, subject to its passage through Parliament, we expect the Health and Care Bill will provide new options for trusts to make joint decisions.

Provider collaboratives are partnership arrangements involving at least two trusts working at scale across multiple places, with a shared purpose and effective decision-making arrangements, to:

- reduce unwarranted variation and inequality in health outcomes, access to services and experience
- improve resilience by, for example, providing mutual aid
- ensure that specialisation and consolidation occur where this will provide better outcomes and value.

Provider collaboratives work across a range of programmes and represent just one way that providers collaborate to plan, deliver and transform services. Collaboratives may support the work of other collaborations including clinical networks, Cancer Alliances and clinical support service networks.

Providers may also work with other organisations within place-based partnerships, which are distinct from provider collaboratives. Place-based partnerships co-ordinate the planning and delivery of integrated services within localities and alongside communities, while provider collaboratives focus on scale and mutual aid across multiple places or systems.

System partners will need to agree the areas of focus and delivery for each type of collaboration and decide how these arrangements can work most efficiently and coherently in a local context to achieve benefits for people and communities.

Provider Collaborative Development – Next Steps

As a committed partner of the Frimley NHS partnership, the Frimley Provider Collaborative continues to be ambitious about the role provider collaboration can play in the delivery of this Joint Forward Plan. We believe that working together is the key to achieving better outcomes for our patients and our communities and recognise that although there are still challenges to be overcome, we are committed to working together to find solutions.

Our focus remains on meaningful service transformation rather than structures and governance. We believe that by working together, we can identify the most effective solutions for our patients and our communities. We will continue to collaborate with our partners in the Frimley NHS partnership to ensure that we deliver high-quality care that meets the needs of our patients.

For the 23/24 year, we have refreshed our Provider Collaborative Board. This new Board has greater Place and Primary Care representation, recognising the importance of oversight and direction from a broad array of provider voices. We believe that this will help to ensure that our services are better integrated, more patient-centred, and more effective.

One of our key priorities for the coming year is to increase our focus on elective care transformation and the recovery of long waiting times. We recognise that this is a significant challenge, but we are committed to working with our partners to find new and innovative solutions that will help us to deliver high-quality care to all our patients.

In addition to this, we will also be looking to identify new pathways that could focus on a more collaborative approach to redesign and integration. We recognise that there are often many different organisations and pathways that patients must navigate to use our services, and we believe that by working together, we can identify more effective ways to support our patients and their families.

Ultimately, the success of provider collaboratives depends on effective clinical and executive leadership. By working together in a collaborative and transparent manner, our leaders will create a culture of trust and cooperation that supports the delivery of high-quality care. This is essential for ensuring that patients receive the best possible outcomes and that providers are able to deliver care that is both efficient and effective.

Place Development – Strategic Context

Context for Place-based development

Our five places within the Frimley system have a well-established history.

Each has a relationship with a different upper tier local authority, and some with additional lower tier local authorities, without clearly defined and aligned boundaries in some cases.

CCGs were originally established across the five geographies of North East Hampshire and Farnham, Surrey Heath, Bracknell and Ascot, Windsor Ascot and Maidenhead and Slough before the Frimley system was formed.

We now have a single Frimley ICB following the implementation of the Health and Care Act (2022) and have five Places which align more closely with our local authority boundaries, and with an opportunity to redefine the ways of working within those Places and the partnerships they embody.

We see Place as an opportunity for our residents and their families, their communities and the unique characteristics they have to be at the heart of our integrated working at place, with and for those residents, families, communities and our public services.

Process for Place-based development

- Since 2021/22, we have held place development workshops together and continued to have a range of conversations within places and across places.
- Those workshops focused on discussing and shaping:
 - Principles of place-based working, their strengths and alignment with health and well-being boards
 - Role and purpose of place, relationships and ways of working for success
 - Enabling elements to support places: people and capabilities, joint decision-making approaches, benefits and opportunities of pooled budgets

The **Integration White Paper** continues to be considered and offers a further framing for our ongoing development of our five places, in the context of the more mature shaping we have agreed across our ICP, ICB, and Provider Collaborative structures.

Place Development – Next Steps

Our aspiration for the development of Place based working

Our aspiration for the development of place-based working in our health and care system is to create a model of care that is truly person-centred and responsive to the needs of our local communities. We believe that by working together, we can create a system that is more integrated, efficient, and effective.

Our vision for place-based working is centred around five key principles:

- **Collaboration:** We believe that effective place-based working requires a collaborative approach that brings together stakeholders from across different sectors. This includes healthcare providers, local authorities, third-sector organisations, and patients and their families.
- **Co-design:** We believe that place-based working requires a co-design approach, where stakeholders work together to develop solutions that meet the specific needs of each community. This means involving patients and their families in the design of services and empowering them to take an active role in their own care.
- **Local leadership:** We believe that effective place-based working requires local leadership that understands the unique challenges facing each community. This means working with local leaders to develop solutions that are tailored to the needs of each place.
- **Innovation:** We believe that effective place-based working requires an innovative approach that is open to new ideas and new ways of working. This means exploring new technologies and new models of care delivery that can help to improve outcomes for patients.
- **Data-driven:** We believe that effective place-based working requires a data-driven approach that is informed by the latest evidence and best practices. This means using data to identify areas for improvement and to measure the impact of interventions.

Our aspiration is to create a place-based working model that is grounded in these principles. This will require a collaborative approach that brings together stakeholders from across different sectors to co-design solutions that are tailored to the unique needs of each community. We will work with local leaders to develop innovative models of care delivery that are informed by the latest evidence and best practices.

In order to achieve our aspiration, we will need to build strong partnerships with stakeholders across different sectors. This will require a commitment to open communication, trust-building, and a willingness to work together towards the implementation of our *People, Places and Communities* strategic ambition as defined in the ICS Strategy, *Creating Healthier Communities*.

Workforce – Our Priorities for 2023/24

Ambition one
Creating a joint workforce model for health and care

- Create a joint health and social care career model and enabling structure to support greater agility in the system.
- Enabling the workforce to be in the right place at the right time and to support them to live well

First steps:

1. Develop new roles which meet demand gaps and strengthen health and care career alignment
2. Research options available to enhance collaboration on pay, terms and conditions

Ambition two
Widening access to employment and keeping the people we have

- Identifying what works well to retain our people and support them to be their best
- Engage with our communities through an anchor institution approach to widen pathways into satisfying, valuable work.

First steps:

1. To pilot the introduction of community 'employment brokers' and spread this approach
2. To deliver our system programmes in EDI, Retention, Health and Wellbeing, Nurse/AHP transformation, Housing, Reservists and Widening participation

Ambition three
Strengthening partnership working and new models of care

- Develop new and digitised workforce models to increase collaboration, productivity and align these to new models of care

First steps:

1. Strengthen alignment with the system digital transformation programme
2. Extending our Temporary staffing and CLEAR programmes
3. Develop a logic model approach to prioritisation and development

Using QI methodology we are collaboratively designing our outcomes, action plans and evaluation for each ambition, to be validated at our system People Board in May 2023

23/24 NHS System Financial Plan

May 2023 submission

	£'m	% Cost Base	% Allocation
Gross Deficit	(146.6)	7.6%	10.1%
Profit on disposal	16.7		
Non-Recurrent efficiencies - Surge	11.0		
Other Balance sheet/NR benefits	19.8		
Revised deficit after NR / technical adjs	(99.1)	5.1%	6.8%
Low & Medium Risk schemes	36.6	1.9%	2.5%
FHFT Led	25.2		
ICB Led	11.4		
High risk efficiency	28.8	1.5%	2.0%
System Stretch	33.8	1.8%	2.3%

- The 23/24 gross deficit is £147m, 10% of the system allocation. The profit on disposal and the benefit of 22/23 non recurrent items has reduced this deficit to £99m, 6.8%. It is assumed that the change in accounting treatment for disposals will continue to apply in 23/24 allowing the profit to be recognised in year.
- Efficiency plans for FHFT and the ICB have been identified totalling £65.4m, of which £36.6m are considered to be low to medium risk. The remaining £38.8m is higher risk schemes in terms of delivery.
- In order to achieve a balanced plan a further system stretch of £33.8m has been included.
- Note that a 1.1% efficiency is assumed across all portfolios through the national tariff efficiency assumptions.
- The May submission was a balanced plan for 23/24

Financial Sustainability Plan on a Page

Strategic Context

As an NHS Partnership, we have agreed a collective approach to how we are going to work together to deliver a financially sustainable NHS for the Frimley population. Our Financial Sustainability Plan sets out a proposed “blueprint” for the development as a system team of a programme that will deliver financial control and alignment with cost efficiency programmes for each Statutory NHS Organisation within the Frimley system.

2023/24 represents year one of a multi-year system financial sustainability plan, to support delivery of the strategic objectives of the Frimley Integrated Care System. The intention is that the blueprint aligns with and complements the developing system governance architecture, such that the objective of delivering a financial “sustainability”, as opposed to “recovery” programme can be delivered. The programme is not intended to be a one-off recovery intervention, but a sustainable solution which enables the system to maintain recurrent financial gap and optimise value-based decision making on an ongoing basis.

The choice of terminology in describing the programme as system sustainability rather than “turnaround” or “recovery” is deliberate. The intention is to develop a programme which can sit within the system’s business as usual governance structures in order to establish and to retain a financial sustainability mechanism to place the system on a secure footing to deliver future strategy.

The sustainability programme must focus on the clear understanding and effective control of the system cost base as a single system entity, rather than an aggregation of organisational positions; such that the system is able clearly to consider and to account for inter-dependencies between different options for the deployment of financial resource to meet health need, in order to inform optimal decision making.

High level financial modelling identifies a material underlying gap in resource availability. The system will adopt an approach to planning on the basis of demand, and capacity to meet that demand, which will enable that financial resource gap to be described alongside a capacity resource gap, with a clear relationship between the two gaps.

Our Financial Sustainability Principles

1. Prioritisation of NHS resource allocation, based on clinical and cost effectiveness – focusing on those which are the most effective
2. The development of New Care Models – developing new ways of working across the health, social care and voluntary sectors.
3. Optimising Value for Money - continue to review all services to optimise value for money, reduce duplication and free up resources to respond to population growth and increasing demand
4. Maximisation of Technical Efficiencies
5. Reduction in Unwarranted clinical variation
6. All efficiency schemes must include a clear route to monetisation for the Frimley system. Plans will:
 - a. Include schemes which create capacity being utilised to repatriate or to facilitate reductions in escalation capacity and will take account of stranded costs and consequent time to monetisation.
 - b. Allow for cases which need to be combined to release fixed or semi-fixed cost to be progressed together, without which monetisation cannot be delivered.
7. System development and maintenance of a clear understanding of its cost base in order to:
 - a. Allow comparative analysis of alternative options to meet demand. For example, new community services vs. meeting the same need in an acute setting, avoiding step costs for new facilities or the opening of escalation capacity if the same need can be met in an alternative setting).
 - b. Give visibility of fixed and semi-fixed costs in order, for example, to realise estates opportunities, and to allow the development of benchmarking internally and with others.

Other areas covered by the Joint Forward Plan

This document is a brief summary of the material elements of the Frimley NHS Joint Forward Plan for 2023 – 2028. The full document contains additional detail on:

- Service development priorities for each of our major clinical and resident facing services
- How we will promote integration and partnership working across the NHS to provide a better offer to our residents
- The ambition around leadership and cultural development which will enable our teams to work better, together
- Granularity on our proposed use of capital allocations and how we will take decisions on estates improvement opportunities
- How the changing nature of procurement and supply chain will enable us to achieve greater value for money and lower overheads for NHS organisations
- The use of digital, technology and innovation as an enabler to higher quality care and new services for patients which provide greater sustainability for the NHS as a whole
- Our delivery priorities in 2023/24, which represents year one of this five year plan.

The full version of the Joint Forward Plan will be published on the websites of all four NHS organisations which have created this Joint Forward Plan together, from 1st July 2023. We will engage with our population and their elected representatives over the summer and consider their views in the production of this plan's next iteration, which is required to be published by 1st April 2024.

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