

To: Rima Makarem, Chair
Bedfordshire, Luton and Milton
Keynes ICB

NHS England – East of England
2-4 Victoria House
Capital Park
Fulbourn
Cambridge
CB21 5XB

31 July 2024

Dear Rima,

Annual assessment of NHS Bedfordshire, Luton and Milton Keynes (BLMK) Integrated Care Board's performance in 2023-24

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 this assessment, we 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 the assessment of your organisation's performance against the 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 2023/24 financial year.

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

In making the assessment, we have also considered how you have delivered against the local strategic ambitions as detailed in your Joint Forward Plan which you have reviewed and re-baselined. A key element of the success of Integrated Care Systems will be the ability to balance national and local priorities together and I have aimed to highlight where I feel you have achieved this.

I thank you and your team for all your work over this financial year in what remain challenging times for the health and care sector, and I look forward to continuing to work with you in the year ahead.

Yours sincerely,

A handwritten signature in dark ink, appearing to read 'Clare Panniker', with a small dot at the end.

Clare Panniker
Regional Director
NHS England – East of England

Cc: Felicity Cox, Chief Executive Officer, Bedfordshire, Luton and Milton Keynes ICB

Adam Cayley, NHS England Regional Chief Operating Officer, and Executive Lead for
Cambridgeshire and Peterborough ICB

2023/24 Assessment against the following duties

System Leadership

Bedfordshire, Luton and Milton Keynes (BLMK) ICB works extensively and collaboratively with partners to realise the Health and Wellbeing Strategy across the four local authorities, four distinct places and two health systems; with an aligned Joint Forward Plan and operational plan providing the framework for how the ICB and partners will arrange and/or provide services to meet the population health needs, improve health outcomes and tackle health inequalities. The ICB prioritises system partnership working, taking a 'seminar' approach to the development of strategy and is currently partnering with the Institute for Health Improvement to support a system-wide approach to Quality Improvement. Good working relationships have been established with voluntary, community, and social enterprises (VCSE) to support the strategy and learning from the Denny Review is strong, with examples of successful collaboration such as the 'Home First' programme noted. However, further opportunity to work with the non-statutory and voluntary sectors remains.

Whilst the Joint Forward Plan includes a focus on Mental Health, this could be further strengthened, with the ICB currently in the process of finalising its three-year Mental Health Learning Disability and Autism quality inpatient transformation plan. The ICB has co-developed with partners a target operating model that will enable plans focusing on episodic care, elective care pathways, and complex care pathways. We expect that this model will further support the targeted approach to improving focus, productivity and efficiencies. Underpinning this are several high impact programmes which will ensure that medium-term Place plans and Provider Collaboratives collectively deliver for the population. However, feedback from providers is that they are not fully versed on the target operating model yet and how it will work in practice to deliver improvements for patients.

The maturing and development of Place based partnership working, which is intended to enable more effective working with system partners, is noted. The ICB needs to ensure Bedfordshire healthcare partners are bought into and committed to engaging with this approach to prioritise areas of development and maximise user experience, value for money, and population health.

Following restructure in 2023/24, the ICB is putting in place comprehensive and robust governance to monitor and challenge financial and operational performance and to understand the link with outcomes. Improvements noted include the use of data, deep dive learning, and two-way reporting between Place and Provider Collaboratives, with a system risk management approach and system performance report in place.

The external audit of the ICB for 2023/2024 is noted for its positive feedback in terms of system risk management, but it does add caution to the risk of long waits for elective, diagnostic and cancer care within the provider trusts and how this affect plans to secure economy, efficiency and effectiveness. This further supports the need for the ICB to ensure close oversight on performance across the system. Providers locally have raised concerns about system urgent and emergency care (leadership and governance). There is a specific request for greater clarity and coherence around how, given the plurality of non-health stakeholders/partners, the Bedfordshire Care Alliance will in practice deliver improvement for the patients of Bedfordshire. It is recognised that wider elements of the structure are still evolving, including oversight of urgent and emergency care and electives, with finalised structures to be agreed and effective early in 2024/25. Governance and contract management for Mental Health specifically, has been noted as robust. The Milton Keynes area works separately to Bedfordshire and Luton reflecting the nature of patient flows and

system partners in those areas; however, planning and governance require further work to ensure the ICB is working well together system wide and that each Place has a better understanding about working arrangements. The ICB needs to consider how it positions itself to ensure that performance is effectively managed through the Place based working model and that providers and their partners are bought into that model. Our own reflection as a region is that we need to invest more time with you to understand your model and the balance in terms of your responsibilities for commissioning, contract management, performance and population health management.

With regards to safeguarding, the ICB has made progress in recruiting to statutory safeguarding roles, however it is recognised that certain demographic risks remain. The system would benefit from working more collaboratively with the regional safeguarding lead and with the regional nursing team more broadly and we will look to discuss this with you and develop relationships further through our multidisciplinary teams with the system. The Joint Forward Plan needs to identify its safeguarding ambition, vision and strategy for the ICB for the next one to five years, ensuring a focus on protecting and prioritising the most vulnerable is maintained. Initial Health Assessments require further work to ensure they are effective and meet the timeframes. The commissioning of Child Protection Medicals requires further development to ensure risks are mitigated and statutory duties met, with re-commissioning to be considered, although it is recognised that recovery actions have been put in place.

The ICB demonstrates a clear vision in terms of transformation opportunities and works to ensure that initiatives can be developed to support a wide range of priority areas aligning with the target operating model. A new transformation team is in place, which allows transformation resource to be used more flexibly, with sign off on priority transformation areas underway. The Digital Staff Passport has been introduced to enhance workforce mobility and the Primary Care Training Hub has been developed, which is focused on expanding placement programs and enhancing educational quality. Leadership development is fostered through initiatives like the 'Leading Beyond Boundaries' program, which equips healthcare professionals with innovative and leadership skills necessary for driving system-wide changes. Work is underpinned by strong clinical advice and leadership.

Luton is a Wave 2 Pathfinder site for Stable Homes work. Further clarity is needed on how the ICB is working in partnership with the local authority & other partners to ensure effective implementation of changes across Luton and to support wider learning across the system.

Improving Population Health and Healthcare

As part of the Joint Forward Plan, the ICB has outlined several High Impact Programmes. Advancing equity is a key component of this, with population health and population health management (PHM) as a 'golden thread' throughout plans, underpinned by the system-wide Population Health Management Unit. The ICB has enhanced its quality improvement focus, with several deep dives undertaken. We also note specifically the clear priorities for residents with a Learning Disability and/or Autism, especially regarding Care, Education and Treatment Reviews and Learning from Lives and Death. The establishment of keyworkers for children and young people using a voluntary organisation, Autism Bedfordshire, has been delivered well, with the improvement of Annual Health Checks for those over 14 with a learning disability prioritised. We recognise that the ICB is working to empower 'Places' to focus on the needs of their local populations however we feel there remains a benefit of ensuring that the ICB also take a whole system approach to population health, sharing and scaling good practice across the ICS.

With support from the NHS England region, the ICB are currently assessing their GP premises for the presence of Reinforced Autoclaved Aerated Concrete (RAAC) via desk top assessments and surveys. No RAAC has been identified to date and the assessment is due to complete by the end of June 2024.

Suggested areas for future improvement include ensuring paediatric hearing services demonstrate the required quality improvements and safe staffing levels to ensure sustainable service provision; achieving United Kingdom Accreditation Service (UKAS) accreditation for all providers, as BLMK providers are not currently UKAS IQIPS (Improving Quality In Physiological Services) accredited for any of their 10 Physiological Science services; and ensuring Healthcare Science (HCS) workforce registration and regulation. It will also be important for the ICB to work with Bedford and Luton Medical Examiner offices to ensure they are on track with the community roll out of the Medical Examiner System in preparation for statutory commencement in September 2024.

There have been some significant concerns raised with regards to maternity services at Bedfordshire Hospitals NHS Foundation Trust. The regional team has made several quality visits with ICB presence at some of them. The trust has demonstrated some examples of following through with improvement actions, but concern remains as to the pace of action and the system being able to support with resource to make effective change.

The ICB and trust will need to continue working together to ensure that an approach is formulated to improve maternity services while also considering the broader perinatal agenda. Seamless pathways across maternity and neonatal services are fundamental for providing safe care for the outcomes of women, birthing people, and babies.

The ICB has generally delivered well against key performance metrics in the planning guidance, including the Cancer Faster Diagnosis Standard and 62-day Cancer backlog targets. The delivery of the latter has been a significant challenge which was met against expectations. BLMK was one of the few systems to meet the 76% four-hour Emergency Department metric by March 2024, although we have some concerns that the system and its providers aren't transforming the approach to flow sufficiently quickly to maintain this performance, and protect planned care services, particularly within Bedfordshire. There is a need for greater partnership and joint working to further improve the use of alternatives to Emergency Department, increase the use of community services and reduce length of stay in all sectors.

Addressing elective long waits has been hindered by industrial action and urgent and emergency demands, and as such, a small number of patients exceeded the end of year deadline to be seen. Some elements of the planning guidance were not met in absolute terms. The system did not commit to a reduction in outpatient activity and increases were seen across the year. Progress towards the 95% diagnostic standard in 2023/24 has been challenged and remains a risk going forward. Primary Care access remains a significant risk for 2024/25 although we note the increase in appointments this year and recognise that the ICB met the requirements of the Primary Care Access Recovery Plan. Bed occupancy remains high and the ICB is also asked to pay close attention to this.

BLMK achieved one of the six mental health planning metrics against their operational plan for 2023/24, based on the available end of year performance, albeit some of these standards were narrowly missed. BLMK was, however, the only ICB in the region to meet the national Dementia diagnosis standard.

The ICB will need to continue its focus, ensuring that the delivery against key metrics remains a priority. Performance delivery should be firmly embedded within developed oversight structures.

Personalisation featured significantly in the 2023 Joint Forward Plan but appears much reduced in the revised plan. Whilst personalised care is now part of the Health Inequalities Steering Group, and progress has been made over the year, such as the appointment of personalised care ambassadors amongst other examples, further focus is needed.

Although BLMK delivers above the level set by NHS England, it delivers the lowest rate of personalised care plans in the country, which will need to improve to meet the needs of the population. This means opportunities to better empower people with long term conditions are being missed, and mandatory plans in dementia, cancer and maternity may not be being delivered to everyone. Rates of social prescribing are also relatively low; a system-wide approach to deploying social prescribing in line with population health management approaches will help address psychosocial aspects impacting health. Inclusion of personalisation measures in board level reporting would enable oversight of progress and outcomes. Measuring levels of self-management of conditions and links to outcomes such as reduced clinical support needs and improved wellbeing would fit well with the ICB's strategic aim of 'Living Well' and their proposed use of a Health Index Framework. Monitoring the rate of social prescribing across the ICB and as interventions used with specific cohorts, would tie in well with the stated strategic aims of addressing the wider determinants of health.

The ICB has worked with Health and Wellbeing Boards and partners across the system to improve outcomes for its residents and to ensure that their voices are heard, including the use of patient stories at ICB Board level. We note the extensive work being undertaken by the ICB to implement the recommendations set out within the Denny Review.

Tackling unequal outcomes, access and experience

The Denny Review is key to the approach to reducing health inequalities and driving forward population health management. As an example of how the system's strategic goals are being further widened, the ICB has developed a Reducing Inequalities Steering Group, which includes representation from the system including Primary Care, ICB transformation, NHS England specialist team, local authorities, voluntary, community and social enterprise organisations and acute hospitals. The ICB has a strong focus on children and young people ensuring that delivery is in line with adult services which continues to form an enhanced approach.

The ICB is working with the Institute of Healthcare Improvement for quality improvement support and quality improvement is embedded throughout the High Impact programmes and Core20PLUS5. Other examples of good work include the ICB's work with the University of Bedfordshire on research aimed at reducing inequalities; support to practices working with the most deprived populations, support to Bedfordshire Hospital's work to target inequalities in addressing waiting lists as well as work to improve Cancer diagnosis in an inclusive way.

As per the 2024/25 planning guidance objectives, the Joint Forward Plan presents an opportunity to incorporate prevention of ill-health, with a particular focus on outcomes for the Core20PLUS5 populations and implementation of NHS England's high impact interventions for secondary prevention. This includes providing lifestyle programmes to address inequalities in Cardio-vascular disease prevention: smoking and alcohol cessation; diabetes prevention; weight management; and diabetes remission, with improved participation rates in the most deprived quintiles of the population. The ICBs should focus on delivery of the NHS Long Term Plan objective to support people to stop smoking through implementing opt-out treatment for patients in hospital and as part of maternity pathways.

In terms of the commitment to fully establish tobacco dependency treatment services, it is noted that Milton Keynes hospital will be the only trust in the region not to have a tobacco dependency treatment service for inpatients.

The ICB is actively working closely with partners to better understand the communities it serves, promote prevention and health promotion and transform primary and VCSE organisations. This approach, and the restoration of services, needs to continue.

Enhancing Productivity and Value for Money

Research and innovation runs through the Joint Forward Plan, with the ICB supporting development of an ICS wide research and innovation Hub, establishing an research and innovation Network, and securing funds. Over the past year, the ICB has expanded cloud-based telephony in general practice, focusing now on using these digital tools to enhance patient access and outcomes. Future efforts will include engaging with the rollout of the Federated Data Platform and facilitating provider discussions. The ICB has shown significant progress with its Shared Care Record and now integrates this with other ICBs. Bedfordshire Hospitals NHS Foundation Trust have also made progress implementing their Electronic Patient Record across both sites. Challenges are faced in securing ongoing funding and resources for digital transformation as these programmes transition into 'Business as Usual' which may impact the ICB's ability to sustain them. To grow key programmes, the ICB could develop a dedicated, costed digital strategy to articulate how all partners will prioritise digital investment.

The ICB recognises the financial challenges the system is facing while also recognising what needs to be delivered for the population. The ICB has led a system-wide approach to delivery of finance, and over delivered on planned efficiencies, which delivered a system surplus of £0.5m for the year against breakeven plan. Significant use of non-recurrent funds in 2023/24 has however created further challenge for next year which needs to be proactively managed with a focus on improving productivity and reducing the recurrent run-rate deficit.

Service Development Funding for learning disabilities and autism usage is well evidenced for the last three years, with clear plans for expenditure for 2024/25. A breakeven plan for 2024/25 has been submitted, however this carries a £55.9m of net risks and £105.7m of efficiency savings (5% of ICB allocation).

Regarding workforce, the 2024/25 finance plan needs to remain focused on overall pay.

We acknowledge that the ICB is experiencing significant population growth (two and a half times the national average) and this has the potential to lead to significant challenges to service delivery and funding shortfalls.

Helping the NHS to Support Broader Social and Economic Development

The ICB is committed to delivering against the five priorities for health and social care across the BLMK system, outlined in the Health and Wellbeing Strategy. The priority areas of Start Well; Live Well; Age Well; Growth, and Reducing Inequalities, support wider cross-cutting enablers to support a healthy life with access to high quality healthcare, healthy behaviours, education, economic stability, employment and the built environment. Of note is the ICB's extensive work with voluntary, community and social enterprise organisations to harness the power and expertise of the third sector to support broader health and wellbeing, and the establishment of an ICS wide System Strategic Leadership Group and system-wide procurement approach.

The ICB has sought to embed its place as an anchor institution for the system through the BLMK People Strategy, with a Place-based approach supporting the anchoring of strategies within the community. While this approach is being supported by closer partnership working with local authorities and organisations including the voluntary and housing sectors there is still significantly more work to do particularly in anchoring with educational institutions noting the relatively poor national reputation for tertiary education across the ICS.

Summary/Conclusions

This has been a challenging year in many respects and in making our assessment of your performance we have sought to fairly balance our evaluation of how successfully you have delivered against the complex operating landscape in which we are working. This is the first full year in which you have been operating as well as the first year of your Joint Forward Plan and we are keen to continue to see progress towards a maturing system of integrated care structured around placing health and care decisions as close as possible to those people impacted by them. My team and I will continue to work alongside you in the year ahead and we look forward to working with you to support improvement throughout your system.

It is encouraging to see the breadth of good practice and examples of good practice and successful delivery and transformation, underpinned by partnership working as highlighted in this letter:

Examples of areas of success:

- The ICB has developed strong relationships with local authority and other non-NHS partners
- The ICB has worked well with its system partners to align the Health and Wellbeing strategy and operational plans.
- There has been a robust response to *The Denny Review Report* and proactive commissioning of the Institute of Healthcare Improvement to improve quality and undertake a review of specialist health inequalities.
- The ICB delivered across a range of operational standards including the 76% 4-hour ED standard.
- Achievement of 23/24 Financial Plan as a System and the approach to system working across the financial community in 2023/24
- Head of internal audit option for 23/24 noted substantial assurance for both design and operational effectiveness on key financial systems.
- In light of the Maternity challenges, the ICB has recruited a Chief Midwife and Luton & Dunstable's Midwives have received High Dependency Unit training and competency assessments as part of the approach to embed improvements.

Notwithstanding the positive points highlighted above there are opportunities to further improve and I trust you will embrace the recommendations in this letter and the key areas set out below:

Areas for development:

- A need to improve the relationships within the Bedfordshire Care Alliance and between the ICB and Bedfordshire Hospitals NHS Foundation Trust to drive improvements for patients. It is acknowledged that this requires better working from all sides of the relationship and that the Milton Keynes place is functioning relatively well.
- A need for greater joint working across the system to deliver urgent and emergency care transformation and sustained performance and to reduce the impact of delays in urgent and emergency care flow on elective care.

- A need to more clearly establish and assert the ICBs role in Oversight, Commissioning, Contract and Performance Management at system and at place. It is acknowledged that providers in the system have been performing relatively well until quite recently however with challenges increasing this responsibility of the ICB becomes more important.
- A need to work more closely with the regional team on matters of safeguarding and quality. We will use multi-disciplinary teams to discuss how to do this together more effectively.
- A clearer articulation on how the ICB is coordinating population health management programme across the entirety of its population recognising the programmes of work underway at place.
- A need to deliver greater levels of productivity across the system to reduce the underlying deficit of the system. Acknowledging the positive steps taken during 2023/24 to deliver a balanced plan there is a need to reduce the reliance on non-recurrent funding.
- The ICB and Bedfordshire Hospitals NHS Foundation Trust will need to continue working together to ensure that an approach is formulated to improve maternity services while also considering the broader perinatal agenda.

I ask that you share my assessment with your leadership team and consider publishing this alongside your annual report at a public meeting. NHS England will also publish a summary of the outcomes of all ICB performance assessments in line with our statutory obligations.