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## A message from the Chief Executive: Facing the year ahead together

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From CEO (FRIMLEY HEALTH NHS FOUNDATION TRUST) <fhft.ceo@nhs.net>

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## Facing the year ahead together

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Dear all

Thank you for your feedback and questions following my last update on 25 March.

I wanted to update you on what has changed over the last three weeks in terms of what the next year looks like for us and what we need to do to address the challenges facing us.

As a result of economic and political pressures and positions in the UK and around the world, the NHS is under a lot of pressure to change at a pace and scale that we have not seen before.

We are being challenged to work in more modern and effective ways, quickly.

### **What does that mean for Frimley Health?**

We need to provide more care while spending much less. Over this year, it will mean:

- Reducing our costs by £58m – 6% of everything we spend
- Seeing more patients than we did last year (5% more outpatient and emergency attendances and 3% more planned electives and day cases)
- Improving our operational performance, specifically >60% of patients seen within 18 weeks (current 52%), 75% of cancer referrals treated within 62 days (current 66%) and 78% of ED attendances seen and treated within 4 hours (current 72%)

And we must do all this while still providing great care and ensuring our patients are highly satisfied with our service.

Since my last message, we have also been given more specific and clearer instructions from NHS England about where we should be reducing our costs.

These are based on benchmarking with other trusts, and we will be measured against these nationally:

- Halving the growth in corporate costs (pay and non-pay) since 2018/19 (£20m)
- Reducing spending on agency staff by 40% (£7m)
- Reducing spending on bank staff by 15% (£7m)
- Either setting up or joining a fully NHS owned subsidiary (on NHS pay and terms and conditions)

There is also a new national performance assessment framework being introduced, where every acute trust will be rated quarterly against more than 30 quality, performance, access and finance metrics.

All ratings will be made public, and ratings will decide how much independence and autonomy we get and whether we need external support.

In addition, NHS England and local Integrated Care Boards (ICBs) have been told to reduce their total costs by 50% by October. This will mean large changes to how the NHS is run and the potential for more responsibility for trusts like ours to manage the health of the local population differently, through new forms of Accountable Care models.

We will need to move at pace, make some difficult decisions, challenge the way we work, and be able to respond flexibly and quickly to the changes.

### **What are we doing immediately to respond?**

- We've paused recruitment for non-clinical roles
- We're reviewing how much we spend on temporary non-clinical colleagues, and working to reduce this immediately
- We're launching a voluntary, Mutually Agreed Resignation Scheme (MARS) for non-clinical colleagues. We will share more information about this next week, and it should open from the week of 28 April.
- We'll also look into whether a wholly NHS-owned subsidiary company could help us meet some of these challenges – if so, this would not be outsourcing, and colleagues would stay on NHS pay and terms and conditions.

We will need to continue to implement all our directorate and trust wide quality improvement and cost reduction plans, and we will also need to continue to look into accountable care opportunities and other changes needed to be more flexible and responsive.

### **Why am I telling you all this?**

I believe in being completely open and honest about our challenges and how we are planning to deal with them.

NHS England benchmarking shows that we could save up to £86m by changing how we work; reducing our length of stay, increasing our activity, reducing our bank and agency spend, reducing our medicine spend; having a leaner corporate structure and generating more commercial income. I see opportunities in all these areas.

None of this will be easy, but we have a responsibility to our patients and our communities to take it seriously, to keep challenging ourselves, and to keep providing excellent care together.

We have strong foundations, and we will soon launch our new five-year strategy. This will guide us through the next stage with a focus on our patients, our people, our infrastructure and the quality of our care.

This year is going to be challenging, but together we can rise to these challenges as a team.

Thank you again for everything you do, and please join our fortnightly all-staff briefings on Tuesday 22 April at 12:30 for updates on these topics or to raise any questions or issues you would like to discuss.

Lance

**Lance McCarthy**  
**Chief Executive**  
**Frimley Health NHS Foundation Trust**