

# Norfolk Community Health and Care NHS Trust

## OPERATIONAL PLAN 2025-26

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Board approval:	

## 1 Introduction

1.1 This Plan forms part of a suite of inter-locking documents comprising:

- Trust Strategy 2023-27:
  - Supplemented by this operational plan.
- Integrated Community Health and Care Priorities 2025-28
- Continuing Trust Programmes
- Group Wide Service Plans 2025-26:
  - Children and Young People's.
  - Dynamic Health ( including Norfolk MSK services).
- Key enabling strategies
- Place and Service Objectives 2025-26

1.2 National priorities are to: operate within allocated funding and make reductions in agency and bank spending; improve quality, access and experience across urgent and emergency care, elective, cancer, mental health and primary care services; remove unwarranted variation and drive productivity, clinically, operationally and corporately.

1.3 April 2025 marks the commencement of our group model with Cambridgeshire Community Services NHS Trust. Developing this relationship and preparing for a transaction is central to the Trust's future. Similarly April 2025 brings the commencement of our renewed s75 agreement with Norfolk County Council, with a clear focus on delivery of integrated health and care to our population.

1.4 There is a national requirement<sup>1</sup> for Boards to review plans and be assured that a robust quality and equality impact assessment has been completed. The Board can be assured that:

- We plan to break even as at 31 March 2026.
- We have a 4.9% efficiency target and are finalising plans to achieve this.
- Our activity levels will not reduce and may increase subject to commissioning arrangements or through improvements in productivity.
- From 1 June 2025 our specialist learning disability and autism diagnosis services will be transferred to other providers following a procurement process. It is anticipated that our adult residential respite service will transfer to another provider on 1 October following a procurement process that has yet to commence.

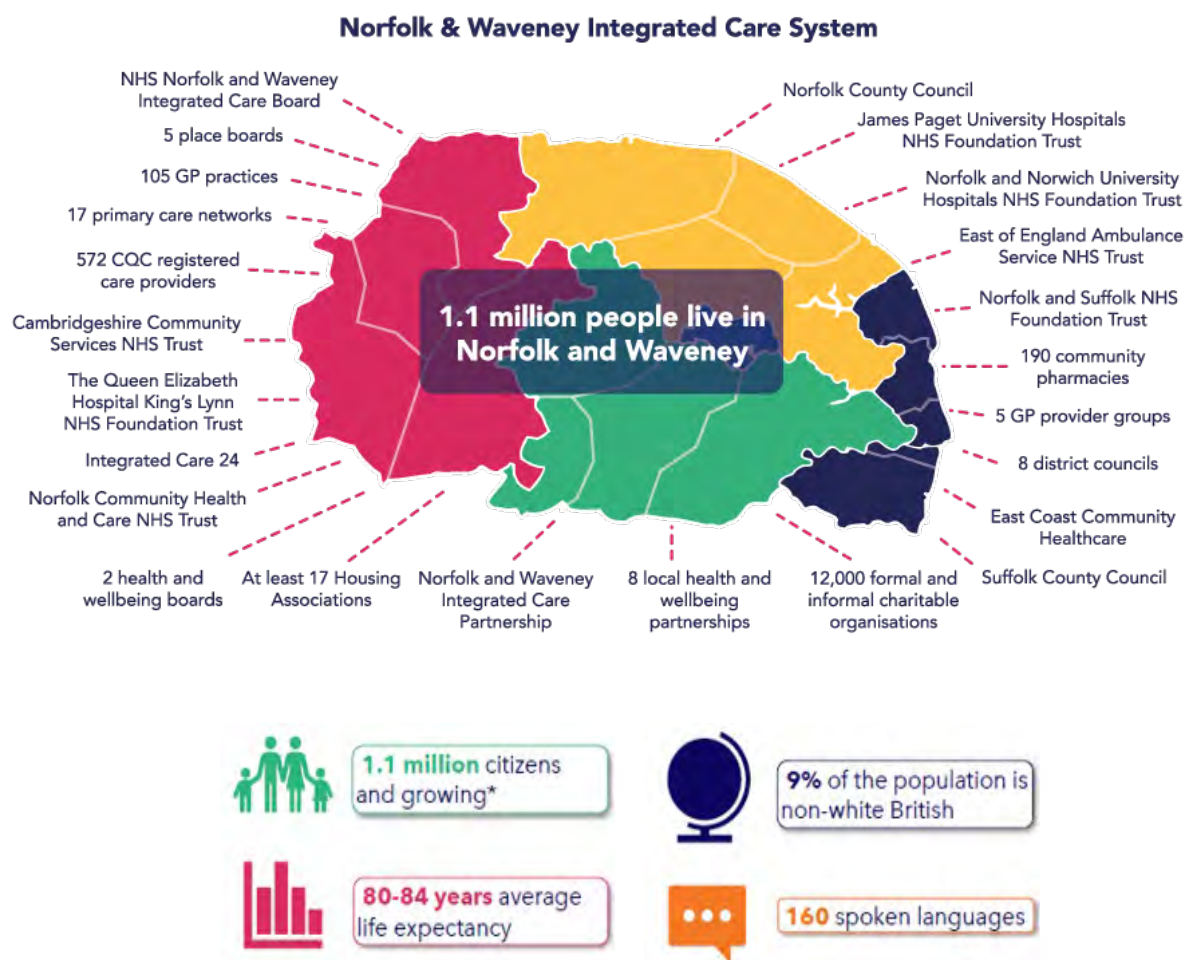
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<sup>1</sup> NHS England Board Assurance and Plan Overview dated 3 March 2025.

1.5 Our baseline planned workforce will show a reduction during 2025/26 as a consequence of service transfers, opportunities to improve efficiency through Group working, and to meet national guidance for support service costs. This is likely to be balanced though the year through new service opportunities e.g. service expansion through growth funding, new service developments etc.

## 2. The Trust

2.1 The Trust operates across Norfolk and Waveney as part of the Norfolk and Waveney Integrated Care System (ICS). An overview of the system is in Figure One below:



**Figure One – ICS Overview**

2.2 The Trust delivers over 80 services, covering broad service areas summarised in Table One below:

Adult Services	
Acute Diabetic Foot podiatry Team	Inpatient Specialist Stroke Rehabilitation
Admissions Avoidance/ UEC / Rapid response	Inpatient Specialist Neuro
Amputee Rehabilitation Inpatients	Inpatient Palliative and End of Life Care
Biomechanics	Integrated Discharge Team
Bladder and Bowel Health	Lymphoedema
Cardiac Rehabilitation	MSK Physiotherapy
Cardiac Vascular Disease	MSK Occupational therapy
Community Matrons	Neuro rehab / ABU
Community Nursing and Therapy	Out of Hours Unplanned care
Community Podiatry	Oxygen Management
Community Palliative care	Pharmacy Technicians
Continence	Phlebotomy
Chronic Obstructive Pulmonary Disease	Podiatry
Dermatology	Post Covid Service
Diabetes	Pulmonary Rehab
Dietetics	Respiratory
Epilepsy	Speech and Language Therapy
Environmental Controls	Tissue Viability
High Intensity User Service (Frequent Attenders)	TB service - adults
Heart Failure	Virtual Ward
Inpatient Rehabilitation	Wheelchair service - adults
CYP Services	
Children's Community nursing	Post Covid Service
Community paediatrician	Short breaks
Neuro Developmental Services	TB Service Children's
Health Training	Specialist Paediatric continence
Children in Care (LAC)	OT
Epilepsy	Physio
Psychology	Wheelchair service - children's
Post Covid Service	

**Table 1 – Service Areas**

2.4 The Trust's vision is to be:

***Providing seamless health and social care that creates healthier futures for everyone across Norfolk and Waveney.***

2.5 In delivering its vision the Trust will remain guided by its values of:

***Community, Compassion; and Creativity***

### **3. Strategic Objectives**

3.1 For each of our strategic objectives we have identified a number of key themes ambitions for the period 2023-27; these guide our focus and actions over this period and drive our annual team and individual objective setting process. These are set out in Table one below:

Strategic objectives	Our key themes towards 2027;
<b>Deepening our integration with partners</b>	Preventing health conditions from developing
	Responding quickly to urgent needs
	Delivering more joined-up treatment experiences
	Empowering patients and caregivers to manage conditions at home
<b>Attracting and developing brilliant and fulfilled teams</b>	Looking after our people
	Ensuring everyone feels they belong
	Encouraging personal growth
	Enabling new ways of working
<b>Continually improving standards of excellence</b>	Supporting people to advance their clinical capability
	Creating a quality improvement culture
	Keeping patient experience and safety a top priority
	Prioritising action in our most challenged services
<b>Advancing our use of data and technology</b>	Developing digital solutions that enable more services at home
	Providing high-quality data analysis and reporting
	Enabling joined-up systems and data with colleagues and partners
	Optimising our digital capabilities to drive efficiencies
<b>Being a future focussed organisation</b>	Ensuring we have the resources for current and future needs
	Minimising our impact on the environment
	Using evidence to continually evolve how we work
	Nurturing proactive leaders at all levels

***Table One: Strategic Objectives and Key Themes***

3.2 The work needed to achieve these challenging ambitions is described in our service plans and key supporting strategies.

3.3 We will report progress with the objectives and ambitions to the Trust Board biannually (in September and March).

**4. National and System Priorities**

4.1 National Priorities and Objectives. National Priorities and Success Measures for 2025-26<sup>2</sup> are set out in Table 2 below and Annex A respectively:

National Priorities 2025-26		
	Priority	Linked plans
1	<b>Reduce the time people wait for elective care</b> , improving the percentage of patients waiting no longer than 18 weeks for elective treatment to 65% nationally by March 2026, with every trust expected to deliver a minimum 5%-point improvement. Systems are expected to continue to improve performance against the cancer 62 day and 28-day Faster Diagnosis Standard (FDS) to 75% and 80% respectively by March 2026	Not directly applicable
2	<b>Improve A&amp;E waiting times and ambulance response times</b> compared to 2024/25, with a minimum of 78% of patients seen within 4 hours in March 2026. Category 2 ambulance response times should average no more than 30 minutes across 2025/26	Not directly applicable but supported by UCR development
3	<b>Improve patients' access to general practice</b> , improving patient experience, <b>and improve access to urgent dental care</b> , providing 700,000 additional urgent dental appointments	Not directly applicable but supported through development of integrated neighbourhood teams to support release of GP capacity
4	<b>Improve patient flow through mental health crisis and acute pathways</b> , reducing average length of stay in adult acute beds, <b>and improve access to children and young people's (CYP) mental health services</b> , to achieve the national ambition for 345,000 additional CYP aged 0 to 25 compared to 2019	Group Children's and Young People's Service Plan
Supporting activities:		
1	<p><b>Drive the reform that will support delivery of our immediate priorities and ensure the NHS is fit for the future.</b> For 2025/26 we ask ICBs and providers to focus on:</p> <ul style="list-style-type: none"> <li>• Reducing demand through developing Neighbourhood Health Service models with an immediate focus on preventing long and costly admissions to hospital and improving timely access to urgent and emergency care</li> <li>• Making full use of digital tools to drive the shift from analogue to digital</li> <li>• Addressing inequalities and shift towards secondary prevention</li> </ul>	Trust Operational Plan Place and Service Objectives Trust Service Plans Trust Quality Strategy Trust Digital Transformation Strategy
2	<b>Live within the budget allocated, reducing waste and improving productivity.</b> ICBs, trusts and primary care providers must work together to plan and deliver a balanced net system financial position in collaboration with other integrated care system (ICS) partners. This will require prioritisation of resources and stopping lower-value activity	Trust Financial Plan People strategy
3	<b>Maintain our collective focus on the overall quality and safety of our services</b> , paying particular attention to challenged and fragile services including maternity and	Trust Quality Strategy Trust Service Plans

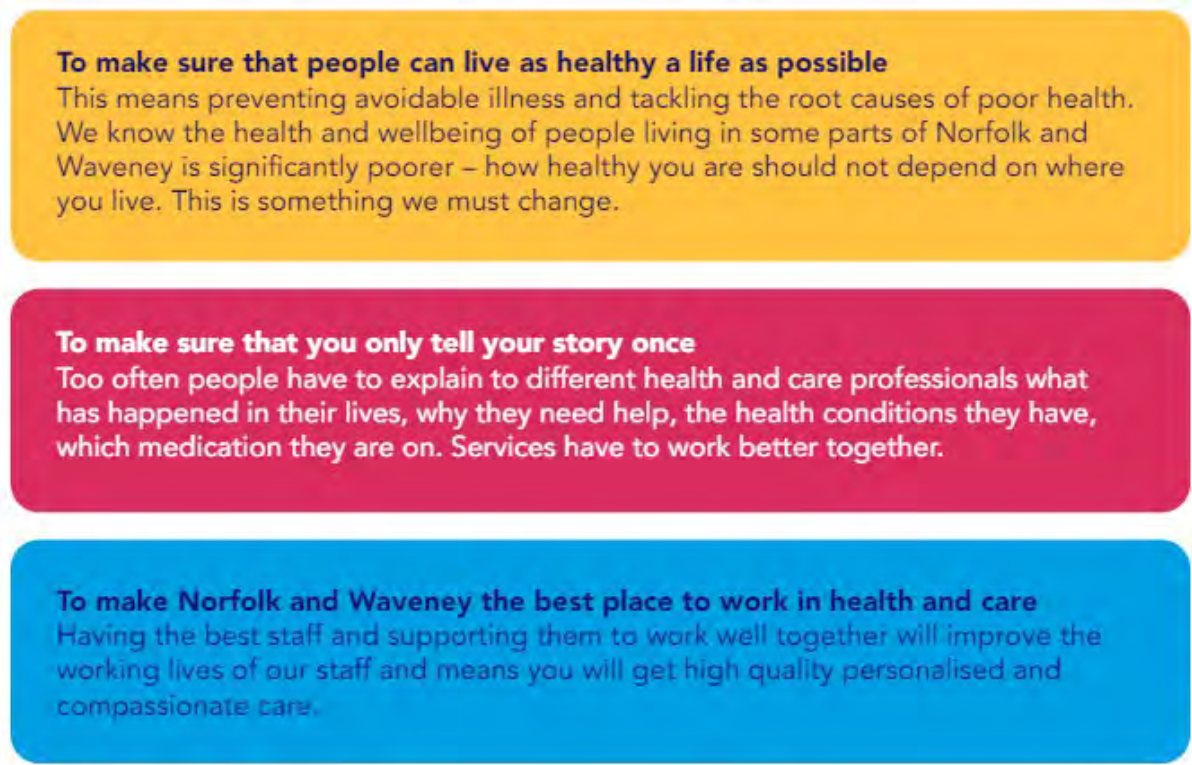
<sup>2</sup> NHS England 2025/26 Priorities and Operational Planning Guidance (PRN01625).

neonatal services, delivering the key actions of the 'Three-year delivery plan', and continue to address variation in access, experience and outcomes.	
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**Table 2 – National Priorities**

**System Strategic Priorities.**

4.2 System Strategic Priorities for the Norfolk and Waveney system are set out in Figure 5 below:



**Figure 5 – N&W Priorities**

**Key Financial Planning Assumptions.**

4.3 The main assumptions underpinning our financial plan are summarised in Table 3 below:

Planning Area	Assumptions: 2025-26
Revenue	NHS contracted income net uplift of 1.65%. LA contracted income zero uplift
Cost	2.8% pay cost inflation 0.9% general non pay inflation
Outturn	Breakeven plan
Cost Improvement Plan	£8.8m (4.9%) in cost efficiencies to be delivered in 2025-26

**Table 3 – Financial Planning Assumptions**

**5. Supporting Plans**

**Trust Strategy 2023-27**

5.1 The Trust strategy, incorporating the strategic objectives and themes identified at 3 above, is enclosed as Annex B. This guides the development of Place and service objectives and plans which are considered and developed on an annual basis.

Integrated Community Health and Care Priorities 2025-28

5.2 The Trust and Norfolk County Council are partners within a formal ‘Section 75’ (s75) agreement for the integrated delivery of health and social care in Norfolk. As part of this partnership working the Trust and NCC have agreed joint community health and care priorities for 2025-28, as shown in Figure 6 below and enclosed as Annex C.



**Figure 6 –Joint community health and care priorities**

Continuing Trust Programmes

5.3 The Trust has delivered a number of trust-wide programmes of work in 2024-25 with a number of these now passed to 'business as usual':

- Wheelchair service re-design
- Willow therapy unit build and operational establishment
- Systems Operational and Resilience re-design

5.4 Two key focus areas will continue into 2025-26

- Community nursing and therapy redesign - to deliver a single consistent operating model for pathways, acknowledging that there will be agreed local variation also creating a positive progression for seamless flex between Planned care and the Urgent Care Response (UCR); and
- Neuro Developmental service transformation - (now being delivered as part of the Group Children and Young People Service grouping) – a redesign programme to deliver a reduction in the numbers of children and young people being accepted for assessment through aligning Trust service delivery to the new 'Norfolk System Model' and wider system transformation.

5.5 As part of 2025-26 contract discussions the Trust was successful in bidding for an additional allocation of £6.3m of recurrent growth funding (c.£4m in year effect) to support expansion and development of Trust services across the following areas:

- Home IV service
- Virtual Ward
- Urgent Community Response
- Frailty Same day Emergency Care

Schemes will be developed in partnership with acute partners and will focus on reducing acute activity by expanding care in the community.

5.6 In addition to this new funding, the Trust has successfully agreed, on a recurrent basis, non-recurrent funding of £2.5m provided in 2024-25 to deliver additional community capacity in West Norfolk which supported the closure of escalation beds in the Queen Elizabeth Hospital Kings Lynn (QEHL). Our partnership working with QEHL to embed the changes delivered in year can now continue.

#### Group Wide Service Plans 2025-26:

5.7 From 1 April, as part of the Trust's move to a Group model, two Trust service groups are now aligned and managed as part of a wider grouping of services across

both Trusts and, consequently, their operational plans will be managed as part of that group alignment. The two services are:

- Children and Young People's specialist nursing, and home/residential respite – now managed as part of the wider Children and Young People service; and
- MSK services - now managed as part of the wider Ambulatory / Dynamic Health services.

5.8 For these services operating plans will be developed to maximise the benefits from operating under our new group model.

Key enabling strategies:

5.9 Following the move to a Group model from 1 April 2025, and in support of the realisation of the benefits that the Group model will bring, the Group is developing its Clinical Care and Support strategy.

5.10 To support the delivery of the Clinical Care and Support strategy, supporting strategies and implementation plans will also be developed in the following areas:

- People strategy and cultural development
- Digital
- Estates and facilities
- Governance
- Improvement and transformation

Financial Plan

5.11 The Trust has a detailed 2025-26 financial plan. Key points are that:

5.11.1 The Trust has a planned turnover of £172.4m for 2025-26 and plans to deliver a breakeven position. The Trust has agreed its position to enable an acceptable plan within the Norfolk and Waveney system as required. The position has been informed using national planning assumptions.

5.11.2 To deliver the planned position, the Trust has a cost improvement target of £8.8m, equating to approximately 4.9% of expenditure for 2025-26. The Trust will continue to identify schemes to deliver the efficiency target, which will be a combination of pay, non-pay and income related schemes and have associated quality impact assessments where appropriate. However, the delivery of cost improvement during 2025-26 is the largest target the Trust has been required to deliver.

5.11.3 The current Trust working assumption for its share of the system capital allocation is a capital plan of £7.8m for 2025-26, which includes clinical equipment replacement, digital developments and the development of Trust freeholds and leasehold properties, statutory compliance and essential backlog maintenance.

5.12 Key finance data are at Annex D.

Group Model

5.13 The group model with Cambridgeshire Community Services NHS Trust is established with effect 1 April 2025. To develop the relationship and a future transaction, we have a programme board established with workstreams focussed on governance; workforce; communications; organisational development and business cases development. The programme Board reports to the Executive team and to the Board on progress, risks and milestones. We are working closely with NHS England to ensure we meet the governance and legal requirements necessary for safe transition to the group Model and a future merger.

**6. Our People**

6.1 Each year the Trust agrees annual priorities to support our strategic objective of ‘Attracting and developing brilliant and fulfilled teams’. These are known as our ‘People Priorities’. For 2025-26 they are shown in Table 4 below:

Norfolk Health and Care Objectives 2025 - 26	
Attracting and developing brilliant and fulfilled teams	
Objective	Core linked strategic theme
<ul style="list-style-type: none"> <li>• Improve attendance performance within operational areas.</li> <li>• Review and improve disciplinary and grievance processes with trade union colleagues.</li> <li>• Working with operational leaders, focus on improving the people promise scores for inpatient staff.</li> </ul>	Looking after our people
<ul style="list-style-type: none"> <li>• Working as a group to Implement appropriate processes and actions to reduce the experience and impact of violence and aggression and sexual misconduct within the workplace.</li> </ul>	Ensuring everyone feels they belong
<ul style="list-style-type: none"> <li>• Create onboarding induction and education plan for inpatient HCSWs.</li> <li>• Deliver outcomes of national re-banding review for nursing staff.</li> <li>• Implement recommendations of national Statutory and Mandated training review locally.</li> </ul>	Encouraging personal growth
<ul style="list-style-type: none"> <li>• Create a digitally confident workforce.</li> <li>• Roll out manager self service to all managers on completion of pilot phase.</li> </ul>	Enabling new ways of working

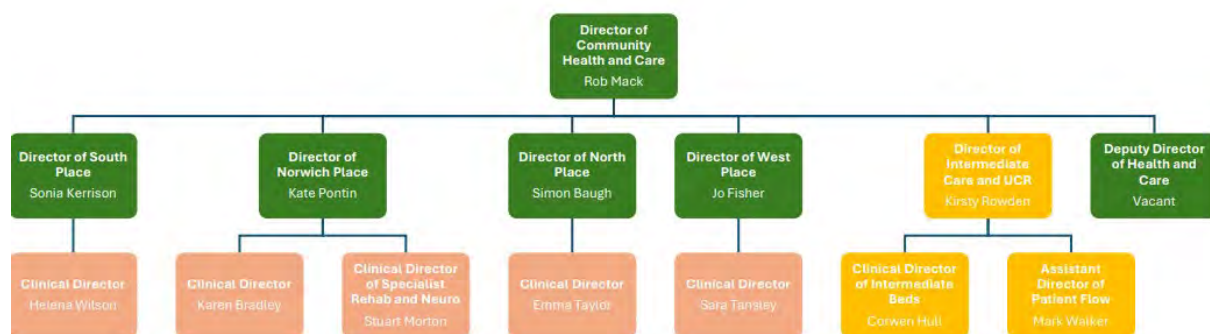
***Table 4 – People Priorities***

**7. Place and service objectives**

7.1 The Director for Norfolk Community Health and Care has agreed place and service objectives with Place and Service Directors / leads which forms the basis

for place and service action plans for 2025-26.

7.2 From 1 April 2025 the Trust has implemented a revised management structure as shown in Figure 7 below and enclosed as Annex E.



**Figure 7 – Management Structure**

Following this management structure the objectives can be summarised under four broad categories:

- Applicable to all Places and services
- Applicable to all Places
- Applicable to Intermediate Care and UCR; and
- Applicable to specific services

Applicable to all Places and services

7.3 The objectives detailed in Table 5 have been agreed with all Place and Service Directors:

Norfolk Health and Care Objectives 2025 - 26	
Objectives applicable to all Place / Service Directors	
Objective	Core linked strategic priority
Manage budgets effectively including providing accurate monthly forecasting. Deliver a break even or surplus position at year end.	Being a future-focussed organisation
To develop a people plan in response to, and to improve staff engagement and measured by improved staff survey results.	Attracting and developing brilliant and fulfilled teams
Develop increased evidence and activity of learning from and with patients/Service Users/residents across portfolio areas.	Advancing our use of data and technology

**Table 5 – Objectives applicable to all Place / Service Directors**

7.4 These objectives embed the fundamental approach to delivering sustainable services with evidence from staff and service users forming the basis of continuous improvement.

Applicable to all Places

7.5 The objectives detailed in Table 6 have been identified as linked appropriate for Places as they focus on our core Community Nursing and Therapy delivery and reflect our continued focus on integration of health and care provision as well as with primary care :

Norfolk Health and Care Objectives 2025 – 26	
Objectives applicable to all Places	
Objective	Core linked strategic priority
Delivery of Integrated neighbourhood teams across health and care	Deeping our integration with partners
Implement and develop Community led Support Social Care Model	Deeping our integration with partners
Develop plan to deliver improved strength based practice social care model - including associated place based QI&A systems and governance to drive improvement and learning	Continually improving standards of excellence
Develop and deliver reviews recover plan to reduce overdue reviews to no more than 6 months overdue by October 25	Continually improving standards of excellence
Integrate reablement into place delivery, and implement reablement led reviews at 4 week stage post reablement period	Continually improving standards of excellence

***Table 6 – Objectives applicable to all Places***

Applicable to Intermediate Care and UCR

7.6 The Trust supports Urgent and Emergency Care (UEC), and the Unscheduled Care Coordination Hub (UCCH) through our Urgent Community Response (UCR) and Intermediate Care teams. This distinction between scheduled activity (delivered through places) and activity requiring a more immediate response allows the Trust to focus on the most efficient use of resources to deliver the best quality care possible.

7.7 Consistent with the focus on Places, objectives have been identified for our Intermediate Care and UCR provision as shown in Table 7 overleaf.

Norfolk Health and Care Objectives 2025 - 26	
Objectives applicable to Intermediate Care and UCR	
Objective	Core linked strategic priority
Conduct a review of medical and ACP roles, responsibilities, and coverage to ensure alignment with service needs.	Being a future-focussed organisation

Review ward structure to support continued focus on improved outcomes and patient flow across intermediate care.	Attracting and developing brilliant and fulfilled teams
Review future bed stock based on patient demand and need types to develop demand and capacity plans and associate business case for transformation.	Being a future-focussed organisation
To deliver identified NCHC efficiencies including reduction of bedded unit cost to delivery NCHC CIP.	Being a future-focussed organisation
Deliver 80% UCR performance.	Deepening our integration with partners
Develop reporting and management of patient flow across inpatient settings to drive improved outcomes, reduced length of stay and greater efficiency.	Advancing our use of data and technology
Work with system partners to develop a single sustainable VW model across all places.	Deepening our integration with partners

**Table 7 – Objectives applicable to Intermediate Care and UCR**

Applicable to specific services

7.8 Individual services have also been identified as benefitting from specific focus through objectives as shown in Table 8 below:

Norfolk Health and Care Objectives 2025 - 26		
Objectives applicable to specific services		
Objective	Applicable to	Core linked strategic priority
Develop a cross place improvement plan for the quality and capacity planning of diabetes specialist and community management .	Diabetes Management	Continually improving standards of excellence
Lead the planning and co-ordination of improvement in specialist palliative and community palliative services into one pathway with clear evidence of improvement in access, timeliness of support and lived experience.	Palliative care services	Continually improving standards of excellence
Review the clinical and operational leadership and strategy for specialist neuro and rehab services with aim to strengthen leadership and have sustainable plan for service delivery.	Specialist Neuro Services	Attracting and developing brilliant and fulfilled teams
Stroke inpatient funding shortfall and associated clinical risk to be managed and mitigated	Stroke services	Being a future-focussed organisation
To link TVN roles close to place with consistent wound care, care plans in place and develop demand and capacity future planning to meet wound care needs across system.	Tissue viability	Being a future-focussed organisation

**Table 8 – Objectives applicable to all specific services**

7.9 A consolidated summary of all the objectives is enclosed as Annex F and, with a revised management and operational structure only in place for Norfolk adult services from 1 April 2025, Place / Service Directors are now confirming plans for delivery.



## National priorities and success measures for 2025/26

Priority	Success measure
Reduce the time people wait for elective care	Improve the percentage of patients waiting no longer than 18 weeks for treatment to 65% nationally by March 2026, with every trust expected to deliver a minimum 5% point improvement <sup>2</sup>
	Improve the percentage of patients waiting no longer than 18 weeks for a first appointment to 72% nationally by March 2026, with every trust expected to deliver a minimum 5% point improvement <sup>2</sup>
	Reduce the proportion of people waiting over 52 weeks for treatment to less than 1% of the total waiting list by March 2026
	Improve performance against the headline 62-day cancer standard to 75% by March 2026
	Improve performance against the 28-day cancer Faster Diagnosis Standard to 80% by March 2026
Improve A&E waiting times and ambulance response times	Improve A&E waiting times, with a minimum of 78% of patients admitted, discharged and transferred from ED within 4 hours in March 2026 and a higher proportion of patients admitted, discharged and transferred from ED within 12 hours across 2025/26 compared to 2024/25
	Improve Category 2 ambulance response times to an average of 30 minutes across 2025/26
Improve access to general practice and urgent dental care	Improve patient experience of access to general practice as measured by the ONS Health Insights Survey
	Increase the number of urgent dental appointments in line with the national ambition to provide 700,000 more
Improve mental health and learning disability care	Reduce average length of stay in adult acute mental health beds
	Increase the number of CYP accessing services to achieve the national ambition for 345,000 additional CYP aged 0–25 compared to 2019
	Reduce reliance on mental health inpatient care for people with a learning disability and autistic people, delivering a minimum 10% reduction
Live within the budget allocated, reducing waste and improving productivity	Deliver a balanced net system financial position for 2025/26
	Reduce agency expenditure as far as possible, with a minimum 30% reduction on current spending across all systems
	Close the activity/ WTE gap against pre-Covid levels (adjusted for case mix)
Maintain our collective focus on the overall quality and safety of our services	Improve safety in maternity and neonatal services, delivering the key actions of the of the 'Three year delivery plan'
Address inequalities and shift towards prevention	Reduce inequalities in line with the Core20PLUS5 approach for adults and children and young people
	Increase the % of patients with hypertension treated according to NICE guidance, and the % of patients with GP recorded CVD, who have their cholesterol levels managed to NICE guidance



# Outstanding health and care at the heart of the community

Bringing thoughtful, expert health and social care into the homes and daily lives of our local communities.



## Who we are

We're Community Health and Social Care Specialists for Norfolk and Waveney. We work with our communities to improve and manage their health and medical conditions in, or near their homes, and minimise the need for them to be in hospital.

## What we do

We work collaboratively with patients and partners to offer a safe, personalised experience, delivered with heart.

## Our vision

Providing seamless health and social care that creates healthier futures for everyone across Norfolk and Waveney.

To help us achieve our vision, we'll work to five new strategic priorities:

Deepening our integration with partners

Attracting and developing brilliant and fulfilled teams

Continually improving standards of excellence

Advancing our use of data and technology

Being a future-focused organisation



And we'll remain guided by our values:

**Community**  
**Compassion**  
**Creativity**



# Deepening our integration with partners

We will deliver this by:



## Preventing health conditions from developing

### The outcomes we are working towards

Signs of developing conditions are proactively addressed. By asking and listening, and by being aware of inequality, patients are supported to make healthier life choices and access services to prevent avoidable crisis.

### Key commitments towards 2027

- We will partner with Primary Care Networks to ensure earlier interventions for avoidable conditions.
- We will increase the number of people trained to deliver health coaching.
- We will prioritise earlier access into prevention focussed services.

## Responding quickly to urgent needs

### The outcomes we are working towards

Patients can access support as soon as it is needed. Patients receive rapid support, assistive technology and co-ordinated communications between partners preventing conditions from deteriorating and reducing the risk of hospital admissions.

### Key commitments towards 2027

- We will work with partners to direct more calls into community urgent care services.
- We will exceed the national urgent care and reablement targets.
- We will enable easier and faster urgent access to services.

## Delivering more joined-up treatment experiences

### The outcomes we are working towards

Patients have a treatment experience designed, in partnership, around their individual needs and capabilities. Strong communications and information sharing means they can move safely and seamlessly, only telling their story once, across all place-based services.

### Key commitments towards 2027

- We will develop more joint services with partner organisations.
- We will improve our discharge pathways from acute into community care.
- We will meet patients' holistic needs at home by increasing our pathways with healthcare, council and voluntary partners.

## Empowering patients and caregivers to manage conditions at home

### The outcomes we are working towards

Patients' care plans are co-created with them to ensure they receive compassionate, specialist support that meets their needs and maximises their independence at home, at whatever stage they are in their care journey.

### Key commitments towards 2027

- We will reduce long term care admissions and emergency visits from frequent attendees.
- We will improve our community offer to support elective recovery at home.
- We will increase our use of technology trust-wide to support more people and conditions at home.

# Attracting and developing brilliant and fulfilled teams

We will deliver this by:



## Looking after our people

### The outcomes we are working towards

We are the best place to work and develop a healthcare career in Norfolk and Waveney with a positive focus on the health, wellbeing and experience of our people.

### Key commitments towards 2027

- We will be the best healthcare organisation to work for in Norfolk and Waveney.
- We will provide new career and skills opportunities for people in our local community.
- We will action a new and inspiring wellbeing strategy which reflects people's varying needs and career stages.

## Ensuring everyone feels they belong

### The outcomes we are working toward

Our people are proud to be part of an inclusive, fair NCH&C where diversity is valued, people feel safe and there is equity for everyone.

### Key commitments towards 2027

- We will work to eliminate workplace discrimination for our staff.
- We will embed civility, compassion and respect across all areas of the trust.
- We will give people the confidence to speak up and trust they will be heard and supported.

## Encouraging personal growth

### The outcomes we are working towards

People feel actively supported to continue their professional development, fulfil personal ambitions and reach their full potential.

### Key commitments towards 2027

- We will give our leaders the skills and behaviours to role model effective and inclusive leadership.
- We will create plans with all staff for their future career with NCH&C.

## Enabling new ways of working

### The outcomes we are working towards

We are fit for the future with the skills, resources and digital capabilities in our workforce to sustainably meet new models of care.

### Key commitments towards 2027

- We will design new roles that reflect new and developing ways of working.
- We will have a confident, digitally literate workforce.
- We will ensure the development and sustainability of our workforce to meet future demand.

# Continually improving standards of excellence

We will deliver this by:



## Supporting people to advance their clinical capability

### The outcomes we are working towards

Everyone is motivated to develop their own skills and nurture those of others and to provide a supportive learning environment which consistently delivers the highest levels of patient care and safety.

### Key commitments towards 2027

- We will ensure all staff have the right specialist training for their role.
- We will have virtual and physical learning hubs in each of our places.
- We will ensure our people receive the highest standards of clinical supervision.

## Creating a quality improvement culture

### The outcomes we are working towards

We have a constant dialogue of learning and improvement, bringing together national and regional evidence with the voices of people, patients, carers and families to better design person-centred care, services and pathways.

### Key commitments towards 2027

- We will build a culture of continuous learning, innovation and improvement.
- We will find new ways to engage our people and communities in meaningful conversation and action.
- We will attract more funding for NCH&C clinician-led research.

## Keeping patient safety a top priority

### The outcomes we are working towards

Our people create the safest possible environment for patients and colleagues tailored to their needs. Everyone feels able to speak up, listen, act with integrity and respect, learn and know that action will be taken.

### Key commitments towards 2027

- We will offer leading End of Life care to patients, families and carers.
- We will ensure best outcomes for our most vulnerable and frail patients focussing on Children, learning disabilities, dementia, and long term conditions.
- We will embed a collaborative environment where patients, carers and staff are comfortable to speak up and feel listened to.

## Prioritising action in our most challenged services

### The outcomes we are working towards

We have resolved capacity and skills provision in our most highly demanded services to ensure all patients receive timely, high quality care, communications and information.

### Key commitments towards 2027

- We will minimise conditions worsening whilst patients are waiting for services.
- We will invest in our specialist community skills to enable more patients to stay at home.
- We will ensure community patients will have the right visit at the right time.

# Advancing our use of data and technology

We will deliver this by:



## Developing digital solutions that enable more services at home

### The outcomes we are working towards

Patients and their carers will have more options for where and how they receive treatment, support and manage their care to best meet their needs.

### Key commitments towards 2027

- We will be a leading community trust for effective self-care digital solutions.
- We will lead the local expansion of virtual wards across our communities.
- We will maximise access to a wider range of virtual consultations.

## Providing high-quality data analysis and reporting

### The outcomes we are working towards

Colleagues can predict and design integrated services to improve efficiencies, health outcomes, tackle inequalities and identify wider population health management opportunities.

### Key commitments towards 2027

- We will enable better decision-making by ensuring all teams receive the timely service data they need.
- We will enable greater innovation by creating a self-service population health insight platform.
- We will improve trust waiting times through effective demand and capacity modelling.

## Enabling joined-up systems and data with colleagues and partners

### The outcomes we are working towards

Our connected infrastructure will support a seamless healthcare experience and patients will only need to tell their story once.

### Key commitments towards 2027

- We will develop the electronic Shared Care Record system for Norfolk and Waveney.
- We will improve medicines management in all wards with our Electronic Prescribing and Medicines System.
- We will improve service effectiveness with all services able to use SystmOne fully as their Electronic Patient Record.

## Optimising our digital capabilities to drive efficiencies

### The outcomes we are working towards

More efficient and effective technologies enable colleagues to free up more time for patient care and we have a more resilient trust-wide digital infrastructure.

### Key commitments towards 2027

- We will improve routine processes by implementing robotic automation.
- We will improve flexible working by upgrading our mobile working provision.
- We will safeguard our key data and systems by increasing our digital resilience and improving our electronic document management.

# Being a future-focussed organisation

We will deliver this by:



## Ensuring we have the resources to meet current and future needs

*The outcomes we are working towards*

We are a valued contributor to the success of the ICB, delivering high quality, sustainable care, treatment and support to all communities across Norfolk and Waveney.

### Key commitments towards 2027

- We will increase our investment funding from the Integrated Care Board through evidencing our efficiency and effectiveness.
- We will become a provider of social care services at home and in bedded care facilities.
- We will repurpose our estate to drive greater integration of services with partners.

## Minimising our impact on the environment

*The outcomes we are working towards*

We are a leading Trust for our positive environmental standards, with the whole organisation confidently working towards national Net Zero targets.

### Key commitments towards 2027

- We will be working ahead of the NHS national targets for greenhouse gas emissions.
- We will only work with suppliers who have effective carbon reduction plans in line with national targets.
- We will exceed national targets to achieve an all electrical/hybrid fleet.

## Using evidence to continually evolve how we work

*The outcomes we are working towards*

We prioritise improvement and use insights from data, research and our partnerships to predict and design improved services. Always planning ahead to better support our local population to live healthier lives and reduce their future needs for care and support.

### Key commitments towards 2027

- We will manage all our waiting lists in a clinically prioritised way to minimise harm.
- We will create a joint framework for population health management with our place partners.
- We will identify new opportunities to support people most likely to have inequality in experience or outcomes.

## Nurturing proactive leaders at all levels

*The outcomes we are working towards*

Our people understand the challenges and needs of our communities and feel empowered to speak up and rethink the way we work to improve patient outcomes.

### Key commitments towards 2027

- We will embed our purpose, vision, strategy and values at all levels.
- We will build a culture of continuous learning, innovation and improvement.

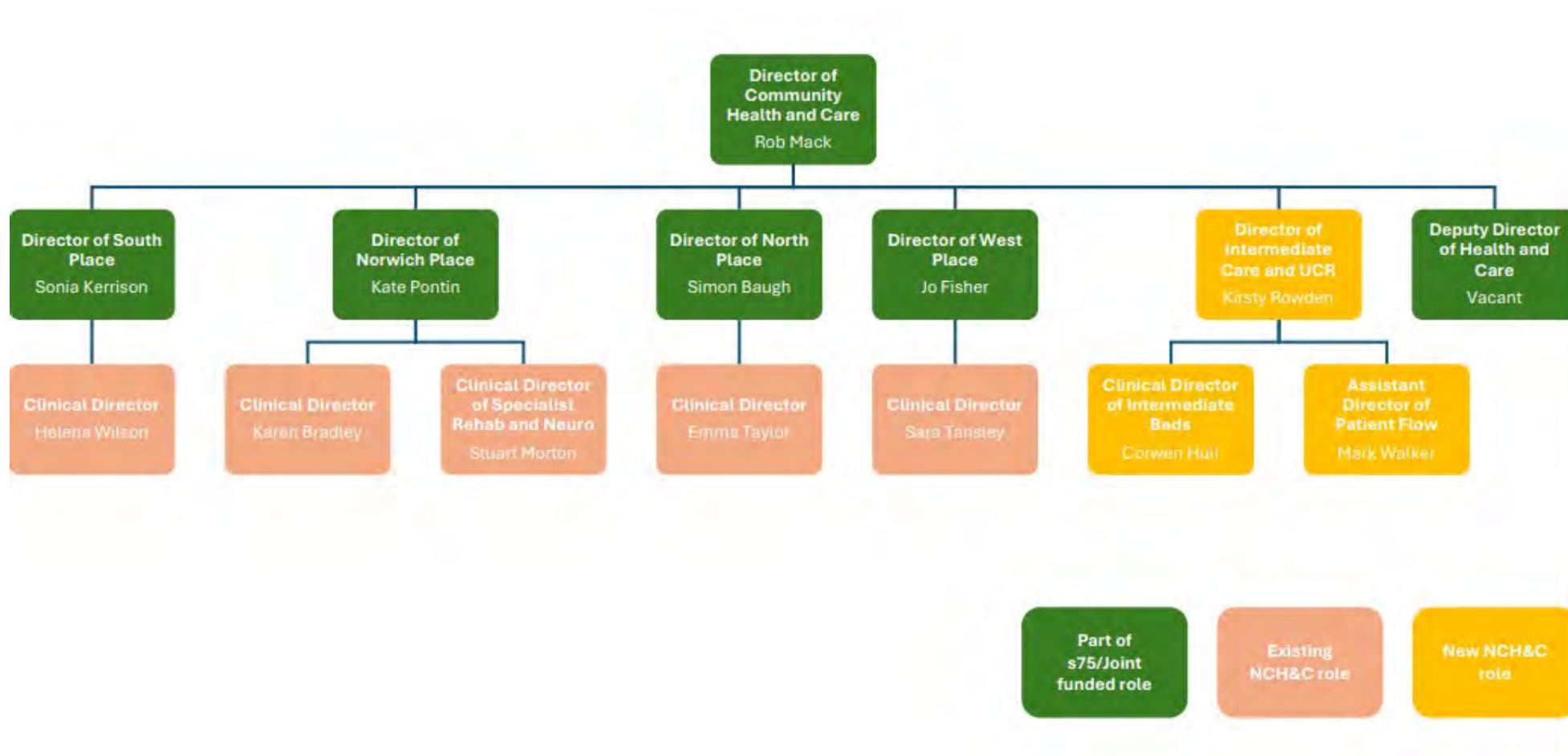
# Community Health and Care Priorities 2025-28

<b>Prevention and Early Help</b>	<b>Integrated Approach to Falls Risk Management and Prevention</b>	Proactively identify individuals at risk of falls to provide early support, helping them maintain independence and avoid crises. This approach aims to prevent, reduce, and delay the need for more formal care and support.
	<b>Trusted Assessor Model for Technology</b>	Enable trusted TEC assessments, provide TEC data, commission a unified community alarm system, and explore telecare integration.
	<b>Single Reablement Therapy Offer that is Place-Based</b>	Deliver a uniform reablement and therapy offer for each place, with a clear prevention offer at each place's front door. Implement multi-disciplinary working at the triage stage with a single-entry point via phone and digital solutions. Develop trusted assessments within teams, upskill reablement staff to carry out delegated health tasks, train OTs in health and social care to assess for each other's disciplines, and improve efficiencies and remove duplication.
<b>Delivery of Community Care</b>	<b>Support for Care Homes</b>	Create a consistent support model for care homes with integrated MDT support, step-up/step-down services, and support services (technology, training, quality improvement, commissioning).
	<b>Complex Patients and Their Carers</b>	Improve support for complex patients and their carers through place-based case management.
	<b>Integrated Neighbourhood Teams</b>	Review and enhance the current operating model to support place structures and integrated neighbourhood teams, improving outcomes and reducing health inequalities.
<b>Intermediate and Unplanned Care</b>	<b>Integrated Intermediate Care Offer</b>	Redesign and integrate a consistent intermediate care offer, including Nursing, Physiotherapy, Social Care, and Occupational Therapy, with KPIs beyond hospital metrics, prioritizing home-based care, reducing readmissions, and enhancing patient outcomes.
	<b>24-Hour Response to Unplanned Care Needs</b>	Ensure expert rapid response teams, consisting of health and social care practitioners, are available to support older people in their community within 2 hours, aiming to keep them at home and avoid hospital admissions. Set clear measurable targets for the two-hour crisis response delivered by a multi-skilled team of professionals.

2025/26 Financial Plan	2025/26 financial plan £'000
Total Operating Income	172,325
Employee Expenditure	(125,682)
Operating expenses excluding employee expenses	(46,662)
<b>Operating Surplus / (Deficit)</b>	<b>(19)</b>
<b>Finance Costs</b>	
Finance income	1,400
Finance expense	(121)
PDC dividends payable/refundable	(2,238)
<b>NET FINANCE COSTS</b>	<b>(959)</b>
<b>SURPLUS/(DEFICIT) FOR THE PERIOD/YEAR</b>	<b>(978)</b>
Donated Asset Income	0
Depn on Donated Assets	734
Depreciation on IFRS16 Right of Use Assets & Peppercorn Leases	243
<b>ADJUSTED FINANCIAL PERFORMANCE</b>	<b>(0)</b>
Includes:	
Efficiencies £	8,823
Efficiencies %	4.9%

Area	24/25 carry forward (under-) / over-delivery £'000	25/26 allocation £'000	Total £'000	% of budget
Non-recurrent vacancy factor plus agency spend reduction		1,500	1,500	
Interest income		1,000	1,000	
Chief Executive	56	183	127	5%
Strategy & Transformation	0	122	122	7%
HR and OD	18	168	150	5%
Finance & Procurement	14	290	276	11%
Digital	327	480	153	3%
Estates	(26)	827	853	8%
Nursing and Quality	(22)	410	432	8%
Community Health & Social Care	(490)	3,720	4,210	4%
<b>Totals</b>	<b>(123)</b>	<b>8,700</b>	<b>8,823</b>	

## ANNEX E



## ANNEX F

## Norfolk Health and Care Objectives 2025 - 26

Objective	Applicable to	Core linked strategic priority
Manage budgets effectively including providing accurate monthly forecasting. Deliver a break even or surplus position at year end.	All Places / Services	Being a future-focussed organisation
To develop a people plan in response to, and to improve staff engagement and measured by improved staff survey results	All Places / Services	Attracting and developing brilliant and fulfilled teams
Delivery of Integrated neighbourhood teams across health and care	All Places	Deeping our integration with partners
Implement and develop Community led Support Social Care Model	All Places	Deeping our integration with partners
Develop plan to deliver improved strength based practice social care model - including associated place based QI&A systems and governance to drive improvement and learning	All Places	Continually improving standards of excellence
Develop and deliver reviews recover plan to reduce overdue reviews to no more than 6 months overdue by October 25	All Places	Continually improving standards of excellence
Integrate reablement into place delivery, and implement reablement led reviews at 4 week stage post reablement period	All Places	Continually improving standards of excellence
Develop increased evidence and activity of learning from and with patients/Service Users/residents across portfolio areas	All Places / services	Advancing our use of data and technology
Conduct a review of medical and ACP roles, responsibilities, and coverage to ensure alignment with service needs.	Intermediate care and UCR	Being a future-focussed organisation
Review ward leadership structure to ensure clear lines of accountability and increased clarity over clinical model, outcomes and quality assurance framework	Intermediate care and UCR	Attracting and developing brilliant and fulfilled teams
Review future bed stock based on patient demand and need types to develop demand and capacity plans and associate business case for transformation	Intermediate care and UCR	Being a future-focussed organisation
To deliver identified NCHC efficiencies including reduction of bedded unit cost to delivery NCHC CIP	Intermediate care and UCR	Being a future-focussed organisation
Deliver 80% UCR performance	Intermediate care and UCR	Deeping our integration with partners
Develop reporting and management of patient flow across inpatient settings to drive improved outcomes, reduced length of stay and greater efficiency	Intermediate care and UCR	Advancing our use of data and technology
Work with system partners to develop a single sustainable VW model across all places	Intermediate care and UCR	Deeping our integration with partners
Develop a cross place improvement plan for the quality and capacity planning of diabetes specialist and community management	Diabetes Management	Continually improving standards of excellence
Lead the planning and co-ordination of improvement in specialist palliative and community palliative services into one pathway with clear evidence of improvement in access, timeliness of support and lived experience	Palliative care services	Continually improving standards of excellence
Review the clinical and operational leadership and strategy for specialist neuro and rehab services with aim to strengthen leadership and have sustainable plan for service delivery	Specialist Neuro Services	Attracting and developing brilliant and fulfilled teams
Stroke inpatient funding shortfall and associated clinical risk to be managed and mitigated	Stroke services	Being a future-focussed organisation
To link TVN roles close to place with consistent wound care, care plans in place and develop demand and capacity future planning to meet wound care needs across system.	Tissue viability	Being a future-focussed organisation