

**DRAFT**  
**Devon 5-Year Joint Forward Plan**

**April 2024**

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# Foreword

We are excited to publish this refresh of our Devon 5-Year Joint Forward Plan (JFP), which demonstrates a different way of working within the Devon system, bringing together plans from across different sectors within health and care in response to the One Devon Integrated Care Strategy. Local Authorities and the NHS have agreed that they will work together and be held jointly responsible for delivering the plan.

The Strategy sets out the key challenges for our Integrated Care System, known as One Devon health and care system, and a set of strategic goals aimed at tackling these challenges over the next five years. Over the last 12 months, system partners have been working to ensure that they take account of the Strategy in their planning and delivery of services, in a way that ensures alignment between health and other sectors. The Devon 5-Year Joint Forward Plan brings together the strategies and plans that are in place or in development across our system, in individual organisations, in collaboratives and in system programmes, into a single over-arching Plan and has aligned these to the strategic goals set out within the Integrated Care Strategy.

We are pleased to be able to describe some of the key achievements across Devon that shows how the programmes we are working on together are making a difference for people who live and work in Devon. We should also recognise that the last 12 months have been challenging for public sector services. NHS partners have been delivering plans to support both NHS Devon and partner NHS trusts moving out of segment 4 of the NHS Oversight Framework and Local Authority partners have been managing their own significant operational and financial pressures. The JFP recognises this context and the need to ensure that our system recovery is prioritised in the early years of the Plan and that we earn the autonomy we need to deliver transformational change.

The JFP does not cover everything that we are doing across our system – it includes priorities in areas of wider social and economic importance, such as housing and employment, as we know that their impact on health and wellbeing is significant, and these are areas where we need to develop our collaborative working.



**Sarah Wollaston**

**Steve Moore**

# Health and Wellbeing Board Opinions

To be updated if requested by H&WBs

There has been ongoing engagement with the three Devon Health and Wellbeing Boards throughout development of the Joint Forward Plan. Each of the Boards has submitted a formal opinion on the extent to which the JFP reflects their Health and Wellbeing Strategy, which is reproduced below.

## Torbay Council

By consensus [Health and Wellbeing Board] Members resolved that:

1. the draft Joint Forward Plan takes proper account of the Joint Local Health and Wellbeing Strategy;
2. the minutes of the Board meeting on the 9 March 2023 will constitute the response in writing of the Health and Wellbeing Board and its opinion in respect of (1).

This opinion has been confirmed as unchanged in relation to the final published JFP.

## Plymouth City Council

Plymouth's HWB has been engaged throughout the process of development of the JFP and has been consulted, with the opportunity to raise questions and highlight potential omissions.

The Plymouth HWB endorses the Plan and is assured that it takes account of the current health and wellbeing strategy for Plymouth. The focus on inequalities in access and in outcomes is welcomed, and we look forward to seeing the shift in resources required to deliver on this aim.

## Devon County Council

The Devon Health and Wellbeing Board has been engaged throughout the process of development of the JFP and has been consulted on each formal draft, raising questions and highlighting potential omissions.

The DCC HWB is happy to endorse the Plan and is assured that it takes account of the current health and wellbeing strategy for Devon.

# Introduction

# Purpose of 5-Year Joint Forward Plan

The plan is structured around three themes: **Healthy People; Healthy, safe communities; and Healthy, sustainable system** and sets out our vision and ambition for the next five years and describes the programmes of work that we will be delivering.

This is a refresh of the Joint Forward Plan for Devon written in collaboration with partners across our system. **It describes how the health and care sector plans to meet the challenges facing Devon, meet the population's health needs and the strategic objectives set out in the Integrated Care Strategy over the next five years.** This JFP reflects the work that is happening across the wider Devon system, in the health and care sectors and beyond, and demonstrates how this work aligns with the strategic goals in the Strategy and how it will deliver the required improvements in health and wellbeing.

The JFP **brings together many strategies and plans** that already exist or are in development across the system, including, but not limited to: Joint local health and wellbeing strategies, Local authority strategies (eg: adult social care strategies); Local Care Partnership (LCP) objectives; Provider trust strategies; Provider collaborative priorities, AHP strategy and our Recovery plan.

## The Devon 12 challenges

1. An ageing and growing population with increasing long-term conditions, co-morbidity and frailty
2. Climate change
3. Complex patterns of urban, rural and coastal deprivation
4. Housing quality and affordability
5. Economic resilience
6. Access to services, including socio-economic and cultural barriers
7. Poor health outcomes caused by modifiable behaviours and earlier onset of health problems in more deprived areas
8. Varied education, training and employment opportunities, workforce availability and wellbeing
9. Unpaid care and associated health outcomes
10. Changing patterns of infectious diseases
11. Poor mental health and wellbeing, social isolation, and loneliness
12. Pressures on health and care services (especially unplanned care)

# One Devon's Integrated Care Strategy on a page

<b>Our Vision</b>	Equal chances for everyone in Devon to lead long, happy and healthy lives			
<b>Our Aims</b>	Improving outcomes in population health and healthcare	Tackling inequalities in outcomes, experience and access	Enhancing productivity and value for money	Helping the NHS support broader social and economic development
<b>Our Strategic Goals</b>	One Devon will strengthen its integrated and collaborative working arrangements to deliver better experience and outcomes for the people of Devon and greater value for money			
	Every suicide will be regarded as preventable and we will work together as a system to make suicide safer communities across Devon and reduce suicide deaths across all ages	People in Devon will have access to the information and services they need, in a way that works for them, so everyone can be equally healthy and well.	People in Devon will know how to access the right service first time and navigate the services they need across health and care, improving personal experience and service productivity and efficiency.	People in Devon will be provided with greater support to access and stay in employment and develop their careers.
	We will have a safe and sustainable health and care system.	Everyone in Devon will be offered protection from preventable diseases and infections.	People in Devon will only have to tell their story once and clinicians will have access to the information they need when they need it, through a shared digital system across health and care.	Children and young people will be able to make good future progress through school and life.
	People (including unpaid carers) in Devon will have the support, skills, knowledge and information they need to be confidently involved as equal partners in all aspects of their health and care.	Everyone in Devon who needs end of life care will receive it and be able to die in their preferred place	We will make the best use of our funds by maximising economies of scale and increasing cost effectiveness.	We will create a greener and more environmentally sustainable health and care system in Devon, that tackles climate change, supports healthier living (including promoting physical activity and active travel).
	Population health and prevention will be everybody's responsibility and inform everything we do. The focus will be on the top five modifiable risk factors for early death and disability	The most vulnerable people in Devon will have accessible, suitable, warm and dry housing	We will have enough people with the right skills to deliver excellent health and care in Devon, deployed in an affordable way.	Local communities and community groups in Devon will be empowered and supported to be more resilient, recognising them as equal partners in supporting the health and wellbeing of local people
	Children and young people (CYP) will have improved mental health and well-being	In partnership with Devon's diverse people and communities, Equality, Diversity and Inclusion will be everyone's responsibility so that diverse populations have equity in outcomes, access and experience.		Local and county-wide businesses, education providers and the VCSE will be supported to develop economically and sustainably
	People in Devon will be supported to stay well at home, through preventative, pro-active and personalised care. The focus will be on the five main causes of early death and disability.			

# About Devon

Devon is a complex system, with many different arrangements across deliver functions and geographies. Elements of the plan are delivered across a range of provision including:

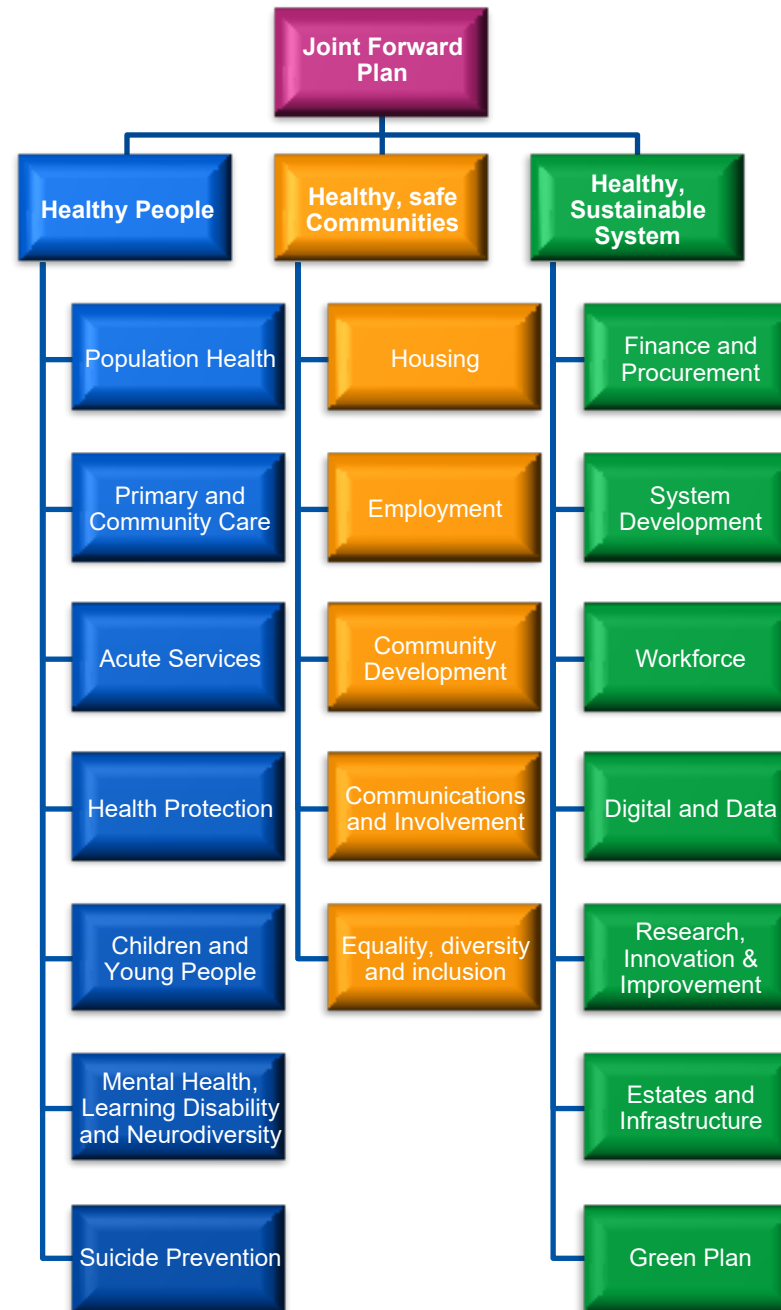
- Two unitary authorities (Plymouth City Council and Torbay Council)
- One county council (Devon), with 8 district councils,
- 121 GP practices, in 31 Primary Care Networks
- Devon Partnership Trust (DPT) and Livewell South West (LWSW) provide mental health services
- Four acute hospitals – North Devon District Hospital and the Royal Devon and Exeter Hospital, both managed by the Royal Devon University Healthcare NHS Foundation Trust (RDUH), Torbay and South Devon NHS Foundation Trust (TSDFT) and University Hospitals Plymouth NHS Trust (UHP)
- One ambulance trust – South Western Ambulance Service NHS Foundation Trust (SWASFT)
- Dental surgeries, optometrists and community pharmacies
- A care market consisting of independent and charitable/voluntary sector providers
- Many local voluntary sector partners across our neighbourhoods





# Developing a sustainable future for health and care in Devon

- The JFP describes how the Integrated Care System plans to deliver health and care services that meet population need and are sustainable in response to the Integrated Care Strategy.
- The JFP is underpinned by a **three key themes** that reflect the system priorities, and foster conditions for successful enabling functions.
- Each theme is supported by a series of programme plans that articulate how the JFP will be delivered in the short, medium and long-term
- The programme plans encompass both **delivery** of services and the requirements to **enable** success.



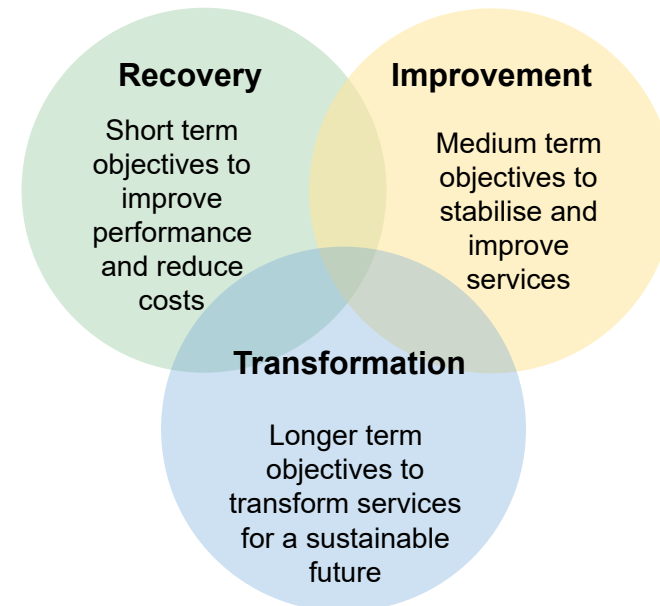
# Delivering a sustainable future for health and care in Devon

- In order to develop a sustainable future for the health and care services in Devon, we need to **recover our system, stabilise services and deliver long term sustainable improvements.**
- Each programme plan describes:
  - The programme **ambition**
  - The **difference** the programme will make to the people of Devon
  - **Achievements** delivered in 2023/24
  - **Short term objectives** to improve performance and reduce costs (recovery)
  - **Medium term objectives** to stabilise and improve services
  - **Longer term objectives** to transform services for a sustainable future

**Ambition**

**Achievements**      **Impact**

## Objectives



# Developing our JFP

## Delivering our ICS Aims

Each programme highlights which of the ICS aims it supports, providing a **golden thread** throughout the plan.



Improving outcomes in population health and healthcare



Tackling inequalities in outcomes, experience and access



Enhancing productivity and value for money



Helping the NHS support broader social and economic development

## Recovery is central to our JFP

There is an immediate requirement to **recover both the financial and performance position for Devon** to ensure that we have a sustainable system going forward. Devon ICB and xx of our acute hospital trusts are in section 4 of the NHS National Oversight Framework (NOF4). Exit from NOF 4 will require to **improvement in both financial and operational performance, access and quality of care.**

The JFP includes how we are approaching system recovery. All the programmes have outlined both their short-term objectives to support recovery and system exit from NOF4.

## Engagement

Development of the Integrated Care Strategy and the Joint Forward Plan was informed **by analysis of extensive public feedback** about health and care (collected across system partners) between 2018 and 2022 and **direct engagement** in production the plan in 2023 with Overview and Scrutiny committees, Health and Wellbeing Boards and system partners including VSCE and Healthwatch representatives. Programme leads have engaged with relevant stakeholders in the refresh of their plans.

## Statutory Duties

The Joint Forward Plan is a system wide plan, which broadly describes the services we have in place and will develop to meet the needs of our whole population as set out in the Integrated Care Strategy. It reflects an intention to work in collaboration and partnership to deliver our system ambitions, but it is important to acknowledge that **statutory duties** remain with individual organisations. There are some specific statutory duties that the Integrated Care Board needs to deliver as part of its statutory function, that must be met through the JFP, and these duties are incorporated throughout the plan and referenced in appendix A.

# The System Recovery Programme (SRP) is committed to exiting NOF4 measures in quarter 1 of the financial year 2024/25

## NOF4 exit criteria

Theme	Criteria
<b>Leadership</b>	<ul style="list-style-type: none"> <li>Demonstrate collaborative decision-making in delivering all the SRP exit criteria at both system and organisational levels, based on the principle of delivering the best, most sustainable and most equitable solutions for the whole population served by the system</li> </ul>
<b>Strategy</b>	<ul style="list-style-type: none"> <li>Delivery of Phase 1 of the Acute Services Sustainability Programme.</li> </ul>
<b>UEC</b>	<ul style="list-style-type: none"> <li>Make demonstrable progress towards achieving national UEC objectives, in line with agreed trajectories, sustained over two consecutive quarters and have in place an agreed system plan to sustain this improvement.</li> </ul>
	<ul style="list-style-type: none"> <li>Achieve the defined expectations of the National Taskforce.</li> </ul>
<b>Elective recovery</b>	<ul style="list-style-type: none"> <li>Make demonstrable progress towards achieving national elective and cancer objectives, in line with agreed trajectories, sustained over two consecutive quarters and have in place an agreed system plan to sustain this improvement</li> </ul>
<b>Finance</b>	<ul style="list-style-type: none"> <li>Develop and deliver a short-term financial plan (2023/24) that is signed off regionally and nationally</li> </ul>
	<ul style="list-style-type: none"> <li>Develop an outline longer-term financial plan that shows non-recurrent balance in 2024/25, and recurrent balance for 2025/26, that has Board agreement from all Devon organisations</li> </ul>
	<ul style="list-style-type: none"> <li>Develop and agree a Capital Plan that is clearly aligned to system strategic priorities</li> </ul>

**Estimated Segment 4 Exit Date : Q1 2024/25**

**Underpinning each exit criterion is a set of agreed metrics and trajectories which form the basis of the system SRP oversight and performance management arrangements**



**Delivery Principles** – we will find solutions that follow these principles:

- Seek solutions that work for the system.
- No organisation will knowingly create an adverse impact on another or the system.
- Standardise practice and services where it makes sense to do so.
- Focus on cost reduction, cost containment and productivity improvements
- Recognise that participation will be required at system, locality, neighbourhood, and organisational level on the priority areas.
- Ensure equitable distribution of funding and outcomes by locality.
- Not make new investments that lead to a deterioration in the underlying position
- Consider financial decisions alongside quality, safety and any impact on patient experience of care.
- Share risks and benefits across the system and ensure they are fully understood by all parties.

# Getting the system in balance – NHS recovery

Financial balance is to be achieved through a system recovery programme focussed on operational, system, clinical and intra-organisation transformation

## What needs to be achieved

**Three-year financial plan linked to activity, workforce, performance:**

- 2023/24 reported position no worse than £42.3m deficit
- 2024/25 c.£30m deficit through use of non-recurrent means
- 2025/26 breakeven exit run rate position

## How we will achieve this

- Used the Drivers of the Deficit analysis as the baseline for planning and Cost Improvement Programme (CIP) expectations aligned to model hospital, GIRFT and regional benchmarks
- Stretched CIPs from 1.3% recurrent cost out to 4.5% (with system schemes in support)
- Accelerating the delivery of system-wide shared schemes
- Whole system clinically-led and planned transformation – acute through to community/primary care
- Intra-organisation wide schemes and redesign

### 1 Operational improvement cost out – to 4.5%

Moving Trust CIP plans in line with national expectations of 4.5% cost out, through an initial focus on grip and control measures introduced by summer

### 2 System wide schemes – targeting c.£60m reduced run rate by Q4 23/24

Stretching the delivery of strategic schemes to be delivered across the system. This includes shared corporate services, peoples services, clinical support services, enhanced primary and community services, outpatient transformation, estates, new models of care, procurement, digital, CHC, allocative efficiency

### 3 Intra-organisation working and redesign

Looking to intra-organisation opportunities in areas such as:

1. Single system pathways (Shared PTL, integrated pathway management etc.)
2. Single system ways of working i.e., redesign of group models, single EPR solutions across Devon and Cornwall and workforce planning.

### 4 System Performance Improvement

Developing system-wide integrated improvement plans at pace through two streams of work, prioritised across UEC and Elective. Initially beginning with key system issues (e.g. frailty) and broadening out to support care pathway demands (e.g. through a surgical strategy):

1. Integrated collaborative community and social care services – working through in sequence frailty, long term conditions, urgent care; and
2. Networked acute care – through networked urgent care, elective, fragile services, virtual

## Activity and Performance

1. The activity required is challenging given the historic position and will require a clear Devon-wide clinical plan and new ways of working
2. Delivering on the performance position – or improving it further – will require different ways of thinking about capital, estates, digital etc (e.g. a cold elective site, single PTL, sub-specialty centres etc) as stated.

## Workforce

Workforce will achieve a net -2% workforce change against the current establishment.

Metric	2023/24 M12 (Planned)
65+ Week waits	2,956
78+ Week waits	0
104+ Week waits	0
A&E 4 Hours	72%
Cancer Faster Diagnostic	76%
System Financial Plan	(£42.3m)
Workforce	-2%

# Getting the system in balance – local authority recovery

## Torbay

Torbay's approach to adult social care is a collaboration Torbay Council, Torbay and South Devon NHS Foundation Trust, and our VCSEs enabling a comprehensive and focused approach to enhancing the well-being and independence of our community. Our integrated partnership aims to strengthen care and support and is aligned to Torbay's clear strategic vision of maximising people's choices and enabling them to live a fulfilling life in their own community. Torbay's vision is supported by system-wide transformation and guided by the values of the Adult Social Care Strategy and the Devon 5-year Joint Forward Plan. To support the accomplishment of our goals, Torbay has key objectives:

- Increasing independence, choice, and control through strategic shaping and oversight of Torbay's market with a focus on building independence through support for living and partnership with the VCSE sector and communities.
- Hospital discharge, supported by the expertise of Adult Social Care, is a seamless and personalised transition aimed at ensuring individuals return home with the necessary support, reablement, and community resources to foster independence and holistic well-being.
- Adult Social Care, transformed by data, technology, and digital improvements, enhances service accessibility, efficiency, and personalisation, ensuring a responsive and tailored approach to meet the diverse needs of our community members.
- Efficiency and innovation ensuring that Torbay's resources are optimally utilised, achieving better value for money while maintaining high-quality services and enhancing the well-being of individuals in our community.
- In embracing these objectives and vision, Torbay remains dedicated to the continual improvement of adult social care services, fostering a community where individuals thrive with autonomy, support, and a collective commitment to well-being.

## Plymouth

Plymouth City Council faces significant financial risks, given the continuing forecast shortfall, uncertainty about resourcing from central government, the wider economic environment and the council's comparatively low levels of financial reserves. Savings plans totalling £25.8m have been developed across the authority for 2023/24, with further work ongoing around future years. The council is experiencing significant pressures post-Covid with increasing acuity of need and cost pressures within both children's and adult social care.

A recovery and transformation programme is in place for adult social care, which focuses on a number of key areas:

- Improving access to advice, information and support to neighbourhoods, through a network of health and wellbeing hubs, our community capacity builders and community assist offer
- Early intervention and reablement to provide enabling support for our most vulnerable and their unpaid carers
- Focussed review and reassessment programme led by Livewell Southwest
- Development of new model of care for working age adults, including targeted work on transition pathways and specialist housing provision in the city
- Remodelling of our homecare market to deliver a neighbourhood model, reducing travel across the city, supporting our net zero carbon agenda
- Reshaping of our existing care home market to increase specialist dementia capacity
- Supporting providers of health and care to recruit, develop and retain a workforce for the future through our Health and Skills Partnership.

## Devon

Our overriding focus is to meet the needs of the young, old and most vulnerable across Devon and we will work closely with our One Devon partners to support and develop the local health and care system, to help support the local economy, improve job prospects and housing opportunities for local people, respond to climate change, champion opportunities and improve services and outcomes for children and young people, support care market sustainability, and address the impacts of the rising cost of living for those hardest hit.

With key local partners we will continue to quality assure, benchmark and improve how we do things so we can continue to deliver vital local services and improve outcomes for the people of Devon as efficiently and effectively as we can with a focus on strengthening partnerships and evidencing. Delivery of the savings and improvement programme will not be easy, but the level of commitment from teams, working together as one organisation, and the level of assurance that has been involved in the budget-setting process, mean that the 2024/25 budget is as robust as possible and will deliver best value for the people of Devon.

# Our Joint Forward Plan

<b>Our Vision</b>	Equal chances for everyone in Devon to lead long, happy and healthy lives			
<b>Our Aims</b>	Improving outcomes in population health and healthcare	Tackling inequalities in outcomes, experience and access	Enhancing productivity and value for money	Helping the NHS support broader social and economic development
<b>Our Themes</b>	Healthy People		Healthy, safe communities	Healthy, sustainable system
	↓		↓	
<b>Our Programmes</b>	Population Health		Housing	
	Primary and Community Care		Employment	
	Acute Services		Community Development	
	Health Protection		Communications and Involvement	
	Children and Young People		Equality, diversity and inclusion	
	Mental Health, Learning Disability and Neurodiversity		Estates and Infrastructure	
	Suicide Prevention		Green Plan	

One  Devon

Healthy People





# Healthy People

## Some of our key challenges in Devon relate to the health and well-being of people.

- We have **an ageing and growing population with increasing long-term conditions, co-morbidity and frailty**, the Devon population is older than the overall population of England we have a disproportionately small working age population relative to those with higher care needs.
- Significant inequalities exist across One Devon, with people living in deprived areas and certain population groups, experiencing significant health inequalities as a result. People living in more deprived areas have **poorer health outcomes caused by modifiable behaviours and earlier onset of health problems** than those living in the least deprived communities. This leads to lower life expectancy and lower healthy life expectancy in these communities, coupled with higher and earlier need for health and care services. The proportion of the population providing **unpaid care is increasing**, with higher levels of the One Devon population caring for relatives, both the physical and mental health of carers can suffer as a result.
- The Covid-19 pandemic has **changed the pattern of infectious disease** and along with increasing levels of healthcare associated infections and the risks posed by anti-microbial resistance. These diseases have disproportionately affected the most disadvantaged and vulnerable in our society and contribute further to health inequalities.
- Our population experiences **poorer than average outcomes in relation to some measures of mental health and wellbeing**. Suicide rates and self-harm admissions are above the national average, anxiety and mood disorders are more prevalent, there are poorer outcomes and access to services for people with mental health problems.

## To address these challenges, we have set the following strategic objectives:

- Every suicide should be regarded as preventable and we will save lives by adopting a zero suicide approach in Devon, transforming system wide suicide prevention and care.
- People (including unpaid carers) in Devon will have the support, skills, knowledge and information they need to be confidently involved as equal partners in all aspects of their health and care.
- Population health and prevention will be everybody's responsibility and inform everything we do. The focus will be on the top five modifiable risk factors for early death early and disability
- Children and young people (CYP) will have improved mental health and well-being
- People in Devon will be supported to stay well at home, through preventative, pro-active and personalised care. The focus will be on the five main causes of early death and disability.
- People in Devon will have access to the information and services they need, in a way that works for them, so everyone can be equally healthy and well.
- Everyone in Devon will be offered protection from preventable infections.
- Everyone in Devon who needs end of life care will receive it and be able to die in their preferred place

# Acute Services

## Our Vision

We will work together across our local NHS organisations to deliver **high quality, safe, sustainable and affordable services** as locally as possible improving patient outcomes and experience. We will ensure that addressing health inequalities are a focus of all our work and that the whole population of Devon is able to access the care they need. We will make sure people access the right service at first time through **effective navigation** around the care system; people with a care need should be seen by **the right professional, in the right setting, at the right time**.

## What Devon will see



Services stabilised in the short-term with increased productivity, maximised capacity and best practice adopted and embedded



Services sustained in the medium term delivering high quality clinical outcomes for the whole population and consistently meeting agreed performance targets



Services transformed in the longer term working as one joined-up system of services without organisational barriers and improved equity of access for all



Improved A&E waiting times and ambulance response times



Improved access to urgent treatment centres



Reduction in waiting times for elective surgery



Faster access to diagnostics



Increase in cancers diagnosed at stages 1 and 2



Easier navigation around our urgent care system



Increased working with services in Cornwall to ensure that together we deliver the best possible services to patients

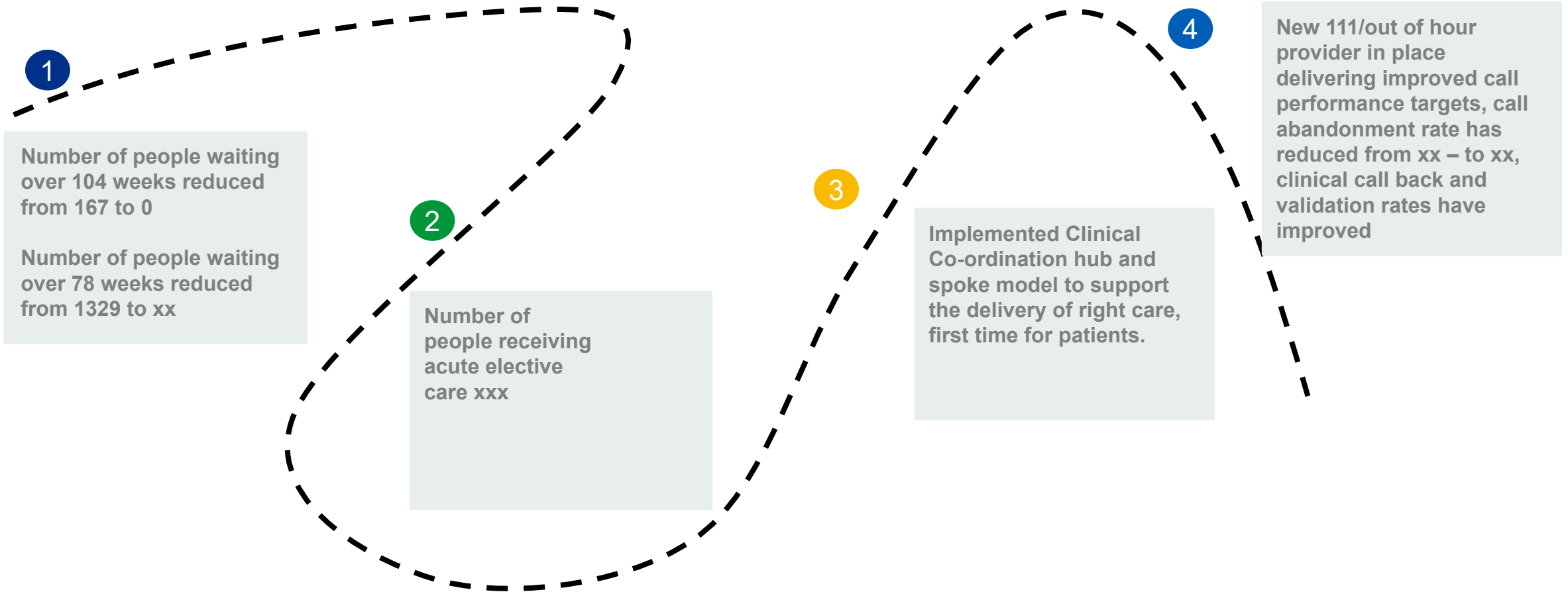
# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
• Improve productivity and efficiency of all acute services through optimising of pathways and developing a common and shared workforce model	☑	☑	☑
• Reduce the number of long waiting patients for elective care and return to waits of less than 18 weeks by 2027 by increasing productivity, maintaining high quality services, reducing health inequalities and maximising elective capacity in Devon.	☑	☑	☑
• Stabilise acute services that are fragile	☑		
• Transform acute services to ensure workforce, clinical and financial sustainability	☑	☑	☑
• Increase diagnostic capacity including Community Diagnostic Centres	☑		
• Increase the percentage of cancers diagnosed at stages 1 and 2 in line with 75% early diagnosis ambition	☑	☑	☑
• Improve A&E waiting times so that no less than 72% of patients are seen within 4 hours by March 2025	☑		
• Improve category 2 ambulance response times to an average of 30 minutes by March 2025	☑		
• Improve effective navigation around the urgent care system including implementation of a care co-ordination hub and spoke model for healthcare professional	☑		
• Enhance the role of community urgent care to manage demand for urgent care through Urgent Treatment Centres	☑	☑	☑

# What we have achieved in 2023/24



# Primary and Community Care

## Our Vision

Our vision is to deliver **an integrated model of care across our communities** to support all people (including carers and families) to be as healthy and independent as possible in their own homes and able to access the right care when they need it. This integrated health and care offer, which includes primary care, community services, social care, the independent sector and the voluntary and community sector, will ensure that we meet people's needs in a way that matters to them and that supports them to stay living safely at home in their community, retaining their independence for as long as possible, living the life they want to lead.

## What Devon will see



People will experience a more multi-disciplinary, personalised and strength-based approach by services that focuses on keeping people connected and supported in their own communities



People will receive services that are aimed at preventing poor health



People will be able to access services on the same day (when clinically appropriate) when they have an urgent need



People will be able to remain living at home, independently for longer



People will know what services are available in their community and how to access them



People will be able to have access to specialist support in the community where appropriate



GP practices will be more resilient and able to meet clinically appropriate demand

# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
<ul style="list-style-type: none"> <li>We will develop a <b>collaborative</b> approach to working across communities. By 2025, we will have effective collaborative mechanisms in place for primary care, community services, voluntary and community services and independent social care providers.</li> </ul>	☑		
<ul style="list-style-type: none"> <li>We will have an <b>integrated</b> approach, neighbourhood approach focussed on PCN boundaries. By 2025, we will have developed integrated ways of working that encompass primary care, community services, mental health, social care, voluntary and community services and acute services working as part of a multi-disciplinary team to jointly deliver services</li> </ul>	☑		
<ul style="list-style-type: none"> <li>By 2025, We will develop our <b>same day</b> services so they can consistently meet people's urgent needs and avoid emergency admission to hospital. This includes pro-actively identifying people at high risk of admission, virtual wards, timely access to general practice and community pharmacy services, urgent community response, social care support and access to specialist support.</li> </ul>	☑		
<ul style="list-style-type: none"> <li>By 2026, each PCN will adopt an integrated, <b>proactive</b> approach, with a focus on prevention and early intervention. PCNs will use population health data to support the identification of the people that are most likely to benefit from this approach.</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li>By 2025, we will have developed consistent, robust pathways for End of Life and falls and frailty, so people are able to access the right, expert input to support them at home. By 2026, we will have developed outreach models to hospital <b>specialists</b> are supporting professionals in the community to look after people in their own homes.</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li>By 2026, people will be <b>easily able to understand</b> what community-based services are available and how to access them. By 2024, we will have implemented the consistent use of the Joy App by social prescribers across 100% of PCNs.</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li>A <b>personalised</b> approach will be utilised across every integrated team, prioritising those population groups who will benefit most from the approach (end of life, frailty and dementia)</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>By 2028, we will have <b>resilient, sustainable and high-quality general practice</b> which is able to meet clinically appropriate demand, offer timely access, operate at scale and have a planned approach to managing change.</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>We will <b>maximise the potential of pharmacy services</b>; by 2028 we will have increased service resilience and improved patient access, safety and quality of care.</li> </ul>			
<ul style="list-style-type: none"> <li>Local authorities will meet their Care Act duties by ensuring a <b>sufficient care market</b></li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>Innovative <b>extra care and supported living schemes</b> will be developed to provide people with greater independence and support them to remain in their own homes</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>By 2028 the ICB will have commissioned <b>sufficient dental services</b> to ensure all disadvantaged groups have access to a routine dental check-up, every 24 months for adults and 6-12mths for children, as well as enough capacity to meet demand for urgent care</li> </ul>	☑	☑	☑

# What we have achieved in 2023/24



## Our Vision

Work together to improve the mental health of our population by improving care and support for people with mental illness across Devon; we commit to improving life opportunities for people who have mental ill health. People with mental illness, carers, staff and our communities will co-produce, lead and participate to deliver our shared purpose; we commit to engage, listen and act with intent and integrity to improve the mental health and wellbeing for the people of Devon.

## What Devon will see

✔ Adults who have serious mental illness can get an annual physical health check, and, if they need it, support to improve their physical health.

✔ People of all ages experiencing mental health crisis will be able to get the help they need as early as possible without needing to go to A&E.

✔ People of all ages will have access to 24/7 mental health advice and support via 111.

✔ People with an Eating Disorder will get timely access to more onward care and support

✔ More children and young people will get access to timely and co-ordinated mental health support

✔ People will have a timely dementia diagnosis and planned onward care and support.

✔ Adults and older adults with severe mental illness will get help with their health and social care needs including housing and physical health as close to home as possible.

✔ People of all ages who need to be admitted to hospital for treatment of a mental illness will be treated in a hospital in Devon whenever it is clinically safe.

✔ People of all ages who need mental health care get treatment within 4 weeks of referral.



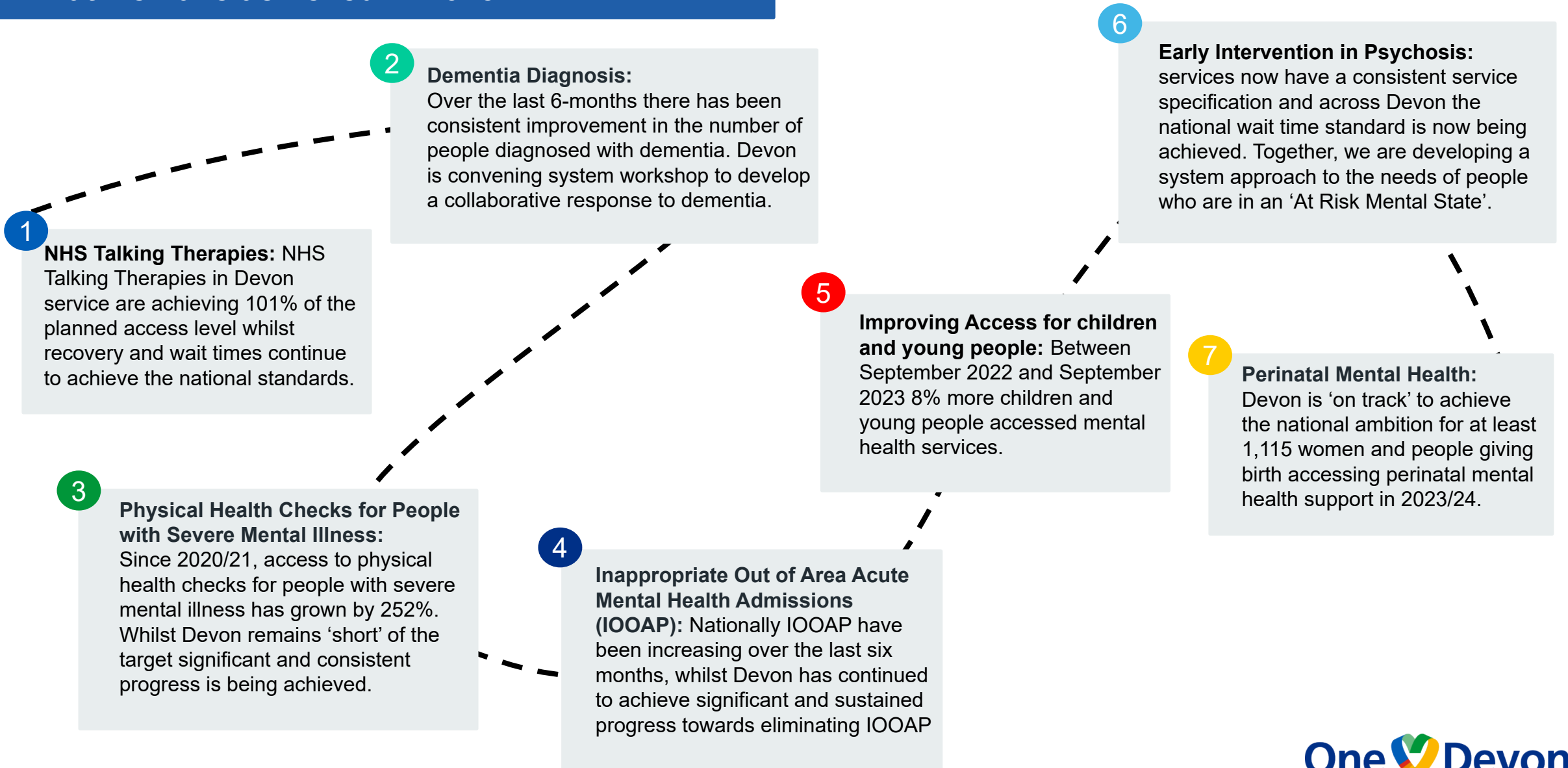
# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
1.) More women and families get help early in development of perinatal mental health need ( <i>access to increase from 1,115 LTP target and wait time baseline to be established in 2024/25</i> ).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2.) More adults and older adults with serious mental illness will have a complete physical health check which leads on to each person having a meaningful action plan and access to follow up care as needed ( <i>TBC access in 2024/25 and pilot evaluation and roll out.</i> )	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3.) More people (of all ages) will have access to treatment within 4 weeks ( <i>Community Mental Health- establish baseline and improvement plan of 10%, increase IAPT access to achieved the LTP target for 2023/24, 32,474</i> ) and a larger proportion of support will be delivered by VCSE ( <i>establish baseline and improvement plan of 10%</i> ).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4.) People (of all ages) experiencing mental health crisis will be able to get the help they need as early as possible. In 2024/25 this includes 111 option 2 'going live' (all age), increasing call handling performance for telephony-based service offers ( <i>dropped calls and hold times</i> ) and increasing access to non-ED crisis response services ( <i>establish baseline access levels to non-acute offer and increase access by 10%</i> ).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
5.) Devon will sustainably eliminate inappropriate out of area bed use for adults and older adults who need hospital admission for acute mental ill health. ( <i>zero new admissions by 2024/25</i> )	<input checked="" type="checkbox"/>		
6.) People will have a timely dementia diagnosis and planned onward care and support ( <i>at least 66.7% of prevalence diagnosed and wait times from referral to treatment/ diagnosis in a specialist team will decrease</i> )	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7.) More children and young people will have timely, co-ordinated access to NHS funded mental health support care and treatment including through mental health support teams in schools. (linked to 3. establish baseline, performance improvement plan and data quality improvement plan)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

# What we have achieved in 2023/24




# Learning Disability and Autism


## Our Vision


The Learning Disability and Autism Partnership reviewed up to 30 different national strategic documents, Acts and legislation that are associated with the system provision of health and social care for Learning Disabilities and Autistic People (LDAP). As a system we agreed that for our approach to have value and commitment to the people we serve, we would reduce those strategies to a number of measurable described and defined pledges. Those pledges will be co-owned through an integrated governed system - mobilised, monitored and overseen in the Learning Disability and Autism Partnership.


## What Devon will see

 Our vision is that autistic people get the support and opportunities they need to lead full and happy lives. As partners, we will work to improve services, reduce waiting lists, support the removal of barriers for autistic people of all ages and their families/carers, through improving training and awareness, such as Oliver McGowan, provision of meaningful support, assessment and diagnosis, early identification and reducing the reliance on inpatient care through community services


 The empowerment of people and families to work with us as partners in making sure people get the best care and support possible. We want to find more ways to bring this to life in the work of the innovations we support. Reaching out to those communities, that are difficult to engage due to rurality and culture, hearing more balanced views and increasing opportunities to co produce.

 Opportunities to increase the number of our adult working age community into meaningful employment

 A reduction in health inequalities and improvement in health outcomes for people with a learning disability and autistic people delivered through actions and learning.

 Collaborative working, with system ownership, shared outcomes and examples of good practice and innovation, led by expertise and clinical knowledge and experience.

 Housing and Accommodation: A new model of delivery for people with learning disabilities and autism, including those with the most complex needs. Housing-based needs share five common principles of providing the best living environment; a clear common pathway for delivery; ensuring better life outcomes and making best use of financial resources to create sustainable housing and services over the long-term

 Golden thread of reasonable adjustments to access all services across Devon

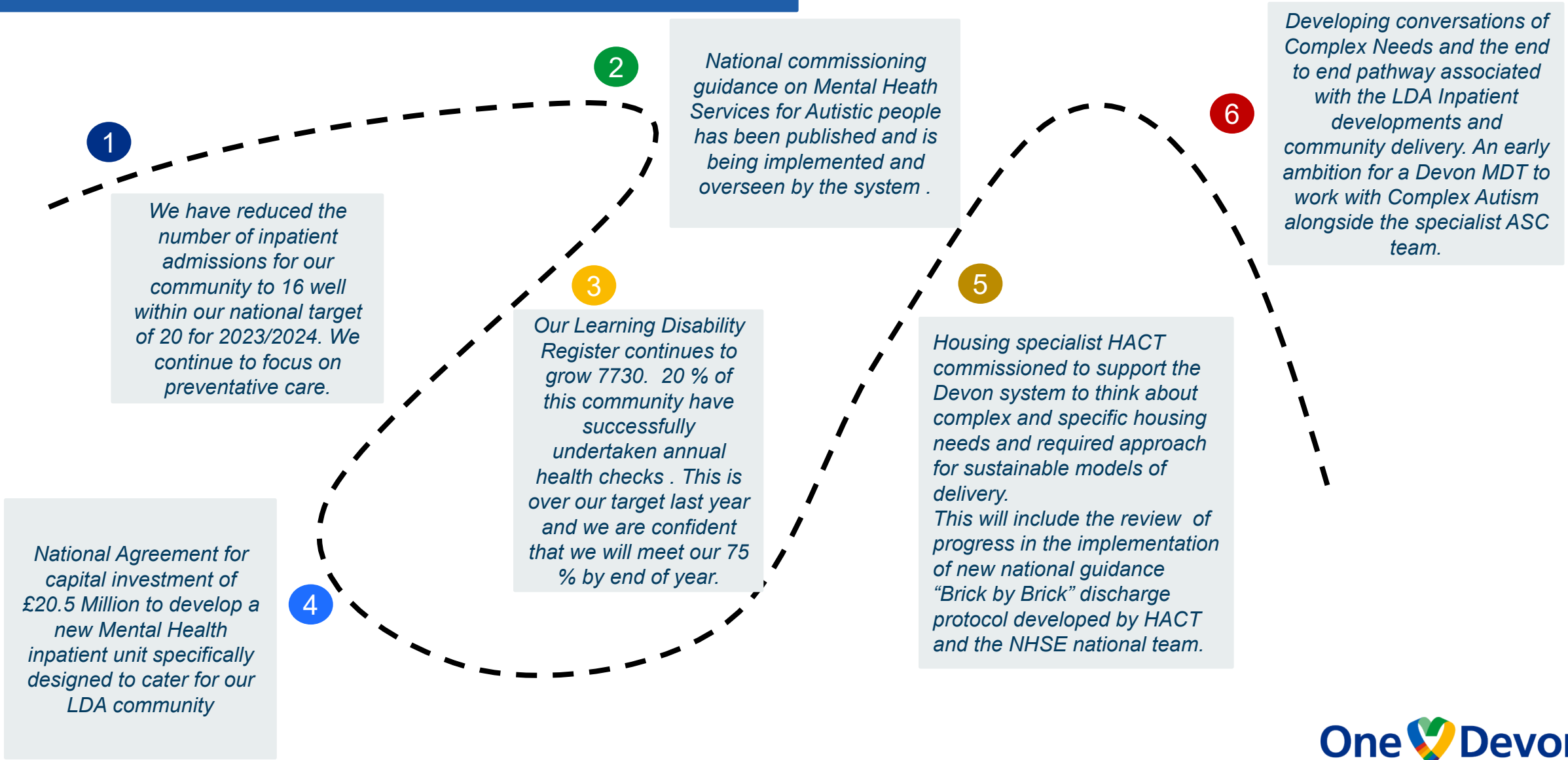
# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
<ul style="list-style-type: none"> <li>Ensure 75% of people aged over 14 on GP learning disability registers receive an annual health check and health action plan by March 2024 as well as continue to improve the accuracy and increase size of GP Learning Disability registers.</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>Reduce reliance on Mental Health locked and secure inpatient care, while improving the quality of Mental Health inpatient care, so that by March 2028 (in line with national target) no more than 30 adults with a learning disability and/or who are autistic per million adults and no more than 12-15 under 18s with a learning disability and/or who are autistic per million under 18s are cared for in an Mental Health inpatient unit</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>Test and implement improvement in autism diagnostic assessment pathways including actions to reduce waiting times by March 2028</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>Develop integrated, workforce plans for the learning disability and autism workforce to support delivery of the objectives set out in the guidance</li> </ul>	☑	☑	☑

# What we have achieved in 2023/24



# Children and Young People and Women's Health

## Our Vision

Our vision is to create an Integrated System and Care Model for Children and Young People (CYP) that supports all aspects of their health (including mental health) and wellbeing, for children and their families so that they can make good future progress through school and life. Our work spans from birth, through transition to young adults. We will ensure that Maternity and Neonatal care is safe, equitable, personalised and kind, delivered through a positive culture of respect, learning and innovation. We will work effectively in an integrated and equitable way within and across health, care and education and will achieve this by sharing information, providing access to care, advice and knowledge and adopting a strength-based approach.

## What Devon will see



Using our collective resources, **we will create, inclusive, accessible and sustainable services** and settings where children can learn and achieve their potential in life.



We will **ensure safe birth and optimise the first 1000 days of a child's life** and **enable the early identification of issues** for children.



We will **listen to our communities** to truly understand the needs of children and young people and their families, women and birthing people.



We will **identify and set steps for improvement within these key priorities:**

1. Waiting list recovery and transformation: acute and community
2. Integrated approach to support vulnerable children and young people with Complex Needs
3. Improve women's health and maternity care
4. Strengthen our data and intelligence
5. Embed co-production in all our work



We will meet the **requirements of the Core20PLUS5** by **proactively addressing health inequalities, working collaboratively with communities and the voluntary sector** to shift to a child and family driven approach, ensuring that safeguarding is a golden thread.



We will ensure that **transition for young people into adulthood** and achieving their potential will be focus for every relevant pathway.



**The needs of CYP with Special Education Needs and Disabilities (SEND) are a specific focus** for our health, care and education system, so that we can respond effectively to the weaknesses identified through inspection and the challenges experienced by our children and families.



Our approach will be informed by **joint use of high-quality data and information.**

# Our objectives

## Which ICS Aim(s)



Objectives – Children and Young People	Year 1-2	Year 3-4	Year 5+
<ul style="list-style-type: none"> <li>Services for children who need <b>urgent treatment and hospital care</b> will be delivered as close as possible to home. There will be a recognition on the potential impact and harm for CYP and their families whilst on waiting lists for paediatrics within acute, community and surgery procedures. By the transformation of pathways to better prioritise the use of clinical capacity, waiting times will steadily improve across the next five years.</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>Through implementation of the neurodiversity offer by, 2027 children and families with <b>neurodiverse, emotional and communication needs</b> will be able to access services and be supported across health, care and education, preventing crisis and enabling them to live their best life (incl. wait list recovery for community services).</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li>Through our work to improve outcomes for children with <b>long term conditions</b>, we are focussing on reducing health inequalities by understanding differences for our Core20PLUS5 populations.</li> <li>To address significantly poorer outcomes for <b>care experienced children and young people</b>, we will tackle issues affecting access and equity of care.</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>We will fulfil our statutory safeguarding responsibilities under ‘Working Together to Safeguard Children’ (2018) and respond to the local safeguarding children partnership priorities; to ensure that the health needs of all <b>vulnerable children</b> are identified and met by 2028.</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li><b>Family Hub and Early Help models</b> will be developed across Devon ICS and in each local area by 2026, working with Local Authorities and other key partners to collaborate, identify and ensure a joined-up approach is taken to meet the needs of babies, children, young people and families across Devon at an earlier stage through a more holistic approach.</li> </ul>	☑		
<ul style="list-style-type: none"> <li>The <b>Special Education Needs and Disabilities (SEND)</b> of children and families will be prioritised across the Devon ICS. SEND reforms will be embedded across the three Local Authorities to address the weaknesses identified through the Torbay, Devon and Plymouth Local Area Inspection’s within the mandated timeframes for each local area.</li> </ul>	☑	☑	
Objectives – Women’s Health and Maternity	Year 1-2	Year 3-4	Year 5+
<ul style="list-style-type: none"> <li>Through a 5 year <b>maternity and neonatal</b> delivery plan, maternity care will be delivered safely and will offer a personalised experience to women, birthing people and their families. Maternity and neonatal workforce will be inclusive, well trained and fit for the future. The Core20PLUS5 approach for women and birthing people will be implemented as part of the core programme.</li> </ul>	☑	☑	
<ul style="list-style-type: none"> <li>We will work collaboratively with System Partners to establish and deliver responsive, data led, inclusive and accessible services to meet the health needs of young girls and women across their life cycle through local implementation of the national <b>Women’s Health Strategy</b>. Women’s Health hubs will be developed and implemented across Devon ICS by 2025.</li> </ul>	☑		

# What we have achieved in 2023/24







# Population Health


## Our Vision


As the Integrated Care System develops, there will be an increasing focus on improving the health of the population: shifting the allocation of resources from treatment to prevention, increasing access to services and reducing health inequalities. This will require changes throughout all parts of the system and, in particular, in the way the ICB carries out its roles as both a commissioner and a system convenor and facilitator. These changes will be embedded in the ICS development programme as we move to a longer term focus.


## What Devon will see


 Devon ICB will lead system partners to increase their focus on population health and ensure that all decisions are made with an understanding of the impact on population health and health inequalities

 There will be a co-ordinated programme of work across all parts of the system focused on improving population health

 We will improve the way that we share and use data to support what we do

 There will be an expert Population Health Team who can support others to deliver the programme and share and learn from their experiences

 Improved performance against Core20+5 targets

 Everyone working in Health and Social Care will have the skills, tools and knowledge to deliver change (including using the PHM approach)

 We will work together as Anchor Organisations to support social and economic development

## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Our LCPs and Provider Collaboratives will have the support and evidence base they need to deliver change at local level and will be empowered to make decisions with their populations on an ongoing basis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure delivery of Core20+5 deliverables (including adult and CYP) in line with national reporting requirements	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Implement co-ordinated prevention plans in priority areas including CVD, diabetes and respiratory	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Develop the ICB and NHS partners as Anchor Organisations by March 2025	<input checked="" type="checkbox"/>		
Support the implementation of new ways of working focused on population health by April 2025	<input checked="" type="checkbox"/>		

## What we have achieved in 2023/24



# Health Protection

## Our Vision

Protecting our population from preventable diseases, hazards and infections. This is set within the context of new and emerging threats, including antimicrobial resistance and climate change. Diseases disproportionately impact on our most vulnerable communities. We also know that some communities in Devon are less likely to access preventative services, and yet are more likely to experience the severe consequences of diseases and infections.

## What Devon will see



### **Reduced health care associated infections.**

Working collaboratively across organisational boundaries, to drive forward further reductions in healthcare associated infection across the whole system.



- **Effective antimicrobial use** Deliver the UK 5-Year Action Plan for Antimicrobial Resistance (2019-2024) which has a strong focus on infection prevention and control..



### **Improved vaccination uptake**

Focusing on MMR, the 4-in-1 pre-school booster and school-age immunisations and working to reduce health inequalities.



### **A system that can respond to health protection incidents**

Pathways in place for key pathogens and communities.



### **Improve uptake of cervical & breast screening**

Supporting vulnerable and underserved populations.



### **100% offer to eligible cohorts for influenza and Covid vaccination programmes**

Working to reduce health inequalities.

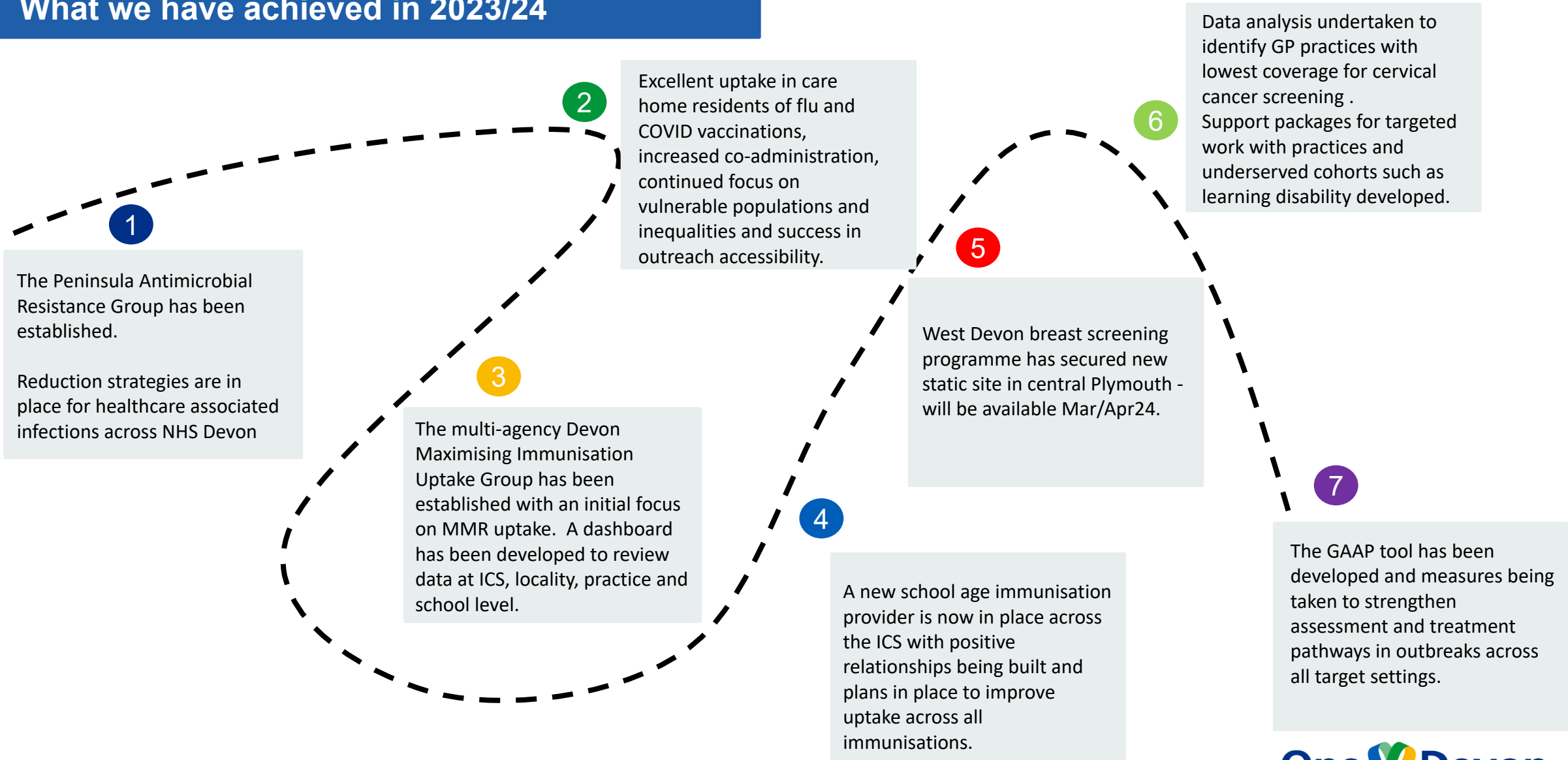
# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Reduce occurrences of healthcare associated infections (HCAI) (Clostridium difficile (C. diff), methicillin-resistant Staphylococcus aureus (MRSA) and community onset community associated (COCA) occurrences of HCAs	☑	☑	☑
Ensure effective antimicrobial use in line with NICE guidance and the Start Smart Then Focus principles to optimise outcomes, reduce the risk of adverse events and to help slow the emergence of antimicrobial resistance and ensure that antimicrobials remain an effective treatment for infection	☑	☑	☑
Providers must demonstrate a 100% offer to eligible cohorts for influenza and Covid vaccination programmes – with particular focus on Devon’s priority populations (CORE20PLUS5) for children and young people (CYP) and adults and aim to achieve at least the uptake levels for influenza of the previous seasons for each eligible cohort, and ideally exceed them where applicable.	☑	☑	☑
Vaccine coverage of 95% of two doses of MMR by the time the child is five, with particular focus on Devon’s priority populations (Core20PLUS5) for CYP	☑	☑	☑
Vaccine coverage of 95% of 4-in-1 pre-school booster by the time the child is five, with particular focus on Devon’s priority populations (Core20PLUS5) for CYP	☑	☑	☑
Achieve recovery of School-aged Immunisation (SAI) uptake to pre-Covid levels, with secondary aim to achieve year on year improvement in uptake working towards the 90% target as stated in national service specification with particular focus on Devon’s priority populations (CORE20PLUS5) for CYP	☑	☑	☑
Halt the decline in cervical screening coverage and then to improve uptake year on year towards a goal of 80%, with focus on first invitation and Devon’s priority populations (Core20PLUS5) for Adults	☑	☑	☑
Work closely with NHS England commissioner to support the delivery of the upcoming national campaign to increase breast screening uptake and reduce inequalities coverage (NHS England and provider led) with focus on Devon’s priority populations (Core20PLUS5) for Adults	☑	☑	☑
Addressed the commissioning and delivery gaps identified in the 2022 South West Gap Analysis Action Plan Tool for Health Protection Frontline Services to ensure that Devon has pathways in place for key pathogens and capabilities and can respond effectively to health protection related incidents and emergencies across different communities in Devon	☑	☑	☑

# What we have achieved in 2023/24




# Suicide Prevention


## Our Vision


Our vision in Devon is for all suicides to be considered preventable and that suicide prevention is everyone's business. The ambition for suicide prevention is to deliver a consistent downward trajectory in the suicide rate for all areas of Devon, Plymouth and Torbay so that they are in line with or below the England average.

## What Devon will see


 **Partners across Devon, Plymouth and Torbay working together to support wellbeing and build suicide safer communities.**

 **Suicide prevention is considered everyone's business**

 **Targeted suicide prevention for people at most risk of suicide**

 **Community awareness and skills in suicide prevention is increased through suicide prevention training**

 **People bereaved by suicide are supported in compassionate and timely manner**

 **People are supported at times of crisis**

## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
• Local Suicide Prevention Groups to each have a published annual action plan based on the national strategy which sets out local delivery priorities for the year	☑	☑	☑
• Local Suicide Prevention Groups to report annually on their suicide rates and their annual action plan to their respective Health and Wellbeing Boards	☑	☑	☑
• Local suicide prevention leads to present local suicide prevention action plans and suicide rates for whole of the ICS area to NHS Devon Suicide Prevention Oversight Group	☑	☑	☑
• Devon ICS to prioritise provision of appropriate suicide prevention training to relevant workforces and the wider population to continue to expand system knowledge of suicide and suicide prevention	☑	☑	☑
• Devon ICS to prioritise the ongoing provision of a suicide bereavement service and a real-time suspected suicide surveillance system, coordinated across the whole of Devon	☑	☑	☑



## What we have achieved in 2023/24



# One Devon Healthy, safe communities



# Healthy, safe communities

## Some of our key challenges relate the wider determinants of health in our communities

- Devon has **complex patterns of urban, rural and coastal deprivation**, hotspots of urban deprivation are evident, with the highest overall levels in Plymouth, Torbay and Ilfracombe. Many rural and coastal areas, particularly in North and West Devon experience higher levels of deprivation, impacted by lower wages, and a higher cost of living.
- Housing is **less affordable in Devon, and the age and quality** of the housing stock poses significant challenges in relation to energy efficiency and issues associated with excess heat, excess cold and damp.
- **Varied education, training and employment opportunities, workforce availability and wellbeing** is impacting on success later in life for children, the health of our economy and our ability to deliver high quality, safe services.
- **Access to health and care services varies significantly across Devon**, both in relation to geographic isolation in sparsely populated areas, as well as socio-economic and cultural barriers. Poorer access is evident in low-income families in rural areas who lack the means to easily access urban-based services. Poorer access is also seen for people living in deprived urban areas, certain ethnic groups and other population groups, where traditional service models fail to take sufficient account of their needs.

## To address these challenges, we have set the following strategic objectives:

- The most vulnerable people in Devon will have accessible, suitable, warm and dry housing
- In partnership with Devon's diverse people and communities, Equality, Diversity and Inclusion will be everyone's responsibility so that diverse populations have equity in outcomes, access and experience.
- People in Devon will be provided with greater support to access and stay in employment and develop their careers.
- Children and young people will be able to make good future progress through school and life.
- We will create a greener and more environmentally sustainable health and care system in Devon, that tackles climate change, supports healthier living (including promoting physical activity and active travel).
- Local communities and community groups in Devon will be empowered and supported to be more resilient, recognising them as equal partners in supporting the health and wellbeing of local people

# Employment

## Our Vision

Our vision in Devon is to create a supportive and inclusive employment landscape where those facing significant barriers, can access meaningful employment opportunities and career development. Focused on empowering the most vulnerable groups, including young people transitioning into adulthood, those with disabilities, mental health conditions, or other health-related employment barriers, and residents from the most deprived communities, we aim to harness the health and social care sector as an inclusive employment destination. This approach not only supports those in need of assistance but also strengthens our workforce, ensuring a healthier, more prosperous community for all.

## What Devon will see



**Youth unemployment reduced:** we will see a significant reduction in the number of young people who are Not in Employment, Education or Training (NEET), especially among those from complex backgrounds and health related barriers to progression, leading to more young people transitioning smoothly into adulthood with stable careers and education paths.



**Disability and health barriers overcome:** we will see enhanced employment rates and career progression among individuals with disabilities or mental health challenges, reflecting a more inclusive and equitable job market.



**Inclusive employment:** we will see individuals from the most vulnerable and deprived communities overcoming barriers to employment, leading to a decrease in poverty levels and an increase in community resilience and economic stability.



**Inclusive health and social care workforce:** we will see a robust and diversified health and social care sector, with a workforce enriched by the inclusion of individuals from varied backgrounds, enhancing the quality and accessibility of care services.



**Flexible and appropriate employment opportunities for carers:** We will see unpaid carers supported to remain in employment or re-enter the labour market.

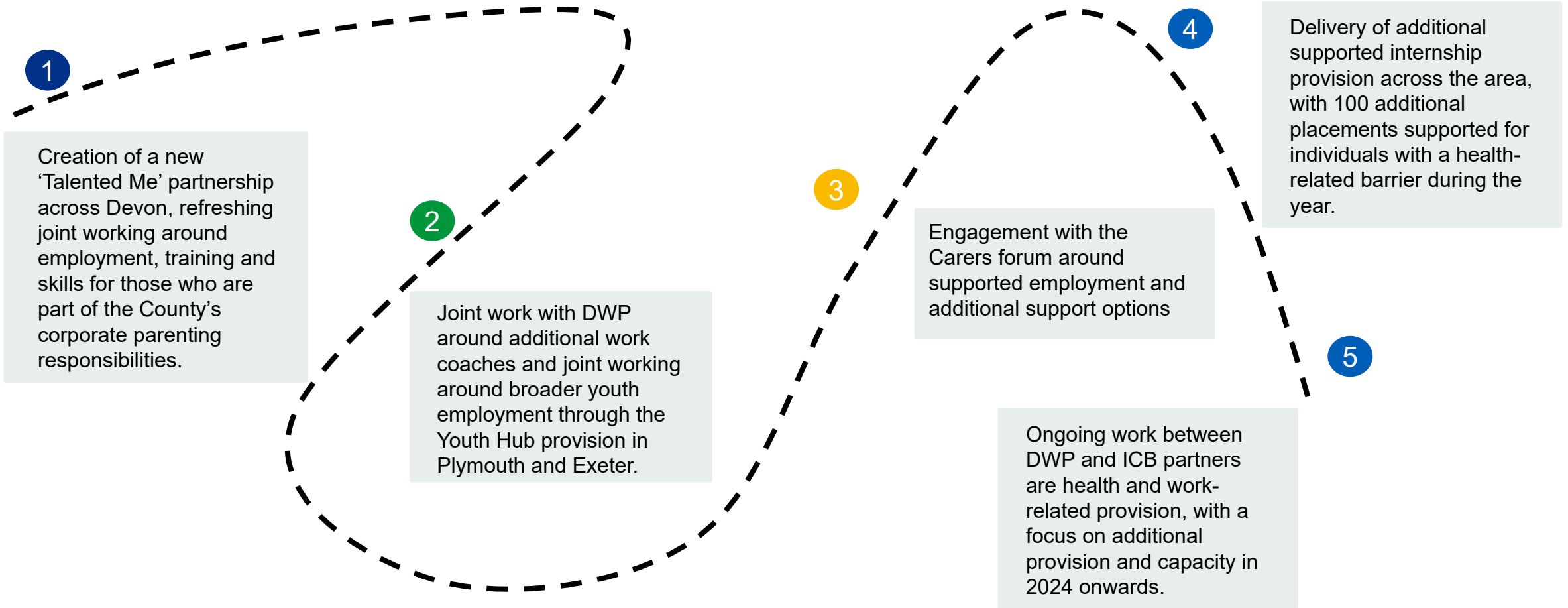
## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Seek to reduce level of 16-18-year-olds Not in Education Employment and Training ('NEET') in Devon by 1% by 2027	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reduction in number of individuals with a disability or mental health need who are unemployed compared to the national average by 4% by 2027	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Build on resources developed across the local authorities and wider partners to support more vulnerable people into employment, working closely with DWP and wider health partners.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Unpaid carers will be supported to remain in or re-enter employment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

# What we have achieved in 2023/24



## Our Vision

Devon's vision is to foster a thriving community through the provision of high-quality, affordable, and sustainable housing. This vision encompasses improved health outcomes via enhanced living conditions, increased availability of specialist housing for the most vulnerable, greater independence for the elderly and disabled through suitable housing options, accessible and affordable housing for key workers and the broader population, and a robust approach to effectively preventing homelessness.

## What Devon will see



**Support for people with health conditions caused, or exacerbated, by poor housing conditions:**

Residents will benefit from better health outcomes due to improved housing conditions. This includes homes that are warm, dry, and free from mould, which are crucial factors in preventing health issues.



**Increase in the availability of specialist housing:** The availability of specialist housing will increase, particularly for vulnerable groups such as those with complex learning disabilities and autism. This expansion will include wheelchair-accessible and supported accommodation, addressing specific needs and promoting inclusivity.



**Effective homelessness prevention:** Devon will see a reduction in homelessness, supported by comprehensive systems aimed at addressing the root causes. These systems will include strong support networks, providing essential help to those in need.



**More people living independently in their own homes:** There will be a noticeable enhancement in the independence and quality of life for the elderly and disabled in Devon. This improvement will be supported by a range of suitable housing options and necessary adaptations, located in sustainable areas.



**An increase in the supply of affordable and accessible housing:** There will be an increase in high-quality, affordable housing, including for key health and care workers and the wider population in high-demand areas. This will help address housing affordability and accessibility issues.

# Our objectives

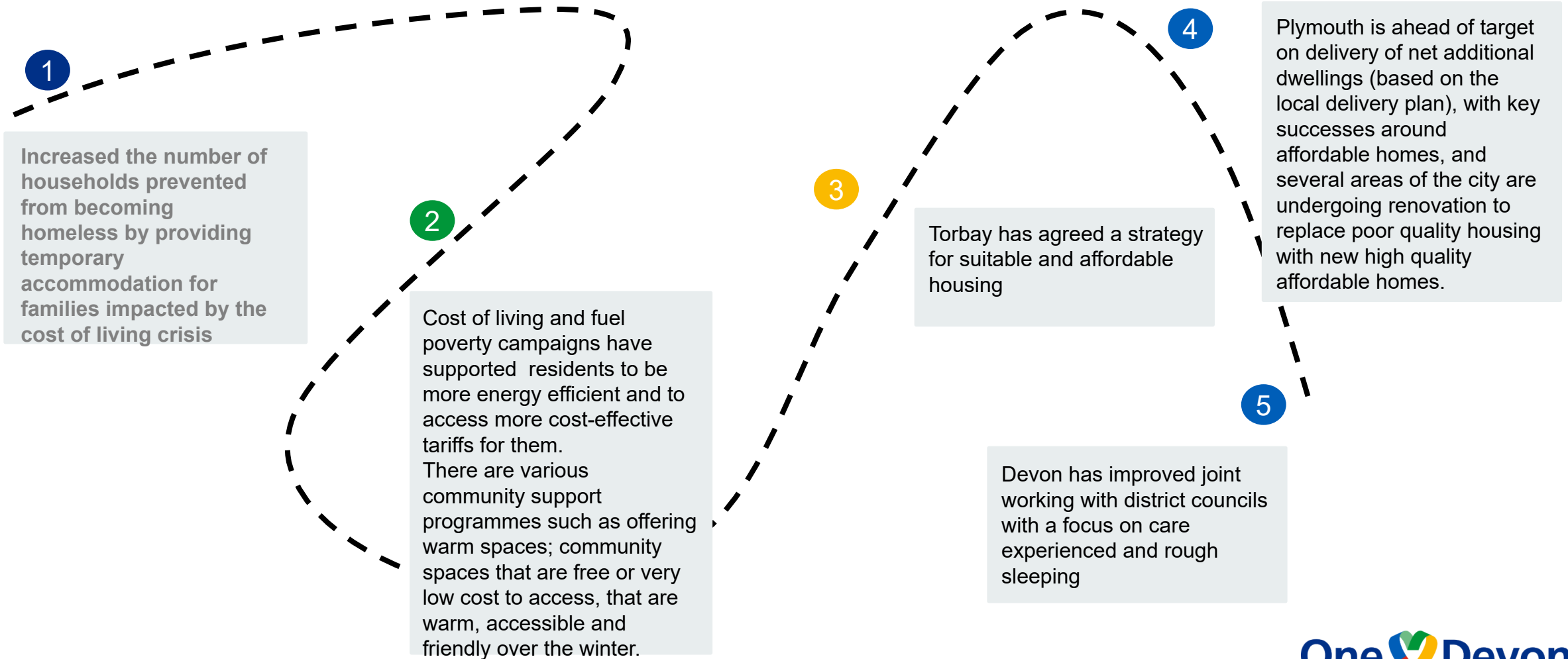
## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
By 2025, we will establish processes to systematically identify vulnerable groups with chronic conditions such as children and young people with asthma, living in substandard housing and direct them to appropriate support services.	☑	☑	☑
By 2028, our aim is to decrease health issues arising from poor housing conditions. This will be achieved by increasing referrals of those living in inadequate housing to a variety of health, social, and VCSE support services.	☑	☑	☑
By 2025, we will implement processes to identify vulnerable individuals in poor quality housing on admission and discharge. This will improve the efficiency of admission/discharge planning and enhance the referral process for additional support.	☑	☑	☑
By 2028 the ICS will work to ensure that Local Plans reflect the needs of older people and those with health conditions, to support the delivery of suitable housing	☑	☑	☑
<p>We will reduce homelessness in Devon, through the implementation of comprehensive support systems, and the expansion of support services. Specific targets include:</p> <ul style="list-style-type: none"> <li>• Ensuring no family stays in B&amp;B accommodation for more than six weeks.</li> <li>• Achieving a 10% reduction in the number of households in temporary accommodation.</li> <li>• Increasing the success rate of preventing homelessness by 30%.</li> <li>• Offering accommodation to 100% of individuals who sleep rough.</li> </ul>	☑	☑	☑



# What we have achieved in 2023/24



# Community Development

## Our Vision

Communities are strong, resilient, inclusive and connected, where people support one another in an environment that promotes health and wellbeing

## What Devon will see



A collaborative system that supports the VCSE and community groups to maximise the health and wellbeing of their local citizens through people led change.



People have multiple opportunities to influence the decisions that affect their health & wellbeing - 'no decision about me without me'



Community partnerships have identified their local priorities and goals



Community partnerships will have identified existing assets (incl. networks, forums and community activities) so they can harness these to tackle gaps in local provision



A strategic framework as an ICS approach to building health capacity in communities with communities



Communities will have a greater sense of purpose, hope, mastery and control over their own lives and immediate environment



A learning culture that challenges, examine and reflect on our community development practice, providing accountability, reassurance and protection



Cross-sector partnerships established to enable collaborative working in communities

# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
<ul style="list-style-type: none"> <li>By 2028, local communities, and particularly disadvantaged groups, will be empowered by placing them at the heart of decision making through inclusive and participatory processes and have an active role in decision-making and governance – ‘no decision about me without me’</li> </ul>		☑	☑
<ul style="list-style-type: none"> <li>By 2028, local communities will work in partnership to bring about positive social change by identifying their collective goals, engaging in learning and taking action to bring about change for their communities.</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>By 2028, a community development workforce will be supported, equipped and trained to agreed standards, code of ethics and values-based practice</li> </ul>	☑	☑	☑
<ul style="list-style-type: none"> <li>By 2028, Local Care Partnerships will have integrated the role of community partnerships into their infrastructure and planning to ensure the communities of Devon are an equal partner both at system and local level</li> </ul>		☑	☑

# What we have achieved in 2023/24



# Communication and involvement

## Our Vision

Through inclusive and meaningful involvement, we will work in partnership with Devon's people and communities so that health and care services meet the needs of our population. We will champion involvement through a culture of ongoing conversations and collaboration, so that we act on what we hear and continue to build trusted relationships with a shared purpose

## What Devon will see

Good involvement will directly contribute to NHS Devon's ability to deliver safe, high quality and efficient services by:



**Improving safety, experience and performance** through ongoing and continuous feedback and quality improvement.



**Improving health outcomes and reducing health inequalities** for local populations by understanding lived experiences and designing services that meet people's needs.



**Better planning and decision making** as the voices of patients, service users, communities and staff are heard and that their insights influence change.



**Confidence and trust with the public** given a focus on transparency and the provision of clear public information about vision, plans and progress.



**Understanding barriers to access** which impact on the efficiency and sustainability of services and work together in solutions to address them.



**Improving efficiency and sustainability** by prioritising resources to where they have the greatest impact based on the needs, knowledge and experience of communities.



**Improving value for money and use of NHS resources** as people have the right services to meet their needs which reduces the need for further, additional care or treatment.



**Reducing risks of legal challenges** in line with section 14Z45(2) of the 2006 Act, which, if we fail to meet, can result in substantial costs and delays to transformation as well as damage to relationships, trust and confidence between organisations, people and communities.



**Improving accountability** by ensuring decisions in the NHS are transparent and clear to the public, patients and staff.

# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Strategic Communications Group - Develop a system approach to communications, working with professionals from all system partners to support consistent communications, involvement, collaboration, sharing of best practice, and co-production	☑	☑	☑
Involvement Operational Group - Develop a system approach, working with professionals from all system partners to support consistent involvement practice, collaboration, sharing of ways of working and resources and genuine co-production.	☑		
Develop the One Devon involvement platform to be the single online space for the One Devon Partnership, focussing on engagement and involvement with people and communities, including the One Devon Citizens Panel. This will be achieved by ensuring a Local Care Partnerships are all actively using the platform to support local engagement work	☑	☑	
Develop an involvement identity to be used by the One Devon Partnership to raise the profile of and awareness of involvement activity undertaken by system partners across Devon	☑	☑	
Establish Healthwatch Devon Plymouth Torbay as part of NHS Devon ICB governance to enable them to provide appropriate scrutiny to the ICB involvement work, whilst continuing to provide insight and intelligence to inform decision making at all levels of the ICB.	☑		
Work with the Integrated Care Partnership (ICP) and the Voluntary Community and Social Enterprise (VCSE) sector, to deliver engagement on behalf of the ICB and to provide insights from, and connection to, local people and communities	☑	☑	☑
Work in partnership with JFP programmes by providing expertise and guidance on working with diverse and vulnerable communities, building a continued dialogue with all people and communities in Devon, supporting delivery of the principles for best practice co-production, involvement and consultation, and holding the accountability of adherence to legal duties around involving people and Overview and Scrutiny Committees (Devon, Plymouth and Torbay)	☑	☑	☑

# What have we achieved so far?

## People and communities' involvement



# Equality Diversity and Inclusion

## Our Vision

NHS Devon will be a great place to work where staff will feel valued and have a strong sense of belonging. As an organisation we will champion diversity as our route to innovation and improved performance. We will tackle health inequalities by working hand in hand with local populations and our partners to understand barriers to care and designing services that have the needs of everyone at their core

## What Devon will see

Equality, Diversity and Inclusion (EDI) are essential components of effective health and social care. Good EDI practices ensure that services meet people's needs, give value for money and are fair and accessible to everyone. EDI means people are treated as equals, get the dignity and respect that deserve, and differences are celebrated. Some specific benefits also include:

### Improving innovation and value for money



- New perspectives and different ideas that come from a diverse workforce support innovation.
- Diversity results in better decision making and therefore improves financial performance.
- Efficient services that better meet peoples' needs and keep people in good health can reduce the need for costly and prolonged care further down the line.

### Improved workforce recruitment and retention



- An inclusive working environment, that encourages everyone to bring their own ideas forward helps employees feel valued, appreciated, and encouraged.

### Building our reputation



- Equality and Diversity ensures we meet the aims of the Public Sector Equality Duty (PSED) of the Equality Act 2010 which in turn builds trust with local communities and helps build our reputation as a positive and inclusive place to work.

### Improving health outcomes and reducing health inequalities



- Equality and diversity help us overcome barriers to care so we can design services that meet the needs of everyone.
- Inclusive services provide better outcomes and experience and therefore help to tackle health inequalities.

### Delivering better care



- When staff feel valued with a sense of belonging, they are likely to provide better care to patients.



## Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Develop inclusive approaches to recruitment that encourage diverse populations to work for NHS Devon so that we can build a more diverse workforce that is reflective of Devon's local population with an initial focus on race and ethnicity (4% to 8%) LGBTQ+ (1% – 3%) and people with a disability (5% – 20%). This will build a culture where our people feel valued, heard and able to be their best selves at work	☑	☑	☑
Continue to support our leaders to champion the benefits of equality and diversity and represent EDI at a Board, Executive and Senior Leadership level	☑	☑	☑
Work with HR to further develop an NHS Devon Staff Network that is representative of our communities with a focus on; Providing peer support for our colleagues. Creating a reference point when undertaking inclusion initiatives. Seeking support and resourcing with campaigns	☑	☑	☑
Identify opportunities through the NHS Devon governance review to embed EDI to ensure we are learning and developing through an EDI lens through the Organisation Change process	☑	☑	☑
The EDI programme will celebrate diversity, raise awareness of discrimination, and involve our staff and communities on the EDI priorities that develop through our work. We will do this through targeted and effective integrated communications opportunities.	☑	☑	☑
Through an involvement campaign, ensure staff recruited via the International Recruitment Hub, are well supported in their roles and deliver a campaign that celebrates our diverse workforce, tackles racism and builds cohesion in the community	☑	☑	☑
Deliver inclusive involvement in collaboration with the People and Communities Strategy to support the ICB and ICS key aim of tackling inequalities in outcomes, experience and access.	☑	☑	☑
As part of the Organisation Change Programme deliver inclusive Recruitment training to Executives, Senior Leadership Team and recruiting managers to ensure people are aware of their biases when recruiting to their teams.	☑	☑	☑
As a system, work collaboratively to agree shared EDI priorities and work collectively on achieving a shared vision, with an initial focus on the six high impact actions in the NHS England EDI Improvement Plan.	☑	☑	☑

# What have we achieved so far?

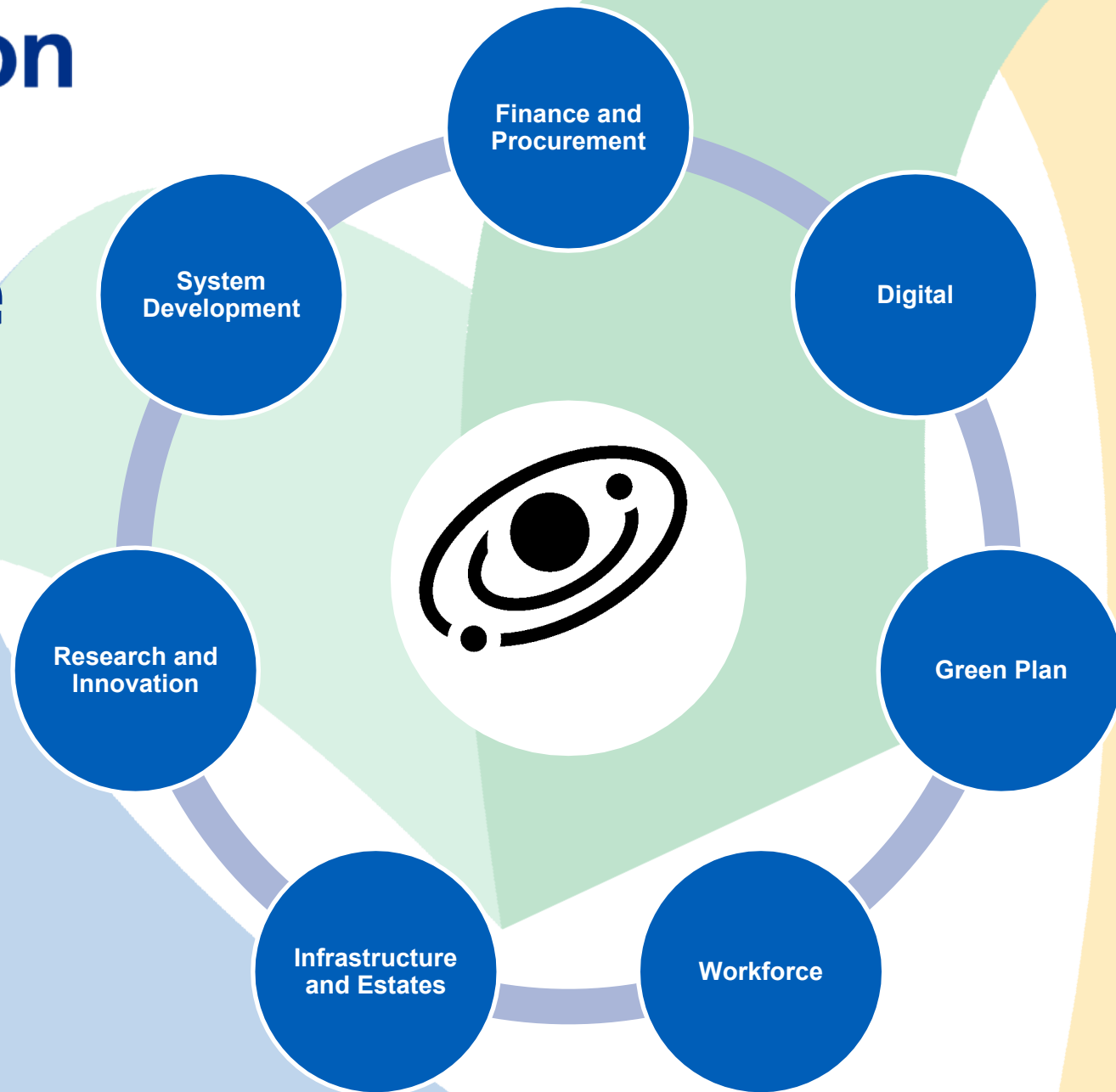
## Equality Diversity and Inclusion



**Healthy, sustainable system**

One  Devon

**Healthy,  
sustainable  
system**



#OneDevon

# Healthy, sustainable system

## Some of our key challenges relate to how we work together as a system

- There is an immediate requirement to stabilise the financial position and recover activity, to improve operational performance, access and quality of care. In order to achieve both, we need to transform the way we **work together across our system** so that it is healthy and sustainable in the future.
- The **financial challenge** facing all our health, social care and wellbeing partners is significant. Lower salaries and higher housing costs, with rising bills for energy, fuel, food and other costs in the One Devon area will increase the impact of the cost of living crisis. People and communities already experiencing higher levels of poverty will be disproportionately affected.
- **Climate change** poses a significant risk to health and wellbeing and is already contributing to excess death and illness in our communities, due to pollution, excess heat and cold, exacerbation of respiratory and circulatory conditions and extreme weather events.
- An older age profile and more rapid population growth in Devon, coupled with the impacts of the Covid-19 pandemic and current 'cost of living' crisis, are contributing to **increased demand for health and care services**. The greatest increased demand is for unplanned care and mental health services, with those living in disadvantaged communities and clinical vulnerability likely to be most severely impacted.

## To address these challenges, we have set the following strategic objectives:

- We will have a safe and sustainable health and care system.
- People in Devon will know how to access the right service first time and navigate the services they need across health and care, improving personal experience and service productivity and efficiency.
- People in Devon will only have to tell their story once and clinicians will have access to the information they need when they need it, through a shared digital system across health and care.
- We will make the best use of our funds by maximising economies of scale and increasing cost effectiveness.
- We will have enough people with the right skills to deliver excellent health and care in Devon, deployed in an affordable way.
- Local and county-wide businesses, education providers and the VCSE will be supported to develop economically and sustainably

## Our Vision

A financial framework that supports **integrated and collaborative working arrangements**, through the Devon Operating Model, that will **deliver better experience and outcomes for the people of Devon and greater value for money**. We will enhance every patient experience through delivering **maximum value and the best quality service through our collective procurement and supply chain excellence**.

## What Devon will see

- ✓ Recurrent balanced financial position by 2025/26.  
With a financial framework that:
  - supports collaborative working
  - reflects the Devon Operating Model and delegation of budgets to LCPs and provider collaboratives.
  - promotes innovative funding models and pooled budget arrangements.

- ✓ Movement of funds into prevention.

- ✓ A commitment to shared services, doing things once for Devon or the wider Peninsula where it makes sense to do so.

- ✓ **Patients** will see the healthcare services they need are delivered on time and of the best quality.

- ✓ **Clinicians** will be equipped with the goods and services they need to deliver world-class care.

- ✓ **Taxpayer will see** the NHS is achieving value for every pound spent and delivering government priorities such as sustainability, NetZero and eradicating modern slavery.

- ✓ **Suppliers will find** the NHS is easier to do business with, with opportunities to develop more innovative solutions to meet NHS and government challenges

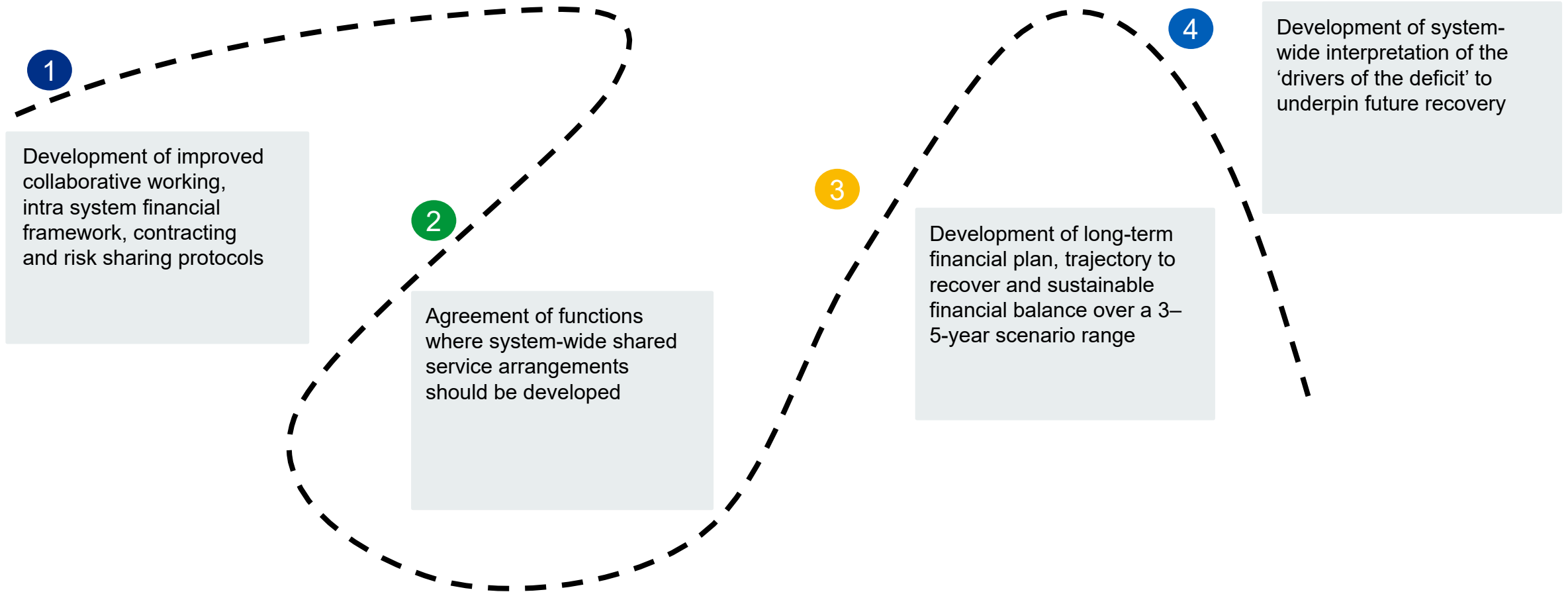
## Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Implement agreed shared service arrangements to increase efficiency and productivity and reduce costs	<input checked="" type="checkbox"/>		
Delivery of 2024/25 recovery and Cost Improvement Programmes both organisational, strategic collaborative, and structural	<input checked="" type="checkbox"/>		
Commence reprioritisation of funding upstream towards prevention and health inequalities		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Take on formal delegation of specialised commissioning functions	<input checked="" type="checkbox"/>		
Deliver corporate ICB right-sized for RCA (Running Cost Allowance) allocations	<input checked="" type="checkbox"/>		
Deliver the long-term financial plan to achieve sustainable financial balance by system and by organisation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Reduce total procurement cost by driving 'at scale' procurement delivery; enabling greater efficiency and effectiveness through the potential to standardise and minimise unwarranted variation	<input checked="" type="checkbox"/>		
Improve supplier management by increased collaboration to leverage scale and value attained through our supplier base through a single voice for categories	<input checked="" type="checkbox"/>		

## What we have achieved in 2023/24





# Estates and Infrastructure

## Our Vision

To ensure that our estates and infrastructure are fit for purpose and located within the right places.

## What Devon will see



A redeveloped the **acute hospital estate** through the funds available via the New Hospital Programme



A **community services and mental health estate** with more specialist services outside of the traditional hospital setting



**Development of the primary care** to integrate primary care with community service developments



A roadmap for estates and facilities activity to reach **Net Carbon Zero by 2040**



**Estates and facilities contracts** that leverage buying power for providers on behalf of the ICS



**One Public Estate** opportunities are maximised



Estates and facilities expertise **working in collaboration** across the ICS to ensure efficiency, skill sets and joint delivery programmes remain optimal

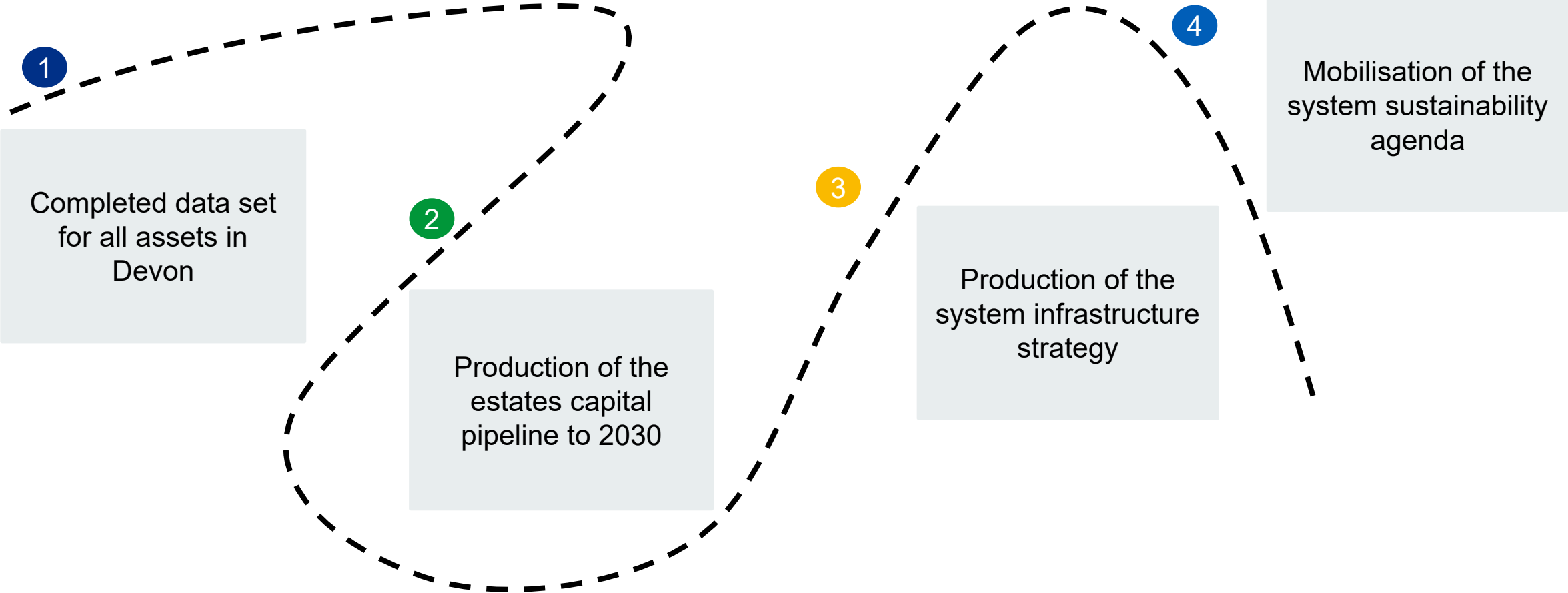
## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Undertake strategic review of the ICS-wide health estate	☑		
Develop an investment plan and a five-year capital prioritisation pipeline	☑		
Develop a cross-matrix team that can support the delivery of estates and facilities at an ICS-wide level	☑		
Deliver a public facing ICS Estates Strategy	☑		
Categorise all of the estate into 'core, flex and tail' and agree strategies for each site or development opportunity	☑		
Prioritise funding allocations while taking advantage of national funding review outcomes and TIF funding	☑		
Integrate provider service departments where possible to create resilience, efficiencies and succession planning	☑		
Commence delivery of the implementation plans that shall support each area of the Estates Strategy	☑		

# What we have achieved in 2023/24



# System development

## Our Vision

The Integrated System Development Programme aims to strengthen integrated and collaborative working in One Devon, to enable partners to implement innovative ways to collectively tackle our shared challenges improving the access to effective health and care for people in Devon.

## What Devon will see



System Partners will collectively own the delivery of the Programme, actively involving communities and people with lived experience, and will adopt five core principles to underpin all of our work together:

- Learn by doing
- Prioritise and implement
- Shared purpose
- Trust & collaboration
- System focus



An innovative approach to reset the way we work together and apply learning will fundamentally change mindsets and improve the outcomes and experience for people across Devon. As a result the Programme will primarily support recovery of services and care in the short term and achievement of the overarching strategic goal outlined in the 5-Year Integrated Care Strategy:



*One Devon will strengthen its integrated and collaborative working arrangements to deliver better experience and outcomes for the people of Devon and greater value for money.*



*By 2026/7 we will have: adopted a single operating model to support the delivery of health and care across Devon and will have achieved thriving ICS status.*



An increased role for provider collaboratives – undertaking some functions currently performed by the ICB and making better joint use of total provider capacity.



An increased role for Local Care Partnerships – bringing partners together at ‘place’ to improve population health and reduce health inequalities.

## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
• a strong shared purpose across system partners, Local Care Partnerships and provider collaboratives will support delivery of our Devon Plan achieving thriving ICS Maturity Assessment standards	☑		
• levels of trust and collaboration between system partners, Local Care Partnerships and provider collaboratives will have increased achieving thriving ICS Maturity Assessment standards	☑	☑	☑
• a 'learn by doing' approach will be embedded within our culture of improvement achieving thriving ICS Maturity Assessment standards	☑	☑	☑
• system partners, Local Care Partnerships and provider collaboratives will be consistently implementing priorities achieving thriving ICS Maturity Assessment standards	☑	☑	
• a unified system focus will be demonstrated by all system partners, Local Care Partnerships and provider collaboratives achieving thriving ICS Maturity Assessment standards		☑	☑

# What we have achieved in 2023/24



# Workforce

## Our Vision

We will have enough people with the right skills to deliver excellent health and care in Devon, deployed in an affordable way.

## What Devon will see



Innovative and effective solutions that enables the attraction, recruitment and retention of talent across our health and care providers, reducing duplication and streamlining processes.



Our Devon 2035 workforce vision brought to life and informing strategic workforce planning which will identify new roles and ways of working, informing our talent supply pipelines with national, regional and local training & education providers



Our One Devon Workforce Strategy Themes and Principles embedded into workforce planning and service transformation and delivery



System working

We work collaboratively to enable our workforce to move flexibly across sectors and create new roles to meet the needs of the population and services.



Stability

We stabilise the workforce by supporting new and diverse career pathways for our current and future workforce.

Learning & Education

We commit to investing in the workforce through enrichment of development opportunities ensuring that quality and safety is at forefront.



Digital

We utilise digital technology to support innovation and transformation to our workforce and across all services we deliver.



Sustainable

We commit to achieving a skilled workforce built on a system that is financially sustainable.



# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
• <b>Objective 1 - Strategic workforce planning embedded at System level.</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
• <b>Objective 2 - System level attraction solutions in place that source new talent and position Devon System as an employer of choice.</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
• <b>Objective 3 - Development of new roles and new ways of working embedded across Devon ICS.</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>



# What we have achieved in 2023/24



## Our Vision

Through investment we will make the most of advances in digital technology to help people stay well, prevent ill health, provide care, better support our staff in their roles and enable the delivery of sustainable, effective and efficient services. People will only tell their story once, First contact will be digital where appropriate and more advice and help will be available online.

## What Devon will see



### Digital Citizen:

Empower citizens to take ownership of their wellbeing and care, through digital technology and contact across the system. Digital will offer new ways of delivering care to help citizens manage their care at home.



**Electronic Patient Records (EPR) & Operational Systems:** The convergence to common digital solutions that meets the information sharing and workflow needs of the various organisations across the ICS.



**Devon and Cornwall Care Record (DCCR):** DCCR will allow information to be available across care settings and coordination of care through specific functionality such as read/write for key flags and care plans.



**Business Intelligence & Population Health Management:** A cross-system intelligence function to support operational and strategic conversations, as well as building platforms to enable better clinical decisions. This will necessitate linked data, accessible by a shared analytical resource that can work on cross-system priorities.



**Unified and Standardised Infrastructure:** Levelling-up and consolidation of infrastructure, to support future enterprise scale digital systems such as Shared EPRs, digital technologies for citizens and also agile and frictionless cross-site working and support experience for the workforce.



# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2 24/25 to 25/26	Year 3-4 26/27 to 27/28	Year 5+ 28/29+
▪ Number of eligible citizens connected to the NHS App increased to support national target of 75% of people registered by 2024.	☑		
▪ Standardisation of GP practice websites achieved within 2025.	☑		
▪ Achieve planned Virtual Ward bed targets by April 2024 across the TSDFT, UHP and RDUH	☑		
▪ EPRs implemented in TSDFT and UHP by 2026	☑	☑	
▪ Peninsula PACS solution for the clinical network procured and implemented by 2025	☑		
▪ Peninsula LIMS solution for the clinical network procured and implemented by 2025	☑		
▪ Re-procurement of GP EPR clinical system by 2024	☑		
▪ Remaining core health and care organisations connected to the Devon and Cornwall Care Record by 2028	☑	☑	
▪ Additional functionality of the Devon and Cornwall Care Record scoped and implemented by 2028	☑	☑	☑
▪ Develop PHM architecture and reporting by March 2025	☑		
▪ Develop an ICS data platform and associated reporting, linked to EPR implementation and national developments including the Federated Data Platform by 2026	☑	☑	
▪ Work collaboratively with regional ICS teams to develop the regional secure data environment to support future research	☑		
▪ Data centre rationalisation subject to business case approval	☑	☑	☑
▪ Non-pay contract savings	☑	☑	☑

# What we have achieved in 2023/24

1

- ✓ ICS Devon developed 'GP in the Cloud' remote working solution for GP locums short-listed for a HSJ award
- ✓ Devon and Cornwall Care Record – hospices connected, first tranche of care homes/domiciliary care providers connected

2

- ✓ Early business case completed for IT services target operating model
- ✓ Early business case completed for IT Shared Service Desk
- ✓ Digital TEP developed in DCCR and in pilot stage

3

- ✓ DPT procured and implemented an Electronic Patient Record.
- ✓ TSDFT and UHP achieved sign-off of OBC for a new Electronic Patient Record
- ✓ Business case completed on expanding the capability and implementation of Robotic Process Automation within the ICS.

4

- ✓ Digitising Social Care programme performed higher than the national average and expected to hit target of 80% care home and domiciliary care providers with a digital social care record.
- ✓ Successfully bid for cyber security funding
- ✓ Successfully bid for funding to support virtual wards, point of care testing, remote monitoring and digital neighbourhoods

# Research and Innovation

## Our Vision

We will work together to promote research and innovation to enhance the productivity of the Health and Care System, strengthen how we attract and retain our workforce and increase inward investment into the system. By doing this we will improve population health, prevent ill health and reduce inequalities. As we develop as a system we will spread research, learning and innovation into other rural and coastal regions in the UK and globally.

## What Devon will see



Increased collaboration between health and social care and academic partners across the South West Region to increase opportunities for research and innovation and make best use of shared assets. This will include streamlined processes for governance and the innovation pipeline.



A research engaged workforce with an increased level of skills and an understanding of the benefits of research and how everyone can participate



Increased inward investment from research and commercial partners



An increased evidence base on what can make an impact in improving population health, preventing illness and reducing inequalities.



Increased patient and public participation in all stages of the research pathway



Rapid implementation of interventions with demonstrated effectiveness.



Increased alignment of research and innovation activity with the priorities of the health and care system with a specific focus on population health

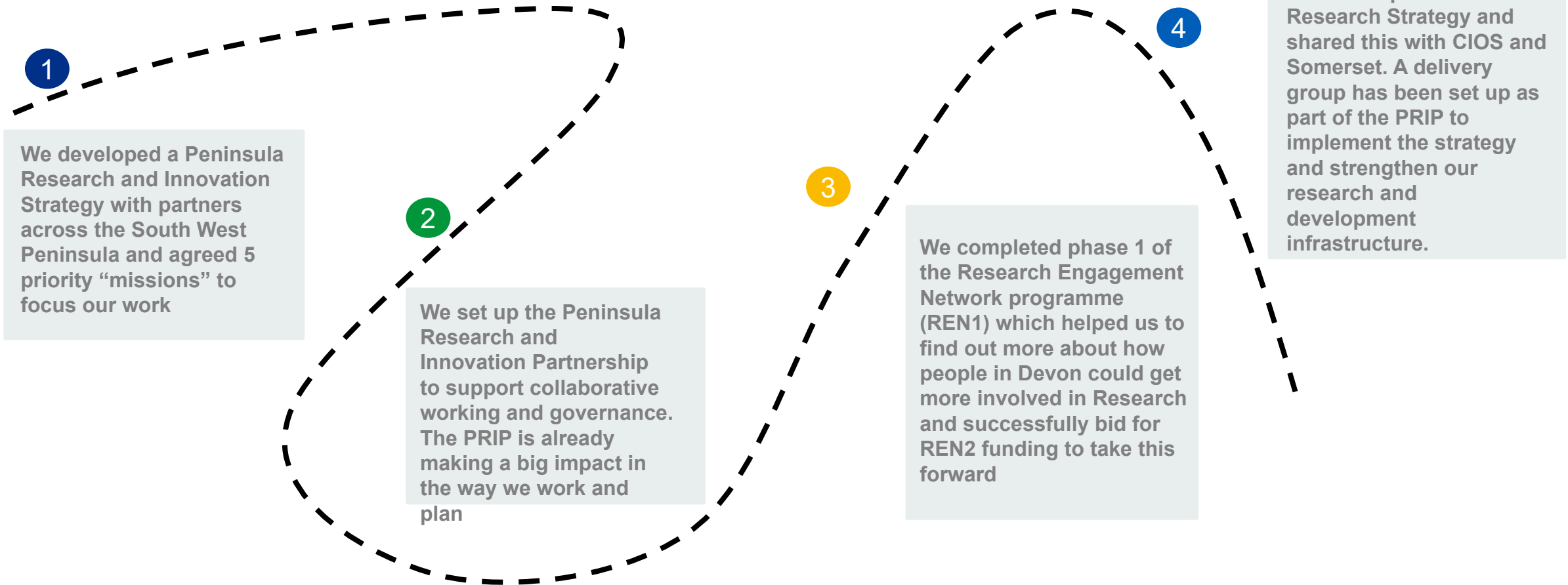
# Our objectives

## Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
Build and strengthen networks at local, system, regional and national level by March 2025	<input checked="" type="checkbox"/>		
Promote research and increase patient sign-up with demonstrable increase by end 2026	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Ensure all system workplans are underpinned by robust evidence of research and innovation by March 2025	<input checked="" type="checkbox"/>		
Develop capacity and capability by having an ICB RII Team in place by April 2024	<input checked="" type="checkbox"/>		
Develop underpinning structure and governance mechanisms including evaluation and links to Value-Based Approach principles by end of March 25	<input checked="" type="checkbox"/>		

## What we have achieved in 2023/24



# Green Plan

## Our Vision

We will create a greener, fairer and more environmentally sustainable health and care system in Devon, that adapts to and mitigates climate change and promotes actions to create healthier and more resilient communities

## What Devon will see



A system that plays a significant contribution to the NHS target to achieve net zero emissions by 2040 with an interim target of 80% reduction by 2028-2032.



A workforce that understands the Green ambitions of Devon ICB and knows how it can make an active contribution.



A system that buys locally where possible and promotes the Devon Pound.



Data collection that shows the current position across all partners



A revised and refreshed ICS Green Plan in 2025.



A programme tracker for each NHS organisation in Devon to enable an understanding of performance and risk areas.



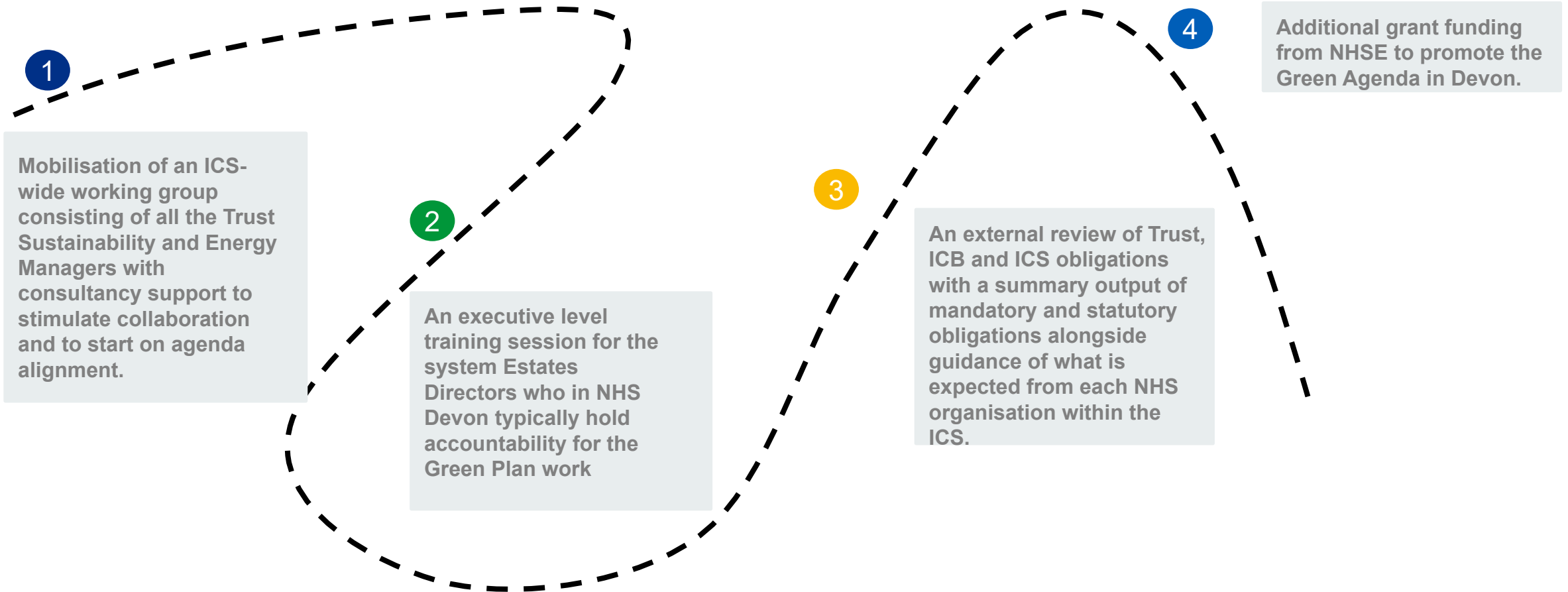
## Our objectives

### Which ICS Aim(s)



Objectives	Year 1-2	Year 3-4	Year 5+
More Devon ICB staff will make greener journeys to work.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Devon ICB will be a paper free organisation by 2028		<input checked="" type="checkbox"/>	
More products and services are bought locally promoting the concept of the Devon Pound across the ICS and its partners		<input checked="" type="checkbox"/>	

## What we have achieved in 2023/24



# **Delivering the Joint Forward Plan and future development**

**Delivering the plan in 2023/24**  
**Devon Operating Model**  
**Governance**  
**Outcomes framework**

# Delivering the JFP

## Delivery

The JFP will be delivered through system architecture that includes:

- Primary care networks and collaboratives
- Local care partnerships
- Networks
- Provider collaboratives
- System level transformation programme boards

## Assurance

- Outcomes framework will be used to monitor progress towards the strategic goals
- The System Recovery Board will drive delivery of the recovery plan
- Delivery of work programme milestones will be monitored through system programme infrastructure
- Progress towards delivery of ICS strategic goals will be overseen by the System Management Executive and will report to the One Devon Partnership
- System development will be measured through the ICS maturity framework

## Engagement

- Targeted engagement by programmes with people and communities

## Annual refresh

- On-going work with system partners and programme leads to refresh each year

# Accountability

Our Vision	One Devon Partnership	Equal chances for everyone in Devon to lead long, happy and healthy lives													
Our Aims	One Devon Partnership NHS Devon	Improving outcomes in population health and healthcare			Tackling inequalities in outcomes, experience and access			Enhancing productivity and value for money			Helping the NHS support broader social and economic development				
Our Strategic Goals	One Devon Partnership	Every suicide will be regarded as preventable and we will work together as a system to make suicide safer communities across Devon and reduce suicide deaths across all ages			People in Devon will have access to the information and services they need, in a way that works for them, so everyone can be equally healthy and well.			People in Devon will know how to access the right service first time and navigate the services they need across health and care, improving personal experience and service productivity and efficiency.			People in Devon will be provided with greater support to access and stay in employment and develop their careers.				
		We will have a safe and sustainable health and care system.			Everyone in Devon will be offered protection from preventable diseases and infections.			People in Devon will only have to tell their story once and clinicians will have access to the information they need when they need it, through a shared digital system across health and care.			Children and young people will be able to make good future progress through school and life.				
		People (including unpaid carers) in Devon will have the support, skills, knowledge and information they need to be confidently involved as equal partners in all aspects of their health and care.			Everyone in Devon who needs end of life care will receive it and be able to die in their preferred place			We will make the best use of our funds by maximising economies of scale and increasing cost effectiveness.			We will create a greener and more environmentally sustainable health and care system in Devon, that tackles climate change, supports healthier living (including promoting physical activity and active travel).				
		Population health and prevention will be everybody's responsibility and inform everything we do. The focus will be on the top five modifiable risk factors for early death early and disability			The most vulnerable people in Devon will have accessible, suitable, warm and dry housing			We will have enough people with the right skills to deliver excellent health and care in Devon, deployed in an affordable way.			Local communities and community groups in Devon will be empowered and supported to be more resilient, recognising them as equal partners in supporting the health and wellbeing of local people				
		Children and young people (CYP) will have improved mental health and well-being			In partnership with Devon's diverse people and communities, Equality, Diversity and Inclusion will be everyone's responsibility so that diverse populations have equity in outcomes, access and experience.						Local and county-wide businesses, education providers and the VCSE will be supported to develop economically and sustainably				
		People in Devon will be supported to stay well at home, through preventative, pro-active and personalised care. The focus will be on the five main causes of early death and disability.													
Delivery Programmes	NHS Devon/ Local Authorities/ Programme Boards	Mental health, learning disability and neurodiversity		Women and Children	Acute Services Sustainability		Primary and Community Care	Housing		Community Development and Learning		Employment		Health Protection	Suicide Prevention
Enabling Programmes		System Development	Workforce		Digital and Data	Estates and Infra-structure	Finance and Procurement	Communications and Involvement	Research, Innovation & Improvement	Equality, Diversity and Inclusion	Green Plan		Population Health		

# ICS outcomes framework

The framework is available via an interactive dashboard with 'drill down' ability to highlight inequalities and drive local action

It offers of breakdowns of information at three ICS 'tiers' (system, LCP and PCN), two local authority 'tiers', and inequalities (socio-economic, geographic, personal characteristics, clinical factors)

It aligns with other frameworks (NHS, public health, Adult Social Care Outcomes Framework, health and wellbeing board)

Some narrative (qualitative) measures

Ongoing co-design process with strategic commissioning partnership to ensure fitness for purpose

Flexibility in terms of addition of new indicators

## Indicators

Admissions Following Accidental Fall  
 Deaths in usual place of residence  
 Total Carbon Emissions (kt CO2)  
 NHS and LA Attributable Carbon Emissions (kt CO2)  
 Deaths attributable to air pollution  
 Index of Multiple Deprivation  
 Access to Community Facilities  
 Rough sleepers per 1,000 households  
 Average house price to FT salary ratio  
 Households in temp accommodation  
 Supply of key worker housing  
 Fuel poverty  
 One Devon Cost of Living Index  
 Community/Business investment  
 Experience of navigating services  
 Waiting Times  
 Support from local organisations to manage own condition  
 Digital exclusion risk index (DERI)  
 Unified digital infrastructure

Healthy Life Expectancy at birth  
 Gap in Healthy Life Expectancy at birth  
 Under 75 mortality rate from preventable causes (persons <75yrs)  
 Global Burden of Disease: Top 10 Causes (DALYs) and Top 10 Modifiable Risk Factors (DALYs)  
 Children achieving a good level of development at the end of Reception  
 16-17 year olds not in education, employment or training (NEET)  
 Employment of people with mental illness or learning disability  
 Workforce diversity (employment profile vs Devon by EDI characteristics)  
 Uptake/coverage of local authority Carer Support Services  
 Unpaid Carers Quality of Life  
 Carers Social Connectedness  
 MMR vaccine uptake (5 years old)  
 Flu vaccine uptake (at risk individuals)

Covid-19 vaccination rates  
 Children and young people accessing mental health services  
 Coverage of 24/7 crisis MH support  
 Suicide rate  
 Social Prescribing Uptake Rates  
 Access to CYP eating disorders services  
 Avoidable admissions for ambulatory care-sensitive conditions  
 Patient Activation Measures  
 Access to dentists / pharmacy / optometry / primary care  
 Vacancy Rate for ICS Organisations  
 Financial sustainability  
 Unified approach to procurement and commissioning  
 Community empowerment/volunteering

# Governance

- Who is responsible for what – functions and decisions map to follow
- How is the journey going to be managed – system approach to transformation programme management
- Devon operating model
- How we will know it has delivered?

# APPENDICES



**APPENDIX A**  
**Universal NHS commitments**  
**Statutory Duties**

# National NHS objectives 2023/24

To be updated  
when available

Area	Objective
<b>Urgent and emergency care</b>	Improve A&E waiting times so that no less than 76% of patients are seen within 4 hours by March 2024 with further improvement in 2024/25
	Improve category 2 ambulance response times to an average of 30 minutes across 2023/24, with further improvement towards pre-pandemic levels in 2024/25
	Reduce adult general and acute (G&A) bed occupancy to 92% or below
<b>Community health services</b>	Consistently meet or exceed the 70% 2-hour urgent community response (UCR) standard
	Reduce unnecessary GP appointments and improve patient experience by streamlining direct access and setting up local pathways for direct referrals
<b>Primary care</b>	Make it easier for people to contact a GP practice, including by supporting general practice to ensure that everyone who needs an appointment with their GP practice gets one within two weeks and those who contact their practice urgently are assessed the same or next day according to clinical need
	Continue on the trajectory to deliver 50 million more appointments in general practice by the end of March 2024
	Continue to recruit 26,000 Additional Roles Reimbursement Scheme (ARRS) roles by the end of March 2024
	Recover dental activity, improving units of dental activity (UDAs) towards pre-pandemic levels
<b>Elective care</b>	Eliminate waits of over 65 weeks for elective care by March 2024 (except where patients choose to wait longer or in specific specialties)
	Deliver the system- specific activity target (agreed through the operational planning process)
<b>Cancer</b>	Continue to reduce the number of patients waiting over 62 days
	Meet the cancer faster diagnosis standard by March 2024 so that 75% of patients who have been urgently referred by their GP for suspected cancer are diagnosed or have cancer ruled out within 28 days
	Increase the percentage of cancers diagnosed at stages 1 and 2 in line with the 75% early diagnosis ambition by 2028
<b>Diagnostics</b>	Increase the percentage of patients that receive a diagnostic test within six weeks in line with the March 2025 ambition of 95%
	Deliver diagnostic activity levels that support plans to address elective and cancer backlogs and the diagnostic waiting time ambition
<b>Maternity</b>	Make progress towards the national safety ambition to reduce stillbirth, neonatal mortality, maternal mortality and serious intrapartum brain injury
	Increase fill rates against funded establishment for maternity staff
<b>Use of resources</b>	Deliver a balanced net system financial position for 2023/24
<b>Workforce</b>	Improve retention and staff attendance through a systematic focus on all elements of the NHS People Promise
<b>Mental health</b>	Improve access to mental health support for children and young people in line with the national ambition for 345,000 additional individuals aged 0-25 accessing NHS funded services (compared to 2019)
	Increase the number of adults and older adults accessing IAPT treatment
	Achieve a 5% year on year increase in the number of adults and older adults supported by community mental health services
	Work towards eliminating inappropriate adult acute out of area placements
	Recover the dementia diagnosis rate to 66.7%
	Improve access to perinatal mental health services
<b>People with a learning disability and autistic people</b>	Ensure 75% of people aged over 14 on GP learning disability registers receive an annual health check and health action plan by March 2024
	Reduce reliance on inpatient care, while improving the quality of inpatient care, so that by March 2024 no more than 30 adults with a learning disability and/or who are autistic per million adults and no more than 12-15 under 18s with a learning disability and/or who are autistic per million under 18s are cared for in an inpatient unit
<b>Prevention and health inequalities</b>	Increase percentage of patients with hypertension treated to NICE guidance to 77% by March 2024
	Increase the percentage of patients aged between 25 and 84 years with a CVD risk score greater than 20 percent on lipid lowering therapies to 60%
	Continue to address health inequalities and deliver on the Core20PLUS5 approach

# ICB core functions and statutory duties

Our NHS statutory duties	How we will meet our duties
<b>Describe health services the ICB proposes to arrange to meet needs</b>	This Joint Forward Plan broadly describes the health services we have in place, and will arrange, to meet the needs of our population as set out in the Integrated Care Strategy. Each year we also produce an Operating Plan that provides more detail about the planned performance of services.
<b>Duty to promote integration</b>	The Joint Forward Plan is an integrated system-wide plan that encompasses a wide range of programmes that will contribute to improving the health and wellbeing of people living and working in Devon. Each programme describes how system partners are working together to deliver joined up services.
<b>Duty to have regard to wider effect of decisions</b>	The Joint Forward Plan is a system-wide plan to meet the aims and strategic goals set out in the Integrated Care Strategy. The strategy is overseen by the One Devon Partnership which will have the remit to ensure the full consequences of any decisions made are understood
<b>Implementing any JLHWS</b>	There are three Health and Wellbeing Boards in Devon and we have worked closely with all three to ensure that their priorities are reflected in this plan.
<b>Financial duties</b>	The national financial framework sets requires a collective responsibility to not consume more than the agreed share of NHS resources. Slides 37- 42 outline how we plan to achieve system balance.
<b>Duty to improve quality of services</b>	Everybody has the right to feel safe and have confidence in the services provided across Devon. We are committed to securing continuous improvement and will ensure that our services are of appropriate quality and that we have robust mechanisms in place to intervene where quality and safety standards are not being met or are at risk. We have developed robust metrics to measure the impact of the plan through our outcomes framework and have a performance and quality reporting function in place. Our Chief Nursing Officer provides executive leadership for oversight of quality across our system.
<b>Duty to reduce inequalities</b>	One of our system aims is ‘tackling inequalities in outcomes, experience and access’ and two of our strategic goals focus on the top five risk factors and causes of death and disability. A third strategic goals explicitly states that we want ‘everyone to have an equal opportunity to be healthy and well’. To achieve this the delivery programmes outline how they will contribute to reduce inequalities, particularly in relation to Core20PLUS5 and, in line with the 2022 Armed Forces Bill, with regard to serving military personnel, reservists, veterans and their families. To support this work, the Population Health enabler programme has been developed.
<b>Duty to promote involvement of each patient</b>	We are committed to promoting personalised care across all the services we deliver across our organisations. Our approach outlined in the strategic goal ‘People in Devon will be support to stay well at home, through preventative, proactive and personalised care’. Specifically, the Primary and Community Care programme describes how it will use the comprehensive model of personalised care to deliver this ambition.
<b>Duty to involve the public</b>	Our Working with People and Communities Strategy sets out our principles for involving local people. The communications and involvement enabling programme outlines how we will support delivery leads to ensure people and communities are involved in a meaningful way.
<b>Duty to enable patient choice</b>	We support patient choice in our commissioning plans in a number of ways. These include expanding the use of personal budgets through our personalised care commissioning and the use of the Devon Referral Support Service (DRSS), which supports patient choice at the point of referral into secondary care.

# ICB Core Functions and Statutory Duties

Our NHS Statutory Duties	How we will meet our duties
<b>Duty to obtain appropriate advice</b>	We ensure that we obtain appropriate advice throughout the development of plans. This includes from: clinicians (both local and through regional networks), NHSE (regional and national), the South West Clinical Senate and legal advice. Obtaining advice is particularly important to us in our delivery of transformation. Our system approach to delivering the JFP means that relevant partners are included on our Programme Boards and are able to influence and give advice as appropriate, this includes police, housing, education and public health.
<b>Duty to promote innovation</b>	We work closely with the South West Academic Health Science Network to ensure we are cognisant of innovation and best practice. The Research and Innovation enabling programme has been developed to ensure all delivery programmes are supported in the delivery of this duty.
<b>Duty in respect of research</b>	We work closely with the South West Academic Health Science Network to ensure we are cognisant of research and best practice and that we promote research within Devon. The research and innovation enabling programme has been developed to ensure all delivery programmes are supported in the delivery of this duty.
<b>Duty to promote education and training</b>	Our Joint Forward Plan has three strategic goals related to education and training including – school readiness, supporting people to access and stay in employment and ensuring we have people with the right skills within our system. The Children and Young people delivery programme focuses on this whilst the employment and workforce enabling programmes outline how they will support these ambitions.
<b>Duty as to regard to climate change etc</b>	Our Green Plan enabling programme outlines our clear commitment to successfully deliver targets for all local authorities to be carbon neutral by 2030 and the NHS by 2040.
<b>Addressing the particular needs of children and young people</b>	Our plan includes two specific strategic goals on children and young people and the children and young people delivery programme outlines the wide programme of work.
<b>Addressing the particular needs of victims of abuse</b>	<p>Serious violence has a devastating impact on lives of victims and families, instils fear within communities and is extremely costly to society. NHS Devon has a domestic abuse and sexual violence (DASV) strategy that outlines actions to improve the health response to victims and perpetrators who are staff or patients in Devon. Over the last two years much has been achieved (eg: a network of DASV champions, robust DASV policies, commissioning of an Interpersonal Trauma Primary Care service, due to commence in April 2023). Locally, compliance with the Duty will be monitored through the Safeguarding and Vulnerable People Steering Group, which will report quarterly to the Quality and Performance Committee and updates regarding Duty activity will be included in safeguarding reports to the System Quality and Performance Group.</p> <p>The case study on slide 30 shows how the ICS is working collaboratively to progress this important agenda.</p>

# **APPENDIX B**

## **Glossary**

# Glossary (A-C)

Abbreviation	Meaning
A&E	Accident and Emergency
A&G	Advice and Guidance
ABCD	Asset-based-community-development
ACE	Adverse Childhood Experience
ACS	Ambulatory Care Sensitive
A-EQUIP model	Advocating and Educating for Quality Improvement
AHC	Annual Health Checks
AHSN	Academic Health Science Network
AMR	Antimicrobial resistance
ARC	Applied Research Collaboration
ARRS	Additional Roles Reimbursement Scheme
ASC	Adult Social Care
B&B	Bed and Breakfast
BFI	Baby Friendly Initiative
BMI	Body Mass Index
BPTP	Best Practice Timed Pathway
C. diff	Clostridium difficile
C2C	Clinician to Clinician
CAS	Clinical Assessment Service
CFO	Chief Finance Officer
CHC	Continuing Healthcare
CIC	Community Interest Company
CIOS	NHS Cornwall and Isles of Scilly
CIP	Cost Improvement Programme
CLD	Community learning and development
CMO	Chief Medical Officer
COCA	Community onset community associated
Core20PLUS5	The most deprived 20% of the national population PLUS the 5 ICS chosen population groups experiencing poorer than average health access, experience and/or outcomes that may not be captured in the core 20.
CPD	Continued Professional Development
CQC	Care Quality Commission
CRGs	Clinical Referral Guidelines
CRN	Clinical Research Network
CSDS	Community Services Data Set
CT	Computerised tomography
CTR	Care and Treatment review
CUC	Community Urgent Care
CVD	Cardiovascular disease
CYP	Children and Young People

# Glossary (D-I)

Abbreviation	Meaning
DASV	Domestic abuse and sexual violence
DCCR	Devon and Cornwall Care Record
DDR	Dementia Diagnosis Rate
DMBC	Decision-Making Business Case
DNA	Did Not Attend
DOS	Directory of Services
DPT	Devon Partnership NHS Trust
DSR/C(E)TR Policy	Dynamic Support Register (DSR) and Care (Education) and Treatment Review C(E)TR policy
DWP	Department for Work and Pensions
EBI	Evidence-Based Interventions
Ecosia	Search engine that uses the advertising revenue from searches to plant trees
ED	Emergency Department
EDI	Equality, diversity and inclusion
EHCP	Education, health and care plan
EHCS	Emergency Healthcare Plan
EPC	Energy Performance Certificate
ePHR	Electronic Patient Held Record
EPR	Electronic Patient Record
EPRR	Emergency Preparedness, Resilience and Response
EQIA	Equality and Quality Impact Assessment
ERF	Elective Recovery Fund
G&A	General and Acute
GIRFT	Getting it right first time national programme, designed to improve the treatment and care of patients through in-depth review of services
GRAIL	Healthcare company focused on saving lives and improving health by pioneering new technologies for early cancer detection
HbA1C	Haemoglobin A1c (HbA1c) test measures the amount of blood sugar (glucose) attached to your haemoglobin
HCAI	Healthcare associated infections
HEE	Health Education England
HEI	Higher Education Institution
HI	Health Inequalities
HR	Human Resources
HVLC	High Volume Low Complexity
HWB	Health and Wellbeing Board
IAPT	Improving Access to Psychological Therapies
ICB	Integrated Care Board (NHS Devon)
ICP	Integrated Care Partnership (One Devon Partnership)
ICS	Integrated Care System (One Devon)
Immedicare	Telemedicine service providing 24/7 NHS video-enabled clinical support for care homes nationally
IPS	Individual Placement Support
IUCS	Integrated Urgent Care Service

# Glossary (J-N)

Abbreviation	Meaning
JCP	Job Centre Plus
JFP	Joint Forward Plan
JLHWS	Joint Local Health and Wellbeing Strategy
JOY app	Real-time directory and case management tool that enables GPs and other health and social care professionals to easily refer into local services, helping to create a more joined-up system for service users.
JSNA	Joint Strategic needs Assessment
L&D	Learning and Development
LA	Local Authority
LCP	Local Care Partnership
LD	Learning Disability
LDA	Learning Disability and Autism
LDAP	Learning Disabilities and Autistic People
LeDer	Learning from Lives and Deaths (People with a Learning Disability and Autistic People)
LES	Local Enhanced Services
LGBTQ+	Lesbian, gay, bisexual, transgender, queer (sometimes questioning) plus other identities included under the LGBTQ+ umbrella
LIMS	Laboratory Information Management System
LMNS	Local maternity and neonatal system
LOS	Length of Stay
LPA	Local Planning Authorities
LTC	Long term condition
LTP	Long Term Plan
MD	Medical Director
MDT	Multi-disciplinary team
MECC	Making every contact count
MH	Mental Health
MHLDN	Mental Health, Learning Disability and Neurodiversity
MHST	Mental Health Support Teams in Schools model
MIS	Maternity Information System
MMR	Measles, mumps, and rubella
MRI	Magnetic resonance imaging
MRSA	Methicillin-resistant Staphylococcus aureus
MSW	Maternity Support Worker
NCTR	No criteria to reside
NEET	Not in employment, education, or training
NHP	New Hospitals Programme
NHSE	NHS England
NHSEI	NHS England and NHS Improvement
NICE	National Institute for Health and Care Excellence
NOF / NOF4	NHS Oversight Framework / NHS Oversight Framework segment 4
NOS	National Occupational Standards
NPA	National Partnership Agreement



# Glossary (N-S)

Abbreviation	Meaning
NPDA	National Paediatric Diabetes Audit
NSS	Non-site specific
Ofsted	Office for Standards in Education, Children's Services and Skills
ONS	Office for National Statistics
OP	Outpatient
OPFU	Outpatient Follow Up
ORCHA	Organisation for the Review of Care and Health Apps
OSC	Overview and Scrutiny Committee
PACS	Picture Archiving and Communication System
PASP	Peninsular Acute Sustainability Programme
PAU/CAU	Paediatric/Children's assessment unit
PCBC	Pre-Consultation Business Case
PCN	Primary Care Network
PHE	Public Health England
PHM	Population Health Management
PIFU	Patient-Initiated Follow-Up
PS	Property Service
PTL	Patient tracking list
RDUH	Royal Devon University Healthcare NHS Foundation Trust
RII	Research, improvement and innovation
rtCGM	Real time continuous glucose monitoring
RTT	Referral to Treatment
SABA inhalers	Short-acting beta agonists
SAI	School-aged immunisation
SCORE Culture surveys	Anonymous, online tool that can be used to gain insight into a team's safety culture to help the team identify strengths and weaknesses and start to drive genuine improvement
SDEC	Same Day Emergency Care
SEMH	Social Emotional Mental Health
SEN	Special Educational Needs
SEND	Special Educational Needs and Disabilities
SET	Senior Executive Team
SIAG	System Improvement Assurance Group
SIC ODN	Surgery in Children Operational Delivery Network
SLCN	Speech and Language Communication Needs
SLT	Speech and Language Therapist
SMART objectives	Specific; Measurable; Achievable; Realistic; Timebound

# Glossary (S-Z)

Abbreviation	Meaning
SOP	Standard Operating Procedure
SRM	Supplier Relationship Management
SRP	System Recovery Programme
STAMP	Supporting Treatment and Appropriate Medication in Paediatrics
STOMP	Stopping overmedication of people with a learning disability, autism or both
Suicide Safer Communities	<a href="https://www.every-life-matters.org.uk/suicide-safer-communities/">https://www.every-life-matters.org.uk/suicide-safer-communities/</a>
SW	South West
SWAHSN	South West Academic Health Science Network
SWAST	South Western Ambulance Service NHS Foundation Trust
THRIVE	The THRIVE Framework for system change is an integrated, person-centred and needs-led approach to delivering mental health services for children, young people and their families.
TIF	Tech Innovation Framework
TLHC	Targeted Lung Health Check Programme
TSDFT	Torbay and South Devon NHS Foundation Trust
UCR	Urgent Community Response
UDA	Unit of Dental Activity
UEC	Urgent and Emergency Care
UHP	University Hospitals Plymouth NHS Trust
UKHSA	UK Health Security Agency
VBA	Value-Based Approach
VCSE	Voluntary, Community and Social Enterprise
VW	Virtual Ward
WRES	Workforce Race Equality Standard