

One  Devon

# South LCP Neighbourhood Development

27 January 2026

#OneDevon

# National update

# Medium Term Planning Framework

- Over the next 3 years it will return the NHS to much better health by reducing waiting times, access to care restored to levels patients and communities expect, and removal of bureaucracy so savings can be moved to front line services and staff.
- Building on the 10 Year Health Plan it sets out how the NHS can deliver three shifts and sets out ways of working:

Hospital to Community	Sickness to prevention	Analogue to digital
<ul style="list-style-type: none"><li>• Accelerating progress on Neighbourhood Health</li><li>• Same-day appointments for urgent cases in general practice</li><li>• Increasing community service capacity and productivity</li><li>• Greater use of community pharmacy</li><li>• 700k extra urgent dental appointments a year</li></ul>	<ul style="list-style-type: none"><li>• Tackling obesity, including continued rollout of weight loss medicines and weight management services</li><li>• Supporting the target of a 25% reduction in CVD-related premature mortality</li><li>• Implementing opt-out models of tobacco dependency services</li><li>• Reducing antibiotic use and polypharmacy</li></ul>	<ul style="list-style-type: none"><li>• Making full use of the NHS App to communicate with and support patients to better access and manage the care and services they need</li><li>• Using the NHS Federated Data Platform to improve care through better use of data</li><li>• Deploying AI tools like ambient voice technology and digital therapeutics</li></ul>

- Neighbourhood Health is an enabler to support the left shift and see a move from hospital care to community care.

# Ambitions and delivery asks from within the 10YHP

## Ambitions and Delivery Asks

### *Unleashing local potential*

Setting out core new documents:

- *Strategic commissioning framework*
- *Foundation trust framework*
- *Systems archetype blueprint*
- *IHO contracts*

### *Sickness to prevention*

Preventative goals on:

- Tackling obesity
- CVD-related mortality
- Tobacco dependence
- Use of antibiotics, polypharmacy

### *Improving Quality*

- Implementing: (1) Emergency Department Paediatric Early Warning System; (2) Maternity Outcomes Signal System
- Improving quality of All Age Continuing Care

### *Our workforce & leadership*

- In year action on staff survey results
- Use of forthcoming *Management and Leadership Framework*



### *Delivering neighbourhood health*

- Support for general practice where demand is above capacity
- Proactive care for the priority cohorts: those with frailty, living care homes, who are housebound, or PEOLC
- Service utilisation and cost for high priority cohorts

### *Doing digital differently*

- Adopt all existing NHS App capabilities
- Onboard to FDP
- Direct-to-patient comms via NHS Notify
- Deploy AI tools, inc. access models, AVT

### *Patient experience*

- In year actions, with a focus on discharge processes

### *Genomics, life sciences, research*

- Support for clinical trials
- Genomic testing and other clinical functions / services

# Neighbourhoods and Integrated Neighbourhood Teams

- Changes for neighbourhood health should not be seen as a one year programme. 2026/27 should be seen as a preparatory year to help plan and embed some of the change expected further into the delivery of the 10YHP.
- Neighbourhood Health guidance has been written. However, NHSE are unable to confirm when this will be released. Guidance is to be aligned with NHSE, central government and LGA. All three parties need to agree the Neighbourhood Health guidance before it can be released.
- NHSE policy (January 2025) asked systems to focus on specific areas through 2025/26 in preparation for a move to Neighbourhood health as defined in the 10 Year NHS Plan:
  1. Population Health Management
  2. Modern General Practice
  3. Standardising Community Health Services
  4. Neighbourhood Multi-disciplinary teams (MDTs)
  5. Integrated Intermediate Care with a “Home First” approach
  6. Urgent Neighbourhood Services

# Detail from Medium Term Planning Framework

The MTPF subsequently provided more detail about what the NHS contribution to NbH should focus on in 26/27

In implementing neighbourhood health, the immediate focus must be on:

- Improving and tackling unwarranted variation in GP access for the whole population
- Reducing unnecessary non-elective admissions and bed days from high priority cohorts – people who have moderate to severe frailty, people living in a care home, people who are housebound or at the end of life
- Enabling patients requiring planned care to receive specialised support closer to home



To support moving at pace, we will produce:

- A model neighbourhood framework, and a planning framework, co-produced with the Local Government Association and local authority colleagues,
- Model system archetypes,
- Model neighbourhood health centres archetypes



From April 2026, ICBs and relevant NHS providers should:

- Identify GP practices where demand is above capacity and create a plan to help decompress or support to improve access and reduce unwarranted variation
- Ensure an understanding of current and projected total service utilisation and costs for high priority cohorts of those with moderate to severe frailty, living in care homes, housebound or at the end of life
- Create an overall plan to more effectively manage the needs of these high priority cohorts and significantly reduce avoidable unplanned admissions

- Current information relating to Neighbourhood Health (NbH) outlines six foundational steps which will enable systems to deliver MTPF expectations. This will need to be linked to Integrated Care Framework Funding (ICFF, formerly BCF) requirements at Health and Wellbeing Board Level. NHSE (December 2025), wrote to Integrated Care Board and Provider Chief Execs outline the below steps would be the focus areas in preparation of MTPF submissions due 12 February 2026.

The infographic consists of two main sections. The left section is a blue rounded rectangle containing text about MTPF requirements from April 2026. The right section is a larger white rounded rectangle with a blue border containing a list of six foundational steps for NbH.

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(MTPF)

- Foundational steps for NbH:
  - Agreeing Neighbourhood Footprints
  - Reducing Variation in GP Access
  - Improving the Primary - Secondary Interface
  - Implementing Integrated Neighbourhood Teams (INTs)
  - Implementing Non-Elective Plans Across Multiple Neighbourhoods
  - Implementing a Neighbourhood Outpatient Model of Care
  - *These should be planned for with ICFF metrics at HWB level*

- It should be noted “improving the primary and secondary care interface” is broader the primary and acute. This should also include mental health and local authorities.

# National Planning Timelines

- There are a number of interlinked planning submissions which systems are required to submit. These include:
  - Medium Term Planning Framework – **12 February 2026.**
  - Health and Wellbeing Board footprint, Neighbourhood Health Plans and associated ICFF (formerly BCF) submissions – **30 April 2026**
  - Health and Wellbeing Board Neighbourhood Health Plan Operating Plan – **September 2026.**
- The anticipated Neighbourhood Framework and BCF / ICFF guidance has not yet been published. It is expected that one policy framework will be published to include:
  - Neighbourhood Framework
  - Neighbourhood Health Planning guidance
  - Integrated Care Funding Framework Guidance
- This is currently being negotiated between Local Government Association, NHSE and Government.

# Local Development

# Devon Integrated Care System

## NHS Devon plans to support neighbourhood transformation

### Purpose:

- Establish and mature Integrated Neighbourhood Teams (INTs) across Devon
- Strengthen neighbourhood leadership and integration capacity
- Deliver joined-up, preventative care aligned to ICB strategic priorities as set out in the Health & Care Strategy and Commissioning Intentions
- Deliver measurable improvements in health outcomes and experience
- Build sustainable neighbourhood capability and leadership
- Support prevention, proactive care, and reduced hospital attendance
- Embed neighbourhood governance and workforce capability for long-term sustainability

### Core Principles:

- Integration and collaboration across health, care, VCSE, and communities
- Shared leadership and accountability at neighbourhood level
- Development and delivery of INT to be driven through LCPs.
- Development aligned to the six core components of neighbourhood health (NHS England)

## Devon Neighbourhood Development session

- December 2025, a Devonwide Neighbourhoods development session was held with support from NHSE.

### Purpose

- To develop vision(s) for Integrated Neighbourhood Teams (INTs) within and across Devon — drawing on multiple perspectives, preferences and experiences

## Neighbourhood health

Neighbourhood health services will bring care into local communities; convene professionals into patient-centred teams; end fragmentation and shift away from the NHS default of 'one size fits all' care.

"The focus in 2025/26 should be supporting adults, children and young people with complex health and social care needs who require support from multiple services and organisations. This cohort has been estimated at around 7% of the population and associated with around 46% of hospital costs"

### Six core components of neighbourhood health models

- A) Population health management
- B) Modern general practice
- C) Standardising community health services
- D) Neighbourhood multidisciplinary teams
- E) Integrated intermediate care with a 'Home First' approach
- F) Urgent neighbourhood services



# South Local Care Partnership

## Mission statement

### Person centred:

- I know where to go to get the help and information I need to manage my needs and improve my life and wellbeing.
- I only tell my story once and a single place I can get support.
- Whatever my needs are, whether they include MH, LD, Neurodiversity, physical & Social, I am seen as a whole person regardless of my age.

### System/Provider:

- We have a clear vision and strategy which all partners are signed up to and involved.
- We have clear governance which holds our system to account.
- We are jointly brave with resources across organisational boundaries for the benefit of the patient.
- Our services are wrapped around the individual, not by organisation. We are proactive not reactive.
- Our decisions are driven by data (qualitative and quantitative) measures of what is of value.

## Actions to make this happen

### Define neighbourhoods clearly:

- Agree services in scope and resources.
- Start somewhere “good enough” and build from there.
- Map what already exists and assess unmet need.
- Identify what’s missing and who is not currently involved.
- Use neighbourhood-level insight to shape system design.

### Outcomes & Pathways

- Agree shared outcomes across:
  - All ages.
  - Health and care (including Physical & Mental health).
  - Short, medium, and long-term needs.
- Develop shared action plans between services.
- Focus on whole pathways, not isolated interventions.

### Design principle

- Good data informs decisions
- Peer reviews with similar places
- Review tech opportunities