



Norfolk Community
Health and Care
NHS Trust

Annual Summary

2024/25



Welcome to our Annual Summary

2024/25

Our Trust annual summary highlights the excellent work that has taken place across Norfolk Community Health and Care NHS Trust (NCH&C).

During the year, a change of government brought reforms that will shape the future of health and care as the NHS ten-year plan places renewed focus on community services – often referred to as the “left shift”. One of the three shifts outlined in the plan, moving care from hospitals to communities, directly aligns with our vision.

In this summary, we share some brilliant examples of innovation and collaboration. Read on to find out about our new Willow therapy-led rehabilitation centre in Norwich which has been designed to help patients recover and regain their independence.

Our Community Virtual Ward has also made a significant impact in its first full year of operation. It admitted and discharged 1,315 patients, with 79% avoiding hospital admission. This saved more than 4,500 bed days across acute and community hospitals in Norfolk and Waveney and you can read more about this in the summary.

Some of our services still have waiting times that are far too long. We're pleased to report that changes to our wheelchair services are already reducing waiting times. We also have joint approaches with Norfolk County Council to support children and young people with neurodevelopmental needs sooner. Find out more about both of these projects on [pages 20 and 21].

As we look ahead to 2025/26, we're excited about the opportunities and challenges that lie ahead.

One significant development this year was the announcement that NCH&C will form a group with neighbouring community trust, Cambridgeshire Community Services NHS Trust (CCS). This collaboration – the first of its kind in the country – brings together two high-performing trusts. It will enable us to share resources, expertise and best practice, helping us further enhance the care we provide to our communities.

We're excited about the opportunities this brings and look forward to an even brighter future together. Read more about this on [page 24].

We are incredibly proud of our team at NCH&C. Their dedication makes the trust what it is, and we cannot thank them enough for their hard work and ongoing support.

We hope you enjoy learning more about NCH&C and the work we do. We look forward to continuing our journey together – improving the health and wellbeing of our communities.



Signed:

Matthew Winn
Chief Executive
Norfolk Community Health
and Care NHS Trust

Lynda Thomas
Chair, Norfolk Community
Health and Care NHS Trust

Our Trust Strategy 2023/27

The NCH&C Trust Strategy 2023-27 was developed by the Trust Board in close consultation with our leadership teams. We also engaged with external stakeholders to ensure a broad range of perspectives informed our priorities.

**Deepening our
integration with
partners**

**Attracting and
developing brilliant
teams**

**Continually
improving standards
of excellence**

**Advancing our
use of data and
technology**

**Being a
future-focused
organisation**

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Deepening our integration with partners

our delivery focus:

- Preventing health conditions from developing
- Responding quickly to urgent needs
- Delivering more joined-up treatment experiences
- Empowering patients and caregivers to manage conditions at home

Three key operational focus areas have been progressed this year:

**A consistent
community offer**

**Urgent care
services**

**Discharges into
the community**

Please read on for examples of how we're delivering this strategic priority.

Boosting integrated urgent care through the Unscheduled Care Coordination Hub (UCCH)

Based at Reed House in Norwich, the UCCH team has played a key role in transforming urgent and emergency care services in Norfolk and Waveney since its launch.

NCH&C works in partnership with East Coast Community Healthcare (ECCH), Integrated Care 24 (IC24), Norfolk and Waveney Integrated Care Board (ICB), Norfolk County Council (NCC), and East of England Ambulance Service NHS Trust (EEAST) to deliver a collaborative approach to assessing patients on the 999 and 111 call lists.

Many patients assessed by the UCCH require a community response. The ability to move patients into community services increases the likelihood of them receiving appropriate care at home – helping to avoid unnecessary hospital admissions.



Willow Therapy Unit

The opening of the Willow Therapy Unit (WTU) in March 2025 marked a significant milestone for the health and care system in Norfolk and Waveney. The approach to patient care at the WTU is helping to reduce the amount of support people need after discharge.

Designed to support the seamless transition of patients from acute hospitals back into the community, the unit focuses on active, out-of-bed care to reduce the risk of readmission. Simple activities – such as brushing hair, making snacks, and preparing hot drinks – are supported and encouraged to help patients build strength, confidence, and mobility.

Patients also benefit from cutting-edge technology, including interactive projections of scenes onto walls or floors. A device tracks the patient's movements and adjusts the scene in response, enhancing rehabilitation by fully engaging the body.

The unit features unique artwork, designed and installed by local artist Carl Rowe. Carl held a series of workshops with patients, staff, and volunteers to develop the designs. The artwork encourages patients to move around the unit, integrating rehabilitation into the building's design while creating a visually engaging environment for therapy.

Key facts:



The Willow Therapy Unit has significantly contributed to an **increase in Intermediate Care discharges**.



In its first month, the unit had an average length of stay (ALOS) of **18.3 days**, compared to 24.7 days across Intermediate Care Beds.



Patients discharged from the unit are **10% more likely to return to their usual place of residence** than those discharged from other units.

Community Virtual Ward: Keeping patients well at home

The NHS Community Virtual Ward service for Norfolk and Waveney launched on 18 September 2023. The service is provided by NCH&C for patients registered with a GP in Norwich, West Norfolk, or North Norfolk, and by East Coast Community Healthcare (ECCH) in East Norfolk.

Many hospital services can be safely delivered at home. Research shows that recovery is often faster in familiar surroundings, where patients can maintain independence and avoid hospital-related complications.

Virtual ward care is managed by an Advanced Care Practitioner (ACP), working alongside doctors, nurses, and therapists. The service supports patients aged 18 and over with conditions such as respiratory disease, frailty, and heart failure.

Patients in any community setting – including community hospitals, residential care homes, and nursing homes – can be referred. Suitable patients are trained to use a device that sends continuous or intermittent observations to the Community Virtual Ward team. This includes breathing rate, heart rate, and skin temperature. If signs of deterioration are detected, the team receives an alert and contacts the patient to decide on the most appropriate next steps.

Key facts:



1,315 patients admitted and discharged in the first year



79% of patients **avoided admission** to acute or community hospitals



Over **4,500 bed days saved** across acute and community hospitals

Over 600 patients benefit from innovative community physiotherapy events

Norfolk and Waveney Community Musculoskeletal Services (NoW MSK) launched in April 2024 – a ground-breaking collaboration between NCH&C and East Coast Community Healthcare (ECCH) to deliver a unified approach to MSK services across the region.

The joint initiative has improved access and aligned clinical pathways. The service provides a single 'front door' for patients, directing them to the most appropriate team based on location and clinical need.

Patients can self-refer via the NoW MSK website without needing to see a GP first, and can schedule or rebook appointments flexibly.

In February and March 2025, five Community Assessment Days (CADs) were held in Thetford, Lowestoft, Norwich, Long Stratton, and Fakenham. More than 600 patients accessed MSK and physiotherapy care at these events

Held in accessible community venues, the CADs offered tailored assessments with MSK clinicians. Support was also provided by local organisations offering advice on exercise, finance, mental health, and nutrition. Local GPs attended some events to offer general health advice.

These events strengthened cross-team relationships within NoW MSK and across the wider community of organisations involved.

Social care partnership working

NCH&C and Norfolk County Council (NCC) have worked in partnership to deliver adult health and social care across Norfolk and Waveney under a Section 75 (S75) agreement since October 2014. This collaboration is vital to meeting the needs of our communities.

Over the past five years, significant progress has been made in building effective relationships across health and social care. A new S75 agreement will be introduced in 2025, with clear objectives to further support integration at Place and neighbourhood level.

We look forward to continuing this collaborative work to make a positive impact on the lives of those we serve.



Attracting and developing brilliant and fulfilled teams

our delivery focus:

- Looking after our people
- Ensuring everyone feels they belong
- Encouraging personal growth
- Enabling new ways of working



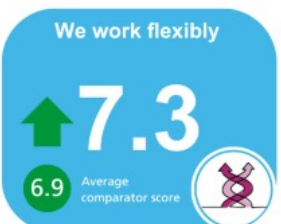
Staff survey results

While we were pleased to see improvements in areas relating to flexible working, we were disappointed to note deterioration across all other themes. The results highlight the need to improve staff experience, including creating more opportunities for staff to influence and improve their working environment.

In response, we will focus on supporting inpatient areas and addressing negative experiences of violence and aggression in the workplace.



NHS Staff Survey 2024: The results



Our top trust priorities

From these results, our two key trust priorities will be supporting inpatient areas, and addressing the negative experiences of violence and aggression in the workplace.



Staff experience

In 2024/25, NCH&C was recognised nationally with the following awards:

- **Employers Network for Equality and Inclusion**
– Talent, Inclusion and Diversity Evaluation Gold Award
- **NHS England** – Work Experience Quality Standard Bronze Award
- **Carers Friendly Tick Employers Award** – Outstanding rating
- **Defence Employer Recognition Scheme** – Silver Award

Key facts:

31

New **Mental Health First Aiders** trained

16

Existing Mental Health First Aiders completed **their three-year refresher**

140

Mental Health First Aiders supported through **group supervision**

Growing our future workforce

Growing our own talent to deliver high-quality patient care in the community is essential. We've taken this back to the grassroots, completing a full review of our work experience offer. This included NHS benchmarking and external input, resulting in the NHS England Work Experience Standard Bronze Award.

Key facts:

51

Colleagues started **new apprenticeships** at NCH&C (10 recruited externally)

46

Apprentices successfully **completed** their programme

13

Attended a new **summer work experience** programme

38

Staff received one-to-one **interview skills** sessions



Our career development team attended **34 events** and engaged with **854** students and parents about careers at NCH&C and in the wider NHS

3

3 Non-Clinical T Level students on placement in January 2024; 3 Clinical T Level students on placement in September 2024



£17,800 invested in CPD for staff since April 2024

Continually improving standards of excellence

our delivery focus:

- Supporting people to advance their clinical capability
- Creating a quality improvement culture
- Keeping patient experience and safety a top priority
- Prioritising action in our most challenged services

The two focus areas in the year were Palliative Care Transformation, and support to our most challenged services.



Palliative and End of Life Care (PEOLC)

Staff workshops and patient feedback have helped the PEOLC project group identify ways to improve support for patients living with life-limiting illness at home.

Service development is also underway at Priscilla Bacon Lodge (PBL) following the move into the new hospice. We continue to strengthen our collaboration with Priscilla Bacon Hospice Charity (PBHC).

We're working with system partners across acute and voluntary sectors to deliver a patient-focused palliative service and have continued to provide additional community healthcare beds.



Better For All

Our Community Nursing and Therapy teams are facing increasing challenges, leading to high numbers of unallocated visits and deferrals across all Places.

In response, NCH&C launched the Better For All redesign programme in 2024. Using a data-led approach, the programme identified the drivers of unallocated visits and aims to create a sustainable model that uses digital innovation to improve care quality.

Key facts:



A single **SystemOne** unit designed and built for rollout in 2025-26 to support streamlined care



Tissue Viability team expanded; wound care pathway action plan in development for 2025/26



Specialist Diabetes Team expanded following successful pilots; now reviewing patients at home across all Places, supporting insulin management

Wheelchair Service

The Wheelchair Service has faced significant challenges over the years. In 2024, we developed a business case to address critical issues affecting the service.

Key drivers for this included:

Patient safety:

Mitigating risks associated with delays in equipment provision.

Staff retention:

High turnover rates impacting service continuity.

Budgetary pressures:

Escalating costs and inefficiencies.

High levels of complaints:

Indicating patient dissatisfaction and service shortfalls.

In January 2024, the service had a caseload of 1,313 patients. Through targeted transformation efforts, this was reduced to 948 by January 2025. This progress was achieved through a series of strategic initiatives:

1. Smarter working

Issuing basic equipment directly to low-risk patients, enabling quicker resolutions and reducing backlog

2. Team development

Expanding the team's skill mix to improve efficiency and staff retention

3. Process review

Streamlining workflows to eliminate inefficiencies

4. Supplier collaboration

Partnering with suppliers to run independent clinics, improving service delivery and accessibility

5. Administrative upskilling

Training admin staff to better support the patient pathway and reduce clinical burdens

We also held patient engagement events to share service improvements and gather feedback. Attendees met our re-enablement teams and spoke with organisations including The Build Charity, Limbless Association, MND Association, Limb Power, Steel Bones, and Opcare.

Neurodevelopmental Service (NDS)

Our NDS assesses children and young people up to age 18 where there are concerns about possible neurodevelopmental disorders such as Autism Spectrum Disorder (ASD) and/or Attention Deficit Hyperactivity Disorder (ADHD).

There are currently over 7,000 children waiting for assessment, and this number continues to rise. Significant system and referral pathway transformation is urgently needed.

In 2024/25, we renewed our focus on Children's Services to slow caseload growth. This included launching a new operating model and leadership changes that brought fresh perspectives to service delivery.

The NCH&C team has joined with colleagues from our new Group partner, Cambridgeshire Community Services NHS Trust (CCS

Key facts:



Launch of a **digital referral form** to reduce admin time and ensure complete supporting evidence



Development of a co-produced **digital resource library** for families and professionals



Rollout of new **one-day assessment clinics** for children and young people

Advancing our use of data and technology

our delivery focus:

- Developing digital solutions that enable more services at home
- Providing high-quality data analysis and reporting
- Enabling joined-up systems and data with colleagues and partners
- Optimising our digital capabilities to drive efficiencies

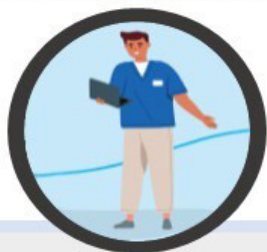
A new digital strategy has been agreed, and a Group Chief information Officer has been appointed to the Group Board.



What does it mean for me?

A new 10-year NHS plan for England is underway and will highlight a shift towards increased community care, making better use of technology, and focusing on preventative care.

This digital strategy will deliver the following benefits:



Staff

- Timely provision of the appropriate kit to do your job
- Greater visibility of patient records within the electronic patient record, (SystemOne), and the Norfolk & Waveney Shared Care Record
- Improved, seamless Microsoft Teams experience between partner organisations
- The right digital tools, supporting more clinical time to care
- Data insights to aid future planning and move toward preventative care



Patients

- Your care and experience will improve, by aiding clinicians with supporting technology
- By improving our communications, you will be informed when visits are scheduled or changed
- By being more digitally inclusive, you will be provided the ability to book appointments via app and online services
- Access to your community health data via the NHS app
- Care provided within your own home through an expansion of virtual wards and remote monitoring technology



Partners

- Standardised and faster digitised referral process
- Working closely together with Norfolk County Council and other organisations to identify digitally inclusive and integrated service opportunities in areas such as, Neuro Developmental Service and Children's and Young People's mental health services
- Providing services to Norfolk and Waveney partners, for example seamless connectivity and support to Primary Care
- Improve patient pathways and shared digital solutions emerging from the new Acute hospital electronic patient record system

Being a future-focussed organisation

our delivery focus:

- Ensuring we have the resources for current and future needs
- Minimising our impact on the environment
- Using evidence to continually evolve how we work
- Nurturing proactive leaders at all levels





NCH&C has delivered its financial plan for 2024/25

Financial performance

Surplus position, in line with plan. Despite rising activity and cost pressures, we achieved a small financial surplus of £1.6m, in line with our plan. This surplus was used to support the financial position of the Norfolk and Waveney Integrated Care System.

Our revenue increased by 10% (£17m) over the previous year, entirely due to increased funding for direct patient care. This includes an additional £8m for the new Willow Therapy Unit.

The number of staff delivering care increased during 2024/25, with an increase of 144 (6%) average whole time equivalents. Most of this increase was for the Willow Therapy Unit. Extra staff also enabled the Trust to open more inpatient beds during times of high need in the Norfolk system.

A Greener NCH&C

As an NHS organisation and a spender of public funds, we are contractually obligated (under NHS Standard Service Conditions) to operate in a way that positively impacts the communities we serve. Sustainability means spending public money wisely, using natural resources efficiently, and building healthy, resilient communities.



Strengthening care across our communities by Building Trust

In July 2024, NCH&C and Cambridgeshire Community Services NHS Trust (CCS) announced the creation of a new Group structure. The aim is to become one new NHS Trust by April 2026.

While we remain legally separate organisations, we are already working as a Group in every other way. Over the coming months, we will begin to unify systems, processes, policies, and ways of working.

This is the first time two high-performing organisations have joined in this way. We believe this will help us deliver the best community care in the NHS.

Forming a Group will make us stronger and more resilient, better able to meet challenges and focus on patient needs. Cost efficiencies – such as improved buying power – will allow us to invest more in care.

Having a stronger, unified voice will also ensure patient interests are well represented in policy discussions and service planning.

Find out more about our Group model on the Building Trust website: <https://www.nhsbuildingtrust.info/>

Three key reasons for coming together:

1 Meeting growing demand

Operating at a larger scale will help us design and deliver the best community health and care

2 Improving equity

A radical approach to equitable health outcomes requires the combined skills, talents, and infrastructure of both organisations

3 Increasing efficiency

As relatively small providers, working together allows us to reduce duplication and streamline systems, enabling tailored services for those who need them



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