

Appendix 1 – Our achievements over the last 12 months

This section provides a review of what we said we would do over the 12-month period from April 2024 to March 2025 and what we have done. It also indicates those streams of work that we will carry forward (C/F) into 2025/26.



Priority 1: Finance & Resource Allocation

Progress Key: ✓ Met > Working Towards ✗ Not Met

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Efficiency, Productivity and short-term savings			
Objective 1 Deep Dive into current spend Review all areas of spend as part of our financial position	✓	An infographic document was developed to provide a breakdown of Income and Expenditure. Contracts continue to be reviewed by the ICB as business as usual. The ICB Finance Committee are cited on any proposed actions from completion of this work.	No
Objective 2 Opportunities through Joint Commissioning Arrangements Review of joint funding arrangements and explore opportunities to spend more effectively	>	Work has commenced to review Joint Commissioning Arrangements. This has mainly been focussed on the Better Care Fund. A Joint Audit is being completed by BDO (ICB Auditors) and South West Audit Partnership (Somerset Council Auditors). Any recommendations will be reviewed, agreed and implemented to ensure that any potential opportunities through joint commissioning arrangements are identified.	Yes
Objective 3 Elective Care Commissioning Strategy Develop elective care commissioning strategy	>	Scoping of the vision for the Elective Care Commissioning Strategy has been completed. A detailed timeline is being developed to determine when public engagement will take place to identify a set of priorities for delivery over the next 5 years.	Yes
Objective 4 Referral Pathway for elective care Review current pathways for elective care to ensure they are as effective as possible	✓	This objective is now being completed as part of the development of the Elective Care Commissioning Strategy.	No
Objective 5 Evaluation of last three years new initiatives Evaluation of last three years initiatives to estimate Return on Investment (ROI), value added and consider future commissioning of these initiatives	✓	Initial evaluation of new initiatives that have been invested in over the last three years has been completed. Further work has taken place to identify any initiatives that have not achieved the expected ROI or value added. Actions will be identified with any potential savings to be quantified and agreed.	No
Objective 6 Reducing Variation in Healthcare	✗	It was agreed that work on this Objective will be managed through normal business and not part of this programme.	No
Objective 7 Fragile Pathways Review services to consider whether these can be reconfigured or alternative commissioning solutions can be found	✗	It was agreed that work on this Objective will be picked up as part of future considerations of the Clinical Pathway Redesign work that is planned to take place.	No

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Efficiency, Productivity and short-term savings			
Objective 8 Frailty <ul style="list-style-type: none"> Organise and consolidate current initiatives, models and pilots Professional/clinical conversation about shared decision making, personalised care, person centred care etc. 	✗	It was agreed that this work should be considered as part of Priority 4 – Integrated Neighbourhood Working.	No
Objective 9 Review additional funding through Service Development Funding	✓	Target saving has been achieved by reviewing any additional funding through Service Development funding.	No
Objective 10 Review additional funding received in-year	✓	Additional funding has been received in-year to achieve the target saving for 2024/25.	No
Objective 11 Hybrid Closed Loop Business Case	✓	A Business Case has been developed for implementation of Hybrid Closed Loop technology within Diabetes care. This Business Case has been reviewed and approved in principle by System (Double Lock process) and the required financials have been signed-off by the System Finance Group.	No
Objective 12 Weight Management Pathway	✓	A Business Case/Proposal has been developed for a weight management service that meets the national specification for wraparound care for Tirzepatide and integrates with local demedicalised/community/neighbourhoods level weight management interventions. This Business Case will be reviewed and considered for approval as required.	No
Learning Disability & Brain Injuries			
Objective 13 Learning Disability and Acquired Brain Injury placements Review of patients who are out of county with a view to considering placements in Somerset	✓	A Complex Care Nurse was recruited within the Continuing Health Care (CHC) Team in June 2024. Review has taken place of all Learning Disability and Acquired Brain Injury placements both in and out of county, and where appropriate alternative placements or alternative care packages have been identified. A pro-active approach to future placements has been developed to ensure that the Somerset Health system are paying the right amount for any appropriate placements identified.	No
Objective 14 Individuals placed by systems outside of Somerset into Somerset Nursing Homes Review of Funded Nursing Care (FNC) and Continuing Health Care (CHC) costs for individuals placed by systems outside of Somerset into Somerset Nursing Homes	✓	A Register of placements made in Somerset by systems outside of Somerset has been developed to record both the Funded Nursing Care (FNC) and Continuing Health Care (CHC) costs of the individuals placed. This is monitored by the ICB Finance team. At the current time there is no way of reclaiming the cost of these placements, but the register will enable a quick reference point for the additional cost pressure to the Somerset system.	No
Objective 15 Neuro Rehabilitation Service Review neuro rehabilitation services and development of new pathway	➤	Engagement exercise and analysis of feedback completed. Financial baseline and Integrated Impact Assessment Report to be completed and shared with ICB Management Board to seek approval to further explore potential options for service.	Yes

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Productive Care Programme			
Objective 16 Further Faster Programme Identify opportunities within specialties for optimising outpatient efficiency under the 'Further Faster' programme	✓	Key metrics such as DNA rates, virtual appointment rates, PIFU and follow-up rates, and clinic utilisation have been collated for each specialty and shared with Service Managers. Data has been compared with peers using Model Hospital to identify areas with greatest potential opportunity. Further Faster checklists have been developed for completion by Service Managers as a self assessment.	No
Objective 17 Theatre Utilisation Increase capped theatre utilisation rates to the national target of 85% and increase theatre session utilisation to 95% on both sites	✓	100 day improvement programme completed focusing on 1) 85% capped utilisation in MPH Day Surgery Centre 2) 85% capped utilisation in YDH Day Surgery Centre and 3) 85% capped utilisation across all YDH theatres for General Surgery and Colorectal. Monthly meetings have been set up to provide opportunity for monitoring/oversight/challenge. Due to work completed, now consistently achieving above 80% theatre session utilisation.	No
Objective 18 Day-case rates/Right Procedure Right Place Increase the range of procedures undertaken as a day-case and the range of procedures undertaken as an outpatient procedure	✓	Development of YDH procedure room, Ortho forefoot (Inpatient to Day Surgery Centre) and Transurethral Resection of the Prostate (TURPs). Review of day case procedures against national target has been completed. Some focussed attention of Gynae and Urology procedures has taken place.	No
Objective 19 Maximising delivery against the Elective Care Recovery Fund Accelerate delivery of elective activity in line with operational plan to maximise the delivery against the national elective care recovery fund	>	Total 2024/25 Elective Care Recovery Fund performance is forecasted to plan to achieve the targeted additional Income required.	Yes
Objective 20 Agency Reduction Reduce the cost of agency used and eliminate all off framework agency by 1 July	>	Total Agency spend for 2024/25 is forecasted to be £6.8m below plan achieving the target set.	Yes
Objective 21 Ready to Go Wards Close two temporary wards (ready to go wards)	✓	The two temporary Ready to Go Wards were closed as planned to achieve the identified target saving.	No
Workforce			
Objective 22 ICB Running Cost Reduction Reduction in ICB running cost allowance of 20%	✓	Work has taken place during 2024/25 to achieve a 20% reduction in ICB running costs. The anticipated savings target has been achieved. In 2025/26 work will take place to identify a further 10% reduction in ICB running costs.	No
Objective 23 Review of support functions to Somerset ICB	✓	Discussions have taken place to review the current contract with NHS South, Central and West Commissioning Support Unit (NHS SCWCSU) and negotiate any potential savings to contribute towards the savings target.	No

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Workforce			
Objective 24 One Public Estate Review of estates options across the system and consider consolidation	>	Work has started on developing One Public Estate for NHS and Somerset Council services. Initial focus has been on estates occupied by NHS or Somerset Council services in Taunton, Yeovil, Chard and Shepton Mallet. Options appraisals for each of these areas will be developed to outline potential opportunities for the future state including identification of spare capacity for potential disposal.	Yes
Objective 25 Oversight of s106 projects and development	✓	Meetings have taken place with Somerset Council's Planning team to establish a new relationship and discuss the Section 106 agreement process. A representative from ICB will be attending Local Planning Authority engagement meetings that take place quarterly to better understand how the ICB can influence this process.	No
Local Autonomy			
Objective 26 ICS Priorities Ensure focus is maintained on our priorities and implement national strategies where they add value to our priorities	✓	The Somerset System Triple Lock process has been developed and approved by the Directors of Finance and ICB Finance Committee. This process has been implemented with the first Triple Lock – Expenditure Proposal Panel taking place in June 2024.	No
Objective 27 Decision Making Faster decision making to support delivery of a balanced financial plan	✓		No

Priority 2: Workforce

Progress Key: ✓ Met > Working Towards ✗ Not Met

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 1 Co-develop a collaborative approach to International Recruitment to ensure ethical and cost-effective supply routes	✗	No longer being pursued	No
Objective 2 Scope the development of a health and social care workforce brand identity to support attraction and onboarding (in Somerset and with regional teams)	✗	No longer being pursued	No
Objective 3 Work alongside educator-providers to plan and expand the number of student/education placements; and post registration pathways aligned to workforce planning & LTWP targets Identify new qualification opportunities.	>	Trailblazer plot for educator workforce strategy Agreement to deliver local programmes for paramedics, Occupational Therapists (OT), Operating Department Practitioners (ODP) and Youth Work to meet workforce challenges in these areas Workforce supply Optioneering workshops completed for system-wide physiotherapy, occupational therapy and midwifery professions/services	Yes
Objective 4 Expand enhanced, advanced and associate roles aligned to clear career pathways.	>	Expanded number of Advanced Practitioner roles	Yes

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Workforce			
Objective 5 Expand apprenticeship and degree routes to entry for ODP and Midwifery	✘	Duplicate action with Objective 3	No
Objective 6 Renew the Staff Experience, Belonging and Retention Strategy action plan by: <ul style="list-style-type: none"> reviewing & evaluating the effectiveness of system-wide programmes define actions for the 24-27 retention strategy 	>	System-wide programmes evaluated System-wide retention programme in flight	Yes
Objective 7 Develop a System Leadership offer, focused on: <ul style="list-style-type: none"> 'system by default' mindset and culture to grow tested through the Somerset Leadership Academy to include JFP themes such as integrated neighbourhood team development Inclusion and Equality themes Test elements of the System Development offer with system partners	>	System Leadership Offer developed with some implementation Integration of leadership and workforce training within the Integrated Neighbourhood Working programme	Yes
Objective 8 Design a coordinated system approach to work experience within schools (primary/secondary), linked to brand work. (aka Widening Participation)	✘	Not developed in 24/25 as a system approach due to capacity	Yes
Objective 9 Scope the Digital Workforce requirements that support: <ul style="list-style-type: none"> Improved workforce productivity through process & service redesign Delivery of tech enabled care 	>	Workforce elements now included within ICS Digital Strategy roadmap – first collective focus will be on equipping our workforce in using AI tools (e.g. CoPilot) to enhance productivity without compromising quality Tech enabled care included in scope as part of the innovation workstream of the Somerset Health and Care Academy Commitment to implementation of Digital Staff Passport for postgraduate doctors in training in collaboration with colleagues in the Bristol area	Yes
Objective 10 Workforce 2035 (scenario planning) Scope the implementation of the outputs from the work.	✓	Workforce 2035: Future capabilities assessment completed and output report received	Yes
Objective 11 Progress the development of the Bridgewater site into a Somerset Health and Care Academy to support the development of our 'One Workforce' vision. Deliver a sustainable operating model within the Seahorse Centre, Minehead	>	Programme delivery mobilised and programme on track 270 people engaged to support operating model and training curriculum development Joint (Executive) Academy Board developed to provide further rigour around programme governance	Yes

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Workforce			
Objective 12 Work and Health programme Support the development of the Workwell needs assessment.	>	£178k funding received from OHID to develop Workwell implementation plan & leadership capacity to deliver programme 7 providers commissioned to pilot employment support	Yes
Objective 13 Keyworker Housing business case and operating model (links to regional NHSE teams).	✓	Established Keyworker Housing Hub steering group 2-year funding for Housing Hub resource identified & role agreed to be hosted by Somerset Citizen's Advice Bureau to take project into next phase	Yes
Objective 14 Co-design system Equality, Equity and Inclusion Plan with system partners & start implementation of year 1 actions.	>	Equality, Diversity and Inclusion and Recruitment (EDIR) Train the Training programme completed with identified EDIR representatives now in place across the system sharing best practice	Yes

Priority 3: System Flow

Progress Key: ✓ Met > Working Towards ✗ Not Met

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 1 Right size Pathway 1 capacity – achieving an increase in pathway 1 new starts.	>	The number of people accessing the pathway 1 intermediate care reablement service ('new starts') have increased from 49 per week to 70 per week in 2024/25. We will continue to work on this objective in 2025/26 to achieve further increase. Currently pathway 1 reablement is only accessible to people after hospital stay. In 2025/26 we plan to increase pathway 1 new starts further so that people who are living at home and require reablement to access the service and regain independence.	Yes
Objective 2 Establish clear metrics and reporting to track flow	✓	In 2024/25 we have seen the creation of a weekly data report that tracks metrics relating to hospital discharges, both from acute and intermediate care (community hospitals and care homes). This report provides us with data insights at locality level. We will use these data insights to influence change and track system flow improvements in 2025/26 and beyond.	No
Objective 3 Establish financial management and governance arrangements for intermediate care services.	✓	In 2024/25 the Intermediate Care Steering Group and Joint Commissioning Steering Group were established to support improved financial management and governance for intermediate care services.	No
Objective 4 Clarify roles and responsibilities across the service and ensure good operational delivery against clear deliverables.	✓	Restructures in both the ICB and Somerset Council took place in 2024/25, helping to clarify roles and responsibilities across the service. Clear deliverables have been outlined within the System Flow Priority Programme, making deliverables more clearly understood. Improved data tracking now supports monitoring against the deliverables.	No

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 5 Establish an effective transfer of care hub operating model	>	A revised transfer of care operating model was designed and implemented in 2024/25. Continued optimisation and monitoring of this new model with continue throughout 2025/26.	Yes
Objective 6 Optimise flow and effectiveness within intermediate care beds. Establish the future intermediate care bed requirements and distribution across Somerset.	>	Established Keyworker Housing Hub steering group 2-year funding for Housing Hub resource identified & role agreed to be hosted by Somerset Citizen's Advice Bureau to take project into next phase	Yes
Objective 7 Mental Health discharges	✓	Delays in Mental Health inpatient units have reduced significantly.	No
Objective 8 Pathway 3 – creating a dedicated bed base that supports people to remain in the care home if they are assessed as requiring long term care home placement.	>	In 2024/25 a Pathway 3 model was tested in South Somerset, supporting people who are discharged from Yeovil Hospital. In 2025/26 review of this test will be concluded, with the intention of expanding the model county wide. (subject to success of the test).	Yes
Objective 9 Hospital discharge planning	>	Improved data insights gathered in 2024/25 has identified further opportunities within the hospital settings to reduce No Criteria to Reside levels in Somerset.	Yes

Priority 4: Integrated Neighbourhood Working

Progress Key: ✓ Met > Working Towards ✗ Not Met

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 1 Co-create a clear system vision and framework for the development of Integrated Neighbourhood Teams in Somerset.	✓	A clear system vision and framework of principles for integrated neighbourhood working has been developed.	No
Objective 2 Clarify the outcomes that this work aims to achieve – develop a small set of measures, together with some counter measures to assess success and baseline of current performance.	✓	Two overarching outcomes to be delivered through integrated neighbourhood working have been developed.	No
Objective 3 Undertake a stocktake of current service provision and spend by Primary Care Network	✓	An initial stocktake of current service provision and spend has been completed and will be taken forward in relevant workstreams.	No
Objective 4 Review the existing national and system wide programmes of work that are underway across Primary Care Networks – consider consolidation and streamlining.	✓	An initial stocktake of current service provision and spend has been completed and will be taken forward in relevant workstreams.	No
Objective 5 Undertake a stocktake of current ARRS spend by Primary Care Network.	✓	A stocktake of ARRS spend by Primary Care Networks has been undertaken.	No

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 6 Engage with the national programme, supporting the roll out of the Fuller Stocktake recommendations.	>	Two Somerset PCNs are taking part in the national PCN pilot programme led by Claire Fuller.	Yes
Objective 7 Assess Readiness of each Locality/ Neighbourhood for Integrated Neighbourhood Working.	>	Building upon the stocktake of current service provision and spend by Primary Care Network a maturity matrix and neighbourhood support package will be developed to assess and improve progress towards Integrated Neighbourhood Working Objectives.	Yes
Objective 8 Develop evaluation methodology for existing Integrated Neighbourhood Working approaches in Somerset.	>	Evaluation methodology is in development for existing and future Integrated Neighbourhood Working approaches in Somerset.	Yes
Objective 9 Review and align the digital neighbourhoods programme to ensure roll out and support to this wider programme of work. The programme embraces the rollout of BRAVE AI, SiDeR+ and other digital, data and technology innovations enabling right care at the right time.	>	Progress has been made against objective and will continue into 2025/26 in line with neighbourhood developments.	Yes
Objective 10 BRAVE AI Rollout - Continue the roll out and develop the risk stratification tool BRAVE AI to Somerset's 13 PCNs who, at present, are at varying stages of roll out.	>	Progress has been made against objective and will continue into 2025/26 in line with neighbourhood developments.	Yes
Objective 11 Identify workforce supply & OD needs, skills and capability gaps, and potential for new roles with different skills/competency mix.	>	Initial workforce supply identification within PCN roles has been undertaken. Continued focus will be given within the neighbourhoods OD programme in 2025/26.	Yes
Objective 12 Implement the Team Coaching programme in West Somerset as a test and learn pilot.	✓	Pilot programme implemented and learning taken within OD programme to consider roll-out.	No

Priority 5: Population Health Transformation

Progress Key: ✓ Met > Working Towards ✗ Not Met

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 1 – Strengthening workforce Formalise Healthcare Inequalities Network as a Community of Practice <ul style="list-style-type: none"> • Develop a local Health Inequalities toolkit • Develop NHS Ambassador Programme focussing on inequalities 	✓	A Health Inequalities Network has developed as a community of practice and health inequalities toolkit developed. The NHS ambassador programme has rolled out across Somerset with a focus on CORE20PLUS5 and inequalities.	Yes
Objective 2 – Data & Evidence <ul style="list-style-type: none"> • Development of local Health Inequalities Dashboard including Core 20+5 metrics • Improve recording of ethnicity data • Development of PCN Data profiles to inform priority areas for Population Health Management and PCN Inequalities plans 	>	A local health inequalities dashboard has been produced and is subject to ongoing development. PCN data profiles have been produced and continued improvement work is underway to improve the recording of ethnicity data.	Yes
Objective 3 – Tackling Specific Inequalities <ul style="list-style-type: none"> • Continue to develop SFT Inequalities focused Elective Care Recovery • Completion of Core 20+ 5 Connectors Project (COPD) • Evaluation of Homeless Health programme and development into Inclusive Health Programme 	✓	Homeless health programme evaluation has been completed and SFT inequalities focused elective care recovery developed.	No
Objective 4 – Alignment with the Integrated Neighbourhood Working priority <ul style="list-style-type: none"> • Support the development of work focused on improving health and tackling healthcare inequalities, including utilisation of BRAVE AI • Support the development of 18 Local Community Networks • Develop a system-wide approach to engagement with groups who experience inequalities 	>	The general practice funding formula has been amended to differentially invest in practices that have a higher level of inequality. Focus has been given within PCNs to tackling inequalities through proactive care using BRAIVE AI. Continued engagement work and focus on health inequalities and population health within integrated neighbourhood working will take place in 2025/26.	Yes
Objective 5 – Development of Population Health Culture <ul style="list-style-type: none"> • Launch of a public and population health training academy • Development of NHS Population Health Ambassador Programme, starting with social prescribers and AHPs • Inclusion of Population Health Management and inequalities into ICB organisational development programme • Development of joint approach to health information, engagement and campaigns for staff and public 	>	Development of a population health culture is underway with a joint approach to health information, engagement and campaigns for staff and the public as demonstrated in the ‘take the pressure off’ campaign. This will continue to 2025/26.	Yes

What we said we would do (April 2024 – March 2025)	Progress	What we have done	C/F to 2025/26
Objective 6 – Deliver 3 priority population Health programmes: <ul style="list-style-type: none"> • ‘Take the Pressure Off’ campaign to case-find and optimise treatment for individuals with hypertension. • Continued development of AI Fatty Liver Case Finding programme • Development of system-wide campaign to achieve smoke free by 2030 	>	Hypertension optimisation programme rolled out and significant progress made. Smoking and hypertension focus will continue to 2025-26.	Yes
Objective 7 – Delivering data and intelligence <ul style="list-style-type: none"> • Scoping and commissioning of cloud-based integrated data lake • Development of Data & Information Sharing governance for integrated cloud data lake • Agreement and development of Joint Intelligence Function for Somerset 	>	Research and development has been undertaken for population health data solutions which is progressing and will continue into 2025-26.	Yes
Objective 8 – Launch approach to commissioning Primary care services weighted towards inequalities <ul style="list-style-type: none"> • Build health improvement and tackling healthcare inequalities into financial processes and performance monitoring • Evaluation of the business cases funded by the health inequalities funding • Development of a local strategy for the movement of resources across the Somerset System • Expansion of Transformation Programme Capacity 	✓	The general practice funding formula has been amended to differentially invest in practices that have a higher level of inequality. Business case evaluation has taken place, transformation programme capacity expanded and an ongoing development of strategy for the movement of resources will continue within the integrated neighbourhood working priority area.	No