



Improving lives **together**

Norfolk and Waveney Integrated Care System

Primary Care Workforce Strategy 2024-2027

Norfolk and Waveney Integrated Care System (ICS)

Executive summary

- The NHS is facing the biggest workforce challenge to date, and this has never been truer for primary care. Nationally, all primary care services are facing ever greater challenges due to workforce shortages, aging workforce demographic, an increasingly complex workload, rising public expectations, and working alongside multiple health and care providers as part of an Integrated Care System (ICS).
- The vision described in the [Fuller Report](#) is for a fully integrated primary care, incorporating the four pillars: general practice, community pharmacy, dentistry, and optometry, across all systems. At the heart of this report is a vision for integrating primary care, improving the access, experience and outcomes for our communities.
- There are currently 452 primary care independent providers across Norfolk and Waveney (N&W). These services provide the first point of contact in the healthcare system, acting as the “front door” of the NHS and increasing interface impacted by extended hospital waiting times.
- The [NHS Long Term Workforce plan](#) clearly sets out the aspirations for the workforce going forward to enable individuals to develop and progress in roles, with a clear focus on Train, Retain and Reform. We will work collaboratively with system partners to integrate and align relevant system plans and strategies, fully reflecting the specifics skills and education needs of our primary care workforce.
- The Norfolk and Waveney operational delivery plan sets out each of the primary care sectors workforce programmes, per annum. This operational delivery plan is dynamic as it reflects and responds to the workforce profile of primary care teams, recognising the important of growing our own, attracting talented individuals, and supporting people to remain in our workforce across the system.



Workforce challenges

- Norfolk and Waveney (N&W) faces constraints to recruitment across all professional groups due to our unique geography.
- The ageing population profile across N&W impacts on increased patient/client needs and the availability of workforce to deliver care.
- Given the existing vacancies and the reliance of locum and short cover support, recruiting substantive staff is hugely important. This education strategy supports individuals to develop and progress into new roles, supporting recruitment.
- We have seen a significant reduction in numbers of learners applying for courses and universities.
- There is no dental school within the eastern region, limiting recruitment opportunities across the system.
- N&W primary care workforce leavers rates, which includes those moving out of the N&W system or leaving the NHS entirely are shown below:
 - General Practitioner's leavers rate is 6.3%* which equates to a loss of 40.8 WTE. This has been a significant improvement in the last 12 months , and places Norfolk and Waveney fourth in the country for GP retention.
 - Dentistry leaving N&W current rate is 8.5% which equates to a loss of 35 WTE.
 - Optometry leavers rate is not known as this data has not been published by NHSE.
 - Community Pharmacy leavers rate is not known as this data has not been published by NHSE.
- Limited funding streams for workforce retention and education pathways in primary care sectors.
- Our workforce challenges are not new. However, the scale of our challenge is increasing. No single provider can resolve this issue alone. It requires all partners within the system to collaborate and work through current and future challenges together to meet aspirations of the 'NHS Long-Term Workforce Plan' for N&W.

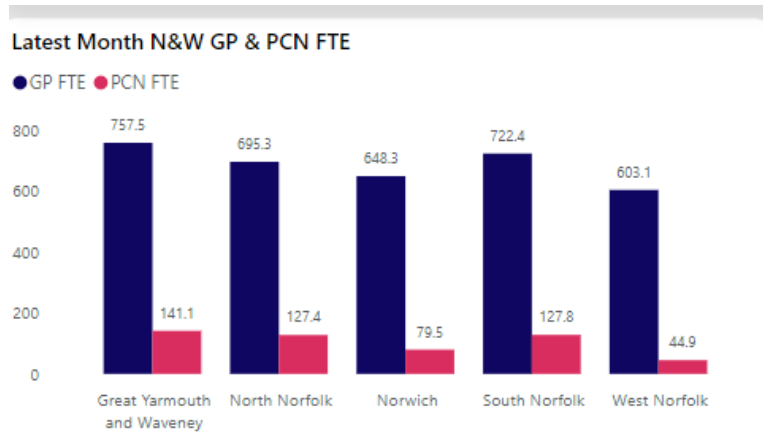
* Timeline December 2022 to December 2023



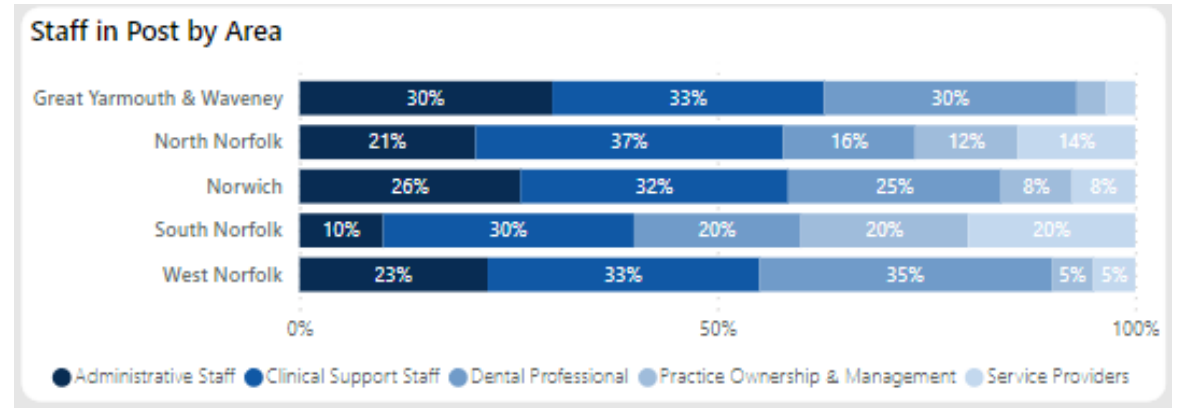
Our Primary Care Workforce – Executive Overview

Source: NHSE eProduct, NW ICB Workforce Dashboard, Date: 1/7/2024

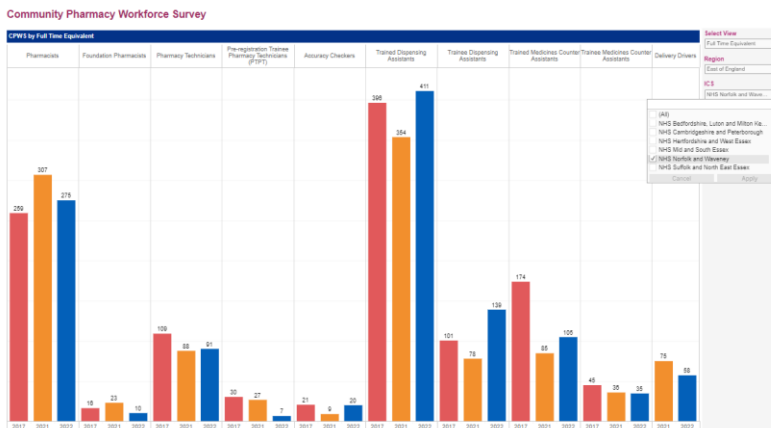
General Practice and Primary Care Networks (PCNs) – 3,426 WTE



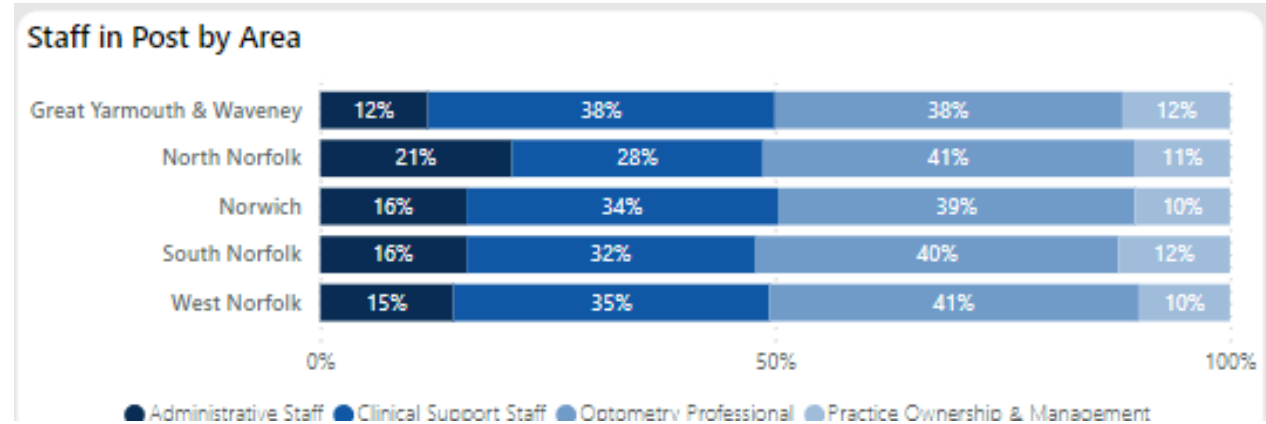
Dental Practices – 709 WTE



Community Pharmacy – 1,151 WTE



Optometry Practices – 710 WTE



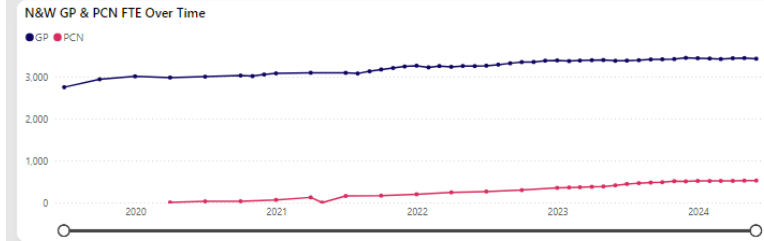
The future workforce will need to adapt and change its skillset to improve productivity. With increased focus on the preventive health agenda, a multi-skilled workforce is required to deliver healthcare, with specialist knowledge.

In Depth: General Practice and Primary Care Networks (3,426 WTE)

Source: NHSE eProduct, NW ICB Workforce Dashboard, Date: 1/7/2024

Primary Care - GP & PCN Workforce

Breakdown of both PCN and GP staff in post (FTE) as at the latest month submission, and over time.

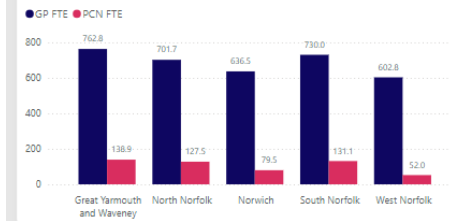


3,433.79
Latest GP FTE

528.97
Latest PCN FTE

Filters applied:
Staff Group: Multiple selections
Place: Multiple selections

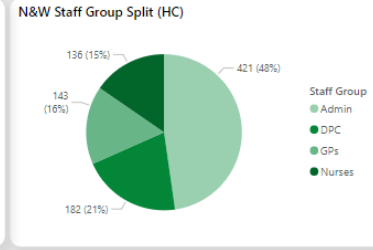
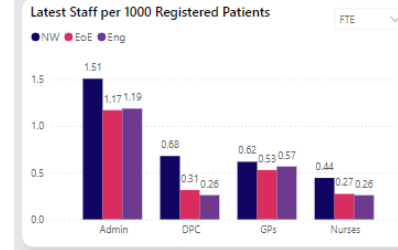
Latest Month N&W GP & PCN FTE



Staff Group	Latest GP FTE	Latest PCN FTE	PCN Leaver Rate	PCN Joiner Rate
Admin	1,720.58	12.00	31.4%	231.4%
DPC	636.30	507.19	25.2%	71.0%
GPs	647.28			
Nurses	429.63	6.56	47.6%	-19.0%
Other	3.22			
Total	3,433.79	528.97	25.3%	71.7%

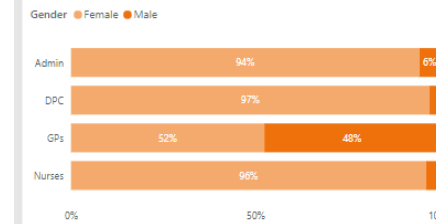
Primary Care - General Practice Workforce

Breakdown of county level current staff in post

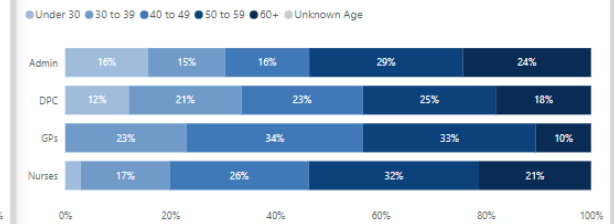


Filters applied:
Staff Group: Multiple selections
Place: West Norfolk

N&W Staff Gender Split (HC)

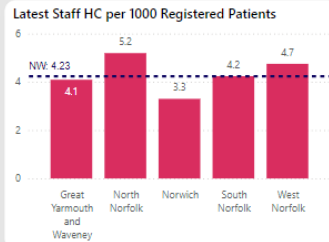


N&W Staff Age Groups (HC)

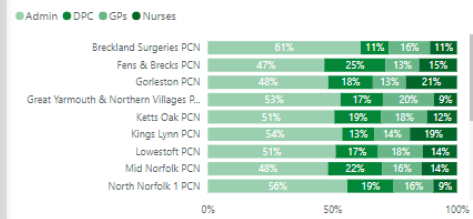


Primary Care - General Practice Workforce

Breakdown of staff in post across Place and PCN

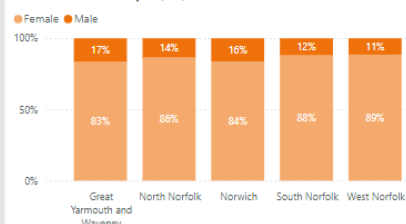


N&W Staff Group Split (HC)

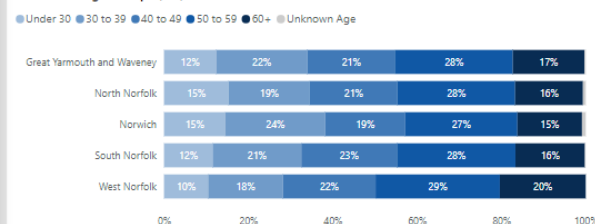


Filters applied:
Staff Group: Multiple selections
Place: Multiple selections

N&W Staff Gender Split (HC)



N&W Staff Age Groups (HC)



Primary Care - PCN Workforce

Staff in post FTE compared to PCN workforce plan FTE



714.79
Latest Plan FTE

528.97
Latest Actual FTE

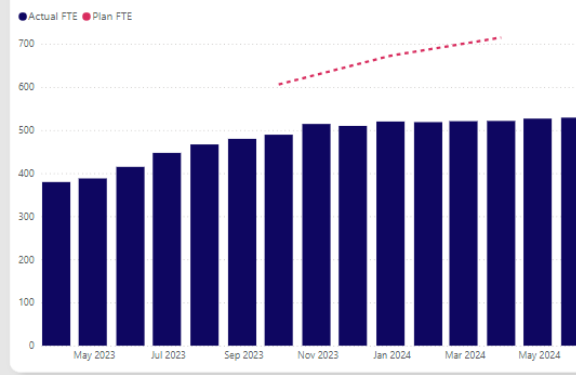
74.00%
Plan vs Actual

Place, PCN: Multiple selections

Staff Group, Job Role: Multiple selections

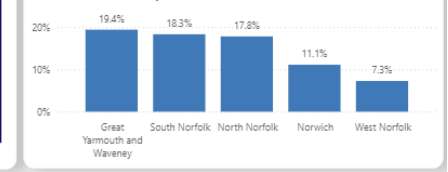
Filters applied:
Staff Group: Multiple selections
Place: Multiple selections

Norfolk and Waveney PCN Staff in Post vs Plan



Staff Group	Plan FTE	Actual FTE	Actual vs Plan
Nurses	10.04	6.56	65.3%
DPC	694.00	507.19	73.1%
Advanced Physiotherapist Practitioner	2.70	0.43	15.8%
Advanced Paramedic Practitioner	6.80	1.79	26.4%
Mental Health and Wellbeing Practitioner (Mental Health Practitioner - Adult)	57.75	18.67	32.3%
Dietician	2.11	1.00	47.4%
General Practice Assistant	54.50	37.71	69.2%
Total	714.79	528.97	74.0%

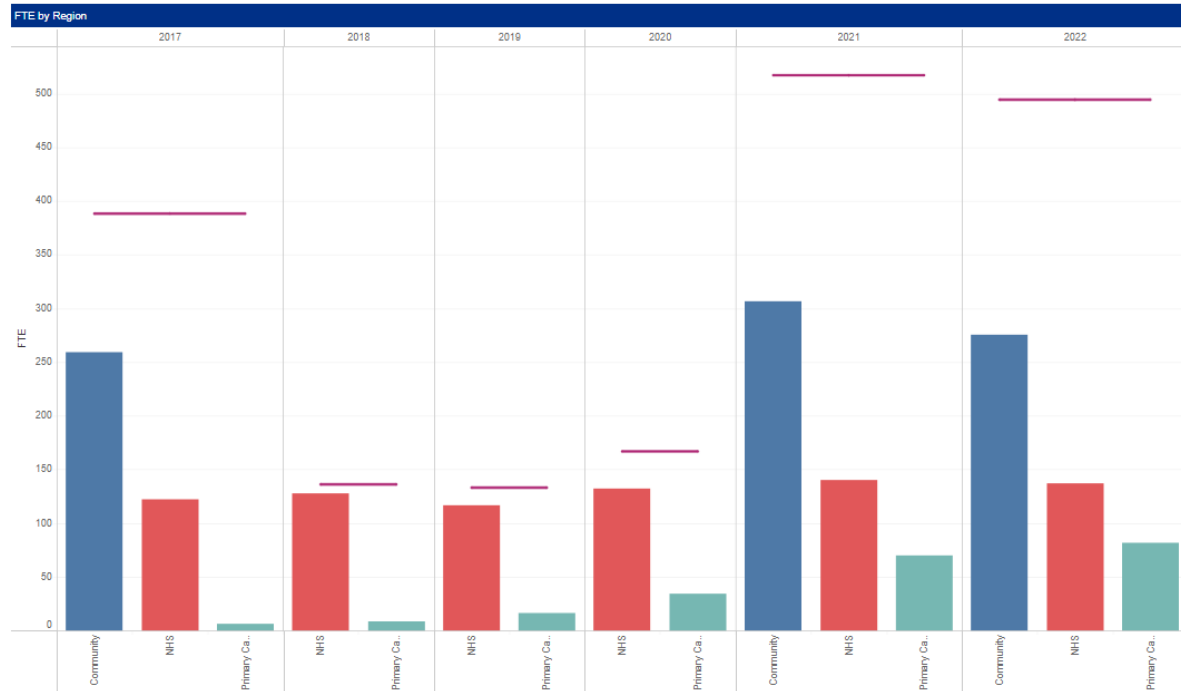
Latest Plan vs Actual per Place/PCN



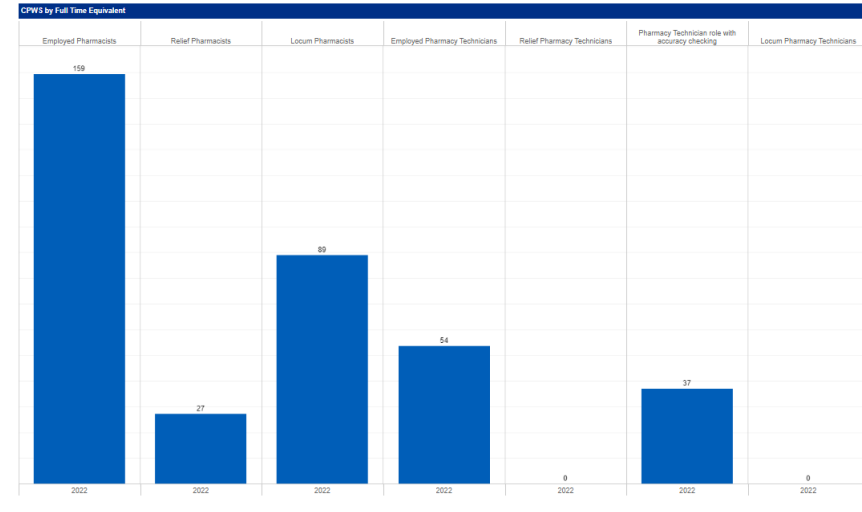
In Depth: Pharmacy (1,151 WTE)

Source: NHSE eProduct, NW ICB Workforce Dashboard, Date: 1/7/2024

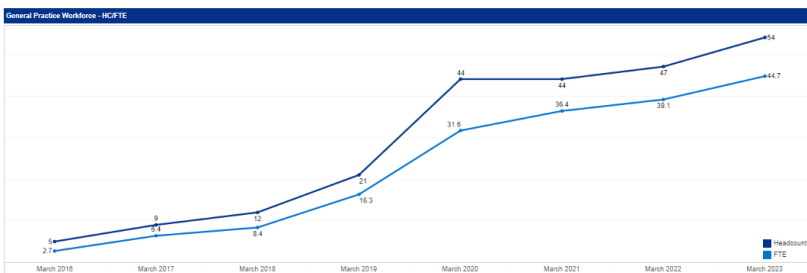
Overall Supply (All Sectors Combined)



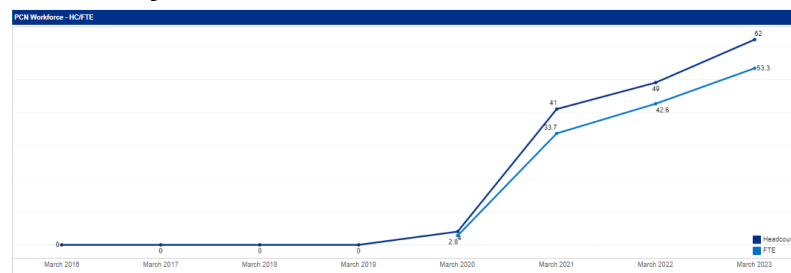
Community



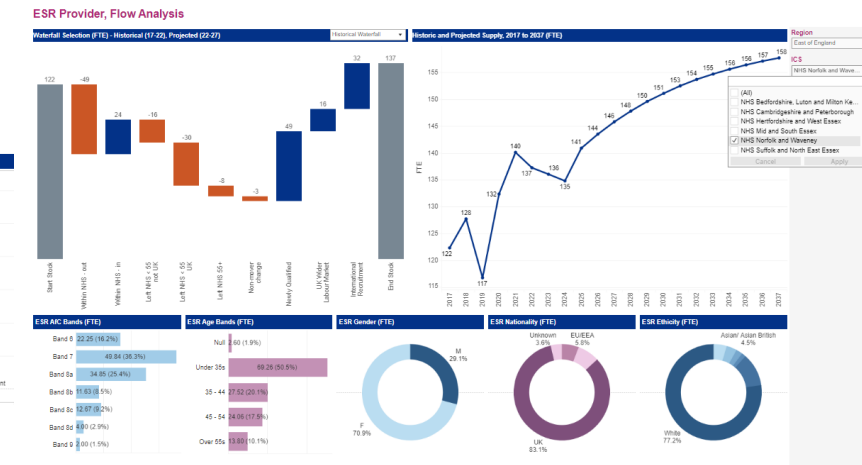
General Practice



Primary Care Networks



Secondary Care Providers



Note: Latest data published from NHSE is 2022

In Depth: Dental (709 WTE)

Source: NHSE eProduct, NW ICB Workforce Dashboard, Date: 1/7/2024

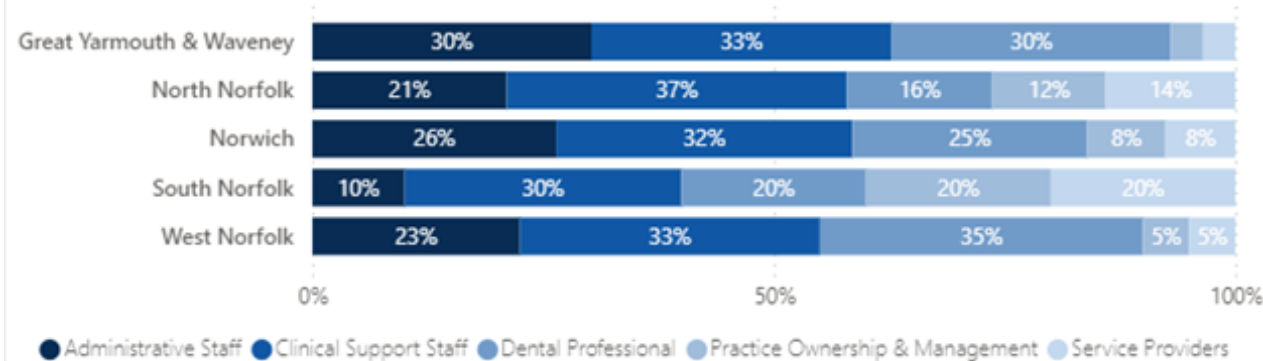
Norfolk and Waveney overall workforce position

Primary Care Training Needs Analysis

Overview page providing top level analysis of Dentistry Training Survey

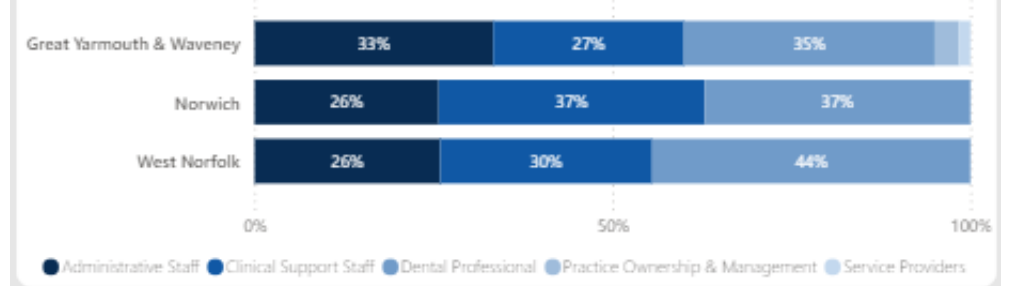


Staff in Post by Area



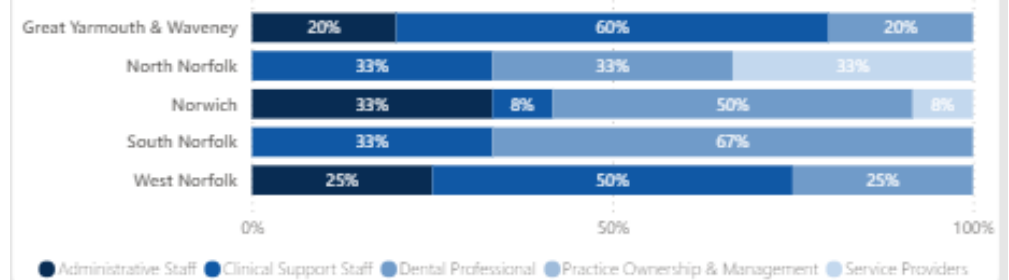
Corporate

Staff in Post by Area



Community Practice

Staff in Post by Area



Independent

Staff in Post by Area



Note: Currently awaiting further release of national data from NHSE due in Q2, which will focus on workforce profiling by staff group and demographics

In Depth: Optometry (710 WTE)

Source: NW ICB Workforce Dashboard
Date: 1/5/2024

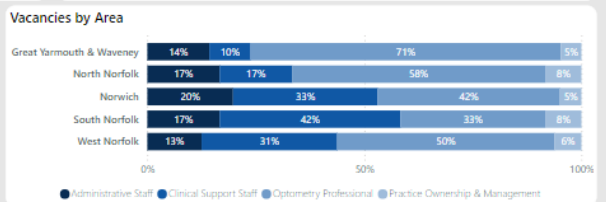
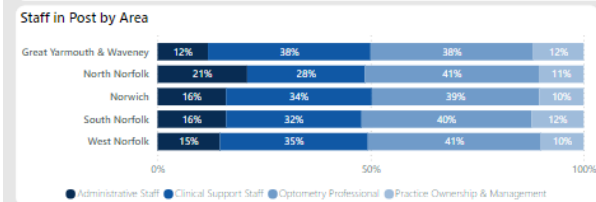
Norfolk and Waveney overall workforce position

Primary Care Training Needs Analysis

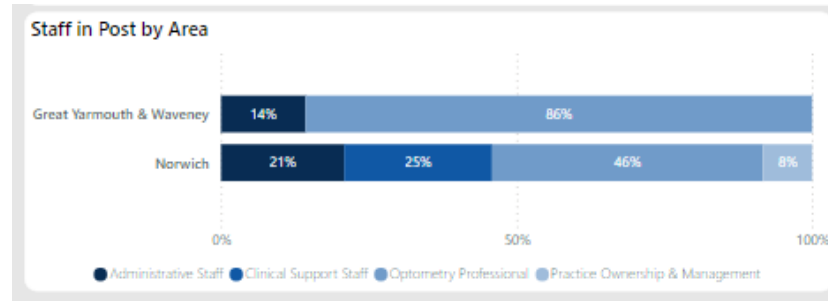
Optometry workforce profile page, providing indicative staff in post and vacancy figures based on survey responses



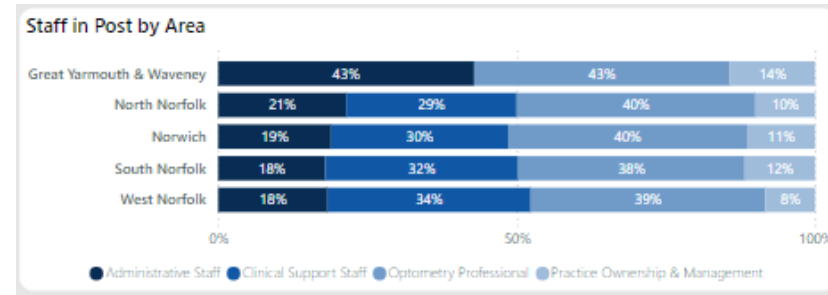
Area, Name of Practice	Practice Type	Total Responses for Latest Year	Latest Survey Year				
All	All	48	2023				
Grouped	Staff in Post (approx)	Vacancies (approx)	% Establishment in Post (approx)	0-3 Months	4-6 Months	7-12 Months	Longer than 12 Months
Administrative Staff	104	17	86.0%	20	1	1	
Receptionist	78	9	89.7%	8		1	
Clinic Coordinator	26	8	76.5%				
Clinical Support Staff	257	38	87.1%	12	1		
Optical Assistant	146	21	87.4%	22		6	
Dispensing Assistant	111	17	86.7%	10		3	
Optometry Professional	275	57	82.8%	12		3	
Optometrists	149	32	82.3%	21	10	8	13
Dispensing Optician	97	16	85.8%	7	1	2	4
Contact Lens Optician	29	9	76.3%	8		1	3
Practice Ownership & Management	74	5	93.7%	6	9	5	6
Manager / Supervisor	74	5	93.7%	7		1	
Total	710	117	85.9%	70	11	16	13



Hospital Practitioners

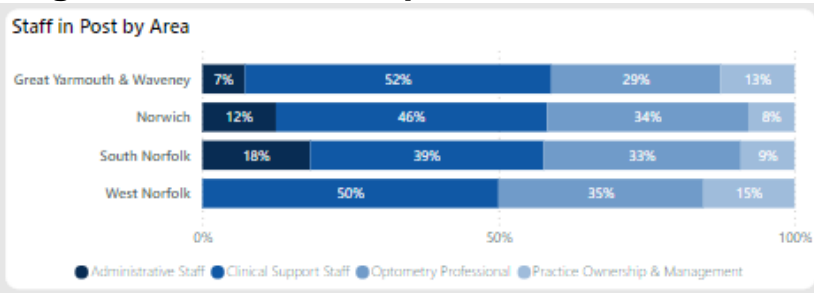


Independents

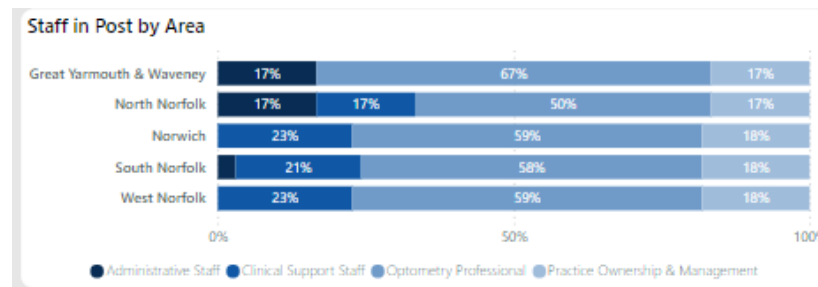


Note: No updated national workforce data published since 2019. The information provided is through local intelligence workforce profiling.


High Street – Boots, Specsavers etc



Small Group practices



What can we expect in the future

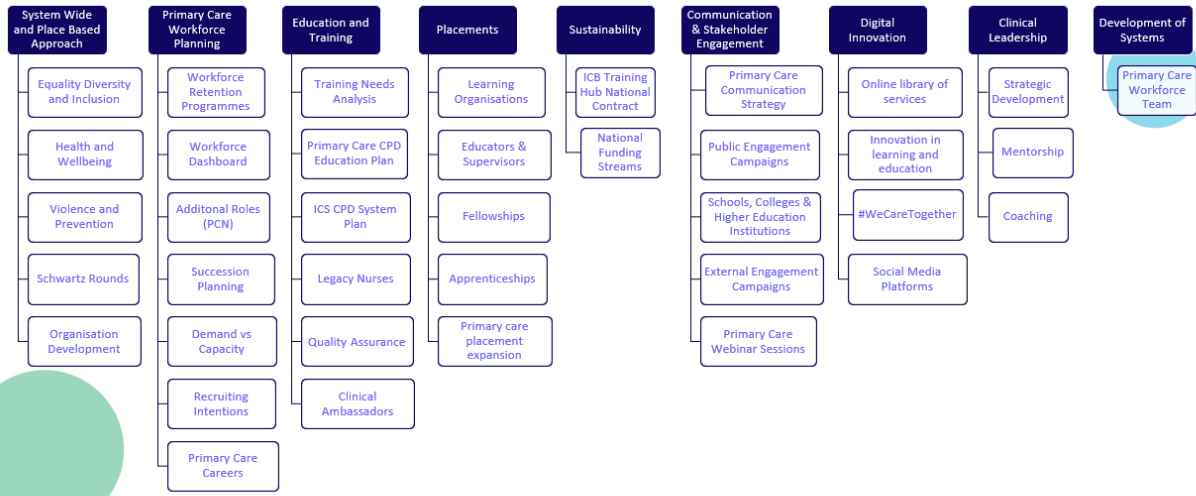
- A drive towards greater integration of health and social care.
 - New care models with increased focus on multi-professional working and community-based care.
 - Increasing funding pressures and allocations awarded annually.
 - More complex service users with higher expectations.
 - Significant staffing pressures arising from an ageing population and insufficient numbers choosing careers in primary care.
 - Technology developments improving the quality, flexibility and cost of learning.
 - Recognising variations in both career aspirations and learner needs.
 - A focus on creating diversity in our staffing.
 - Patients taking greater self-management and understanding of their health and care needs.
 - Medical school expansion with the moving towards graduate entry and degree apprenticeships.
 - A changing landscape for dental training and the increased use of expanded roles and skill mixing.
- 

Our vision and pledge to our primary care workforce

- Our people are the most important resource, without our workforce there is no primary care services provision.
- We want to promote good health and wellbeing, flexible working and recognise the importance of work/life balance.
- Our vision will be supported by a data driven approach focusing on population health management. We will use and analyse our data to support localised decision making and planning.
- Our vision is to ensure all our primary care services are delivered with a sustainable workforce supply, supporting all roles through Train, Retain and Reform to meet the needs of our population.
- We want our people to remain in roles across our health and care organisations and will support people to move across these boundaries more flexibly.
- Our education vision is to equip all with the right knowledge, skills and values to deliver outstanding, evidence based, person-centred care, now and in the future. We will support by delivering education flexibly, collaboratively and embracing technology to allow you to learn in the way that best suits primary care.
- We will endeavour to create more diversity in our workforce and to support everyone to reach their full potential.
- We will unashamedly take a system-wide approach to ensure equal opportunity for all learners and make the most efficient use of resources, while embedding quality of care through consistent standards across primary care.
- This approach will be underpinned through building capacity and by supporting a highly engaged workforce through training, education and upskilling.
- We want to enable people to continue to learn new skills throughout their lifetime of their career and achieve their ambitions.

How will we do this

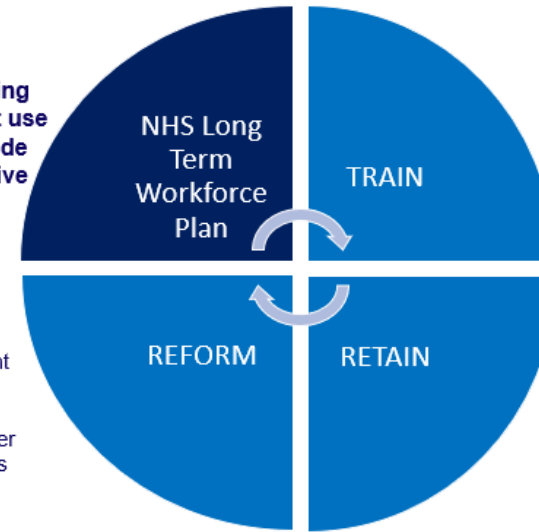
Primary Care Workforce Pillars 2024 - 2027



Enablers: Business Intelligence, People, Communication & Engagement, Estates & Digital

Putting staffing on a sustainable footing and improving patient care. It focuses on retaining existing talent and making the best use of new technology alongside the biggest recruitment drive in health service history.

Improving productivity by working and training in different ways, building broader teams with flexible skills, changing education and training to deliver more staff in roles and services where they are needed most.



Significantly increasing education and training to record levels, as well as increasing apprenticeships and alternative routes into professional roles.

Ensuring that we keep more of the staff we have within the health service by better supporting people throughout their careers.

The diagram above, outlines the primary care workforce pillars to support the stabilisation of primary care services in line with our ICS Joint Forward Plan, whilst delivering the objectives and aims of the contract specification and operational guidance set for 2024/25.

This programme of work includes the three sectors of primary care (General Practice, Dental, and Optometry). Community Pharmacy will be managed by the ICB Medicine Optimisation Team.

How will we do this? Train: Education and Training approach

- Deliver a joined up, consistent approach to education across the system that supports workforce needs.
- Ensure staff are equipped with the skills to deliver the required care using innovative educational styles, with trust wide opportunities for the whole workforce.
- Be driven by analytical evidence and guided by a shared understanding of best practice. Systems in place to support learners across primary care.
- Work collaboratively on skills training, sharing expertise and trainers.
- Develop Governance structures across the system, with shared decision making and a unified approach.
- Foster a system wide understanding of resources and agreement to join up education provision, with agreed CPD top slicing. Coming together as a system will increase efficiencies in budgets and teaching delivery, remove duplication, support quality assurance and ensure requirements for small specialities can be met.
- Work closely with universities and other educational providers to develop system wide training and education programmes to meet service needs.
- Establish Clinical Ambassadors and Legacy Nurses within primary care, these will have a critical role in the development and retention of staff in primary care settings.

How will we do this? Train: Placement approach

- Deliver a joined up, consistent approach to primary care learning organisations across the system that supports workforce needs.
- Expand placement capacity to support multi-professional learners across their constituent practices and partners, creating a rich training environment to grow and retain a skilled primary care workforce, now and for the future.
- Increase the number of approved primary care educators and supervisors across the system that supports a culture where our workforce can draw on knowledge and learning across disciplines to identify solutions, practically or technically.
- Working closely with primary care learning organisations to increase placement capacity across the system, to deliver the future primary care workforce pipeline in sufficient numbers to meet the needs of our local population.
- Embedding Fellowship programmes within primary care settings to lead opportunities for integrated working and varied portfolio work experience.
- Widening access to primary care careers with different pathways from Princes Trust, T-Levels and apprenticeships, to more traditional routes into new roles. Ensuring the health and care academy helps young people discover what opportunities we have to offer.
- Collaborating the Norfolk and Waveney Primary Care Estates Strategy supports the expansion of primary care workforce to meet the need of placement expansion.

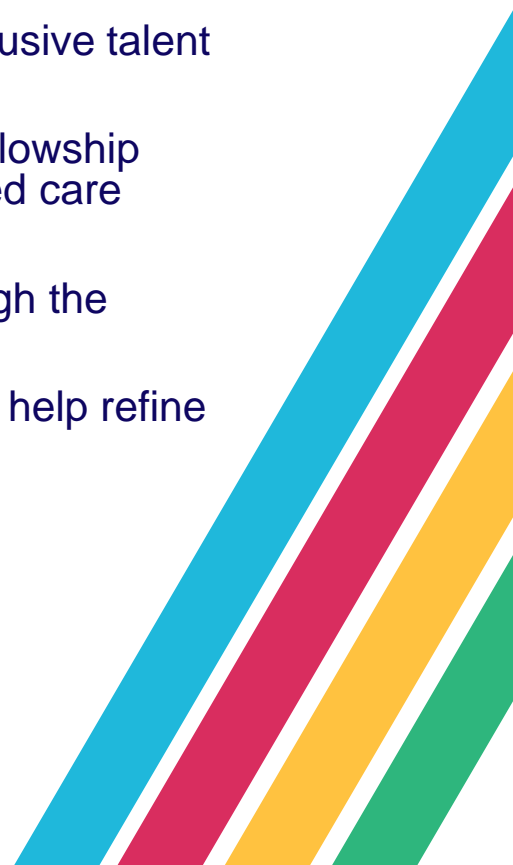
How will we do this?

Retain: Primary Care Workforce Planning approach

- Utilise workforce dashboards, appointment activity and population health management approaches to analyse, forecast and plan workforce supply based on present and future demands.
 - Offer all primary care practices a bespoke recruitment service to attract and recruit new staff.
 - Work closely with practices in workforce and succession planning by providing tools, training and guidance on new ways of working and population health needs.
 - Deliver a Primary Care Induction Programme to attract and retain professionals within primary care settings.
 - Achieve a range of Workforce Retention Programmes to attract and retain primary care substantive roles into the system.
 - Deliver an overseas international recruitment process to allow dental professionals to achieve their General Dental Council (GDC) certification number.
 - Enable practices to achieve certification as a licensed sponsor, for the recruitment of international skilled professionals.
 - Deliver a programme for emerging leaders and future change-makers by the promotion of partnership models to stabilise primary care services.
 - Create a new pipeline of volunteers in primary care and provide a supported structure pathway for volunteers to join the workforce.
- 

How will we do this? Retain: Clinical Leadership approach

- Embedding a culture of collaborative and compassionate leadership to enable primary care workforce to do their best work which will lead to better patient care, experience and outcomes.
- Supporting primary care with future workforce succession-planning by creating or identifying opportunities for clinicians to develop leadership careers.
- Creating a flexible, supportive and trusting culture within primary care settings with a compelling and credible vision for the future.
- Providing clinicians with the opportunity to understand the breadth of available career options for inclusive talent management.
- Offer all newly-qualified GPs, newly-qualified nurses, nurses, foundation dentists and therapist, a Fellowship opportunity with an explicit focus on working across a primary care networks (PCN) and the integrated care board (ICB) to support our future system leaders.
- Supporting primary care leaders to a coach or mentor by supporting professional development through the sharing of knowledge, skills, insights and connections.
- To enhance the retention of healthcare professionals in the workforce by providing coaching that can help refine skills, foster leadership, and promote well-being.



How will we do this? Reform: System wide and based placed approach

- Ensure Equality, Diversity and Inclusion is embedded to improve the culture of our workplaces and the experiences of our workforce, to boost staff retention and attract diverse new talent to Norfolk and Waveney primary care services.
- We will provide equitable access to education, training and workforce programmes for all our people, ensuring clear communication about these opportunities. Additionally, we will continue to assist our people in maximising their skills by offering ongoing continued professional development (CPD) and learning through appropriate courses, shadowing experiences, coaching opportunities, and ongoing careers conversations to accelerate progression, improve retention and inspire people to come and work in Norfolk and Waveney.
- Raise the voice of rural and coastal communities, highlighting not only the challenges faced, but also capitalising on the unique benefits of a rural & coastal lifestyle for our primary care workforce.
- Develop a comprehensive health and wellbeing programme for primary care workforce, offering resources, tools, and information to support their physical, mental and emotional wellbeing. Ultimately this will enhance job satisfaction, work-life balance and the quality of care.
- Establish a network of dedicated Primary Care Network (PCN) Community Pharmacy Integration leads within N&W to facilitate seamless collaboration and communication among primary care providers, specialists, and community resources.
- Deliver an ICS Schwartz Rounds programme which will offer a safe and confidential group reflective practice forum for staff, that will help to combat isolation within primary care thus improving morale and increasing workforce retention.
- To raise the awareness of ICS organisational development programmes such as 'Restorative and Just Culture' and 'Civility and Respect', which will grow with the workplace, modelled by leaders.
- Supporting our primary care workforce teams with violence and prevention programmes as part of our commitment to support health and wellbeing, recognising the negative impact that poor staff health and wellbeing can have on patient care.

How will we do this? Reform: Development of systems approach

- Support staff throughout their careers, helping them stay in work through flexible working and improving culture, diversity, inclusion and leadership.
- Improve the culture of our workplaces and the experiences of our workforce, to boost staff retention and attract diverse new talent to N&W primary care services.
- Supporting PCNs to actively engage in promoting new roles and explore new ways of working that can support population health needs.
- Strengthen collaboration and communication among primary care providers, specialists, and community resources, thereby enhancing patient centred care, improving health outcomes, and optimising the healthcare delivery system.
- Working with system partners to provide a range of integrated health and wellbeing approaches that are accessible for all.
- Creating a safe and confidential group environment to enable reflective practice for staff, to combat isolation within primary care and improve morale and workforce retention.



How will we do this? Reform: Sustainability approach

- Maximising all national available funding opportunities to support primary care workforce retention programmes.
- Widening primary care access to system wide resources and agreement to support clinical professional education top slicing.
- Committed in working together to meet the targets outlined in the ICS 2022-2025 Green Plan, sharing best practice and innovation, and holding each other to account. Key areas of carbon emissions have been identified, and primary care is taking responsibility for planning and delivering programmes that will reduce emissions, improve efficiencies, and support the sustainable delivery of health services.
- Enabling access to primary care careers through apprenticeships levy transfers from system partners, where possible.



How will we do this?

Reform: Communication and Stakeholder engagement approach

- To access a 'one stop shop' digital platform for primary care colleagues. This platform will provide a library of services in the areas of "Train, Retain and Reform" for our workforce.
- To develop a range of external engagement campaigns for primary care, showcasing case studies and videos that can bring to life the plethora of roles within the system, as well as "selling" the Norfolk and Waveney lifestyle.
- Use a range of engagement approaches and tools to build strong relationships with primary care settings and evaluate the outcomes of workforce and retention programmes.
- Working with ICS to develop a range of public engagement campaigns, which "Support's Primary Care" services within our system.
- Deliver a range of communications to support cascading messages and brand identity, at all levels in organisations across the primary care sector, being ambassadors of our workforce programmes.
- Proactively engage with schools, colleagues, and higher education institutions to support workforce sustainability.




How will we do this? Reform: Digital Innovation approach

- Establishing robust learning packages to support the development of our workforce with new learning strategies to maximise the use of available resources. Using technology to support the development of learners by improving access to resources and appropriate IT infrastructure for all.
- To pilot new ways to increase access and use of the NHS app within Coastal Communities with a focus on supporting GPs & Community Pharmacies.
- To have a presence on social media across Norfolk and Waveney and to reach primary care staff showcasing workforce programmes and incentives.
- Utilise business intelligence platforms to support strategic workforce planning, education programmes and retention programmes
- Understand all primary care sector vacancy levels through Artificial intelligence software mapping across the system.
- Ensure there are enough people working in the NHS to support patients, through the procurement of innovative staff matching technology using digital solutions for deployment of sessional clinical capacity.



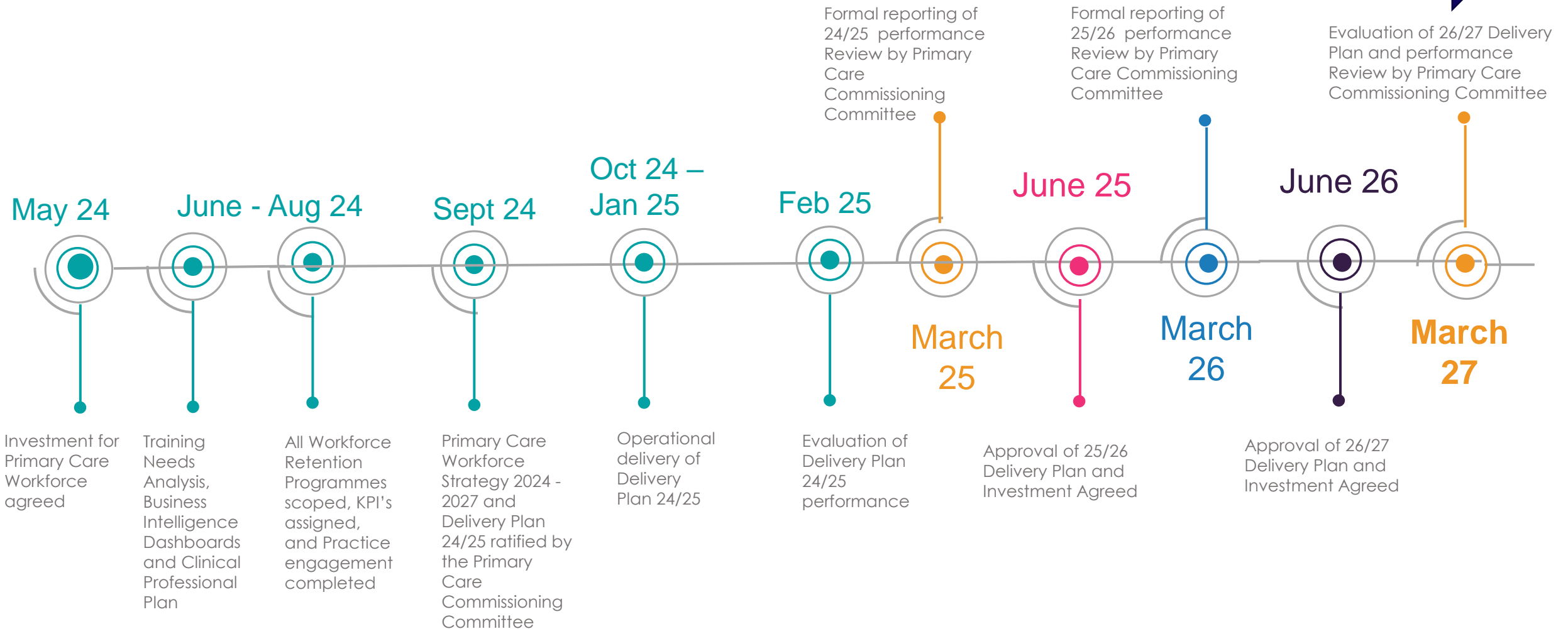
How will we do this? Reform: Development of systems approach

- By better supporting staff throughout their careers, helping them stay in work through flexible working, and improving culture, diversity, inclusion and leadership.
 - Improve the culture of our workplaces and the experiences of our workforce, to boost staff retention and attract diverse new talent to Norfolk and Waveney primary care services.
 - Supporting Primary Care Networks to actively engaged in promoting new roles and how new ways of working in can support population health needs.
 - Strengthen collaboration and communication among primary care providers, specialists, and community resources, thereby enhancing patient centred care, improving health outcomes, and optimising the healthcare delivery system.
 - Provide a range of integrated health and wellbeing approaches that is accessible for all.
 - Raise the voice of Rural and Coastal Communities as a whole, highlighting not only the challenges faced, but also capitalising on the unique benefits of a Rural & Coastal lifestyle for our primary care workforce.
 - Supporting a safe and confidential group reflective practice for staff, to combat isolation within primary care and improve morale and workforce retention.
- 

Strategic Timeline

Continuous improvement in "Train, Retain and Reform" for our Primary Care Workforce

Primary Care Workforce Strategy and Delivery Plan – Reviewed and Updated Annually



Executive overview of strategic timeline

24/25

- **System wide approach for primary care workforce programmes offerings** exploring consistency to education, workforce retention programmes the development of a student placement management system and clinical leadership.
- **Business Intelligence Modelling** for education, workforce supply, demand vs capacity, health and wellbeing, workforce profiling for Dental and Optometry and succession planning.
- **Increasing Learning Organisations and Educators** across the system to increase medical and dental placements.
- **Artificial intelligence** software mapping for vacancies across the system for primary care.
- **Expansion of the Coastal and Rural Communities programme** with the introduction of the Generalist Enhanced School, Volunteer to Career.
- **Introduction of Primary Care Optometry Workforce Retention Programmes** across the system.
- **Expansion of the Dental Workforce Programmes** across the system which includes national offerings.
- **Introduction of Norfolk and Waveney Primary Care workforce strategy** which defines our vision and pillars for delivery.

25/26

- **Equality, Diversity and Inclusion** within primary care for a consistent joined up offering clearly communicated.
- **Health and Wellbeing Offering** expanded to support all the sectors of primary care.
- **Career enhancing education** development of careers faculty, development of health and care academy.
- **Leveraging technology** increased use of technology in training and promotion of education, workforce support programmes and online teaching materials for student placements.
- **Development of systems** through flexible working models, culture, compassionate leadership and integration of neighbourhood teams at place.

26/27

- **Expansion of the use of Artificial Intelligence**, virtual health care and upskilling education in relation to the use of technology across the system.

Summary

- The Long-Term Workforce Plan, recognises the huge growth in workforce required to deliver health care going forward. This increase involves new ways of encouraging individuals into primary care through:
 - **Train:** significantly increasing education and training to record levels, as well as increasing apprenticeships and alternative routes into professional roles, to deliver more doctors and dentists, more nurses and more of other professional groups, including new roles designed to better meet the changing needs of patients and support the ongoing transformation of care.
 - **Retain:** ensuring that we keep more of the staff we have within the health service by better supporting people throughout their careers, boosting the flexibilities we offer our staff to work in ways that suit them and work for patients, and continuing to improve the culture and leadership across NHS organisations.
 - **Reform:** improving productivity by working and training in different ways, building broader teams with flexible skills, changing education and training to deliver more staff in roles and services where they are needed most, and ensuring staff have the right skills to take advantage of new technology that frees up clinicians' time to care, increases flexibility in deployment, and provides the care patients need more effectively and efficiently.
- As part of the ICS Joint Forward Plan, "Ambition 2: Primary Care Resilience & Transformation", is critical to stabilise primary care services in line with our ICS strategic objectives for our population.

Alignment to strategic plans

N&W's **Clinical strategy** sets out what public, patients, and staff should expect from the NHS: see me as a whole person, be one high quality resilient service, reduce waiting times and act early to improve health, be reliable and tackle health inequalities

Norfolk and Waveney **ICS Education Strategy** sets out how we will equip all with the right knowledge, skills and values to deliver outstanding, evidence based, person-centred care, now and in the future.

The Integrated Care Partnership promotes close collaboration of the health and care system, bringing together health & social care providers, local government, voluntary, community and social enterprise and other partners

Norfolk and Waveney ICS **Green Plan** sets out how we will focus on The areas focussing on carbon reduction include:

- Medicines, medical equipment, and other areas of the supply chain such as construction and freight, and food and catering.
- The carbon footprint from our buildings and materials.
- Personal travel (including patient and staff travel, as well as visitors).
- Commissioned health and care services

Norfolk and Waveney ICS **Health and Wellbeing Strategy** sets out how we will ensure healthy work environments and providing relevant and timely wellbeing support to our workforce to enable them to be as well at work as possible, to feel valued and have a sense of belonging.. This includes promoting and maintaining good physical and psychological wellbeing and supporting those who need additional help.

NHS Long Term Workplan 2023 identifies 3 priorities: train, retain and reform. Improve leavers rates by 15%, grow the number & proportion of NHS staff working in primary by 73% by '36/'37, Increase training placements by 50%

Norfolk and Waveney **Joint Forward Plan 2023-2028** identifies our ambition to integrate primary care services to deliver improved access to a wider range of services from a multi-disciplinary team. This will deliver more proactive care, preventing illness and improving outcomes, for local communities closer to home.

Norfolk and Waveney ICS **Estates Strategy** sets out how the NHS estate across Norfolk and Waveney will be transformed to support new models of care, deliver better outcomes to patients, and provide best value for money.

Alignment to Local Landscape

Source: ICB Population Insights Dashboard,
Date: 1/5/2024

Norfolk & Waveney Registered Population Explorer

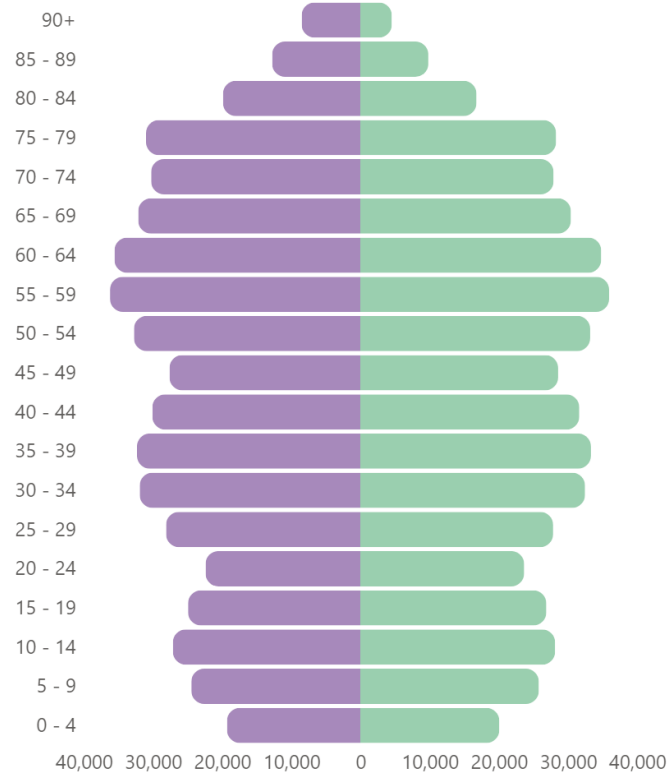


Registered Population

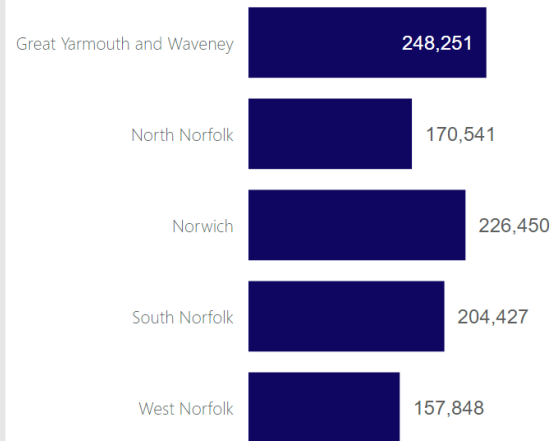
Registered Population 1,007,517	Female 506,940	Male 500,516	Child - 18 & Under 187,516	Adult - 19+ 820,001	BAME - 66.2% Populated 53,299	Core 20 175,949
---	--------------------------	------------------------	--------------------------------------	-------------------------------	---	---------------------------

Population by Gender and Age

● Female ● Male



Population by Registered Place



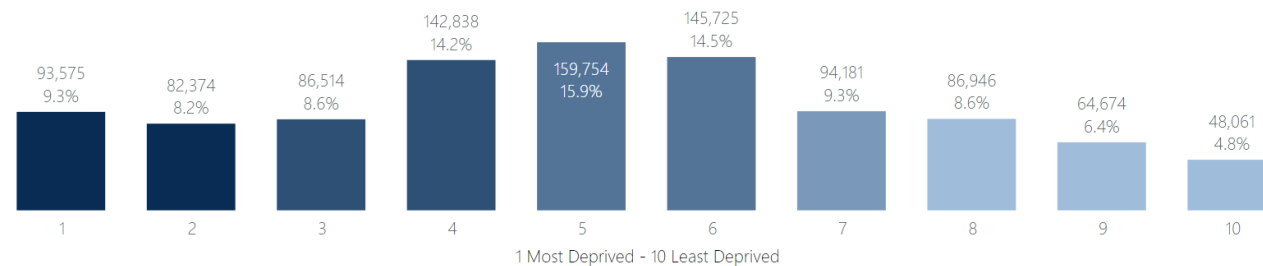
Community - MSOA

LSOA

Min M

This visual does not support exporting.

Population by Deprivation



1 Most Deprived - 10 Least Deprived

Alignment to Local Landscape (2)

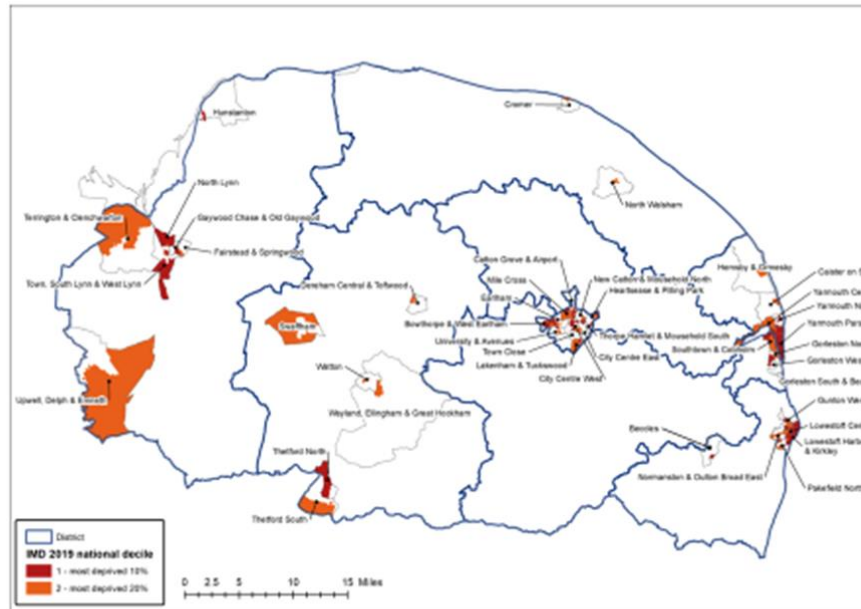
- **Deprivation** - around 163,800 people live in areas that are among the 20% most deprived in England

- **Geography Coastal Areas Situation**
Norfolk and Waveney has over 100 miles of coastline, 171,000 people live in the higher deprivation coastal towns of Caister-on-Sea, Cromer, Gorleston, Great Yarmouth, Hemsby, Hunstanton and Lowestoft.

- In Norfolk and Waveney, the leading causes of death for males and females are:

- Heart disease
- Dementia
- Stroke
- Lung cancer

Deprivation & Wider Determinants of Health



There are 42 communities across Norfolk and Waveney where some or all the population live in the 20% most deprived areas in England. However, none of these communities are in Broadland or South Norfolk.

Approximately 40% of the populations of Great Yarmouth and Norwich live in the most deprived 20% of areas in England compared to 16% for Norfolk and Waveney as a whole.

District	Most deprived decile 1 Core 20	Most deprived decile 2 Core 20	Other deciles	Core 20 Population
Breckland	2,500	12,300	126,500	14,700
Broadland	0	0	131,900	0
Great Yarmouth	26,900	12,800	59,500	39,700
KLWN	12,100	11,200	127,900	23,300
North Norfolk	0	2,800	102,400	2,800
Norwich	27,400	28,100	86,700	55,500
South Norfolk	0	0	143,100	0
Waveney	16,000	11,800	90,700	27,900
Norfolk and Waveney	84,900	78,900	868,800	163,800
England	5,603,900	5,697,200	45,249,000	11,301,100

District	Most deprived decile 1 Core 20	Most deprived decile 2 Core 20	Other deciles	Core 20 Population
Breckland	1.7%	8.7%	89.6%	10.4%
Broadland	0.0%	0.0%	100.0%	0.0%
Great Yarmouth	27.1%	12.9%	60.0%	40.0%
KLWN	8.0%	7.4%	84.6%	15.4%
North Norfolk	0.0%	2.6%	97.4%	2.6%
Norwich	19.3%	19.7%	61.0%	39.0%
South Norfolk	0.0%	0.0%	100.0%	0.0%
Waveney	13.5%	10.0%	76.5%	23.5%
Norfolk and Waveney	8.2%	7.6%	84.1%	15.9%
England	9.9%	10.1%	80.0%	20.0%