NEIGHBOURHOOD
MODEL OF HEALTH AND WELLBEING

Department of Health
An Roinn Sláinte
Männystrie O Poustie
www.health-ni.gov.uk

HSC RESET
STABILISE | REFORM | DELIVER

Neighbourhood Model

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NI Neighbourhood Model

Context

- Demographic change – ageing NI population
  - 18.1% of NI population is over 65 years compared with 13.1% in 1999
  - Over 85 year population has increased by 24.6% in the past decade

- Healthcare demand among older people
  - Older people (over 65 years) use 40%-50% of total healthcare resources
  - Those in last year of life (5% of older people) use half of the healthcare resources of all older people
  - Older people account for 40% of all admissions and 60% of hospital bed days approx.
  - Older people consult their GP four times more often than those under 65 years

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- HSCNI unable to keep pace resulting in long waits for emergency and elective care
  - Pressures on Primary Care, VCS partners and independent sector

- Health spends more than half of NI Executive budget
  - Efforts to make savings impacting heavily on Health and Social Care Trust services
  - HSCNI spending £2.2 million more each week than we can afford
  - Efficiency alone will not resolve the shortfall

What is the Neighbourhood Model?

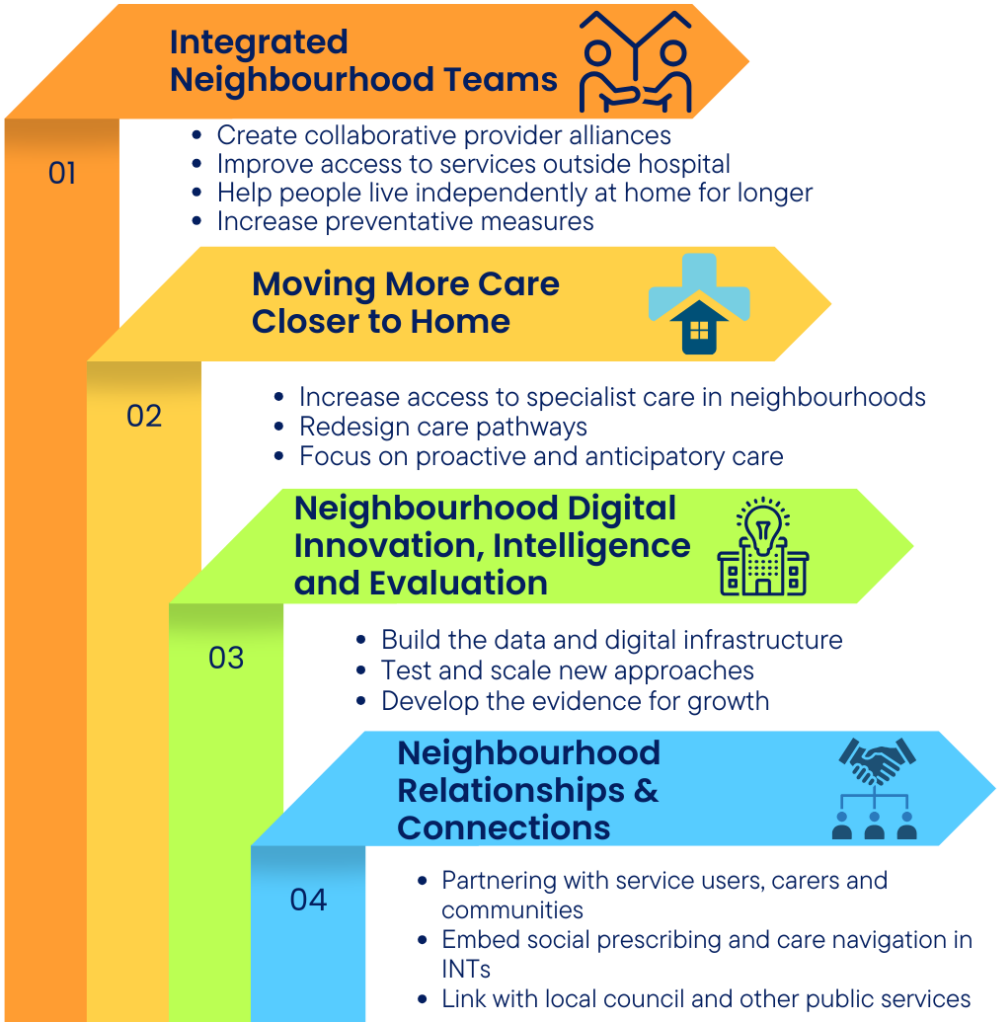
Policy

The Neighbourhood Model is a major reform initiative by the Department of Health (Northern Ireland) designed to shift care from hospitals into communities. It forms part of the Health and Social Care Reset Plan and the Neighbourhood Model of Health and Wellbeing Framework published in March 2026.

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Four Pillars of the Nieghbourhood Model

Policy



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Our Vision for Neighbourhoods in NI…

- People are enabled and supported to live healthier, more independent lives
- With 17 Integrated Neighbourhood Teams (INTs) – multi-disciplinary, multi-sectoral, caseload focused
- Focusing on identifying need, ensuring person-centred support closer to home, improving outcomes, tackling health inequalities, managing demand on HSC services and building a resilient health and wellbeing system for the future
- Initial focus on older people and growing model to include other priority groups, including people with long-term conditions, people with mental health challenges and vulnerable children and young people

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Priority One – Focus on Older People

Key Enablers

To deliver this Focus on Older People, INTs should

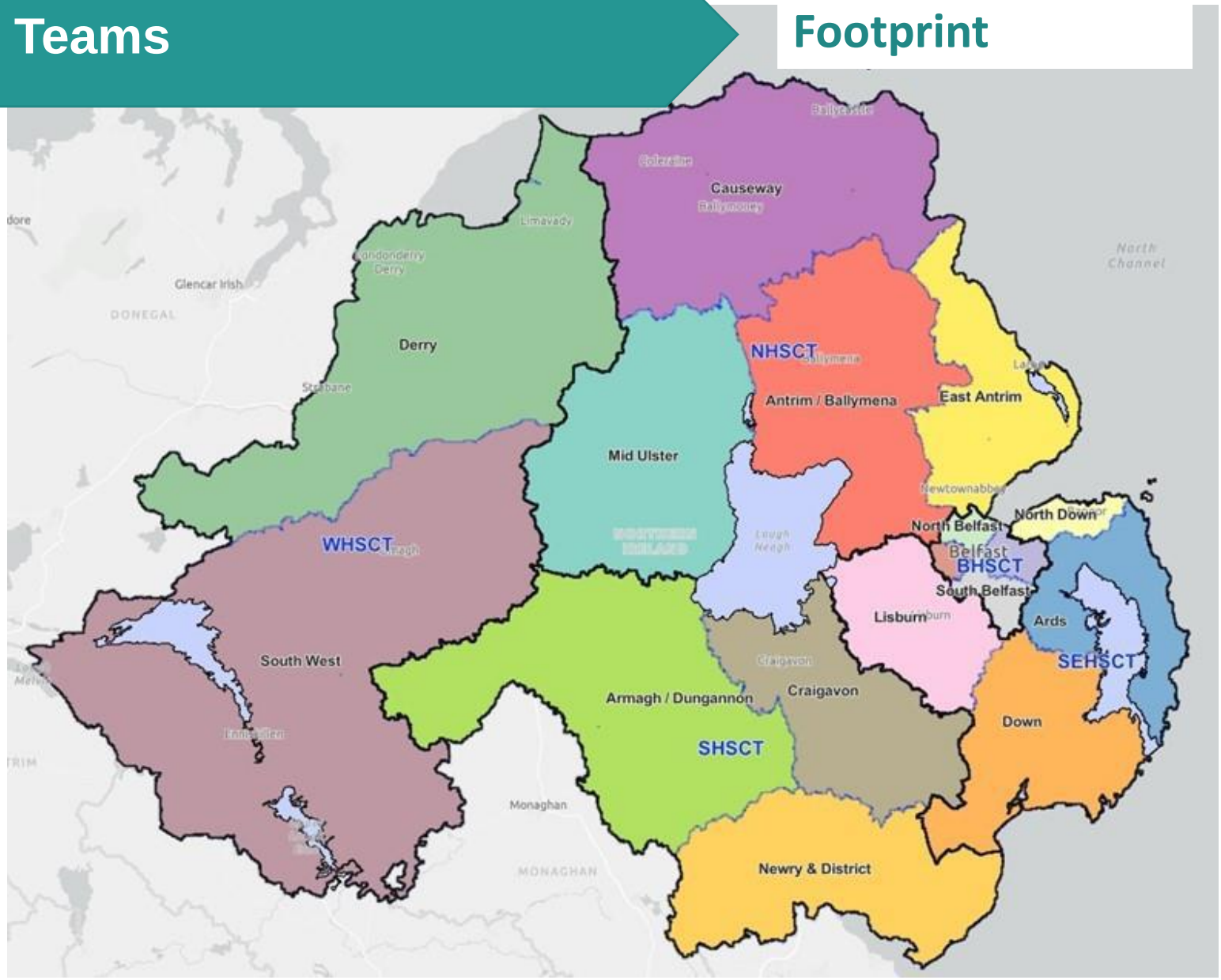
- Operate as multi-disciplinary and multi-sectoral teams (Primary Care, Community Care, Social Care and Voluntary/Community Sector) with service user and carer involvement
- Share information effectively between key partners
- Use local data to drive planning and evidence outcomes & impact
- Ensure alignment with wider system priorities and pathways
- Utilise all available resources to shape planning proposal

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Integrated Neighbourhood Teams

- Average population of 115,000 people
- Co-terminous with GP Federation areas
- Shared boundaries with 5 HSC Trusts

Footprint



Integrated Neighbourhood Teams

Overview

- 17 INTs have been established across Northern Ireland, aligned with current GP Federation footprints.
- They have been identified as a key delivery mechanism to support this ambition and to drive the shift of care from acute settings into neighbourhoods.
- Significant development work, led by the Permanent Secretary, has been undertaken through a structured INT development programme.
- Core membership consists of representatives from:
  - General Practice
  - Community Pharmacy
  - Health and Social Care Trusts
  - Voluntary, Community and Social Enterprise sector

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Measures of Success

Progress evidenced through outcomes of local INT plans, to include

- Reduction in ED attendances
- Reduction in non-elective admissions
- Decrease in average & excess lengths of stay
- Reduction in delayed discharges
- Reduction in readmission rates
- Increased proportion of deaths occurring in individuals preferred place
- Increase in proactive care plans in place
- Improved patient & carer experience

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Priority One – Focus on Older People

Definition

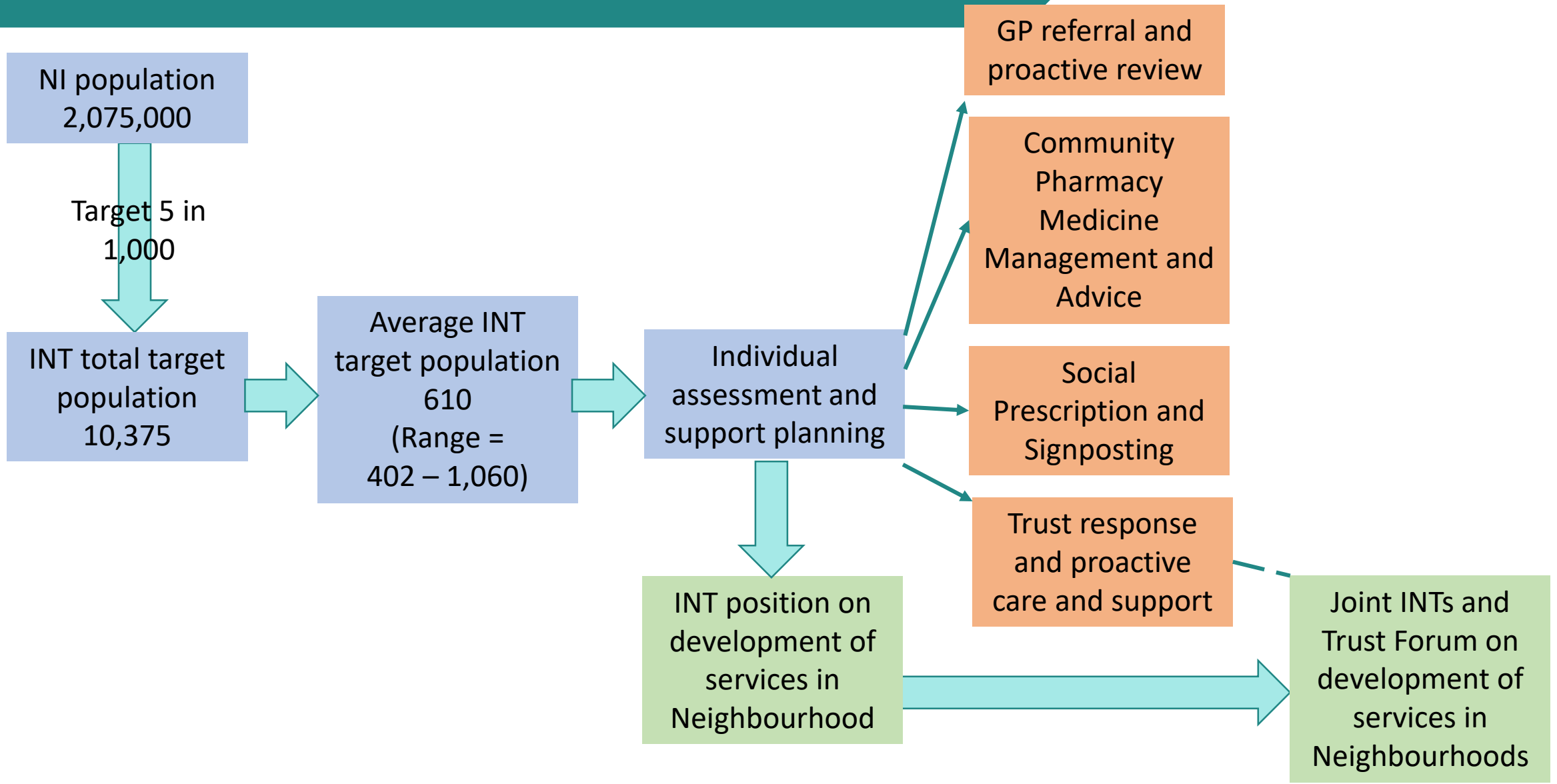
Neighbourhood Winter Plan 26/27 will target vulnerable older people who:

- Recent admissions of practice patients over 75 years old to all hospitals within previous 6 months
- ED attendances of practice patients over 75 years within previous 6 months
- Practice patients over 75 years old discharged within last 6 months
- Practice patients over 75 years old with an Expected Date of Discharge (EDD) within next 10 days
- Practice patients over 75 years old with an inpatient episode longer than 21 days
- Total bed days for Practice patients over 75 years old with moderate/severe frailty scores
- Practice patients over 75 years old classified as complex discharges
- Practice patients over 75 years old classified as delayed transfers of Care

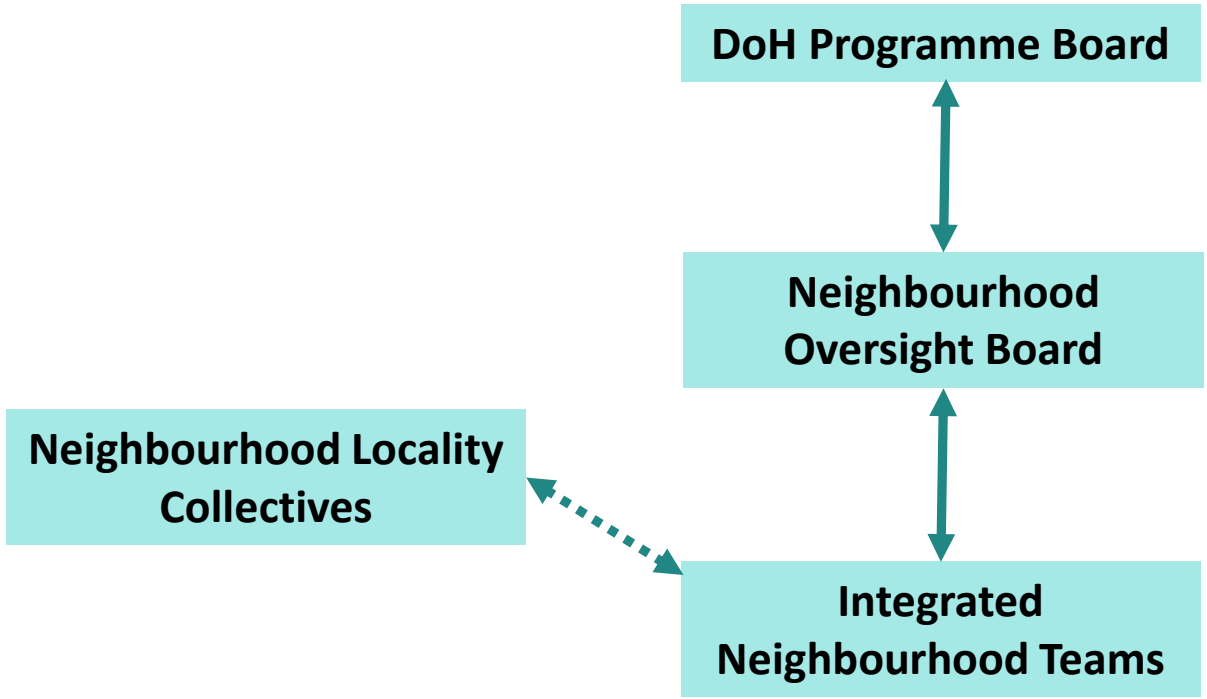
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INT Initial Phase 26/27



Neighbourhood Governance Structure



SPPG Chair
Includes 5 INT chairs

1 collective/Trust
Quarterly meetings
Forum for INTs to meet with Trust

Core INT membership
GP chair (initially)
SPPG supporting

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Priority One – Focus on Older People

Resources

- Realignment of HSC Trust services – acute to community settings
  - Measureable 2% per year
- Complete the rollout of GP Multi-Disciplinary Teams
- Resourcing INTs to deliver proactive care
  - Professional-led assessment and individualised care and support plans
  - Social prescribing and VCS support
  - Growing Pharmacy First
- Identifying care and support gaps
- Linking with other public bodies (e.g. housing, rural development)
- Partnership with external bodies and seed funding
  - Pharmaceutical companies, voluntary sector organisations, other private sector
- Access to regional programmes
  - respiratory, obesity, last years of life care and support

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Acute Realignment

'Push and Pull'

- Beyond better coordination of primary and community care services
- Area and regional service consistency
- Extending Primary Care Elective Services
- Commissioning opportunities
  - Post-Covid/post-viral service
- Focus on the 'ologies' – pull more to neighbourhoods
- INTs' role in timely discharge of those medically fit
- Opportunities for service change – push more to neighbourhoods
  - E.g. Pre-op and post-op review

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