



You can view the agenda at <https://www.devon.gov.uk/democracy/>
or use a smart phone camera and scan the code above.

To: The Chair and Members of the
Health and Adult Care Scrutiny
Committee

County Hall
Topsham Road
Exeter
Devon
EX2 4QD

(See below)

Your ref :
Our ref :

Date : 4 March 2020
Please ask for : Gerry Rufolo 01392 382299

Email: gerry.rufolo@devon.gov.uk

HEALTH AND ADULT CARE SCRUTINY COMMITTEE

Thursday, 12th March, 2020

A meeting of the Health and Adult Care Scrutiny Committee is to be held on the above date at 2.15 pm at Committee Suite - County Hall to consider the following matters.

P NORREY
Chief Executive

A G E N D A

12 Model of Care – Site Visit to Holsworthy & Hatherleigh Medical Centre (Pages 1 - 4)

4.35 pm

Report of the Site Visit, attached.

Members are reminded that Part II Reports contain confidential information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). Members are also reminded of the need to dispose of such reports carefully and are therefore invited to return them to the Democratic Services Officer at the conclusion of the meeting for disposal.

Membership

Councillors S Randall-Johnson (Chair), H Ackland (Vice-Chair), M Asvachin, J Berry, P Crabb, R Peart, S Russell, P Sanders, A Saywell, M Shaw, R Scott, J Trail, P Twiss, N Way, C Wright and J Yabsley

Declaration of Interests

Members are reminded that they must declare any interest they may have in any item to be considered at this meeting, prior to any discussion taking place on that item.

Access to Information

Any person wishing to inspect any minutes, reports or lists of background papers relating to any item on this agenda should contact Gerry Rufolo 01392 382299.

Agenda and minutes of the Committee are published on the Council's Website and can also be accessed via the Modern.Gov app, available from the usual stores.

Webcasting, Recording or Reporting of Meetings and Proceedings

The proceedings of this meeting may be recorded for broadcasting live on the internet via the 'Democracy Centre' on the County Council's website. The whole of the meeting may be broadcast apart from any confidential items which may need to be considered in the absence of the press and public. For more information go to: <http://www.devoncc.public-i.tv/core/>

In addition, anyone wishing to film part or all of the proceedings may do so unless the press and public are excluded for that part of the meeting or there is good reason not to do so, as directed by the Chair. Any filming must be done as unobtrusively as possible from a single fixed position without the use of any additional lighting; focusing only on those actively participating in the meeting and having regard also to the wishes of any member of the public present who may not wish to be filmed. As a matter of courtesy, anyone wishing to film proceedings is asked to advise the Chair or the Democratic Services Officer in attendance so that all those present may be made aware that is happening.

Members of the public may also use Facebook and Twitter or other forms of social media to report on proceedings at this meeting. An open, publicly available Wi-Fi network (i.e. DCC) is normally available for meetings held in the Committee Suite at County Hall. For information on Wi-Fi availability at other locations, please contact the Officer identified above.

Public Participation

Devon's residents may attend and speak at any meeting of a County Council Scrutiny Committee when it is reviewing any specific matter or examining the provision of services or facilities as listed on the agenda for that meeting.

Scrutiny Committees set aside 15 minutes at the beginning of each meeting to allow anyone who has registered to speak on any such item. Speakers are normally allowed 3 minutes each.

Anyone wishing to speak is requested to register in writing to the Clerk of the Committee (details above) by the deadline, outlined in the Council's [Public Participation Scheme](#), indicating which item they wish to speak on and giving a brief outline of the issues/ points they wish to make. The representation and the name of the person making the representation will be recorded in the minutes.

Alternatively, any Member of the public may at any time submit their views on any matter to be considered by a Scrutiny Committee at a meeting or included in its work Programme direct to the Chair or Members of that Committee or via the Democratic Services & Scrutiny Secretariat (committee@devon.gov.uk). Members of the public may also suggest topics (see: <https://new.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutiny-work-programme/>)

All Scrutiny Committee agenda are published at least seven days before the meeting on the Council's website.

Emergencies

In the event of the fire alarm sounding leave the building immediately by the nearest available exit, following the fire exit signs. If doors fail to unlock press the Green break glass next to the door. Do not stop to collect personal belongings, do not use the lifts, do not re-enter the building until told to do so.

Mobile Phones

Please switch off all mobile phones before entering the Committee Room or Council Chamber

If you need a copy of this Agenda and/or a Report in another format (e.g. large print, audio tape, Braille or other languages), please contact the Customer Service Centre on 0345 155 1015 or email: committee@devon.gov.uk or write to the Democratic and Scrutiny Secretariat in G31, County Hall, Exeter, EX2 4QD.



Induction loop system available

Terms of Reference

(1) To review the implementation of existing policies and to consider the scope for new policies for all aspects of the discharge of the Council's functions concerning the provision of personal services for adults including social care, safeguarding and special needs services and relating to the health and wellbeing of the people of Devon, including the activities of the Health & Wellbeing Board, and the development of commissioning strategies, strategic needs assessments and, generally, to discharge its functions in the scrutiny of any matter relating to the planning, provision and operation of the health service in Devon;

(2) To assess the effectiveness of decisions of the Cabinet in these areas of the Council's statutory activity;

(3) To relate scrutiny to the achievement of the Council's strategic priorities and to its objectives of promoting sustainable development and of delivering best value in all its activities;

(4) To make reports and recommendations as appropriate arising from this scrutiny to the County Council and to the Secretary of State for Health, in accordance with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

NOTES FOR VISITORS

All visitors to County Hall, including visitors to the Committee Suite and the Coaver Club conference and meeting rooms are requested to report to Main Reception on arrival. If visitors have any specific requirements or needs they should contact County Hall reception on 01392 382504 beforehand. Further information about how to get here can be found at: <https://new.devon.gov.uk/help/visiting-county-hall/>. Please note that visitor car parking on campus is limited and space cannot be guaranteed. Where possible, we encourage visitors to travel to County Hall by other means.

SatNav – Postcode EX2 4QD

Walking and Cycling Facilities

County Hall is a pleasant twenty minute walk from Exeter City Centre. Exeter is also one of six National Cycle demonstration towns and has an excellent network of dedicated cycle routes – a map can be found at: <https://new.devon.gov.uk/travel/cycle/>. Cycle stands are outside County Hall Main Reception and Lucombe House

Access to County Hall and Public Transport Links

Bus Services K, J, T and S operate from the High Street to County Hall (Topsham Road). To return to the High Street use Services K, J, T and R. Local Services to and from Dawlish, Teignmouth, Newton Abbot, Exmouth, Plymouth and Torbay all stop in Barrack Road which is a 5 minute walk from County Hall. Park and Ride Services operate from Sowton, Marsh Barton and Honiton Road with bus services direct to the High Street.

The nearest mainline railway stations are Exeter Central (5 minutes from the High Street) and St David's and St Thomas's both of which have regular bus services to the High Street. Bus Service H (which runs from St David's Station to the High Street) continues and stops in Wonford Road (at the top of Matford Lane shown on the map) a 2/3 minute walk from County Hall, en route to the RD&E Hospital (approximately a 10 minutes walk from County Hall, through Gras Lawn on Barrack Road).

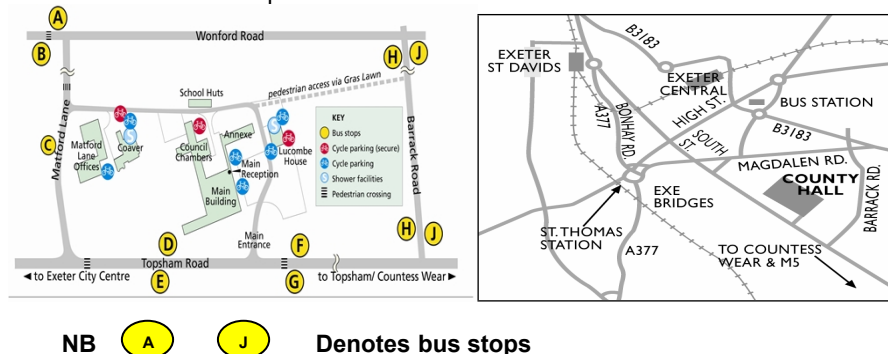
Car Sharing

Carsharing allows people to benefit from the convenience of the car, whilst alleviating the associated problems of congestion and pollution. For more information see: <https://liftshare.com/uk/community/devon>.

Car Parking and Security

There is a pay and display car park, exclusively for the use of visitors, entered via Topsham Road. Current charges are: Up to 30 minutes – free; 1 hour - £1.10; 2 hours - £2.20; 4 hours - £4.40; 8 hours - £7. Please note that County Hall reception staff are not able to provide change for the parking meters.

As indicated above, parking cannot be guaranteed and visitors should allow themselves enough time to find alternative parking if necessary. Public car parking can be found at the Cathedral Quay or Magdalen Road Car Parks (approx. 20 minutes walk). There are two disabled parking bays within the visitor car park. Additional disabled parking bays are available in the staff car park. These can be accessed via the intercom at the entrance barrier to the staff car park.



Fire/Emergency Instructions

In the event of a fire or other emergency please note the following instructions. If you discover a fire, immediately inform the nearest member of staff and/or operate the nearest fire alarm. On hearing a fire alarm leave the building by the nearest available exit. The County Hall Stewardesses will help direct you. Do not stop to collect personal belongings and do not use the lifts. Assemble either on the cobbled car parking area adjacent to the administrative buildings or in the car park behind Bellair, as shown on the site map above. Please remain at the assembly point until you receive further instructions. Do not re-enter the building without being told to do so.

First Aid

Contact Main Reception (extension 2504) for a trained first aider.

Understanding the Model of Care – Site Visit to Holsworthy & Hatherleigh Medical Centre

Report of the Health & Adult Care Scrutiny Members

Please note that the following recommendations are subject to confirmation by the Committee before taking effect.

Recommendations:

that the Committee shares the learning from the visit to inform its future work programme.

Background

Following the 22 March 2018 Health & Adult Care Scrutiny Committee it was agreed that members would undertake a series of visits to health and care settings across the County. Councillors wanted to get a first-hand account from staff of where the system is working well, how supported they feel and where there may be issues of concern. The visits were about members getting a better understanding of the way in which the model of care in Devon is working operationally and the key issues affecting services from a frontline perspective. Members have undertaken visits to various health providers including to psychiatric units, community health and care teams, residential care homes, personal care providers, GP practices and South Western Ambulance Foundation Trust over the last 2 years.

The Model of Care

The model of care in Devon is built upon the premise that people should be treated in their own homes wherever possible and that conditions that had previously required hospitalisation may no longer need it or may not need it for as long. Staying any longer than necessary in hospital causes harm to patients – muscle function reduction, reduced independence & risk of infection. It particularly affects people who are frail and people who have dementia. The model also enables improved use of resource by transferring resource and workforce from the provision of community hospital beds to the provision of enhanced home-based care services more people can be supported.

- Comprehensive assessment to identify and support those most at risk of being admitted to hospital in an emergency
- Single point of access and rapid response service - front and back end of the pathway - admission avoidance and expedited discharge
- Building on what is already taking place; each intervention is an extension of work that is already happening in parts of Devon
- Changing how we think and act - changes in system & process only part of the change – ‘doing the same, better’.
- Leading to changing the focus to prevention, population health & wellbeing. New focus & roles that span health, care and rehabilitation = ‘doing things differently’.
- Trust, mutual understanding of risk and ability to share information are essential for successful integration.

Agenda Item 12

25 February 2020 – Holsworthy & Hatherleigh Medical Centre Site Visit

[Ruby Country Medical Group](#) brings together Holsworthy & Hatherleigh Medical Centre, and Stratton Medical Centre with a growing practice population of 14,800 patients spread over about 350 square miles in both Devon and Cornwall. Their team includes GPs, a Clinical Pharmacist, paramedics, nurse practitioners, practice nurses, health care assistants and phlebotomists as well as practice management and patient services teams. They also have access to two social prescribers employed by the local Primary Care Network (PCN).

The following councillors undertook the visit to Holsworthy & Hatherleigh Medical Centre, where they met Jane Wells, Managing Partner, Ruby Country Medical Group:

- Cllr Hilary Ackland, Chair
- Cllr Sylvia Russell
- Cllr Andrew Saywell
- Cllr Jeff Trail

Issues Identified

Health Profile

- There is considerable rural deprivation in the area. Low wage and low skilled jobs in the main.
- The patient profile is poorer and more elderly than the Devon average. People are living much longer with ill health. Growing complex elderly.
- At the 40-70 years health checks, the main issues tend to be obesity and alcohol. The number of diabetics has increased significantly. There is a lot of work also around smoking cessation.

Primary Care Networks

- There are 6 practices in the PCN (4 in Devon and 2 in Cornwall). Each practice has a Practice Administrator, and the PCN has a PCN Manager who was recruited to help run the Network.
- PCNs will not see a patient at another surgery within the PCN unless there is a sub-contracting arrangement.
- PCNs are not yet mature. It might be 5 to 10 years until they are maximising their potential.
- There is a lack of consistency across the various practices as all private business.

Rural Isolation

- Accessibility is an issue with Holsworthy over 30 miles from the nearest acute hospital in Barnstaple. The area suffers with a lack of connectivity. Getting to Barnstaple is difficult, as the distance is compounded by issues with the roads. There are also many elderly who do not drive.
- The local farming community often will not let people see if they are struggling and will look after themselves more.

Recruitment and Retention

- Last year the [Nuffield Trust](#) reported that across the UK, the number of GPs relative to the size of the population has fallen in a sustained way for the first time since the 1960s. The shortage of GPs could treble in the next 5 years.

- The situation with GP recruitment is an issue in Holsworthy and North Devon in general. North Devon has limited professional opportunities. A lot of GPs over 55 and would like to retire given certain recent pension issues.
- Unlikely to have partners that will work here for 30 years – on average now staying for 5 years. The family doctor days have long gone. Patients do not always recognise this is the case.
- GPs generally marry similar high earners and there needs to be career opportunities in the area for both, which Holsworthy does not have.
- It is difficult recruiting nurses, nurse practitioners and pharmacists. 'Growing your own' is the way forward and promoting opportunities in nursing in primary care. High percentage of nurses also over 50.
- Holsworthy & Hatherleigh Medical Centre currently has 9 GPs, which is 2 short and also 2 nurse practitioners short in the practice, while also need 10 new staff for the PCN including a mental health worker. GPs often want to work part-time.

Appointment Waiting Times

- The latest target is that patients are seen within 3 weeks.
- There is always a huge spike in the number of patients on a Monday as the out of hours provision is not adequate in Barnstaple.

Accident & Emergency

- People in the area do not tend to use A&E in the same way as they would if it was nearer (Holsworthy is over 30 miles from Barnstaple). Direct correlation in terms of A&E attendance and the distance people live to the hospital.

Prevention

- Prevention is key and earlier intervention.

Mental Health

- Massive need for mental health services – managing those with a high risk of suicide. There are significant gaps in terms of childrens mental health and emotional wellbeing.

Residential Care

- Residential care homes in the area are mixed in terms of their quality. There is only one home in the area with step-up and step-down beds.

Voluntary Sector

- Voluntary groups tend to be in the towns, but as soon as you get outside then huge drop off.

Digital

- The practice has had digital medical records for over 20 years. These do not tie in with hospital records.
- eConsult is used for sick notes, travel advice, asthma reviews. Not convinced by the STP claim that it will save 5% of appointments. The ease of access may end up creating more demand.

Agenda Item 12

Carers (unpaid)

- Link in with Devon Carers – have social prescribers working with frequent attenders.
- Carer identification is difficult. Considerable time is spent data cleansing to ensure the carers register is up to date.
- Carers are often at end of their tether compounded by the rurality and lack of services available.

Care Workers

- As there will be across the County, there are issues with staffing and care workers remuneration, which is exacerbated by the rural isolation and demography of the area.
- There are some areas not covered by any providers. A care package of 4 sessions a day may be agreed, but then the provider may only be able to cover 2 of these.

GP Surgery Valuation

- Issue with how GP surgeries are valued creates significant limitations.

Small GP Practices

- Shebbear will not be the last small practice to close. Less than 5000 population size are not seen as viable.

Conclusion

Members agreed that the site visit provided invaluable insight into how the model of care is working from a GP surgery perspective. The key objective is to keep people living safely at home, promoting their independence and their good physical and mental health.

The Committee should continue to consider further visits in line with the work programme to broaden members understanding on complex topics.

Members also wished to place on record their thanks to Jane Wells and Ruby Medical Group for the visit.

Councillor Hilary Ackland, Vice Chair Health & Adult Care Scrutiny Committee

Electoral Divisions: All

Local Government Act 1972

List of Background Papers

Contact for Enquiries: Dan Looker

Tel No: (01392) 382232

There are no equality issues associated with this report