ACH/19/114 Health and Adult Care Scrutiny 23 September 2019

HEALTH AND CARE GENERAL UPDATE PAPER

Joint report Joint Associate Director of Commissioning (Devon County Council and NHS Devon CCG) and the (Interim) Director of Commissioning – Northern, Eastern and Southern Devon (NHS Devon CCG)

1. Recommendation

1.1 That the Health and Adult Care Scrutiny Committee receives this report that contains updates and general information responding to specific actions or requests during the previous Health and Adult Care Scrutiny Committee meeting.

2. Purpose

2.1 To respond to specific questions from previous meeting (sections 3-5) and update on latest news (section 6).

3. Performance comparison of Ambulance Foundation Trusts

- 3.1 Further to previous information provided to the Health and Adult Care Scrutiny Committee on aspects of <u>SWASFT performance</u> in June. There was a request to understand relative performance compared to other Ambulance Service Financial Trusts.
- 3.2 This information is available in a monthly <u>performance report</u> submitted to the SWASFT Board that includes a wide range of performance figures, including information on response times. The report also includes national benchmarking of SWASFT performance against the other ambulance trusts in England. The reports are published on a monthly basis.
- 3.3 The NHS also publishes <u>ambulance quality indicator data</u> on a monthly basis.

4. Urgent care and winter planning

- 4.1 Levels of urgent care activity in the urgent care system over the summer period have been above those anticipated and planned and this has put additional pressure on A&E departments in our 4 acute hospitals. Current performance for the latest year to date figure is 85.5% (national performance is at 87.8%) against 4 hour waits in ED departments.
- 4.2 All partners are now working on local winter plans using additional winter resources that will bring additional capacity over the winter period. There will also be a system wide plan which will be sent to NHS England by 4 October for initial review and feedback with a final plan submission in early November.

5. Healthwatch Devon Annual Report 2018-19

- 5.1 In June this year Healthwatch Devon published its <u>annual report</u> for 2018-19. The report sets out people's experience of health and care services in Devon. Over 2600 people across Devon contributing.
- 5.2 The report also sets out what Healthwatch has done with this information and how it has contributed to improving the experience that people get from local health and care services.

6. Devon Health and Care system communications update

6.1 The quality of health and care services in Devon

- 6.1.1 The CQC has updated all of the <u>local area profile documents</u>. Of particular note locally is that 100% of GP surgeries in the DCC footprint are rated either Good (77%) or Outstanding (23%), better than national and comparator averages. And, adult social care provision within the DCC footprint also continues to be rated as better quality than national and comparator averages
- 6.1.2 GP practices across Devon have also been praised after achieving excellent results in the <u>annual national patient survey</u>.
- 88% of patients described the overall experience of their GP practice as good or very good
- 90% of patients reported feeling that the healthcare professional at their last appointment recognised or understood any mental health needs they had (compared with 86% nationally).
- Almost eight in ten patients (77%) reported a good experience of NHS services when they wanted to see a GP but their GP practice was closed.
- 90% of patients felt that the healthcare professional at their last appointment recognised or understood any mental health needs they had, compared to 86% nationally

6.2 Devon Sustainability and Transformation Partnership shortlisted for Public Sector Campaign of the Year

6.2.1 Thumbs Up For Coby, a powerful Devon STP campaign to encourage parents to make sure children get the flu vaccination, has been shortlisted for three Chartered Institute of Public Relations (CIPR) awards. The campaign, which reached more than one million people online and contributed to an increase in flu vaccinations for 2-3-year-olds by 10%, is shortlisted in the following categories in the South of England and Channel Islands awards: Public Sector Campaign of the Year; Regional Campaign of the Year; Best Use of Social Media.

6.3 NHS and Local Government working together in Dartmouth

6.3.1 Ambitious plans to build a new health and wellbeing centre in Dartmouth have received a <u>triple boost</u>. The local NHS, South Hams District Council (SHDC), Dartmouth Medical Practice and other partners are working together to build a state-of-the-art new home for GP and NHS services in the town.

- 6.3.2 SHDC's Executive has approved the business case for the scheme and GPs from Dartmouth Medical Practice have formally announced they will relocate from their Victoria Road surgery to the new site after terms were agreed with Devon CCG. Torbay and South Devon NHS Foundation Trust, which provides local NHS services, has also announced it had approved the financial model for the scheme and confirmed details about the sums being invested by the NHS. The overall project cost is £4.8million.
- 6.3.3 The new building will be light, airy and built to modern health and energy standards, providing an improved experience for patients.

6.4 Living Well at Home update

- 6.4.1 Devon County Council and NHS Devon CCG commission domiciliary care that is provided at home to vulnerable people across the county. Since July 2016, this has been delivered through our Living Well at Home contract, with three Primary Providers; Mears Care, Mihomecare and Devon Cares. They in turn have provided the contract either directly, or via other local care providers.
- 6.4.2 Devon County Council and Devon CCG have agreed with Mears Care to bring forward the end of their contract as Primary Provider for personal care in Exeter, East Devon, Teignbridge, South Hams and Tavistock. This follows a review by Mears of their business model now that they no longer deliver direct care to people in Devon, and a wider consideration of how best to respond to market conditions in those areas.
- 6.4.3 This decision means that Devon County Council will take back the day to day direct management of those care arrangements. People currently receiving a service will not be affected by this change.
- 6.4.4 We will work in close partnership with the same local care providers that Mears Care subcontract with, so that people who are currently receiving home visits arranged by Mears Care on our behalf will continue to receive their care from the same care providers, with the same care arrangements.
- 6.4.5 We anticipate that a small number of Mears Care staff will transfer to Devon County Council under TUPE Regulations, and we will be recruiting additional staff to ensure a smooth transition.
- 6.4.6 We continue to engage local care providers in our action plan and will have the new arrangements in place in early November.

6.5 Healthy and Happy Communities: Devon's Joint Health and Wellbeing Strategy 2020-25

- 6.5.1 The consultation on the new Devon Joint Health and Wellbeing Strategy closed on the 5th of September.
- 6.5.2 As well as the online consultation, a series of five focus groups were held by Living Options Devon to engage hard to reach groups such as learning disabled, LGBTQ, young people, disabled and deaf people and BME

communities. The organisations which supported the focus groups included:

- United Response (5 people participated Adults with learning disabilities)
- Proud2Be (50 people participated Young people and adults)
- Young Devon (18 people participated Young people aged 13 to 23 years)
- Living Options (22 people participated Adults with lived experience of disability)
- Hikmat (78 people participated Devon residents from the following ethnic groups: Filipino, Chinese, Vietnamese, Bangladeshi, Pakistani, Syrian, Libyan, Bahraini, Egyptian, Iraqi, and Sudanese.)
- 6.5.3 Responses have also been received through other means and therefore it is important to recognise that the information provided in Appendix A of this report is interim and indicative of what has been heard in response to the consultation questions.
- 6.5.4 A full and final analysis and response to what has been heard during the consultation will be published in due course when all the feedback received has been considered.

6.6 Proud to Care health and care campaign update

- 6.6.1 <u>Proud to Care Devon</u> will be running a further marketing recruitment campaign to support the recruitment of care workers in Devon from September December. This campaign will focus on recruiting people to roles in domiciliary care, residential and nursing homes using a range of different media to attract people aged 20 39.
- 6.6.2 Digital advertising will include YouTube, Gmail, Instagram Stories, and Facebook, as well as TV and On Demand adverts, radio advertising through Heart FM, and advertising on the back of buses. The campaign will focus on a small number of older people who are currently receiving care in Devon, in their own home and in residential homes.
- 6.6.3 Proud to Care was pleased to be overall sponsor at the <u>Outstanding</u> <u>Care Awards 2019</u> at the Riviera International Centre on a beautiful sunny evening in Torquay on Friday 28 June. The full list of the award winners can be found <u>here</u>.

6.7 Association of Directors of Adult Social Service annual budget survey

- 6.7.1 In June ADASS published the results of 2019 <u>annual budget survey</u>. There are a number of ADASS resources that set out the key message and also that looks in more detail at the findings. The key messages are:
- The failure of any government to address social care is having severe impacts on people needing care, their families and the people who work in arranging and delivery of care
- Social care and the NHS are interdependent. Without a settlement for social care the NHS will not be able to deliver on the commitments of the Long-Term Plan.
- There needs to be a long-term, sustainable solution for funding adult social care

- Short-term funding needs to continue until whatever is in the promised Green Paper can be implemented.
- Adequate funding is required to meet an increasing number of people's needs in effective ways.
- Councils, individuals employing personal assistants and providers must be able to recruit and retain a caring, skilled and valued workforce
- We need to be able to fund a vibrant care market that gives people choice and control over their lives
- Aspirations to invest in asset-based approaches and prevention must be able to be realised

6.8 Devon Doctors to provide 111 and out of hours from 1 October 2019

- 6.8.1 Devon Doctors have been the main provider for the Integrated Urgent Care Service (IUCS) in Devon for three years, with the NHS 111 telephony service for Devon sub-contracted to Vocare. Together we have been reviewing how the IUCS is provided in future, specifically the provision of NHS 111 and out-of-hours care (triage, treatment centre and home visits).
- 6.8.2 The objective of the review focuses on ensuring a high-quality and efficient service, diversity in roles and job security and delivering a sustainable model for the future service which has a really important role to play in delivering the ambitions of the Long Term Plan for the NHS.
- 6.8.3 Devon Doctors will begin directly providing the Devon NHS 111 telephony service on 1 October 2019. The sub-contact with Vocare will cease. This means Devon Doctors will provide the entire IUCS service directly, from initial NHS 111 call right through to clinical consultation at either CAS, treatment centres or by home-visiting clinicians.

6.9 Peninsula Clinical Services Strategy

- 6.9.1 The Peninsula Clinical Services Strategy (PCSS) brings together NHS partners across Devon and Cornwall and the Isles of Scilly to shape the future of hospital-based clinical services, ensuring their safety, quality, accessibility, resilience, performance and affordability.
- 6.9.2 The strategy is vital to address some of the fundamental challenges faced by the NHS, which will escalate in the next five to ten years. By enabling clinical teams to work together across hospitals, sharing access to diagnostics and expensive equipment we aim to deliver the best standard of care we can throughout the peninsula and work together to manage waiting times so they are kept as short as possible for our population.
- 6.9.3 Clinical teams are working hard to meet the increasing need for their services but are challenged by difficulties in recruiting essential staff and their access to specialised facilities and equipment.
- 6.9.4 Through this strategy, which is led by local doctors and will involve clinicians and hospital managers from each trust, we want to spread collaboration, clinical networking and best practice in the services where we are facing our greatest challenges. A briefing document on the PCSS is available to download.

6.10 Results of the Better Births engagement.

- 6.10.1 In 2018, the Local Maternity System (LMS) in Devon consisting of NHS and health care organisations undertook 8 weeks of intensive engagement to gather the thoughts, experiences, and views of parents and families about births in Devon.
- 6.10.2 2,267 parents gave their feedback, and this has helped us shape the priorities for maternity services in Devon, working with the <u>Maternity</u> <u>Voices Partnership (MVP)</u>
- 6.10.3 During the engagement, we explored the recommendations of NHS England's Better Births review. This national review focuses on personalised care, continuity of carer (i.e. seeing the same health professionals), postnatal and perinatal mental health care, digital medical records and the wider planning of maternity services.
- 6.10.4 Since the engagement took place, the LMS has been looking at the recommendations and how they are implemented locally
- 6.10.5 The full report is available <u>online</u> that detail all of the recommendation received including the following:
 - More shared decision-making and better communication between families and health professionals
 - Consistent information is needed regarding safety, this is a big part of the decision-making process for families when deciding where to have their baby. They should be given all relevant information regarding safe birthing options before they are asked to decide where they want to deliver their baby. For example, parents wanted more information about home birthing
 - Antenatal and postnatal care could be much better at a local level, parents were concerned about the reduction of groups in the community and peer-to-peer opportunities that used to happen in children's centres. They also felt antenatal classes missed opportunities and could provide much better advice and information to help parents plan and make informed decisions
 - Birthing plans are a personal decision taken by families, however a strong recommendation from families was regarding post birth - when a birth has not gone to plan. They would like a de-brief, offer of further support if they are struggling (this could be counselling or support groups, for example), and the chance to talk it through with a health professional.
 - Feeding choices parents feel there is more that can be done to help them make informed choices, they shared experiences of being given contradicting advice from professionals. Feeding was the main theme that seemed to cause added stress and confusion postnatally. They felt there was limited opportunities in the community for peer-to-peer feeding support, unless volunteer groups existed.
 - In terms of perinatal and postnatal mental health, families felt there should be better support for those who have experienced a traumatic birth. They also want to see better community support and more peer-to-peer groups. It was felt the reduction in postnatal groups could have a significant impact on families and women, as the opportunity to come together in the community to socialise, support each other through feeding and developmental milestones is highly valued.

6.10.6 Better Births engagement in numbers:

- 12,500 births per year in Devon
- 1,370 people completed an online survey
- 29 focus groups were held across Devon
- 78 children's centre events were attended over 8 weeks reaching 324 parents (60 children's centres were involved)
- 438 engagements on the dedicated 'Better Births in Devon' Facebook page (social media proved a very successful channel for engagement)
- Over 300 people registered their interest in being further involved in the development of maternity services. People continue to be involved on the <u>Better Births in Devon Facebook page</u>

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LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS

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BACKGROUND PAPER DATE FILE REFERENCE

Nil