

Report to Devon County Council's Health and Adult Care Scrutiny Committee

21 June 2022

Update on Modernising Health and Care Services in the Teignmouth and Dawlish area

1. Background summary

In autumn 2020, Devon Clinical Commissioning Group (CCG) undertook a public consultation on the future of health and care services in Teignmouth and Dawlish and the surrounding area.

In December 2020, the CCG's Governing Body approved the recommendations to:

- a) Move of the most frequently used community clinics from Teignmouth Community Hospital to the new Health and Wellbeing Centre
- b) Move of specialist outpatient clinics, except ear nose and throat clinics and specialist orthopaedic clinics, from Teignmouth Community Hospital to Dawlish Community Hospital, four miles away
- c) Move of day case procedures from Teignmouth Community Hospital to Dawlish Community Hospital
- d) Continue with a model of community-based intermediate care, reversing the decision to establish 12 rehabilitation beds at Teignmouth Community Hospital
- e) Move of specialist ear, nose and throat clinics and specialist orthopaedic clinics to the Health and Wellbeing Centre
- f) Request Torbay and South Devon NHS Foundation Trust consider in detail the suggestions put forward for additional services at the Health and Wellbeing Centre
- g) Request Torbay and South Devon NHS Foundation Trust consider providing a second base at Dawlish Community Hospital for physiotherapists, occupational therapists and district nurses
- h) Request Torbay and South Devon NHS Foundation Trust work with Teignbridge District Council to mitigate parking issues for staff and patients as far as possible.

The **benefits of the new Health and Wellbeing Centre** are far reaching and include:

- Better opportunities to train new GPs and other clinical staff through additional space.
- Improved professional development for senior staff
- Greater opportunities to encourage new GPs and nurses to work in Teignmouth for the longer term.
- A range of health and care specialists working under the same roof, providing opportunities for further enhanced integrated care, supporting people in their own homes and further reducing hospital admissions and demand on Torbay Hospital.
- Flexibility in use of space and potential to share administrative functions.
- Great place to work – offering a bright, modern and airy environment, build to a specification designed to meet local need.
- Easier access for patients and carers, especially those with disabilities.
- More space so other services can be included on a drop-in basis such as housing and mental health.
- Convenient town centre location with likely economic boost to the surrounding area.
- The modern building would meet environmental standards and be more efficient to run.
- Contributing to the regeneration of Teignmouth town centre.

In March 2021 the Devon Health and Adult Social Care Overview and Scrutiny Committee decided to refer the issue to the Secretary of State. The referral was made using regulation 23(9)(a) of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 – that the Scrutiny Committee is not satisfied that consultation between the CCG and themselves has been adequate in relation to content or time allowed.

In November 2021 the Secretary of State asked the Independent Reconfiguration Panel (IRP) to review the evidence in relation to the referral. The Secretary of State also requested that the Panel consider: - the impact of these proposals on groups with protected characteristics under the Equality Act (2010) in light of your duties around health inequalities and the Public Sector Equality Duty; and - current system resilience and the impact of the COVID-19 pandemic.

The CCG received correspondence about the outcome of the referral from the Secretary of State on 17 March 2022 at 2.17pm, just after the council was informed, including the report and recommendations from the IRP. The IRP concluded:

The Panel has considered the referral on its merits and concluded that NHS Devon Clinical Commissioning Group consulted adequately with Devon County Council's Health and Adult Care Scrutiny Committee on its proposal.

Purpose of this Report

The purpose of this report is to update members of the Devon County Council Health and Adult Care Scrutiny Committee by:

- Summarising the report from the IRP
- Reporting on the progress on the Health and Wellbeing Centre project in Teignmouth
- Outlining the CCG's response to the recommendations made by the IRP

2. Summary of the IRP Report (See Appendix 1 for the report)

Consultation with the Scrutiny Committee

The IRP's view is:

The Panel notes that the CCG has carried out extensive engagement and consultation since 2013 using a variety of methods based on strong clinical evidence with scrutiny from the South West Clinical Senate and others. [...]

Taken with the evident interest of local people, captured and reported in successive engagement exercises and the public consultation, it is clear to the Panel that the future of Teignmouth Community Hospital under the proposal has been in plain sight for everyone and open for discussion with the NHS since 2018.

[...] the Panel feels that the CCG perhaps could have been more explicit in its communication with the public about how they would be involved in determining the hospital's future, should the proposal be implemented. [...]

Overall, the Panel considers that the CCG did consult adequately with the Scrutiny Committee in terms of content and time allowed. There are lessons to be learned for both parties about timing and process which should be the subject of a joint review to prevent similar issues happening again in future.

The Impact on equality and protected characteristics

The IRP's view is:

The Panel has reviewed the quality and equality impact assessment and the travel impact assessment in full and considers that the CCG has properly assessed the impact of the proposal on people with protected characteristics. The Panel also notes the involvement of various stakeholders to provide feedback on the proposal, including the independent expertise of Healthwatch.

The Panel understands that the centre of Teignmouth has the highest deprivation levels in terms of health and disability and agrees with the CCG that moving services into this area as part of the new Health and Wellbeing Centre, with multi-disciplinary teams working together under one roof, would be of positive benefit to patients. [...]

The Panel considers that the proposal to move services to Dawlish Community Hospital, although it is four miles away from Teignmouth, demonstrates positive benefits for equality because it is on a level site with good car parking and would improve disability access when compared to Teignmouth Community Hospital which is sited at the top of a steep hill with limited parking. [...]

It is also important to note that the services being proposed to move to Dawlish from Teignmouth are used in high proportion by people living outside of the area, with 86% of patients who have day case procedures, and 70% who attend specialist clinics, living outside the Coastal Locality and will already need to travel some distance to Teignmouth to attend their appointments. The Panel therefore feels that it is reasonable for patients to travel a further four miles to Dawlish under the proposal but agrees that there are still some legitimate concerns around public transport. [...]

Overall, the Panel considers that the proposal as described would not disadvantage groups with protected characteristics under the Equality Act (2010).

The Impact of COVID-19 and system resilience

The IRP's view is:

The Panel has considered the CCG's review of the impact of COVID-19 and acknowledges the difficulties in planning services around future COVID-19 prevalence as the situation is constantly evolving. [...]

On the issue of rehabilitation beds in Teignmouth, the Panel acknowledges the CCG's evidence on reducing hospital admissions and that the integrated care model is able to care for around four times as many patients at home when compared to caring for patients on a ward at Teignmouth Community Hospital. This model of care was evaluated by researchers from the University of Plymouth over a two-year case study published in 2019.

The Panel recognises the Devon system as a national exemplar of providing integrated care which highlights the importance of admission avoidance and supports emerging national evidence on people staying well out of hospital. [...]

The Panel understands that the CCG's proposal involves moving the location of existing services with minimal impact for the current workforce and agrees that the improved facilities of the new Health and Wellbeing Centre are likely to improve recruitment and retention, particularly among GPs and the local integrated health and wellbeing team.

Conclusion

The IRP's view is:

*After a thorough review of the evidence in this case, **the Panel understands how the proposal will deliver the vision of patient-centred and integrated local services by modernising and making the best use of health and care facilities and staff resources in the Teignmouth and Dawlish area.** The history and contribution of Teignmouth Community Hospital is cherished by some of the local community and they need to be involved in its future possibilities. [...]*

The evidence also highlights the importance of NHS commissioners working with local authorities and community organisations outside of health and care to consider equality issues, such as travel, in order to provide an integrated and joined-up service for people to access the care they need.

This case demonstrates how challenging it can be to develop proposals for service change in a fast-moving situation such as the COVID-19 pandemic. However, health and care systems must adapt and learn from this experience and use COVID-19 as an accelerator for change to improve the safety, sustainability, and quality of services for all.

Recommendations made by the IRP (with numbering added)

1. Drawing on the example of engagement in Dartmouth, and innovative examples of repurposing community hospitals elsewhere, the NHS must engage the local community and interested parties, such as the local authority, in a programme to determine the future of the Teignmouth Community Hospital site. It is for the HACSC and the relevant NHS body to discuss how they wish to be involved and whether the remedy of being consulted, as requested in the referral letter, is taken up.
2. The Panel understands that Devon CCG and Torbay and South Devon NHS Foundation Trust (TDSFT) will work with Teignbridge District Council to explore transport options, especially for the most vulnerable people. The CCG will also engage with Dawlish Community Transport and Volunteering in Health to support the further development of community transport options. As part of the planning application process, TSDFT has been working with Teignbridge District Council to mitigate the impact on parking at the Health and Wellbeing Centre, particularly for disabled people and staff. The IRP strongly supports these actions and recommends the establishment of a specific time-limited standing group of stakeholders, including patient representatives, transport providers, and planning authorities, to scope out the work required and the time frame for each action.
3. In this context, the Panel highlights the need for the NHS to examine digital inclusion to ensure the local population are able to access consultations remotely

to minimise the potential impact on health inequalities and ensure no patient groups are disadvantaged.

4. After examining the impact of COVID-19, the Panel recommends that the NHS keeps its scenario planning and risk analysis of bed and workforce capacity under close review.
5. The Panel encourages the CCG to explore the options and ensure that mental health services are included in the integrated care model of the Health and Wellbeing Centre in Teignmouth.
6. Overall, the Panel considers that the CCG did consult adequately with the Scrutiny Committee in terms of content and time allowed. There are lessons to be learned for both parties about timing and process which should be the subject of a joint review to prevent similar issues happening again in future.

3. Health and Wellbeing Centre Update

The plan is for the Health and Wellbeing Centre to be occupied by:

- Channel View Medical Group, the larger of the two Teignmouth GP practices, with 17,966 patients on its list (61% of the building)
- the health and wellbeing team, comprising community nurses, therapists and social workers
- community clinics including podiatry, physiotherapy and audiology
- specialist orthopaedic outpatient clinics and specialist ear nose and throat services
- the voluntary sector in the form of Volunteering in Health
- potentially one of the existing Teignmouth pharmacies

Torbay and South Devon NHS Foundation Trust will hold a head lease on the Health and Wellbeing Centre and will sub-let to the GP practice.

At a meeting on 28 April, Teignbridge District Councillors approved the sale of town centre land in Brunswick Street, Teignmouth, to Torbay and South Devon NHS Foundation Trust (TSDFT), as the site for a new Health and Wellbeing Centre for the town and surrounding area.

The site at Brunswick Street has been identified as one of the main areas for regeneration in the town. In approving the sale, the council noted 'positive collaboration with the NHS to provide a modern and accessible healthcare hub' in the centre of the town. A number of councillors also highlighted how the centre is due to be built in an area of high deprivation.

The trust and the council are now working on agreeing heads of terms for the land transaction. Once heads of terms are agreed (which will include a clause making the

sale subject to planning permission being granted), the trust will move to the detailed design phase.

TSDFT had previously submitted a planning application for the Health and Wellbeing centre on a different part of the same regeneration site on Brunswick Street. The revised plot allows for a better layout of the new Health and Wellbeing facility for the town. A notional fit of the services to a potential new design on the new site has already been demonstrated.

GB Partnerships (the Trust's estates partner) will act as developer and will manage the appointment of the main contractor. Pre-planning discussions have been held and a full planning application will be submitted in August/September 2022. Some surveys have been completed and these are being supplemented by other surveys required to confirm the overall development.

From here, a best-case schedule would involve submitting the planning application in August/September 2022, meaning a decision would be expected in December 2022/January 2023, with building work beginning in early 2023. The development would be likely to be circa 18 months in construction.

4. Update on IRP recommendations

Recommendation 1: Engaging the local community and interested parties in a programme to determine the future of the Teignmouth Community Hospital Site

Recommendation 2: Working with Teignbridge District Council on transport and parking and establishing a time-limited standing group of local partners

Note: Additionally, on 17 December 2020, when approving the formal service change recommendations made as part of the decision-making business case, the CCG's Governing Body approved a recommendation to request TSDFT work with Teignbridge District Council to mitigate parking issues for staff and patients as far as possible.

NHS Devon CCG and Torbay and South Devon NHS Foundation Trust are committed to continuing to engage with local people on the development of the planned new health and wellbeing centre and the future of Teignmouth Community Hospital.

As part of work to address recommendations 1 and 2, above, we have met with Anne Marie Morris, MP for Newton Abbot, and Sara Randall-Johnson, chair of the Health and Adult Care Scrutiny Committee, to discuss collaborative approaches. We have agreed two principal actions:

1. We will continue to work closely with the well-established Coastal Engagement Group, which has been instrumental in involving local people and groups in

discussions around key aspects of local health and care in Teignmouth and Dawlish for many years.

2. We will set up two short-term working groups (as sub-groups of the Coastal Engagement Group) comprising key stakeholders and members of the community to work together to identify and consider future possible uses for the Teignmouth Community Hospital site and transport options, as below.

Future of Teignmouth Community Hospital site sub-group

As noted in the IRP's recommendation paper, the trust will be drawing on the ongoing example of engagement in Dartmouth, where membership of the stakeholder group includes representatives from the town council, the local GP practice's patient participation group, the hospital league of friends, the district council, the voluntary sector, the neighbourhood plan steering group, the CCG, TSDFT, and the education sector, along with Governors and Trust members and an equality and diversity representative.

The objectives of the working group will be:

- To involve and listen to local people and communities as we plan for the future of the Teignmouth Community Hospital site.
- To work with a group of key stakeholders to identify possible future uses and to set the criteria for how we measure success for the preferred option(s).
- To seek input and views from people living in Teignmouth and Dawlish and the surrounding area on the options.
- To be clear, open and transparent in our involvement and communications, making sure that people are aware of this work and understand how decisions will be made.

It would be inappropriate to involve people in discussions on the future of the hospital before planning permission has been secured and so the working group will be set up by TSDFT once this project milestone has been achieved. This is likely to be January 2023, assuming the planning application is submitted in autumn 2022.

Transport Options sub-group

Work on establishing this group is in train and has already yielded positive outcomes.

As part of Teignbridge District Council's approval of the land sale on 28 April, the council also approved the budget to create a new car park next to the revised site for the health and wellbeing centre and that and this, alongside additional spaces created at the nearby Eastcliffe Car Park, will replace the spaces being lost as part of the land transfer.

The group will bring together Teignbridge District Council and local voluntary sector transport providers to explore transport options, especially for the most vulnerable people. This will include support for the further development of community transport options. This group will be set up in June 2022 once the trust and the council have agreed heads of terms for the land transaction and the trust moves to the detailed design phase with the aim of informing and supporting the planning application.

At our meeting on 9 June 2022, we invited Anne Marie Morris MP, or her representative, to join the groups and it was agreed that a member of Anne Marie's team will join. Anne Marie also made some helpful suggestions on possible membership of the groups which we are following up.

We also invited Cllr Sara Randall-Johnson or a member of the scrutiny committee to join the groups and it was agreed that a member will be nominated to join both groups.

Recommendation 3: Examining digital inclusion

The panel recommended we examine digital inclusion to ensure the local population is able to access consultations remotely to minimise the potential impact on health inequalities and ensure no patient groups are disadvantaged.

In line with other health and care systems, the NHS in Devon is working towards the Secretary of State's target to have 75% of our population using the NHS App by March 2024. We commission digital services in a manner that ensures both consistency and ease of use to encourage and enable use of digital solutions.

We know that not everyone has access to the technology and we therefore continue to provide multiple access methods to NHS services, including telephone consultations and walk-in appointments.

Where providers enjoy autonomy as to the design of digital offers, we are working to influence, and, where appropriate, incentivise consistency of offer. For example, we are working on a national pilot to improve and standardise GP practice websites.

We are also mandating that provider Electronic Patient Record solutions must either link to the NHS App or be connected to the emerging Devon and Cornwall Care Record (DCCR), which will be available to clinicians and local people.

The DCCR itself that will transform the way we provide services to patients, enabling authorised health and care staff to see relevant details held by a range of health and care providers across Devon, Cornwall, and the Isle of Scilly in a single record - giving them a more complete view of a patient's history. This reduces the need for patients to keep telling their story to many different clinicians at different appointments.

Last year, the CCG was part of a four-month project aiming to address digital inequality in clinical pathways. It was one of 10 across the UK, funded by [NHSX](#) and supported by Thrive by Design. This programme was a joint cross-sector initiative – the CCG and Devon Communities Together (DCT) applied for the funding, with the latter as project manager, alongside community wellbeing charity Wellmoor. The project ran from December 2021 to the end of March 2022.

As part of this piece of work, Devon Communities Together conducted a survey on how digital exclusion affects the lives of socially isolated people in later life living in rural communities in Devon. To prevent health inequalities developing in the future, this work aims to understand how we can support the target group to gain the skills and know-how to engage with the digital transformation with confidence.

In summary, the findings were:

- There is no ‘one-size fits all’ solution
- A hybrid/mix and match strategy is paramount
- Support from a trusted, digitally capable person is vital in the community
- Initiatives exist but not necessarily in rural areas distant from acute hospitals
- Accessing healthcare digitally in a community venue in rural areas ensures internet connectivity and social contact
- We know the positives – when it works well for many people, it saves time and money both ways and is better for the environment

These findings are due to inform an action plan forming part of the emerging Devon ICS strategy.

Recommendation 4: Reviewing scenario planning and risk analysis of bed and workforce capacity after examining the impact of COVID-19.

The NHS in Devon has closely monitored the impact of Covid-19 on health services throughout the pandemic, including on bed utilisation and workforce.

As part of operational and strategic planning, the NHS continues to assess the residual longer-term Covid impact, as well as general demographic and population changes, to ensure a detailed understanding of future demand on services and the capacity of the NHS to meet demand.

This includes scenario planning around different levels of demand and capacity and the associated risks are managed through our corporate risk management structures. Our corporate risk register is published every month as part of our [Governing Body agenda papers](#).

The Integrated Care System for Devon is in the process of writing Community First and General Practice strategies, and as part of this we will aim to understand the

impact these developments have on people's experience of health and care services.

Recommendation 5: Ensuring mental health services are included in the integrated care model of the health and wellbeing centre in Teignmouth

This is being achieved in a number of ways, as set out below.

The Community Mental Health Framework (CMHF) multi-agency approach across all three Teignbridge PCNs will enable good connectivity between the core mental health team, voluntary sector and primary care in developing resources to meet population needs.

The Southern Devon CMF Local Implementation Team brings together senior system managers across primary care, mental health, voluntary sector and wider community services to plan how services work together to meet the holistic needs of patients in a "one team" approach. Aligning Health and Wellbeing Centre, Teignmouth and CMHF will be progressed through this forum.

Coastal Primary Care Network and mental health provider Devon Partnership NHS Trust are working to implement a joint role using the national Mental Health Additional Roles Reimbursement Scheme, with two further roles planned by March 2024.

These joint roles provide mental health support to patients within the PCN and work as an integrated role within the Community Mental Health Framework model, bringing mental health support closer to people's communities and operating within an integrated multi-agency team approach for mental health base around Primary Care Network populations.

Additionally, three social prescribing link workers are in place with six more planned by March 2024. These roles provide health and well-being support to patients within the PCN and work closely with the mental health practitioner and voluntary sector.

Recommendation 6: Bolstering processes between Scrutiny and the CCG

We were pleased to discuss this with Cllr Sara Randall Johnson, Cllr Carol Whitton (Committee Vice-Chair) and colleagues during our meeting on 6 June 2022.

The Chair and Vice Chair of the Devon Scrutiny Committee have been leading the engagement with the CCG on behalf of the committee and have welcomed the opportunity for ongoing discussion and enhanced planning of committee sessions. We are pleased to say that the more collaborative approach we have adopted towards agenda-setting with the council's committee is already leading to improved relationships and better mutual understanding of each other's needs, priorities and challenges. We have also agreed a programme of 'masterclass' sessions – in-private

briefings on key topics for committee members, delivered by our subject experts and programme leads – followed by a public session where plans and updates are scrutinised. This is to ensure that any potential transformation is discussed at an early stage with members of local scrutiny committees.

Internally, we have also established a significant service change process. As part of this, we ensure any team considering service change factors in not only early engagement with scrutiny committees, but also adequate time for committees to consider the outcomes of any formal public consultation at the other end of the process.

5. Conclusion

The CCG is pleased to have the opportunity to update the members of the Devon Health and Adult Care Scrutiny Committee on the IRP report and the response to the recommendations and provide details of progress on the Health and Wellbeing Centre in Teignmouth.

It is hoped this provides an exciting opportunity for us to work with local communities to develop integrated, sustainable health and care services for the population of the Teignmouth and Dawlish area.

6. Recommendation

That the progress and outcomes in this report are noted and that the CCG (to become NHS Devon from 1 July 2022) and the scrutiny committee welcome the advice of the IRP in Recommendation 6 and continue to build on the recent progress in working more closely together.

ENDS