

Community Services Transformation Consultation overview NHS South Devon & Torbay Clinical Commissioning Group (CCG)

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Recommendation: for information

Introduction and context

Formal consultation on proposals to reconfigure community services ran from 1 September to 23 November 2016, the key elements of which were published in April 2016. The proposals for change resulted from a recognition that the current NHS provision in the area is unsustainable and will be unable to cope with rising demand for services, created in part by the increasingly elderly population, increased life expectancy and the number of people with complex long term conditions. The CCG believes that the status quo is neither sustainable nor clinically sound and that change is therefore inevitable.

At the heart of the consultation process was the wish to respond to what people told us in 2013 they wanted from their health services, providing care in or close to people's homes, via a more integrated joined up health and social care service. The CCG was also open about the financial pressures faced by the NHS and the need to extract best value from the money we spend.

Summary of consultation proposals

If approved, the consultation proposals would see a switch of spend from bed based to community based care with the number of community hospital beds being reduced to levels evidence suggests we need and more investment being made in the local services which most people use. Under the proposals, if agreed, minor injuries units would be concentrated in three locations, operating consistent hours and with x-ray diagnostics so that they would provide a viable alternative to A&E.

The main changes proposed in the consultation were:

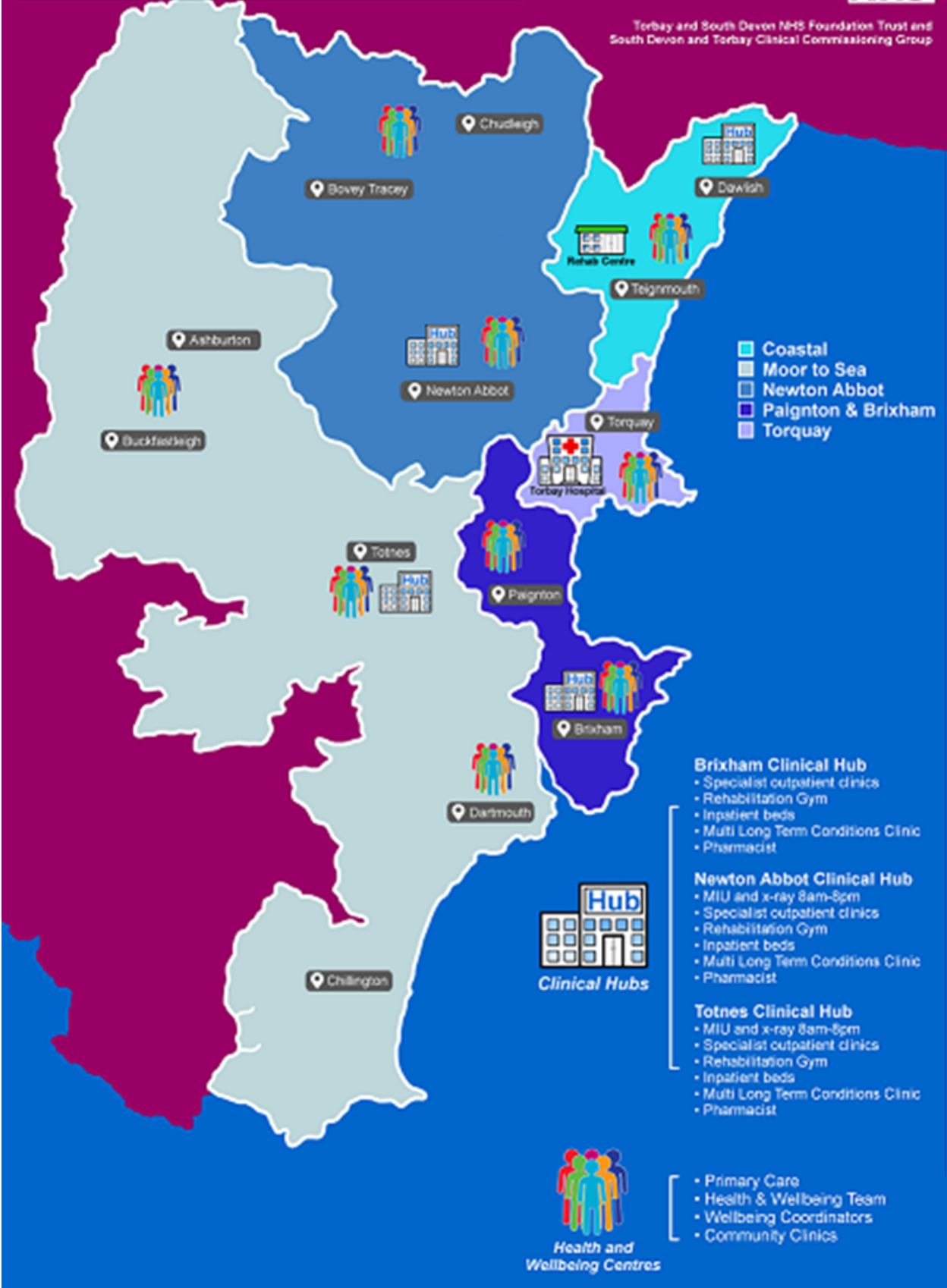
- Closure of Ashburton and Buckfastleigh, Bovey Tracey (beds currently temporarily relocated to Newton Abbot Hospital due to safe staffing issues), Dartmouth and Paignton Hospitals.
- Totnes and Newton Abbot to be the location of enhanced MIU services and operating from 8am to 8 pm, seven days a week and with x-ray diagnostics. MIUs in Ashburton, Dartmouth (both currently suspended), Brixham and Paignton would close.
- Establishment of clinical hubs in Newton Abbot, Totnes and Brixham with medical beds and specialist out-patient clinics.
- Establishment of health and wellbeing centres in Ashburton or Buckfastleigh, Bovey Tracy or Chudleigh, Dartmouth, Newton Abbot, Totnes, Brixham, Paignton and Torquay providing a base for the delivery locally based integrated community services
- Expansion of intermediate care across the CCG area

The map below shows the spread of services across South Devon and Torbay should the consultation proposals be approved and implemented.

Future services for our communities



Torbay and South Devon NHS Foundation Trust and South Devon and Torbay Clinical Commissioning Group



Consultation

Our goal was to get people involved from across the CCG area, to set out the reasons for our proposals, to explain why the status quo is not a sustainable option, to answer questions, respond to challenges raised and to listen to views and comments. We wanted to encourage people to use their local knowledge to come up with ways of improving our proposals and to offer alternative ideas for how we might change

services for the better and to meet the growing future needs. We stressed the importance of any solution being clinically sound, affordable and sustainable.

We promoted the consultation widely, using a variety of methods designed to reach different parts of our communities and to give everyone who wished to comment on our proposals the opportunity to do so. Set out below is a summary of the core activity:

- About 14,000 consultation documents were distributed, and versions were available in easy read and large print format. Some 2,000 posters promoting the consultation and public meetings were displayed.
- 23 public meetings were held and we attended more than 60 other meetings with community based groups and staff.
- Information was sent to more than 300 groups, many of whom such as Torbay Community Development Trust, shared it with their member organisations. Healthwatch Devon and Healthwatch Torbay also promoted the consultation and shared documentation via their websites and publications whilst Torbay and South Devon NHS Foundation Trust and Devon Partnership Trust sent information to their members.
- More than 1,700 people attended the public meetings and Healthwatch was able to record views expressed in our round table discussions as well as issues raised in the question and answer sessions.
- Nine advertisements were placed in the Brixham Times, Dartmouth Chronicle, Herald Express, Mid Devon Advertiser (all six area editions), and the Totnes Times.
- Facebook advertising reached 35,000 people, more than 1,000 of whom accessed the website or online questionnaire.
- Throughout the consultation, we used twitter to report on public meetings, share information and respond to questions and the number of people reached more than doubled during the consultation period, reaching more than 100,000.
- Information was shared via the Torbay and South Devon NHS Foundation Trust web, Facebook and twitter feeds.
- The consultation pages on the CCG website received more than 8,000 hits from unique users during the consultation period.
- Presentations were made to Trust and CCG staff; to Devon, Torbay, South Hams and Teignbridge scrutiny committees.
- Some 1,400 feedback questionnaires were completed.
- More than 700 people signed up to receive the weekly stakeholder update which ran throughout the consultation.
- Throughout the consultation, and since the core proposals were published in April, different aspects have been covered by BBC Spotlight, Radio Devon and local newspapers, as well as by community based newsletters, publications and websites.

To help increase understanding, a range of support documents were also published on our website and made available at public meetings and on request. Short videos were also hosted on the website illustrating different aspects of services under the new model and a range of FAQs were published. We added Browsealoud to our website which facilitates access and participation for people with Dyslexia, Low Literacy, English as a Second Language, and those with mild visual impairments by providing speech, reading, and translation.

The promotional activity highlighted above targeted different groups across the area. Specifically, we directly approached a large number of groups based on our Equality Impact Assessment (EIA) to ask them to highlight the consultation to their members and to help us share consultation material. We also held sessions for young people, talked to people while they travelled on Newton Abbot community transport and attended sessions aimed at hard to reach groups.

Initial meetings in Paignton and one in Ashburton were oversubscribed and additional meetings were organised as a result. The consultation feedback questionnaire received some criticism as some people did not like the way it sought views on the CCG's specific proposals, while providing opportunities for people to respond with alternative proposals/comments in their own words.

Consultation responses

Healthwatch Torbay and Devon were commissioned to attend all public meetings and most community group meetings to record feedback and alternative ideas. An independent consultation report by them should be published in early January. However, the main themes which we heard across the consultation were:

- Praise for NHS staff and support for the NHS and the services it provides
- Concerns relating to reliability of some current services
- Recognition of the need for change, the importance of being able to meet the rising demand for services and the financial pressures
- The prerequisite of making sure services are responsive and safe
- Support in principle for the new model of care and in particular for:
 - investment in community services to support more people in or near their own homes,
 - outpatient clinics delivered nearer to where people live
 - professionals – doctors, nurses, physiotherapists, occupational therapists and other health and social care workers – being brought together in health and wellbeing teams.
- While supporting the care model people want reassurance that:
 - expansion of community based services can be properly resourced
 - mental health services will also benefit from the changes as well as physical health
 - sufficient capacity in the voluntary sector for it to play its part in the new model
 - sufficient GPs to provide the medical cover in the community
 - quality and availability of care home beds is good enough
 - social care is resourced to play its part.
- Reducing the numbers of people admitted to hospital unnecessarily and speeding up discharges by having more out of hospital resources is also viewed positively, providing these decisions are clinically and not financially driven
- Opposition to removal of community hospital beds; a lack of acceptance that fewer hospital beds are needed or that hospitals proposed to close need substantial investment to bring them up to modern standards for bed based care or for an alternative health use
- The high regard for the role played in the past by community hospitals and the trust that people have in them
- The lack of an MIU in the Bay
- The lack of x-ray in Paignton and Brixham
- The location of a clinical hub in Brixham as opposed to Paignton
- The location of the health and wellbeing centres in Paignton and Ashburton/Buckfastleigh
- National issues outside the control of the CCG and this consultation such as NHS funding, fear of privatisation and the long term future of health and social care
- Cutting waste would enable hospitals to remain open
- Broader issues that impact on life generally such as travel, pressure on the local infrastructure caused by more house building and social isolation are also frequently raised but these are not issues the local NHS can resolve alone
- A belief that the consultation is a 'done deal'

What happens next

All alternative ideas put forward in the consultation will be evaluated to see whether they would meet clinical needs and offer an affordable, sustainable solution to the challenges we face. We will be inviting local stakeholders to take part in this evaluation and more detailed criteria for evaluating alternative proposals will be published before Christmas.

The CCG governing body meeting on 26 January 2017 is likely to consider the Healthwatch report, the evaluation of alternative ideas and to make decisions on the future of community services.

Conclusion

We would like to record our thanks to everyone who took part in the consultation and to Healthwatch volunteers for their commitment to recording all feedback.