

Response to the recommendations of Devon County Council's Health and Adult Care Scrutiny Committee

Introduction

The information below sets out the response to the three recommendations made by the Health and Adult Care Scrutiny Committee on 9 November 2023 in relation to the decision taken by NHS Devon Clinical Commissioning (CCG) Group in December 2020 on services in the Teignmouth and Dawlish area.

The information is provided on behalf of NHS Devon Integrated Care Board and Torbay and South Devon NHS Foundation Trust (TSDFT).

Recommendation 1

The Task Group recommends the Committee takes steps to make a referral to the Secretary of State for Health and Social Care on the decision to move services from Teignmouth Community Hospital and build a Health and Wellbeing Centre on Brunswick St, Teignmouth instead.

Rationale

The Task Group asserts that the proposal has not been proven to be demonstrably in the best interests of the health service in the local area. In 2020 proposals were evaluated by the NHS, yet the site has still not been secured. In the meantime, costs have risen, and Councillors would like to look again at the reasons why building the health hub was a significantly better option than retaining the hospital. The next step will be to invite NHS comment, detailing how the health hub is more sustainable than keeping the existing hospital building, depending upon the response a referral could possibly be made. More detail is in section 9.5.

NHS Response

Key information on the proposal and decision

It is important to be clear that the autumn 2020 public consultation – *Modernising health and care services in the Teignmouth and Dawlish area* – and subsequent decisions by Devon CCG were about services, not buildings.

As we said in the consultation materials at the time:

The NHS would like to build a new £8million Health and Wellbeing Centre in Brunswick Street, in the heart of Teignmouth, to house the town's biggest GP practice and other health and care services.

A new, modern facility gives us a great opportunity to consider the best way to deliver other local services.

Having GPs, nurses, social workers, physiotherapists, other professionals and the voluntary sector working in a single setting opens up great new prospects for joined-up, seamless care.

At the time of the consultation, the decision to develop a health and wellbeing centre in the centre of Teignmouth had already been made, following a period of public engagement.

The reasons for this decision were included in the pre-consultation business case and included good access for patients, the support received for a town centre site during public engagement, support from the GP practices which are currently located nearby in the town centre, and the opportunity to contribute to the wider regeneration of the town centre.

The proposals put forward during the public consultation in 2020 involved identifying the best place to locate the services provided at Teignmouth Community Hospital in light of the decision to develop the new centre in the centre of Teignmouth and to support the vision of creating an integrated, strong, sustainable health and wellbeing service in the locality.

The CCG did not formally consult on the decision to build the new centre and no decision on whether to build it was included in the CCG's Board decision in December 2020, as this had already been taken in conjunction with TSDFT, who would lead the development of the health and wellbeing centre project.

It is also important to note some of the important outcomes of the autumn 2020 consultation:

- There were more than 1,000 survey responses to the consultation
- 61.3% said that, all things considered, they supported the overall proposal, which was to relocate services from the hospital and continue with a model of community-based intermediate care, reversing the decision to establish 12 rehabilitation beds at Teignmouth Community Hospital.

In December 2020 the CCG, having considered the positive response during the public consultation, decided it was in the best interest of health services and the population of Teignmouth and Dawlish to:

- Move the most frequently used community clinics from Teignmouth Community Hospital to the new Health and Wellbeing Centre
- Move specialist outpatient clinics from Teignmouth Community Hospital to Dawlish Community Hospital
- Move day case procedures from Teignmouth Community Hospital to Dawlish Community Hospital
- Continue with a model of community-based intermediate care, reversing the decision to establish 12 rehabilitation beds at Teignmouth Community Hospital

- Move specialist ear, nose and throat clinics and specialist orthopaedic clinics from Teignmouth Community Hospital to the health and wellbeing centre.

The rationale for moving the community clinics from Teignmouth Community Hospital to the health and wellbeing centre included:

- It keeps services within the Coastal locality
- The clinics will benefit from the co-location and integration with the health and wellbeing team
- The services can be 'lifted and shifted' to the centre
- Teignmouth Community Hospital needs renovation.

The rationale for moving the specialist outpatients clinics from Teignmouth Community Hospital to Dawlish Community Hospital included:

- Dawlish already has the capacity to expand
- It keeps the services within the Coastal locality
- Teignmouth Community Hospital needs renovation.

The rationale for moving the day case procedures from Teignmouth Community Hospital to Dawlish Community Hospital included:

- Dawlish already has acute outpatient clinics and has the capacity to expand
- The current clinics can be 'lifted and shifted' to the location, it keeps the services within the Coastal locality, Teignmouth Community Hospital needs extensive renovation and does not have a sustainable future and that Dawlish is a more affordable option than Newton Abbot Community Hospital which does not have the capacity and would require expansion.

The rationale for moving the specialist ear, nose and throat clinics and specialist orthopaedic clinics to the health and wellbeing centre was that as a result of the public consultation with both the public and staff, the NHS recognised the need to base these alongside the physiotherapy and audiology community clinics.

The rationale to continue with community-based intermediate and to reverse the decision to develop rehabilitation beds in Teignmouth Community Hospital included the view of the South West Clinical Senate which noted:

'It seems very clear that they do not need the 12 rehabilitation beds that were proposed for Teignmouth hospital in 2015... The impact of the Integrated care Team has reduced the need for beds despite the demographic and demand.'

The Senate also noted:

The improved service delivery over the last few years is impressive with a greater number of patients being cared for appropriately in the community despite the greater acuity. It is a good model that other areas should learn from without re-inventing the wheel.

The rationale also reflected the evaluation of the impact of enhanced intermediate care which showed that the enhanced intermediate care team which includes local GPs is able to provide rehabilitation mainly in people's own homes or in short term residential or nursing home placements.

As stated at the time of the consultation and in our written response to the committee in June 2023, the model of care introduced means the NHS can treat around four times as many people in their own homes as we could in a rehabilitation ward in Teignmouth Community Hospital with the same investment.

The information relating to this from the time of the consultation can be [found here](#) – see pages six and seven.

The document shows the staff cost required to run a 12-bed rehabilitation ward and the community-based intermediate care team were broadly similar. The number of patients that can be cared for on a 12-bed rehabilitation ward is largely fixed and in the paper is given as 232 per year, based on a 90% occupancy rate and a 17-day length-of-stay.

As stated in the paper, in 2017/18, there were 881 referrals into the intermediate care team.

In 2022/23, there were 1,134 referrals into the intermediate care team with the increase driven by the new discharge hub, additional services of offer and the embedding of the team over the period, including closer links to local partners.

Financial sustainability

As previously advised, changes to the design, the site configuration, land purchase costs, inflation and the post-Covid construction market all indicate that the current estimated total project cost will be £14.5 million + VAT (up from the estimated £8 million at the time of the consultation).

There remain some unresolved elements around finance and capital that are currently being discussed by the Boards and Executives of TSDFT and NHS Devon.

The project is also delayed due to the impact of the above changes and the committee's previous referral to the Secretary of State and the impact of local elections on timelines.

In autumn 2023, as part of its ongoing work with the Teignmouth Hospital Stakeholder Group, Torbay and South Devon NHS Foundation Trust commissioned Ward Williams Associates to complete a high level feasibility assessment to repurpose and refurbish the Teignmouth Community Hospital site as a health and wellbeing centre (appended).

The total estimated cost was £23.3 million, which exceeds the cost of the health and wellbeing centre in Brunswick Street.

Sustainability of primary care in Teignmouth

The autumn 2020 consultation document clearly stated:

Change is needed for GP services to be fit for purpose, sustainable into the future and flexible to meet the changing needs of the population. There are a number of current issues for GPs in Teignmouth, who want to develop new ways of working and be able to take advantage of the expansion in the workforce such as pharmacists and social prescribers.

1. Current surgery buildings are not fit for purpose. The GP buildings are old residential buildings, converted years ago. They are cramped with no further scope for expansion and have limited access, especially for disabled people. A 2018 engagement exercise showed people supported co-location and wanted their GP practice to be on a flat site, in the centre of town, easily accessible by public transport.

2. Recruiting new GPs. This is a countrywide issue. GPs need to be attracted to work in this area at a time when fewer GPs are willing to become partners who lead and develop GP practices. Some are further discouraged by the commitment and liability of owning buildings at the beginning of their careers, when they might already have sizeable student loans and their own private mortgage.

Working from a modern purpose-built health and wellbeing centre, which is leased, would make Teignmouth a more attractive option for new GPs.

3. The constrained space limits the scope to teach and train medical students and trainee GPs and nurses.

4. The need to be flexible and adapt to meet future needs of the population. How working patterns have had to change in response to the COVID-19 pandemic is only one example of this.

It is worth noting that although the committee's previous referral was made on different grounds, the conclusion of the report by the Independent Reconfiguration Panel begins:

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.

Environmental sustainability

In terms of environmental sustainability, Teignmouth Hospital was built many decades ago and is a hugely inefficient building to run and maintain. It would take significant investment to bring it up to standard.

The new health and wellbeing centre would meet modern environmental standards for sustainability and would be energy-efficient. It would be built to achieve a BREEAM Environmental Assessment rating of Very Good.

Sustainability: Quality and Equality Impact Assessment

The detailed assessment done at the time of the consultation is appended and was reviewed by the Quality and Equality Impact Assessment Panel. A summary of the assessment is below:

Safety: Benefit - all services are being 'lifted and shifted' and therefore will still meet the same staffing, treatment and administration standards that are currently administered now.

Dawlish Community Hospital is a purpose built, modern community hospital. At Dawlish hospital there is level access at both ground and lower ground floors with a lift from the lower ground floor. Therefore, safety will be at the very least maintained and likely improved.

A health and wellbeing centre at Brunswick Street would be a brand new, purposely designed building with all modern facilities. Therefore, safety will be at the very least maintained and likely improved.

Effectiveness – significant benefit to patients: The model of care in Teignmouth has been evaluated by researchers in residence at TSDFT. This demonstrates how the health and wellbeing team supports its local population in terms of patient motivation, mental wellbeing scale, frailty and further use of the health and care system. Co-locating this team with primary care in a new health and wellbeing centre will further increase the effectiveness of how they all work in support of each other.

Experience – benefit: There is no change to operational features of day case procedures and specialist outpatients moving to Dawlish. Patients from Teignmouth and outside of the locality south and west of Teignmouth who attend day case procedures or specialist outpatients will have 3.8 miles further to travel. There are main line/route bus and train links to Dawlish as well as Teignmouth (this is on the same train line). For some coming from the north and east of the locality the journey will be shorter. The parking at Dawlish Community Hospital is larger in capacity than at Teignmouth and is on the flat, with easier access into the building than at Teignmouth Community Hospital.

Equality – generally neutral or benefit: A full equality impact assessment has been undertaken and the impact score was 16 (low positive benefit).

Dawlish Community Hospital is on a level site with good car parking and access. The building is modern and accessible including induction loop. A new build for the health and wellbeing centre would be in a level part of Teignmouth which is improved from the current hospital site. JSNA shows Central Teignmouth has highest deprivation level in terms of health and disability. Users of patient transport would not be disadvantaged as the service will soak up cost of any additional miles.

Sustainability: Travel

A summary of key information from the Travel Impact Assessment (appended) from the autumn 2020 consultation:

Day case procedures: Coastal residents make up 13% of day case procedures patients and of these, 29% would have to travel an additional 4 miles to Dawlish and 28% would have less distance than currently to travel.

Specialist outpatients clinics: Coastal residents make up 30% of specialist outpatient clinics and of these, 17% would have to travel an additional 4 miles to Dawlish and 32% would have less distance to travel.

Community Clinics: Coastal residents make up 91% of community clinics and of these, 23% would have to travel an extra mile to get to the new health and wellbeing centre and 24% would have less distance to travel.

Recommendation 2

The Task Group strongly support efforts are made by local community groups to save the hospital building for community use, if it cannot be retained by the NHS.

Rationale

Councillors recognise that the site is a community asset and wish for the community to be involved in the long-term planning of what the site is used for, expressing a desire for part of it to remain in the community's use.

NHS response

The NHS in Devon is actively involved in the Teignmouth Hospital Stakeholder Group, which is independently chaired by Healthwatch and is working with local people to explore options for the future of the Teignmouth Community Hospital site.

Recommendation 3

That the Task Group ask the NHS to continue to engage with local stakeholders and local people in determining the long-term future of the Hospital site, whilst operating with the principle that the building currently used as Teignmouth Hospital should be saved for local people.

Rationale

Councillors also recognise the improved working relationship with the local NHS over the period of the Task Group and wish to build on these relationships to determine the future of the site whilst addressing Councillor's concerns. It is anticipated that

there will be issues that need resolution during this process and the ask is for local people's voice to be heard and valued.

NHS response

The NHS in Devon is actively involved in the Teignmouth Hospital Stakeholder Group, which is independently chaired by Healthwatch and is working with local people to explore options for the future of the Teignmouth Community Hospital site.

List of appendices

- For further information, please see [all the supporting information](#) provided at the time of the 2020 consultation.
- Post consultation business case – extracted from the [Devon CCG December 2020 Board Papers](#)
- Ward Williams Associates feasibility study on Teignmouth Community Hospital refurbishment

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