

Stakeholder Briefing No 13 – 21 October 2016

Re-shaping Community Health Services in South Devon and Torbay

We've passed the half way mark in our consultation which runs until 23 November and there are just under five weeks left to give your views on our proposals to strengthen the way we deliver the community based services that most people use. This briefing reflects on the consultation to date, the rationale for change, the areas of broad support and the concerns that people are expressing.

Getting people involved

We are grateful to everyone who has taken part in the consultation. The passion shown demonstrates the commitment and support local people have for our NHS and the fantastic care provided by NHS staff. Our goal has been to get people involved, to explain why the status quo is not a sustainable option, to set out the reasons for our proposals, to answer questions, to respond to the challenges raised and to listen to views and comments. We want 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 future needs.

We continue to respond to new opportunities to promote the consultation and to date we have run 17 public meetings where 1,400 people have participated. Our round table format has meant that everyone has had the opportunity to give their views on different elements of the proposals, all of which have been recorded by Healthwatch and will be reflected in the feedback report it will produce at the end of consultation.

We've used social media to share information more widely, such as tweeting from all the public meetings, posting information on our locality Facebook pages and responding to comments. Our website consultation pages have had 6,000 hits from people seeking information and we have distributed almost 2,000 posters and 13,000 consultation documents. We've advertised in local newspapers, given interviews for TV, radio and newspapers and also responded to more than 50 invitations to attend local community group meetings. Our GP practices have promoted the consultation on their surgery presentation screens and some have also promoted via social media.

Presentations have been made to Trust and CCG staff; to Devon, Torbay, South Hams and Teignbridge scrutiny committees; and we have circulated information to members of both the Torbay and South Devon NHS Foundation Trust and Devon Partnership Trust.

In response to strong interest in the proposals, we have organised six additional public meetings – one in Ashburton on 8 November and five in Paignton on 1 and 10 November.

Recognising the challenges

When discussing the proposals, people have generally recognised the need for change, the importance of being able to meet the rising demand for services, the financial pressures and the prerequisite of making sure services are responsive and safe. There is also considerable support in principle for the new model of care and for investment in community services in order to support more people in or near their own homes, delivering high volume outpatient clinics nearer to where people live and bringing different professionals – doctors, nurses, physiotherapists, occupational therapists and other health and social care workers – together in health and wellbeing teams.

But people want assurance that the expansion of community based services can be properly resourced; that mental health services will benefit from the changes as well as physical health; that there is sufficient capacity in the voluntary sector for it to play its part in the new model; that there are sufficient GPs to provide the medical cover in the community; that the quality and availability of care home beds is good enough; and that social care can play its part.

While people see community hospitals as especially valuable in supporting older people and helping with issues of isolation, they recognise that with an average stay of just 15 days it is not a solution to this issue but one that the community at large needs to help resolve.

People seem to like the idea of health and wellbeing centres and teams, which bring together different professionals in a local multidisciplinary team, which the CCG and the Trust believe will result in better care for more people locally. 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.

Public concerns

National issues outside the control of the CCG and this consultation such as NHS funding generally, fear of privatisation and the long term future of health and social care dominate many of the arguments against the proposals. 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.

Although many aspects of the model of care are supported, many people do not want to see improved community based services funded by diverting resources from hospital based care to community based care. They don't accept 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. They remain to be convinced that the new services will deliver better care.

Opposition to hospital closures reflect the valued role hospitals have played in local communities; the trust that people have in them; and insufficient faith that change will be for the better.

Alternative ideas

Retaining community hospitals however does not solve the issue of how within the budget available, the services that support most people in the community can be strengthened. Keeping beds and keeping people in hospital who don't need to be there does not contribute to strengthening the preventative services which will help reduce future demand. And with people staying an average of 15 days in a community hospital, the issue of supporting people who live alone is also not resolved by retaining the current number of hospital beds. The CCG wants to hear alternative suggestions for how we can fund the services needed for the future that will deliver the quality, safe care that people rightly expect.

Responding to the consultation

Please complete the feedback questionnaire www.communityconsultation.co.uk which can be accessed via the CCG or Trust website and which appears in the consultation documentation. For more information, go to www.southdevonandtorbayccg.nhs.uk/community-health-services or

- Email sdtccg.consultation@nhs.net
- Write to South Devon and Torbay CCG, Pomona House, Torquay, TQ2 7FF
- Call 01803 652511 office hours (voicemail messaging overnight/weekends).