



#healthyplym

Oversight and Governance

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HEALTH AND WELLBEING BOARD – PRESENTATION SUPPLEMENT PACK

Thursday 12 September 2024
10.00 am
Warspite Room, Council House

Members:

Councillor Aspinall, Chair
Councillor Ms Watkin, Vice Chair
Councillors Laing and P.Nicholson

Statutory Co-opted Members:

Strategic Director for Adults, Health and Communities, Director of Children's Services,
Director of Public Health, NHS Devon ICB, and Healthwatch.

Non-Statutory Members:

Livewell SW, University Hospitals Plymouth NHS Trust, and the Voluntary and Community Sector.

Members are invited to attend the above meeting to consider the items of business overleaf.

This meeting will be webcast and available on-line after the meeting. By entering the Council Chamber, councillors are consenting to being filmed during the meeting and to the use of the recording for the webcast.

Tracey Lee

Chief Executive

Health and Wellbeing Board

- 5. Peninsula Acute Sustainability Programme (PASP) Draft Case for Change: (Pages 1 - 20)**
- 6. Healthwatch Annual & Highlight Reports: (Pages 21 - 52)**

Peninsula Acute Sustainability Programme: Plymouth Health and Wellbeing Board

12th September 2024

Purpose of this session

- Context and Background of the PASP programme
- The outputs from Phase 1
- Our plans for Phase 2
- A summary of the Case for Change
- How we plan to work with local populations during phase 2 to develop a case for Change

We would like to take the opportunity to ask Members to:

- Endorse the approach we are taking on engaging with local people
- Support raising awareness locally and to encourage local people to take part in the engagement.

PASP: Context

What we want for people in Devon, Cornwall and the Isles of Scilly

To be able to:

- live happy and healthy lives
- have equal chances (ie the same opportunities as everyone else regardless of where they live or who they are)
- live well for as long as possible
- have independence
- have choice
- live free from harm.

We are focused on caring where it matters using the latest technology, the best clinical evidence and the latest research to provide the best outcomes and experiences for our people.

What we believe should be true:

- the care that can be provided at home, is provided there
- the care that can be provided in local communities, is provided there
- the care that can only be provided in an acute hospital setting, is provided there
- the care that is best provided in a specialist hospital setting or centre of excellence, is provided there

Peninsula Acute Sustainability Programme (PASP) - purpose

- The Peninsula Acute Sustainability Programme aims to ensure **clinical, workforce and financial sustainability** of services at the five acute hospitals in Devon, Cornwall and Isles of Scilly.
- The **primary objectives** of the programme are to:
 - Improve how we support our population's health needs and target health inequalities
 - Ensure there are consistent and safe acute services across the Peninsula
 - Address problems with fragile acute services
 - Ensure that we have a sustainable workforce
 - Make best use of our limited resources
 - Learn from previous programmes of work and feedback from the public
- The primary role of the PASP is to support **service sustainability in the long-term** creating a sustainable platform for strategic service improvement, and the **recovery of fragile services in the medium term** but it also needs to be **aligned with any short-term tactical improvements** to ensure support for recovery of elective, UEC, cancer and diagnostic services and Devon's exit from NOF4.

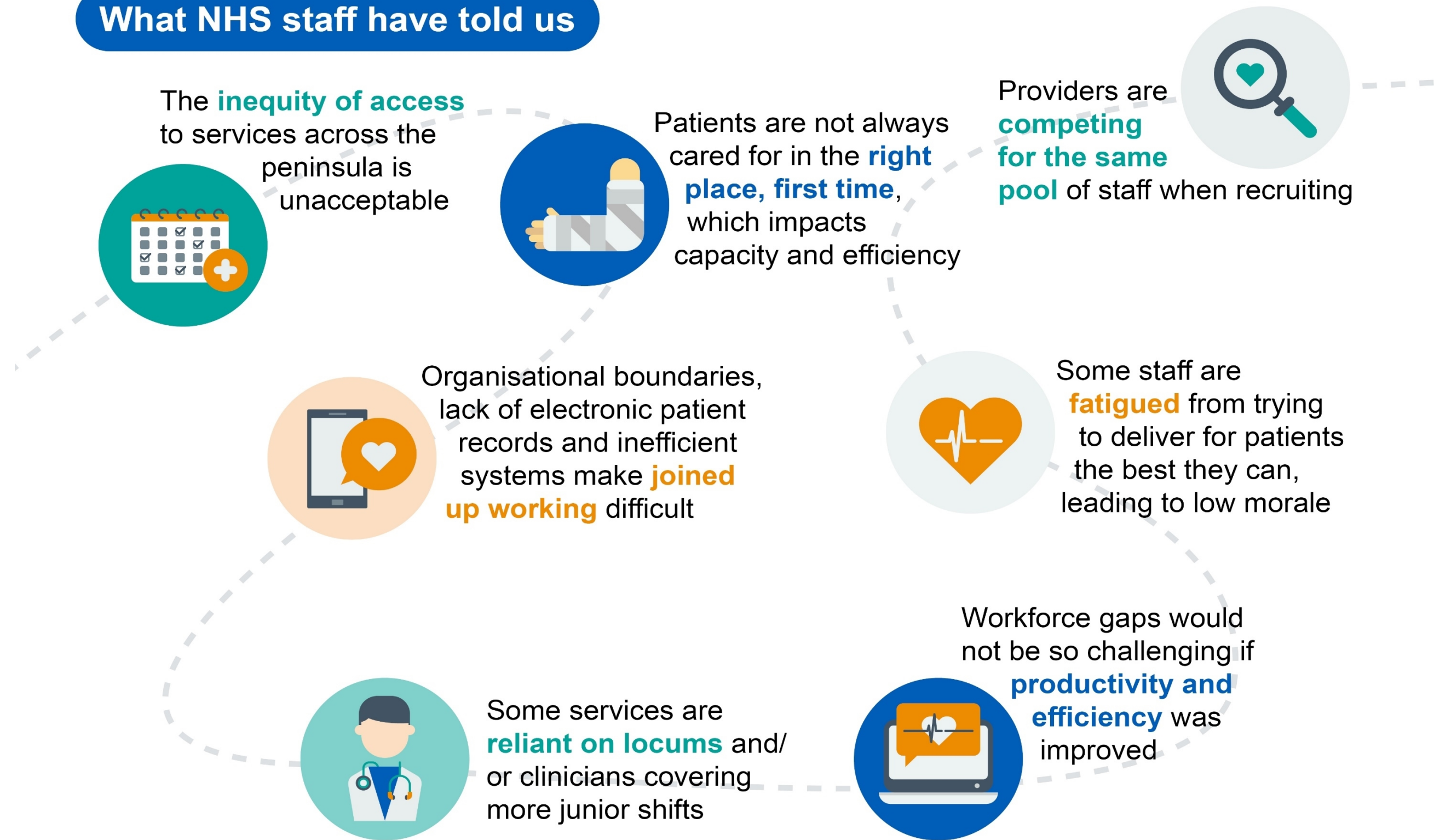
What people have told us

What people have told us



What NHS Staff have told us

What NHS staff have told us

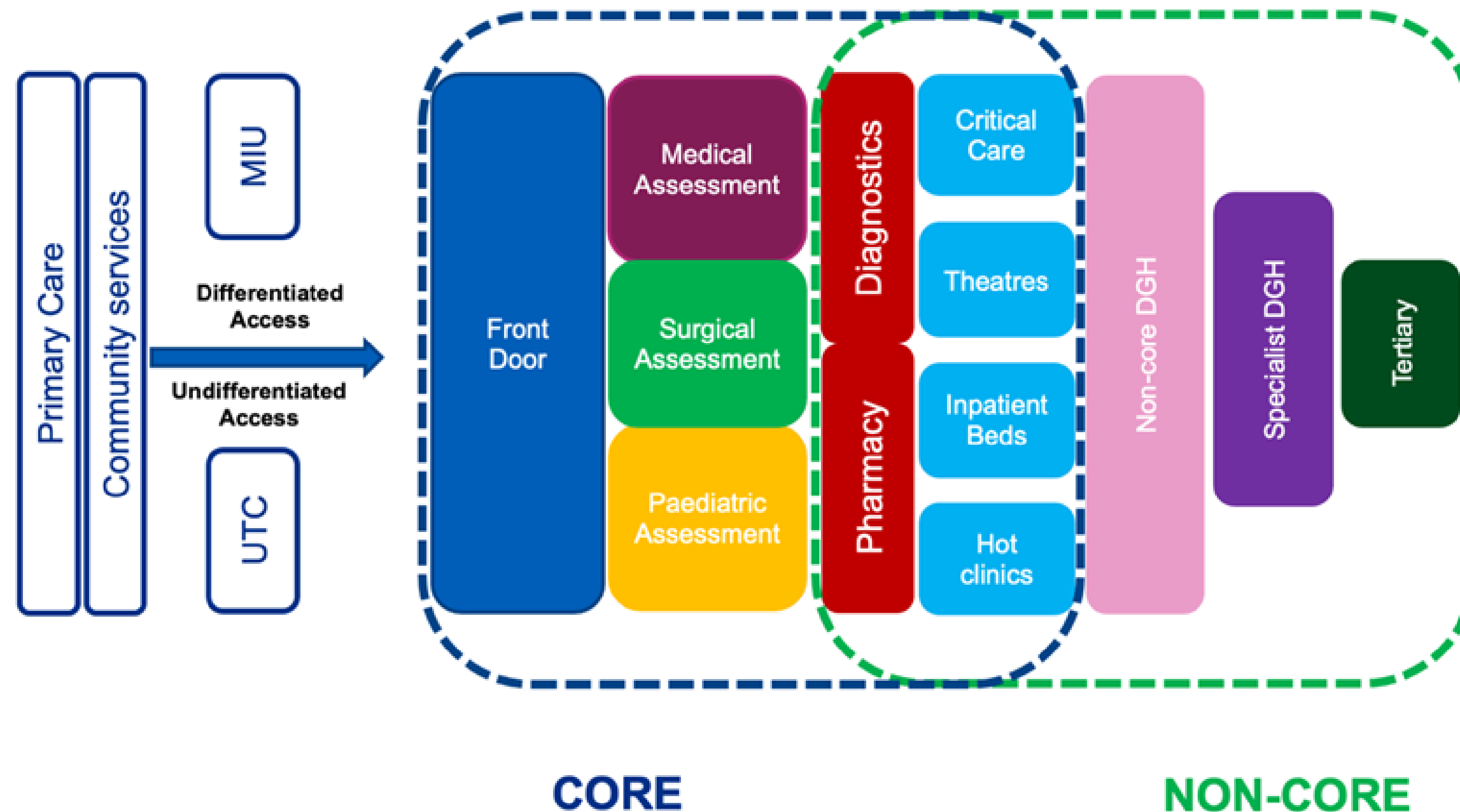


PASP: Recap of Phase 1

Building blocks for an acute services model

Our starting point

The simplistic outline hypothesis that this programme started with was that through strengthening the assessment and diagnostic functions aligned to the hospital front door, there could be **different approaches to delivering the non-core services** that would start to address some of the significant workforce challenges facing the Peninsula.



Our approach – clinical and patient engagement

- A series of **focused workshops** were held paediatric, medical and surgical specialties and involved a wide range of clinicians across the interdependent specialty, subspecialty and clinical support services from across Devon, Cornwall and Isles of Scilly.
- We aimed to adopt a **consistent approach** for the paediatric, medical and surgical assessment workshops with 3 phases: Prepare the ground; Agree the position; Develop proposals.
- A series of **core questions**, co-produced with Chief Medical Officers were used to stimulate workshop discussion. There was a clear requirement to **think innovatively** about what could be different.
- Robust **demand, activity and workforce data** was essential input to considering the impact of changes in the demographic and health profile and needs of the population of Devon, Cornwall and Isles of Scilly and the complementary impact on staff.
- **We commissioned Healthwatch** in Devon, Plymouth and Torbay, in collaboration with Healthwatch Cornwall, to support us in developing an understanding of patients experiences of acute services across the Peninsula. During the involvement period which took place in **July 2023**
- All data that was collected during this engagement period was anonymised and shared with Healthwatch to be analysed independently and collated into **a single report** - <https://healthwatchdevon.co.uk/pas-report/>

Outputs from Phase 1

- A shared understand of the **challenges** faced delivering health services in acute settings across the peninsula
- A set of **key messages from the clinical workshops** for paediatrics, medical and surgical assessment.
- **Feedback from patients and their families** on their experience of using medical, paediatric and surgical acute services.
- An outline a **possible direction of travel** to transform acute service to ensure sustainability in the future.

PASP: Phase 2

PASP: Phase 2

To meet the needs of the population of the Peninsula we need to consider transforming some services.

Phase 2 includes:

- Developing a detailed formal case for change in partnership with staff and local people
- Undertaking some detailed modelling in conjunction with staff and patients to further explore possible ways to tackle our challenges.

Ensuring we have robust arrangements to continue involve staff, patients and the public will be vital to meeting our objectives and our statutory responsibilities

PASP: Case for Change and Vision

What is a Case for Change

What is a case for change

A case for change describes, in detail, the challenges facing services.

It is a **technical document** that uses data to evidence the need to change. It is required as part of the regulated transformation process outlined by NHS England. Our case for change is being developed using [*Major service change: An interactive handbook JUNE 2023, NHSE*](#)

The technical case for change is provided for:

- Regulators (NHSE)
- Peninsula Acute Provider Collaborative
- PASP Board
- Peninsula Acute Trust Boards
- Health Overview and Scrutiny Committee Members
- The public

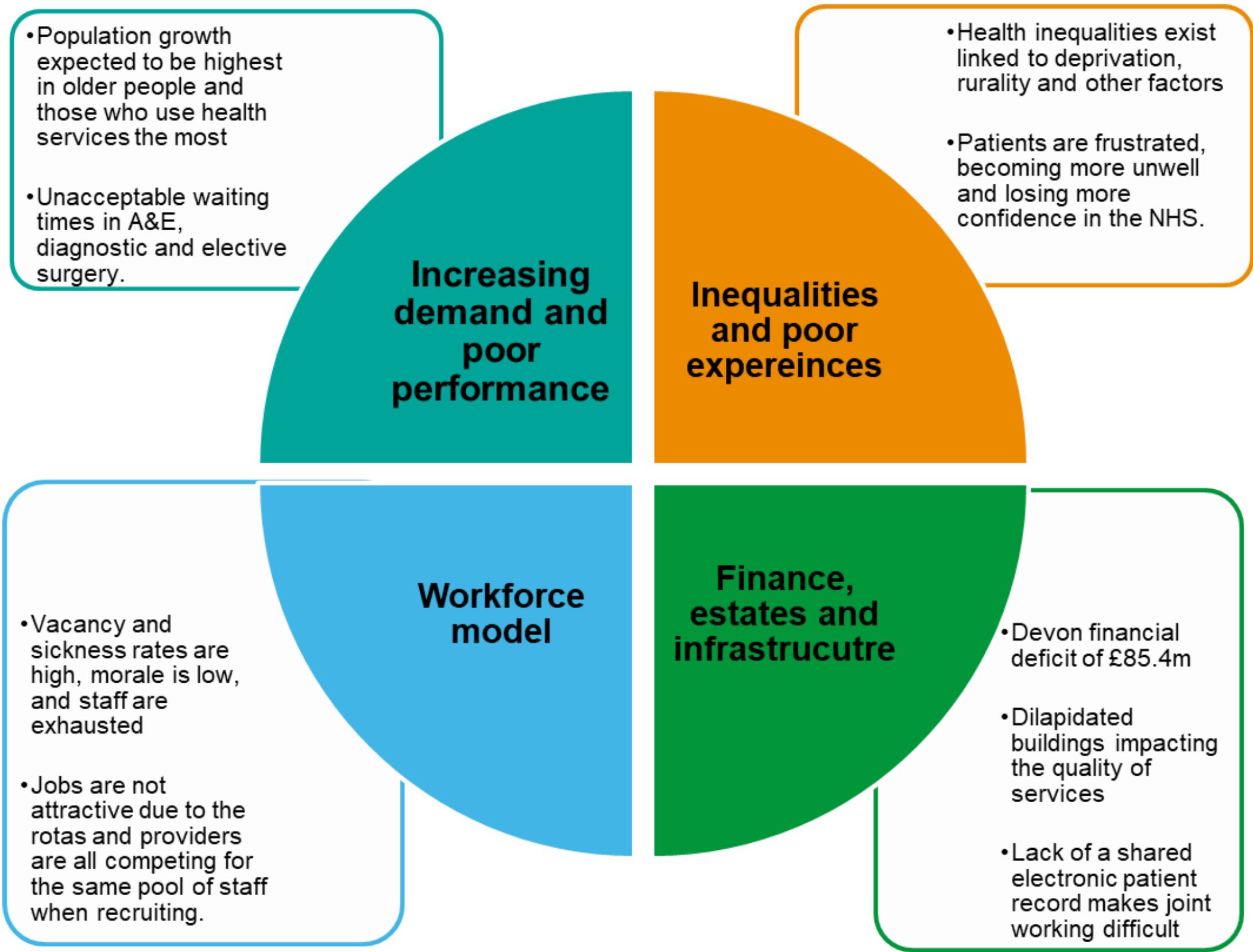
A **summary will also be produced** to support our local populations and stakeholders to understand our challenges.

Summary of our challenges

- The five acute hospitals across the Peninsula are facing unprecedented challenges in delivering high quality and timely care to patients
- Many of our challenges existed before Covid, the global pandemic has exacerbated an already challenging position.
- The NHS workforce are our biggest asset, but they are exhausted and burnt out from going above and beyond to deliver care for patients in processes that are not working for them.
- An older age profile and more rapid population growth coupled with the impacts of the Covid-19 pandemic and 'cost of living' crisis, are contributing to increased demand for health and care services.
- The greatest increased demand is for unplanned care and mental health services, with those living in disadvantaged communities and clinical vulnerability likely to be most severely impacted.

Our challenges

Challenges: Multiple challenges face the Peninsula’s hospital services and they are summarised as follows:



Our vision for acute services

To work together to deliver high quality, safe, sustainable and affordable hospital services as locally as possible.

For patients and families

- More timely access to the right specialist teams
- Reduced waiting lists, with fewer procedures and operations cancelled, including at short notice
- Faster ambulance response times because they will spend less time waiting outside hospitals
- People spending less time in hospital, because of closer working with community teams
- Improved equity of access, so that where people live or who they are is never a barrier to them accessing the services they need
- Services that are more joined up, so people don't have to tell their story multiple time.
- Closer working between acute and community teams so people spend less time in hospital and receive care as close to home as possible

For staff

- Improved systems and processes to help teams to provide consistently high-quality care
- A range of different staffing models across our hospital sites, tailored to the service and its needs
- Investment in digital technology to support the delivery of modern healthcare
- Colleagues will be supported to have a healthy work life balance

For acute hospital services

- 24/7 urgent and/or emergency care will remain at the five acute hospitals
- Services able to adapt to meet changing population needs
- Organisations working together more effectively to provide a joined-up health and care service,
- New and innovative ways of organising care in line with best practice standards
- Better use technology to provide better experiences and more convenient and efficient care
- Development of rapid assessment, diagnosis and treatment for patients (who would otherwise require a hospital stay) so they can go home the same day if clinically safe to do so – this is better for patients and also helps to free up inpatient beds for those who are more acutely unwell

We've already made some progress

Across the Peninsula hospitals already work together supporting delivery of services. There are also organisations and teams working innovatively and collaboratively to successfully improving our performance as the examples below demonstrate

One Devon Elective Pilot	Staff and Clinical Networks	Use of technology
<p>Using the Nightingale Hospital as a specialist centre for orthopaedic, ophthalmology and spinal surgical services to achieve four aims:</p> <ul style="list-style-type: none">• Maximise day case and High-Volume Low Complexity activity• Standardise patient pathways• Increase efficiencies in theatre utilisation• Develop ability to support cross site working	<p>Hospitals across the Peninsula are working together in a networked way to provide care</p> <ul style="list-style-type: none">• Interventional Radiology rota• Urology• Cardiology• Trauma networks• Neonatal networks• ICU network <p>Networks between RDUH North and East</p> <ul style="list-style-type: none">• Oncology• ENT• Acute medicine• Midwifery/obstetrics• Upper GI	<p>Shared Picture Archive System (PACS) that enables radiologists to share images across all peninsula Trusts</p> <ul style="list-style-type: none">• Faster reporting, including overnight, without costly outsourcing.• Faster diagnostics• Faster time to treatment with results back to clinicians more quickly

Involving people in developing our case for change

We plan to launch a period of involvement with the people across Devon, Cornwall and the Isles of Scilly, in September for 6 weeks, so that we can further develop our Case for Change.

Through the involvement we hope to learn:

- How challenges impact local people when using hospital services
- Whether there are any other challenges people experience that we have not covered?
- What is important to people when they need to access hospital services
- Whether people have any ideas or thoughts on how we could tackle some of our challenges?

Involvement approach:

- Survey (under pinning the involvement)
- Focus groups
- Attendance at meetings
- Market stall type events
- Targeted outreach with people who experience health inequalities

Your thoughts

- Endorse the approach we are taking on involving local people
- Support raising awareness locally and to encourage local people to take part in the engagement.

The value of listening

About this presentation



**Kevin Dixon, Chair of Healthwatch in
Devon Plymouth & Torbay (HWDPT)**

This presentation talks about all the different ways Healthwatch has connected with, represented, and made an impact on people in Devon, Plymouth and Torbay over the past year.

It shows the hard work and dedication of the Healthwatch volunteers and staff.

It shows why listening to patients is so important.

I want to thank everyone who has supported Healthwatch in our goal to monitor and improve health and care.

How Healthwatch works in Plymouth

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are independent services with statutory obligations under the Health and Social Care Act 2012.

Devon County Council, Plymouth City Council and Torbay Council work together to commission local Healthwatch in Devon, Plymouth and Torbay (HWDPT).

Although they work together, each area keeps its own separate local Healthwatch service. They are run by a partnership of three organisations: Colebrook (SW) Ltd, Engaging Communities Southwest and Citizens Advice Devon.



Who funds us?

The Department of Health and Social Care (DHSC) fund the work of Healthwatch nationally. DHSC gives money to local councils so they can commission an effective independent local Healthwatch service. **Although local Healthwatch are funded by and accountable to local authorities, they are completely independent.**

Our Mission Vision and Values

Our Mission

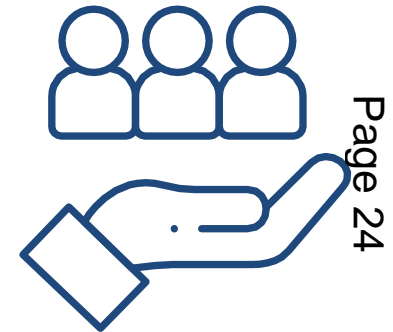
To make sure people's experiences help make health and care better.

Our Vision

A world where we can all get the health and care we need.

Our Values

- Listening to people and making sure their voices are heard.
- Including everyone in the conversation - especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers, Government, and the voluntary sector - serving as the public's independent advocate.



Working and volunteering in HWDPT



- We have 26 excellent volunteers and continue to recruit on a regular basis.
- We employ 15 staff members – not all are FTE.
- We offer dedicated walk-in centers in Torbay, Plymouth and in wider Devon.
- Our Citizens Advice (CA) Healthwatch Champions' are located at offices based in East Devon, North & West Devon, Exeter, South Hams, Torridge & Mid Devon and Teignbridge.

Healthwatch Assist Network



Our Healthwatch Assist Network helps us connect with people in Devon, Plymouth and Torbay.

Sharing helps find what works well.

It helps make health services better.

We now have **150** organisations in our Healthwatch network from across the whole of Devon .

They are from local groups, school councils, parent groups, committees and sports groups.

How many people we reached in 2023/24



- **3395** people shared their experiences with health and social care services. This helped raise awareness about issues and improved care.
- **620** people came to us to get clear advice and information. This was on topics like dental services and doctor appointments as well as delays to a wide range of services.

How we share advice and information



This year over a thousand people got help from our HWDPT contact center. The contact centre helps by phone, email, and online chat.

Many people visited our 3 websites and followed us on social media.

Over 3000 people are now sign up for our Email Bulletins. We share the latest updates from Healthwatch in Devon, Plymouth & Torbay as well as NHS, Local Authority and VCSE news on health & social care services.

Examples of what people tell us



"At the worst of my complex trauma, I felt listened to. I felt like I mattered and their advice was warm and caring. Very congruent staff enabling me to take responsibility on my journey into healing thanks to their empathy and empowering doctors. Very grateful"

★★★★★

#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay



"I've tried everything to get an appointment. I am 84 and all I get is go online and book one. Well 4 of us have tried and it's still impossible. Bring back the old system this is just ridiculous, its very upsetting."

★★★★★

#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay

Examples of what people tell us

"Made an emergency appointment, tried to cancel because of an emergency at my home and was told I had to pay regardless of my circumstances."



#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay



"I've attended several appointments in different departments recently and have had positive experiences each time. Twice I have been seen and left the hospital before the scheduled appointment time! No waiting, cheerful and professional staff."



#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay



Examples of what people tell us

"I have been on the waiting list for the pain management team since June 2021 for an appointment. They have not written to me even though my GP wrote to them to exasperate my case."



#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay



All the staff are caring and supportive, the stroke and medical team took their time to explain as I am extremely deaf. The paramedics were exceptionally kind and made me feel at ease as I was very confused and afraid."



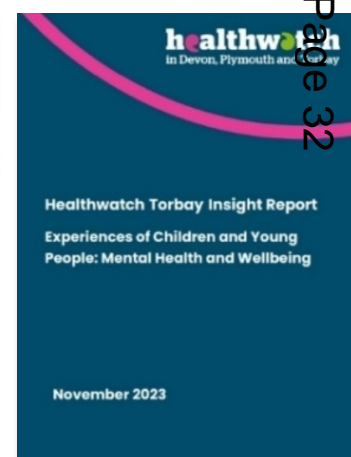
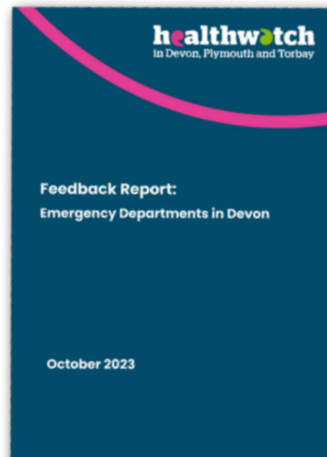
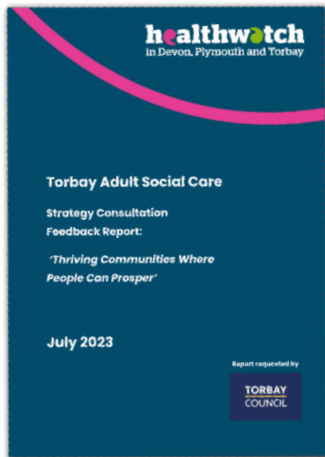
#yourvoicecounts

healthwatch
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What we did with these experiences

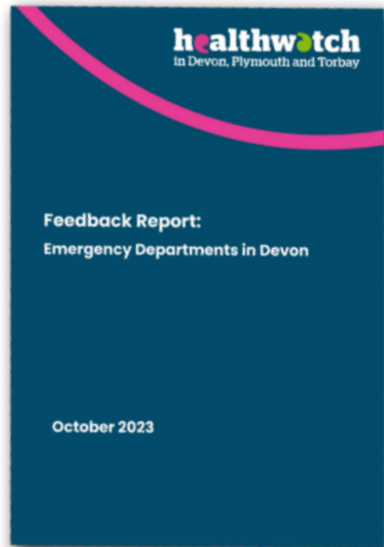
We published 10 reports about the improvements people would like to see in health and social care services, including:



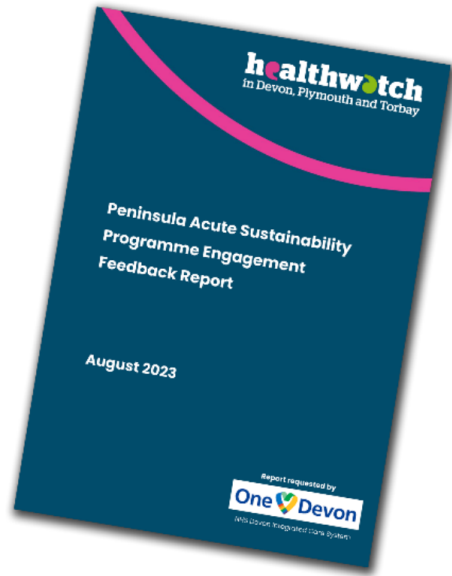
Emergency Departments across Devon

In Spring 2023 we were commissioned by NHS Devon to visit Emergency Departments at Devon's four main hospitals.

- We interviewed 511 people (122 from RUDH, 133 from NDDH) during 34 visits at different times and days, including daytimes, evenings and weekends.
- Our report was shared with NHS Devon and all key stakeholders, including Urgent and Emergency Care Boards.
- The report was also given to the NHS Devon Primary Care Commissioning Committee.
- The Southwest Clinical Senate invited NHS Devon and HWDPT to give a joint presentation on the work at their Annual Conference in Exeter.



Peninsula Acute Sustainability Programme (PASP)



- NHS Devon asked HWDPT for support to run some focus groups to find out more about people's experiences of Acute Medical Services, Surgical and Pediatrics across Devon, Cornwall and the Isles of Scilly.
- Working with Healthwatch Cornwall, we provided feedback from 335 people which was summarised in a full report and shared with NHS Devon.
- HWDPT will remain involved with the PASP programme as it moves forward.

Patient Experiences of Pharmacy Services

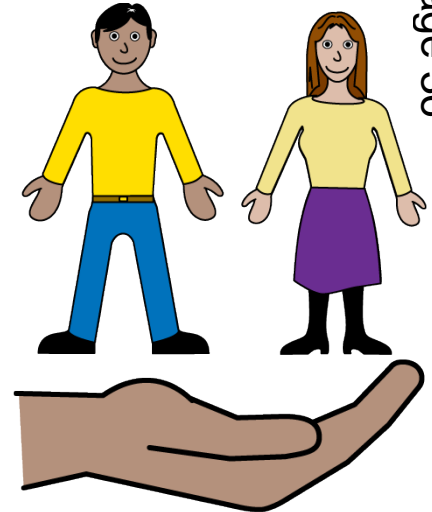


- 141 people shared their experiences with pharmacy services through our normal feedback channels.
- We shared our report and recommendations with NHS organisations in Devon.
- After we released the report, Plymouth Hospital NHS Trust said they will be providing a new pharmacy for outpatients which supports those visiting from surrounding areas.
- NHS Devon said they will use our report to help develop their Pharmacy strategy for the local community.
- Community Pharmacy Devon said they will use all our recommendations to improve pharmacy services.

Other examples of communities we have supported to have their say this year

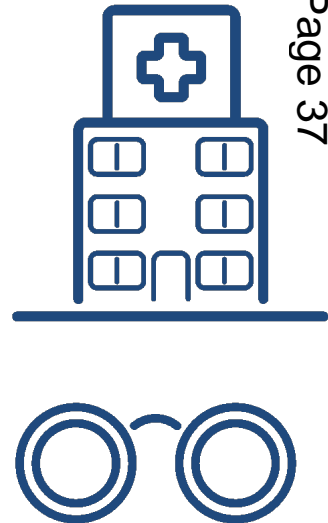
We have worked hard to make sure we can speak to as many people in our communities as possible and shared our findings with key stakeholders .

- **Children & Young People** - We gave CAMHS and emotional well being support evidence at a Torbay Council spotlight review, sharing concerns on behalf of parent's families and representatives from local community groups.
- **Carers** - We gathered feedback from 224 people across Devon about the impact of providing unpaid care in their homes and in particular the effect it has on their wellbeing.
- **Local communities** - we ran a social media campaign to find out how the cost-of-living crisis was impacting on people and their health, feeding into a national HWE report



Other examples of communities we have supported to have their say this year

- **Men's Health** - we collected feedback from men of all ages who access Torbay and South Devon healthcare services to find what matters to them about their health.
- **Local communities** - we continue to independently chair and collate people's feedback from stakeholder groups on the possible future use of Teignmouth Hospital.
- **Eye care patients** - we are making sure patient experiences are used in UHP, by codesigning a short survey on access to services at the new Royal Eye Infirmary (REI) building in Plymouth.



Recognition – This year we have:



- Attended different national Healthwatch England events.
- Shared the work we did around urgent care at HWE national leadership conference in London.
- Won a commended award at the National Healthwatch Impact Awards.
- Shared lots of briefing documents about the work of the wider Healthwatch Network.
- Presented our Emergency Department report at the South West Clinical Senate Conference in Exeter.

Our Priorities for next year for HW Plymouth

Over the next year we will keep reaching out to every part of our community - especially in deprived areas - so that people can share their experiences and have their voices heard. Based on public feedback, our priorities for 2024-25 are:

Health: Accessing Primary Care, Secondary Care and Mental Health services.

Social Care: Accessing Social Care Services and residential and home support services.

Children & Young People: Development and integration of Children & Young People services.

Mental Health: Accessing Mental Health services under the Community Mental Health Framework.

Digital Health: Use of digital technology to support access to services and monitoring services at home.



Quote from Devon Integrated Care Service



**Steve Moore -
Chief
Executive
Officer for
NHS Devon**

"Healthwatch in Devon, Plymouth and Torbay provides a patient voice which is vital for the delivery of NHS services locally.

Healthwatch is a valued board member of the One Devon Partnership, a committee that includes a range of organisations and groups who can influence people's health, wellbeing and care. The committee's primary aim is to drive integration by producing a strategy to join-up services, reduce inequalities, and improve people's wellbeing, outcomes and experiences.

Healthwatch continues to provide important feedback from patients, on big themes and small, so that as we redesign services, we can better tailor them to meet the expectations of our local population. Our mission at NHS Devon is to provide equal chances for everyone to live happy, healthy lives, and we need 'critical friends' such as Healthwatch to help achieve this.

We look forward to another year of close working with our partners

Quote from Devon & Cornwall Police



**Devon & Cornwall
Police and Crime
Commissioner
Alison Hernandez**

"Health and social care organisations play a critical role in building the types of communities in which people can thrive, leading healthy and productive lives.

I've worked with Healthwatch to assure me that patients who have come to the awareness of the police are being managed well in our community. They know who to approach and the right questions to ask to ensure services meet required standards.

In the same way I am there to represent the voice of the people in policing, Healthwatch is there to be that 'critical friend' to some of the most vital services our communities will ever need. People can turn to them and get actively involved or seek guidance on what steps to take. It is an invaluable organisation."

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Thank you – any questions?

Healthwatch England – Missing Millions

Exploring hidden and unmet
social care need for disabled
people

Introduction

Social care support can be transformative for disabled people – but as many as 1.5 million working-age Disabled people in England may not be getting the care they're eligible for.

New research from Healthwatch England (HWE) into social care for disabled people shows how transformative social care can be for those receiving it. But it also demonstrates the scale of unmet need. In their full report, they outline the findings and provide recommendations to decision-makers.

Background

HWE set out to learn who's accessing care, who isn't, and why. This follows the latest official proposals for social care reform, laid out in a 2021 Government white paper, which noted in its chapter on access that:

"There is a lack of data and evidence on the extent to which care needs are not being met...We believe that better-quality data, including client-level data, will help us to:

- Understand more about who accesses care, how and with what impact.
- Better understand who is not accessing care.
- Better understand how much barriers or choices (or a mix of both) may be a cause of this."

Background (cont'd)

In this report, HWE aim to address that lack of data.

Research is based on an online survey HWE commissioned from research company Savanta, carried out between February and March 2024. A representative sample of 1,504 disabled adults aged 18 to 64 were surveyed.

Key findings

- Up to 1.5 million disabled adults in England could be eligible for social care or other support but aren't receiving it.
- When people receive social care support, their experiences are very positive, with 78% of disabled adults aged 18-64 agreeing that their care helped them live the lives they wanted to.
- Social care helps people stay healthy, do their favourite activities, eat and drink, work and volunteer, and look after themselves and their homes.
- Only 9% of people spoke to disagreed that care helped them live the lives they wanted to.

Key findings (cont'd)

- Access to social care remains a challenge. 28% of the total sample had never accessed care, despite self-identifying as eligible.
- Most people waiting for care assessments received information and support, including how long they could expect to wait for an assessment (32%) and information on what to expect.
- Around 10% of people received no support at all while waiting.

Recommendations

Based on this report's findings, HWE set out the following recommendations:

- The Government must fund local authorities to raise public awareness of social care, improve ways of accessing social care services, and find potentially eligible individuals through proactive outreach and statutory information, advice, and signposting services.
- Funding should be made available to local councils to boost social care capacity and support councils in addressing existing care assessments and care package backlogs.

Recommendations (cont'd)

- ~~Funding should be ringfenced for organisations providing independent advice and guidance related to social care.~~

In response to broader challenges facing social care, we set out the following recommendations for long-term and funded reforms:

- A fully funded and long-term reform plan for social care addressing:
- Workforce challenges, including retention, recognition and pay.
- A focus on prevention of care needs and support to help people live as well and as long as possible in the place they call home.

Recommendations (cont'd)

- More support for unpaid carers, including reform of **Carer's Allowance** and improved access to support for themselves and those they care for.
- Expanded access to **Care Act advocates** to support everyone accessing a social care needs assessment.

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Thank you – any questions?