Supporting Information - Health and Wellbeing Services in Teignmouth and Dawlish

A wide range of health and wellbeing services are available to people living in the Teignmouth and Dawlish area

The way they are designed and delivered is called a 'model of care'. In Teignmouth and Dawlish, different parts of the health and care system have developed a way of working together called 'integrated care'.

Our Devon Integrated Care Model outlines a model of integrated care at neighbourhood level, bringing together Primary Care Networks (groups of GP practices), mental health, social care and community services to meet population needs. The basis of the model is to ensure that:

- people are linked into services that will support them to live as independently as possible at home
- individuals and their carers have easy and ready access to information about local services and are supported to navigate these options and make informed decisions about their care
- organisations work together to develop services and deliver care that meets the needs of individuals in the community
- people can easily access services for urgent health and social care needs
- providers and practitioners have ready access to the information they need and share information appropriately

It means:

- all the people in the health and care system who are looking after someone work together as a team to support them, instead of passing a patient on to someone else when they can't help
- all the people in the health and care system who are looking after someone have the relevant information about that person's situation, so they don't have to repeat themselves
- when someone needs help, they quickly get the right support, so their situation does not escalate into a crisis if it can be avoided

We can make this happen by helping health and care workers to work more closely together. This means everyone is clear what people need, there are fewer different staff involved in looking after people, care and treatment appointments are better co-ordinated and we don't duplicate work or miss important things through poor co-ordination.

For some years in Devon we have been investing in enhancing our community health and social care teams. Medical staff with a huge range of skills and expertise are helping people maintain their health and independence, primarily in their own homes.

Our teams provide rehabilitation, nursing and social care support. They work with patients, carers and families to prevent admissions and get people home from hospital more quickly.

This is because – for the majority – patients recover their independence and rehabilitate far better when in their own home, in familiar surroundings.

Who provides the care and how does it work?

Health and wellbeing team

This team makes the model of care work. It has a daily meeting where people in the locality who are most at risk of their health deteriorating to the point of needing a hospital stay are discussed and their care is planned.

People from the locality who are already in Torbay Hospital or a community hospital bed are also discussed to see how the team can enable them to be discharged as soon as possible in a planned, safe and supported way.

The health and wellbeing team includes:

- GPs
- Community matron
- Community nurses
- Occupational therapists
- Physiotherapists
- Social workers
- Social care assessors
- Pharmacists
- NHS clinical support workers (such as health care assistants and assistant practitioners)
- Support workers from local charity Volunteering in Health to help link people to their communities

Intermediate care

This supports people coming out from hospital, prevents people from being admitted unnecessarily and provides rehabilitation for those recovering from injury or illness.

It involves a wide range of professionals and support workers from health and social care who link with GPs, voluntary sector and specialist clinicians as required.

The team visits people at home to provide nursing or therapy support to keep people safe and help them return to their maximum wellness.

The team links closely with the community health and wellbeing team and steps in for crisis intervention when needed.

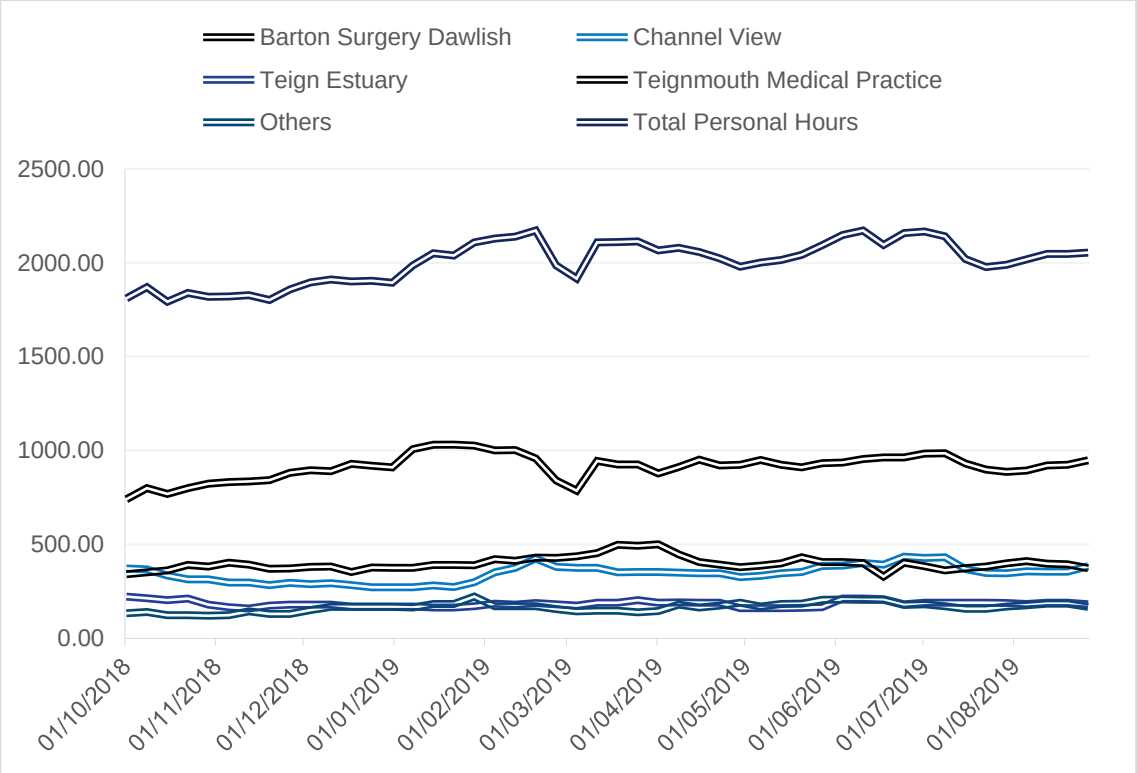
The intermediate care team also arranges short term placements in local residential or nursing homes when someone is unable to remain at home due to illness or injury but does not require hospital admission.

Rapid response
This service provides care visits for someone who may be in crisis at home. It may be a one-off visit, such as for someone who has seen a professional from the intermediate care team but needs a bit more help in the very short term. Rapid response can provide things such as personal care, support with meals and assistance with medication.

Social care reablement
This is short-term care support (up to four weeks) with a focus on rehabilitation by carers trained to help people become as independent as possible. The reablement focuses on goals and clients are encouraged to be independent when doing tasks to achieve those goals. It is often used when someone is recovering from a bone fracture or short-term illness.

Night sit
This service may be used to support people who need regular overnight support due to a short-term crisis.
The night carers update the local health and wellbeing team about any help given overnight so the person's needs are fully understood for longer-term planning.

Domiciliary care support
This is means-tested longer term support provided by private agencies. Social care workers can help set this up if needed. The use of domiciliary care arranged via Devon County Council is set out below:



Care Homes

Devon CCG works in close partnership with local authorities in the development of the care home market, seeking to ensure a sufficient, sustainable, quality and affordable bed base to support the needs of people in Devon.

Local Authorities have lead responsibility for ensuring the sufficiency of their local markets under the Care Act 2014, and for publishing and maintaining a market position statement. This is an online publication that provides an assessment of needs, supply and demand, both now and looking to the future. It offers an assessment of the changes needed in the market to adapt to changing requirements.

The Devon County Council market position statement can be found here. With regards to care homes with nursing (nursing homes) the Devon County Council area has fewer homes proportionately (based on population) than other local authority areas. However, the area also places fewer individuals into care homes because there's a greater focus on supporting individuals to remain in their own homes with care and support. It also describes some potential future challenges in terms of the provision of nursing beds for individuals with long term needs in some areas of the county. This includes the Teignbridge area, with a suggestion that further market planning activity is needed and the development of a nursing home within the Newton Abbot/Teignbridge area may be appropriate.

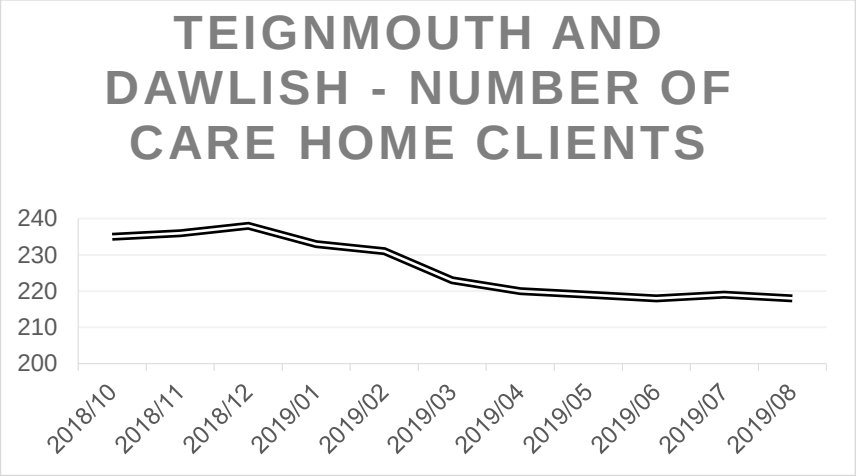
Currently, there is a sufficient supply within the local area for those individuals who require a long-term placement, with a number of vacancies within a 10-mile radius of Teignmouth as set out below:

Care Home Bed type	Registered beds	Vacant Beds @ 20/8/20
With nursing	118	12
Without nursing	493	55

Although this demonstrates current sufficiency, given the expected growth in the future in the need for more complex care home with nursing provision for individuals requiring a long term placement, further work is being done to fill the gaps identified in the market position statement.

This is clearly of importance for future need in the Teignbridge area, however, it is worth noting that in the context of the current consultation the future need is for long term placements rather than short term rehabilitation/recuperation beds.

The usage of care home beds for people living in Teignmouth and Dawlish is below:



Voluntary Sector
The Teignmouth and Dawlish area has many voluntary sector and community groups who support people with health and wellbeing needs. These groups support people in their own homes to maintain their independence, reduce social isolation and manage their health and care needs. They provide a range of activities such as befriending, community/volunteer transport, lunch groups and group meetings, physical activity sessions, advice and support with accessing services, food banks, support with shopping and at home and care and support at end of life and for those with specific conditions. For details about community and voluntary sector groups in Teignmouth and Dawlish contact Teignbridge CVS on office@teigncvs.org.uk.

Teignmouth Community Hospital

Community Clinics (which make up **73%** of outpatient appointments):

- Audiology

- Physiotherapy
- Podiatry

For levels of activity see Appendix 1

Day case procedures (minor procedures that require a specific treatment room)

These are undertaken in one operating room which is best described as suitable for minor procedures only. It has no piped gases, portable suction, and no anaesthetic or recovery rooms. In addition, the ventilation is 15+ years old and does not comply with current healthcare design standards. Recent breakdowns and inability to cope with high humidity reinforce this.

Update, December 2020.
The photo, left, was wrongly captioned as the day case procedure room at Teignmouth Community Hospital in a previous version of this document. The photo shows part of the day case procedures accommodation at the hospital.

Update, December 2020: The photos below show the day case procedure room at Teignmouth Community Hospital

Specialist outpatient clinics (making up **27%** of outpatient appointments):

- Abdominal aortic screening
- Anaesthetics
- Breast
- Cardiology
- Chronic fatigue/ME
- Clinical psychology
- Colorectal
- Dermatology
- Ear, nose and throat (ENT)
- Genetics
- Gynaecology
- Neurology
- Oral outpatients
- Orthopaedics
- Orthoptist
- Pain management
- Paediatrics
- Parkinson's
- Plastics
- Retinal screening
- Rheumatology
- Upper gastrointestinal
- Urology

For levels of activity see Appendix 1

Dawlish Community Hospital

16 medical beds – for more acutely ill and complex patients. Medical cover provided by the GPs from Barton Surgery.

[cont]

Admissions to Dawlish Community Hospital

Year	Month	Locality of patient						Total	% of Coastal Admissions
		Coastal	Moor to Sea	Newton Abbot	Paignton and Brixham	Torquay	Out Of Area		
2019	Apr	38	4	9	5	2		**58**	65.5%
	May	25	2	16	5	7	3	**58**	43.1%
	Jun	30	1	16	2		1	**50**	60.0%
	Jul	30	3	15	1	5	1	**55**	54.5%
	Aug	23		16	4	6		**49**	46.9%
	Sep	28	3	17	4	2		**54**	51.9%
	Oct	32	3	11	7	2		**55**	58.2%
	Nov	30		11	4	5		**50**	60.0%
	Dec	39	1	6	4			**50**	78.0%
2020	Jan	35		16	1	2		**54**	64.8%
	Feb	27	2	14	2	4		**49**	55.1%
	Mar	27		13	8	2		**50**	54.0%
	Apr	16	3	9	7			**35**	45.7%
	May	21	4	7	6	2		**40**	52.5%
	Jun	30	2	12	6	6	1	**57**	52.6%
	Jul	29	3	13	6	8		**59**	49.2%
Total		**460**	**31**	**201**	**72**	**53**	**6**	**823**	**55.9%**

Admissions of Coastal Patients to Other Community Hospitals

Year	Month	Hospital the Coastal patient was admitted to			Total
		Brixham	Newton Abbot	Totnes	
2019	Apr		8		8
	May		3	1	4
	Jun		13		13
	Jul		2		2
	Aug		9	1	10
	Sep		6		6
	Oct		8	2	10
	Nov		8	1	9
	Dec	1	6		7
2020	Jan	1	7	1	9
	Feb		4		4
	Mar		4		4
	Apr		2	2	4
	May	1	4		5
	Jun	1	2		3
	Jul		3	2	5
Total		**4**	**89**	**10**	**103**

Minor Injury Unit – providing non-urgent services for things like cuts, sprains, strain, bruises, itchy rashes, stings and minor burns. People are seen by an experienced nurse, without an appointment. This service is currently suspended due to staff shortages and COVID-19.

Dawlish Minor Injury Unit (MIU) opening hours were reduced due to staff shortages at the end of July 2019 with Devon CCG's approval in order to provide a safe and consistent level of service. The initial agreement was to reduce the hours over a three-month period. However, the staff shortages were unable to be resolved within this time frame and a further extension was agreed in October to the end of March 2020.

Since then, the COVID-19 pandemic has had a significant impact on the way that Minor Injury Units need to operate. In order to separate possible COVID-19 patients from non-COVID patients, not one but two staff groups are now needed for triage, assessing and treating patients. For the same reason, patients need to be provided with enough space and separate facilities to maintain safe social distancing. In March 2020 therefore, in response to the COVID-19 pandemic, the Trust agreed with the CCG that the MIU service would be suspended. This remains the case. Totnes MIU has also been suspended so that MIU and urgent care services are now safely provided at Newton Abbot Community Hospital, with staff resources concentrated there to meet the COVID-19 requirements.

X-ray - The X-ray equipment at Dawlish needs replacing and there are gaps within the radiology staffing team, which mean that the X-ray facility cannot currently be reopened. The replacement of this equipment is within this year's 2020/21 capital investment plan for Torbay and South Devon NHS Foundation Trust.

Outpatient clinics:

- Abdominal aortic screening
- Audiology
- Bladder and bowel care
- Baby clinic
- Catheter
- Combined Coastal Clinic (GP improved access)
- Fibroscan clinic
- Health visitor
- Line flushing
- Lower limb therapy team
- Micro-suction/Ear, nose, throat
- Midwife
- Orthoptist
- Podiatry
- Retinal Eye Screening
- Speech and Language
- Talkworks
- Vasectomy
- X-ray

For activity levels see Appendix 1

Appendix 1

Outpatient clinics – Teignmouth Community Hospital

Attended Appointments July 2018 – June 2019

(The resumed column shows which services are once again operating, after being stood down at the height of the COVID-19 pandemic)

High Use Community Clinics	No. of appts	Resumed	Specialist Outpatient Clinics	No. of appts	Resumed
Audiology	2121		Cardiology	195	
Physiotherapy - other	2389		Colorectal surgery	195	Y
Physiotherapy - MSK	9955		Neurology	352	Y
Podiatry	1895	Y	Oral surgery	167	Y
Ear nose and throat	475	Y	Trauma and orthopaedics	1930	
Wheelchair clinic	monthly		Orthoptist	347	Y
			Pain management	1365	Y
			Paediatrics	101	
			Plastic surgery	694	Y
			Rheumatology	145	Y
			Upper gastrointestinal surgery	181	
			Urology	706	Y
			Abdominal aortic aneurysm (AAA) screening	1 clinic per 5 weeks	Y
			Retinal eye screening	1 clinic per week	Y
			Plastics dressing clinic	1 clinic per week	Y
			Dermatology	2 clinics per 5 weeks	Y
			Clinical psychology	1 clinic per week	
			Genetics (RD&E)	half day clinic per week	Y
			Chronic fatigue/ME	2 clinics per 5 weeks	Y
			Paediatric support nurse	1 clinic per 5 weeks	Y
			Parkinson's	1 clinic per 5 weeks	Y

			Cardiac nurse	1 clinic per week	Y

Outpatient clinics – Dawlish Community Hospital

Attended Appointments July 2018 – June 2019

High Use Community Clinics	No. of appts	Resumed	Specialist Outpatient Clinics	No. of appts	Resumed
Audiology	979		Trauma and orthopaedics	41	
Ear, nose and throat	287		Orthoptist	103	
Podiatry			Abdominal aortic screening		Y
			Bladder and bowel care		Y
			Baby clinic		
			Catheter		
			Combined Coastal Clinic (GP improved access)		
			Fibroscan clinic (liver service)		Y
			Health visitor		Y
			Line flushing		
			Lower limb therapy team		Y
			Midwife		Y
			Retinal eye screening		
			Speech and language		
			Talkworks		Y
			Vasectomy		Y
			X-ray		