

# Better for You, Better for Devon

Working together to develop our  
Long Term Plan for health and care



# A Long Term Plan for Devon

**The NHS and local authorities in Devon, Plymouth and Torbay are working together to improve the health and wellbeing of local people**

- In January 2019, NHS England published the NHS Long Term Plan, setting out the priorities and focus for the NHS over the next 10 years
- As part of this, we are creating our own Long Term Plan
- Building on our system work over the past few years, our plan will take into account the needs of our population, our workforce and the challenges we face
- Our Plan will focus on real changes to how we support people
- This will see us strengthening prevention to support people to live healthier lives, supporting GP and community services to intervene early to support local people, enhancing services to help children, young people and adults needing mental health support, and having high-quality, efficient hospital services in the right place when people need them

# A Long Term Plan for Devon

- At the heart of our Long Term Plan, we will place greater emphasis on supporting people in their communities
- We will work more closely with voluntary, community and social enterprise organisations, charities and the broader social care sector to improve people's health and wellbeing
- As the NHS and locality authorities, we will also work with wider agencies – such as housing, debt advice, police and schools – to support local people
- We aim to work better with the 130,000 unpaid carers across Devon
- We will focus much more on improving people's health and mental health, and supporting people to stay well
- And, how we organise ourselves is changing – some things will be done county-wide, but more will be done locally (Northern, Eastern, Southern and Western), connecting staff from many organisations to better support people
- From 11 July to 5 September 2019, we will be talking to local people and our staff to help shape our Plan
- These slides form the basis of our 'Case for Change'. They contain a number of questions that we are seeking local peoples' views on

# How we have started to make things better

Over the past few years, the health and care system has made a number of improvements to make a #BetterDevon for local people

600,000 people across Devon have access to **online GP consultations**, giving people easier access to their GP



In Torbay and South Devon, we invested millions of pounds in **joined-up health and care services**, so people receive care closer to home, rather than in hospital

**Four Health and Wellbeing Hubs** opened in **Plymouth**, bringing together health, social care, and the voluntary and community sector

**Day surgery for hip replacements** now take place across Devon



**A new Mother and Baby Unit** to support mums with mental health needs opened in Exeter

**Minor operations and other treatments** are now provided at our smaller local hospitals, such as Tiverton, Tavistock, Okehampton and Holsworthy

# Our Case for Change: the challenges we face in Devon

# The challenges we face in Devon



## 1. More people are living for longer in ill-health

Medical advances mean people are living longer – something we celebrate. But people now often live with multiple illnesses, such as cancer, heart problems and type 2 diabetes. We need to ensure services can provide what they need



## 2. Preventable illnesses are increasing

Illnesses like type 2 diabetes are on the rise, and the amount of time people spend in good health has been decreasing since 2012



## 3. Vital health and care jobs remain unfilled

1 in 10 nurse jobs and 1 in 12 social worker posts in Devon remain vacant as demand for services increase. There is a shortage of people to undertake these roles



## 4. NHS funding is not keeping pace with demand

There have been increases in NHS funding, but peoples' needs for services are growing faster

# The challenges we face in Devon



## 5. The NHS in Devon is does not always provide timely access to care

Devon is struggling to provide timely access to services. In addition, a rise of conditions like cancer, heart disease and dementia will put the health and social care system under more pressure unless more flexible, joined-up approaches are taken



## 6. Devon's population is rising

The county's population will rise by about 33,000 people – equivalent to the population of Exmouth – over the next five years



## 7. The overwhelming baby boomer effect

The number of people aged over-85 in Devon will double in the next 20 years. We need to be able to offer all the services they need as an even greater priority



# *1. More people are living for longer in ill-health*

**Medical advances mean people can, and are, living longer – something we celebrate. But people now often live with multiple illnesses, such as cancer, heart problems and type 2 diabetes. We need to ensure services can provide what they need**

- In Devon, 400,000 people live with one or more long-term conditions, such as cancer, heart disease and dementia
- Devon has more people aged over-50 than the national average. Older people are more likely to live with one or more long-term conditions
- Mental health, respiratory issues and problems with joints, bones and muscles are responsible for a substantial amount of poor health. This peaks for people aged 65-74
- Social isolation and loneliness are big issues in Devon

**Q How can we work more closely with volunteers and the voluntary sector to better support people to live healthier and for longer?**

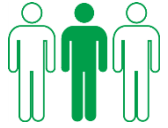


## 2. Preventable illnesses are increasing



**The amount of time people live in good health has been decreasing since 2012. Preventable illnesses, like type 2 diabetes, are on the increase**

- Smoking, alcohol, physical inactivity and poor diet are the main causes of disease and are accountable for 40% of premature deaths
- Almost a quarter of children in Devon are overweight or obese. This rises to over a third by the time children leave primary school
- Obesity now causes more cases of bowel, kidney, ovarian and liver cancers than smoking
- In Devon, more pregnant women smoke than the national average



### ***3. Vital health and care jobs remain unfilled***

**1 in 10 nurse jobs and 1 in 12 social worker posts in Devon remain vacant as demand for services increase. There is a shortage of people to undertake these roles**

- 50,000 staff work in the NHS and social care system in Devon
- 1 in 10 nursing roles are vacant
- 1 in 12 social worker posts are vacant
- 14% annual turnover of staff in the NHS
- 34% annual turnover of staff working in social care
- We do not have the staff available to deliver the current models of service provision



## ***4. NHS funding is not keeping pace with demand***

**The Government has increased funding for the NHS, but it is not enough to keep up with the numbers of people who are accessing care. There are real pressures too on social care funding**

- Social care faces significant funding shortfalls
- The NHS in Devon is given a budget of £1.8 billion to care for the 1.2 million who live in Devon
- We have consistently overspent this allocation
- This money is taken from other parts of the country, which is not fair
- We have to repay this overspending. We have done this over the past three years, totalling around £170 million each year
- It is vital, therefore, we start to only spend what we are allocated
- The NHS does not have limitless finances, and we cannot deliver everything people want

## *5. The NHS in Devon is does not always provide timely access to care*



### **Devon is struggling to provide timely access to services**

- More people are waiting longer than 18-weeks for non-urgent treatment in Devon than many parts of England
- We are not offering planned diagnostic tests within 6-weeks to all patients
- The target of 85% of patients starting treatment within 62-days from the hospital receiving an urgent referral for suspected cancer is not consistently met in Devon
- The A&E 4-hour wait target is not currently being met

**In addition, the rise of conditions like cancer, heart disease and dementia will put the health and social care system under even more pressure, unless more flexible, joined-up approaches are taken**

## 6. *Devon's population is rising*



**Devon's population will rise by about 33,000 people – equivalent to the population of Exmouth – over the next five years**

**In addition, Devon has a relatively elderly population compared to the national average, and this is expected to grow**



## 7. *The overwhelming baby boomer effect*



**The number of people aged over-85 in Devon will double in the next 20 years. We need to be able to offer all the services they need as an even greater priority**

- We are committed to supporting people aged over-85, who require more care and generally cost 10 times more to look after than children aged 10
- There are also fewer people aged 65 or under, meaning there are less people to care for older people



# Health challenges: inequalities

## Worst outcomes

Central Ilfracombe  
75 years

Plymouth  
(Devonport)  
52 years

Exeter  
(Mount Pleasant)  
27.9% of households

Plymouth  
(Union Street)  
10.8%

Plymouth  
(North Hill)  
2.9%

Plymouth  
(Stoke Road)  
51.5%

Life expectancy: 15 year difference

Healthy life expectancy: 20 year difference

Fuel poverty: eight-fold difference

Long-term conditions working age: 13-fold difference

Alcohol admissions: 14-fold difference

Child poverty: massive variations

## Best outcomes

Exmouth  
(Liverton)  
90 years

Mid Devon  
(Exe Estuary)  
72 years

Exmouth  
(Douglas Ave)  
3.6% of households

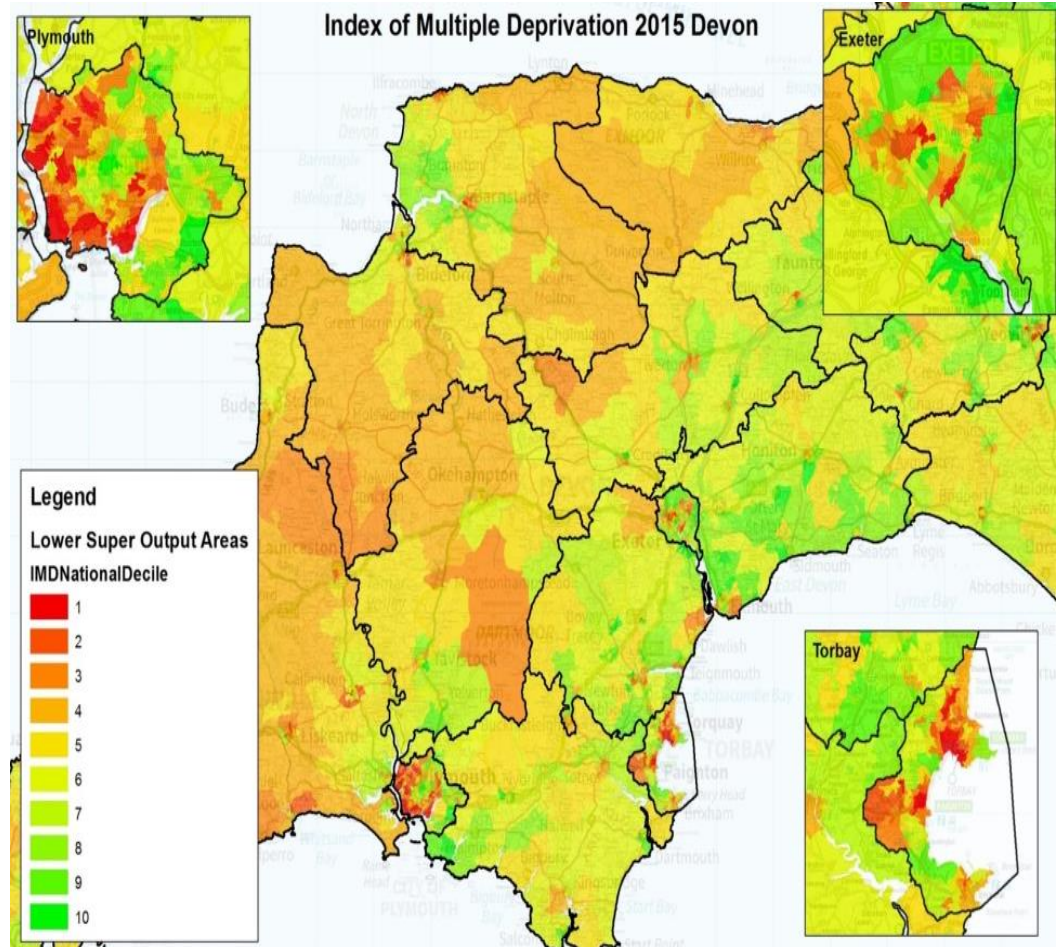
Dartmoor  
(Widecombe)  
0.8%

Eastern Devon  
(Chardstock)  
0.2%

Plymouth  
(Torr Lane)  
0.3%

# Health challenges: deprivation

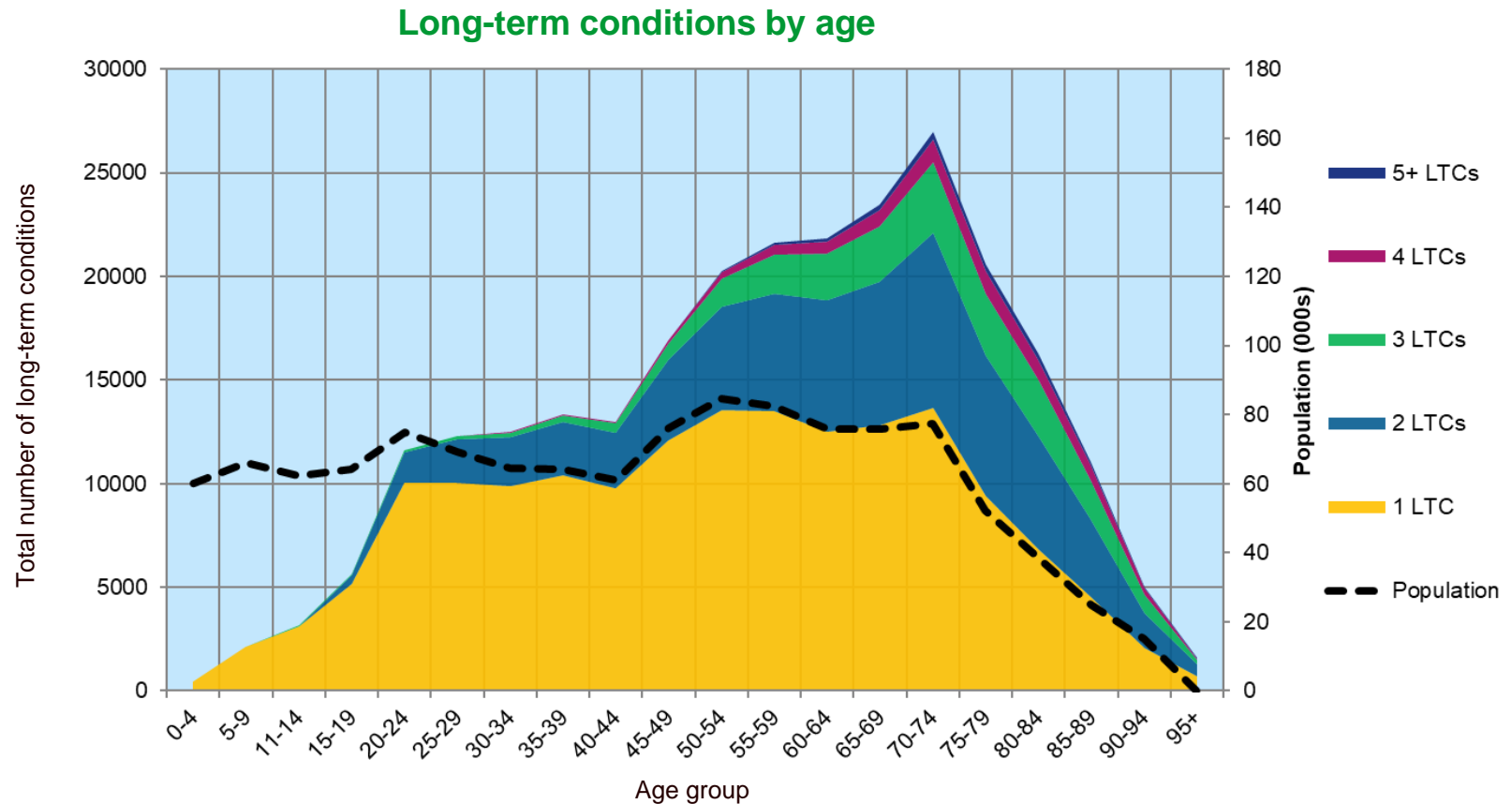
- Areas of Plymouth and Torbay have the highest levels of deprivation and poverty
- On average, people living in more deprived areas die 15-years earlier than those in more affluent areas
- Young people in more deprived areas are three times less likely to be in education, training or employment, which will affect their health
- 1 in 6 households in Devon experience fuel poverty





# Health challenges: long-term illnesses

With people living for longer they often have ill health and with multiple illnesses, such as cancer, heart problems and diabetes



# The areas for discussion

# Areas for discussion

**We have identified a number of areas for discussion based on the national Long Term Plan and our local challenges. We are seeking your views on these across Devon**

1. *Transforming care in our communities*
2. *Reducing pressure on emergency services*
3. *Personalising care*
4. *How we use digital technology*
5. *Improving cancer services*
6. *Improving people's mental health*
7. *Shorter waits for operations and procedures*
8. *How we support people to live a healthier life*
9. *Improving maternity services*
10. *Caring for children and young people*
11. *Helping people with learning disabilities and autism*
12. *Improving hospital services*
13. *Tackling our workforce challenges*

# 1. *Transforming care in our communities*

## **We want to better support people in the community with responsive services and multi-disciplinary teams**

- Groups of GP practices and doctors, nurses, pharmacists, physiotherapists, voluntary and community services are coming together to better support local communities. This is part of what are called new Primary Care Networks, launched on 1 July 2019
  - We aim to use home-based and wearable monitoring equipment to reduce hospital admissions
  - We will improve how we identify and support unpaid carers
  - Whenever safe and sustainable, mental health support will be available in and as part of communities
  - And, we are aiming to upgrade NHS support to care home residents
- Q How can we better support individuals in their communities and homes?**

## 2. Reducing pressure on emergency services

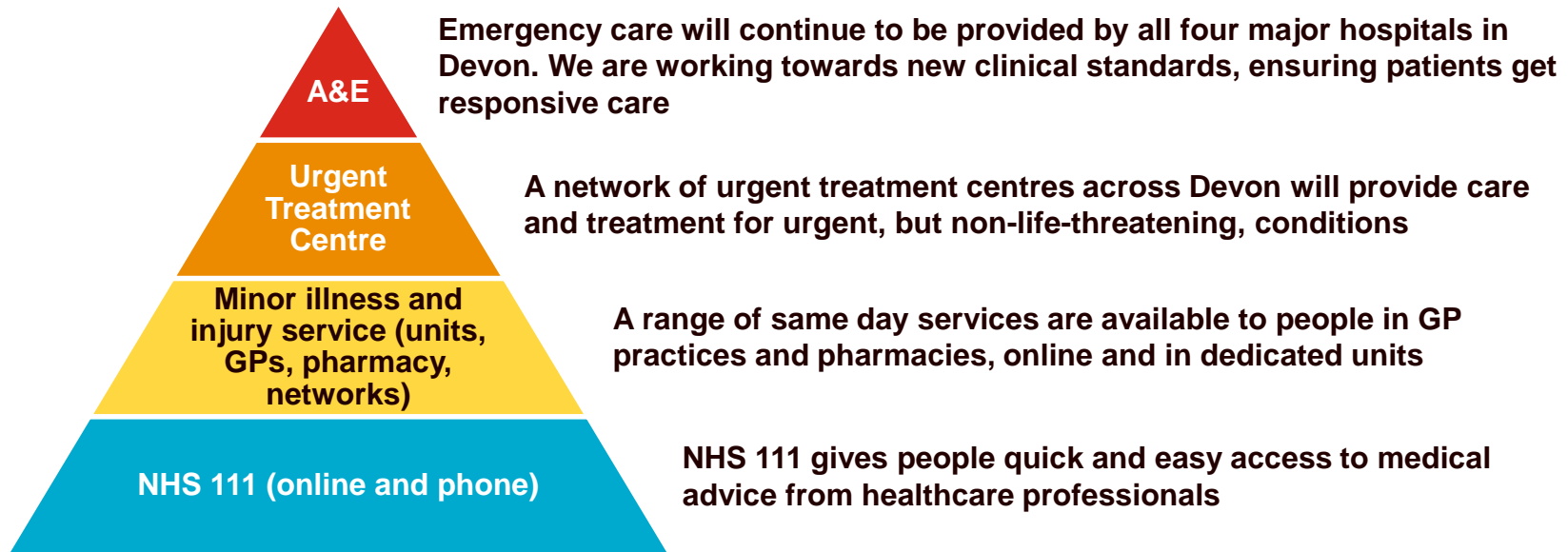
**There is increasing pressure on our urgent care services: 4% more people were treated in Devon's A&Es this year compared to last year**

**We want patients to get the care they need fast, and relieve pressure on A&E departments**

- People should have access to a range of same day services, for example, NHS 111, GP surgeries or in dedicated units
- We are enhancing the role of GPs in community urgent care, working alongside urgent treatment centres and other community services
- We will provide more mental health support via NHS 111, the ambulance service and in A&Es
- We are working to get people, who are medically fit, to leave hospital more quickly



## 2. Reducing pressure on emergency services



- Q We know that people sometimes attend A&E, even when their condition is not an emergency. Why is this?**
- Q How can we encourage people to use alternative services, for example pharmacies, 111 and minor injury services?**

### 3. Personalising care

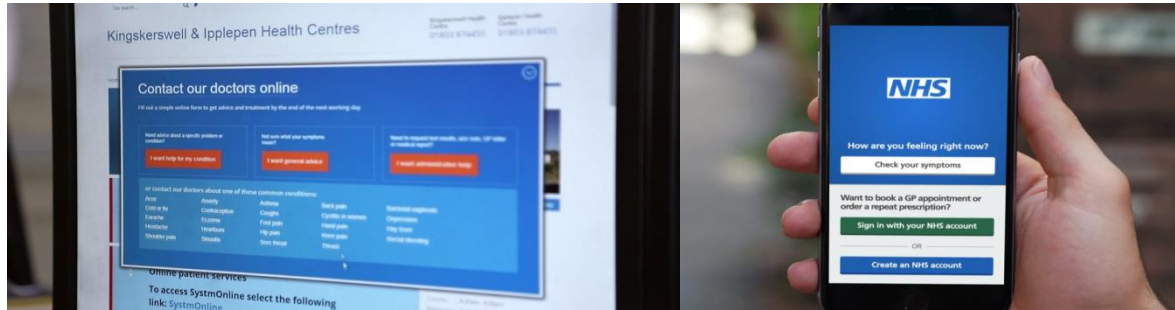
**We have significantly expanded the choices and control that people have over their own care, but there is more to do...**

- **Shared decision-making:** we want clinicians to support patients to make decisions about their care and treatment
- **Enabling choice:** we will support patients choose where and how they are treated
- **Social prescribing and community support:** we will help connect people to community groups (for example, walking and gardening clubs)
- **Supported self-management:** we will support patients to stay healthy, choose appropriate treatments and manage long-term conditions
- **Personal/integrated budgets:** we will give individuals choice over how they are supported, including therapies, personal care and equipment
- **Personalised care and support planning:** we will give people more choice and control over the way their care is planned and delivered

**Q How do you look after your health and that of your family?**

# 4. How we use digital technology

Technology is continually opening up new possibilities for preventing ill health and improving care and treatment



- We will give people access to information about their care via the NHS App, while local care records will enable better sharing of data
- We will enable all patients to consult with their GP online, giving them quicker and easier access to GP services. Currently, 600,000 patients have access to these services
- We will use technology to help people monitor their health at home and in their communities – especially in rural and isolated areas
- We will shortly be asking 1,700 members of the public – who are part of our new Devon Virtual Voices Panel – how we better use technology



## 5. *Improving cancer outcomes*

**Cancer survival is the highest it's ever been and thousands more people now survive cancer every year. However, we need to do more...**

- Access to screening services is generally good across Devon and we perform above the national average for all main screening services (for example, breast, bowel and cervical cancer)
- We need to improve our cancer waiting times. Many people currently wait longer than the 2-week national target to access urgent tests and for the 62-day target to start treatment
- From this year onwards, we will improve diagnostics and screening for patients through rapid diagnostic centres, HPV (Human Papillomavirus infection) screening and lung health checks
- Within 10 years, we aim to increase the percentage of people diagnosed with cancers at stage 1 or 2 from 56% to 75%

## 6. *Improving people's mental health*

**We need to address the major inequities that people with serious mental health problems endure in access to services, social stigma and poor physical health care**

### **ADULTS**

- People are still treated outside of the county. We will support more people closer to their homes and families
- Too many people in crisis find it hard to get care which is timely and offered in a place that best meets their needs. We will provide more mental health support via NHS 111, the ambulance service and in A&Es (First Response)
- People often wait too long to receive support for their mental health. We are developing our community mental health services so more people can get the help, when and where they need it
- People with mental illness often die prematurely. We will work across the system to help ensure people with mental health needs are better supported

**Q We want to know about things that affect your mental health and wellbeing when you are in your community. Please can you briefly describe something that happens in your local community which helps improve or maintain your mental health and wellbeing? What is it? What makes it good? What impact does it have on you and others?**

# 6. *Improving people's mental health*

## CHILDREN AND YOUNG PEOPLE

- We working to develop mental health support teams in schools and colleges and to support more children and young people to get timely access to evidence based mental health care
- We are working to provide 24/7 support for children and young people and their families at times of crisis
- We are working to reduce the need for children and young people to be treated outside Devon
- We are developing services to create a comprehensive offer for 18-25 year olds that reaches across mental health services for children, young people and adults

## ***7. Shorter waits for operations and procedures***

**Waiting times for treatment – as previously highlighted – could be improved in Devon. We have a number of patients waiting longer than 52 weeks for non-urgent treatment**

- More treatments are now being completed in a day, for example, hip replacement surgery in Torbay and Exeter. This means patients can return home and recover more quickly, and the NHS can treat more people
- The number of physiotherapists in GP Practices will be increased so patients can see the right professional the first time, without needing a GP referral
- Nationally, there is a target to reduce follow-up appointments by a third. Many follow-up appointments – particularly following routine treatment – are unnecessary or can be done by providing online information and advice

## ***8. How we support people to live a healthier life***

**The top five causes of premature deaths are smoking, poor diet, high blood pressure, obesity, and alcohol and drug use**

- We will offer NHS-funded tobacco treatment services to all people admitted to hospital who smoke, with a specialised offer for expectant mothers and their partners, and long-term users of mental health services
- We will give more people access to weight management services, the Diabetes Prevention Programme, and nutrition services
- We will support hospitals with the highest rate of alcohol dependence-related admissions to establish Alcohol Care Teams
- We will invest an additional £2 million in preventative projects, including supporting people who are suicidal, increasing physical activity, and preventing falls and fractures

**Q What reduces your ability to live a healthy lifestyle?**

## 9. *Improving maternity services*

**It is now much safer to have a baby than 10 years ago but we can still do more to reduce variation and improve care**

- We will reduce stillbirth, maternal mortality, neonatal mortality and serious brain injury by 50%
- We will increase specialist perinatal mental health care, such as our new mother and baby unit in Exeter
- We will develop the neonatal workforce and support to families
- We will give more women access to postnatal physiotherapy
- We will implement an infant feeding programme
- We will ensure all women can access their maternity notes and information digitally on smartphones, tablets and computers
- We will provide maternity services in all four major hospitals in Devon (Barnstaple, Exeter, Torquay and Plymouth)

## 9. Improving maternity services

In 2018, the NHS engaged with more than 2,000 parents as part of the *Better Births in Devon* initiative. This is what they said:

- Most women make their decision on **where to give birth** largely on the basis of safety. Women feel safest in or close to an acute hospital – particularly those with midwifery-led units on site (i.e. in Exeter)
  - Women want **better information** in early pregnancy to aid their choices (for example, reassurance on the safety of home births)
  - Women want to **see the same health professionals** throughout their pregnancy and after the birth
  - **Antenatal classes** and **postnatal support** could be better, especially for mental health
- Q** Having spoken to parents, we recognise they often want to give birth in, or near to, acute hospitals, but would like better antenatal and postnatal support locally. What services should be available locally?

# 10. *Caring for children and young people*

**Children and young people represent a third of our county. Their health and wellbeing will determine our future**

- We aim to better help children to stay out of care, but also offer better services for children in care and care leavers
- And we aim to provide better emotional wellbeing, mental health and self-harm support, early support for autism, and improved speech and language services
- Using advanced genetic research, we will identify those at risk of contracting diseases, such as cancer, and provide advice, treatment and preventative action earlier
- We will offer all boys aged 12-13 the HPV (Human Papillomavirus infection) vaccine
- We will improve care for children with long-term conditions such as asthma, epilepsy and diabetes
- We want to improve paediatric critical care and surgical services



# ***11. Helping people with learning disabilities and autism***

**We will tackle the causes of deaths or preventable deaths in people with a learning disability and/or autism, and support faster diagnosis for people with autism**

- We are working to ensure that there is closer joint working across services, including mental health and social care services
- We will increase access to specialist autism diagnostic and support services
- We will work across our system to ensure that all local services are making reasonable adjustments for people with learning disabilities or autism
- We will increase personal health budgets to give people more choice about their care
- We aim to reduce the number of people with a learning disability/autism who are treated in hospital or those treated outside of Devon inappropriately
- We aim to improve the physical healthcare of people, and prevent or stop the over medication

# 12. Improving hospital services

## Doctors and other clinicians in Devon and Cornwall are working together to improve hospital-based clinical services

- This is because medical teams are working hard to meet the increasing need for their services, but are finding it hard to recruit the staff they need, meaning many patients face longer waiting times
- We want people to access specialised services for the best treatment, which may require them to travel to other hospitals in Devon, or outside of the county, such as to Bristol and London for cardiac and paediatric surgery
- Medical Directors in each major hospital have identified areas that are under particular strain, ranging from diagnostics to specialist services (see below)
- They are looking at how they work to stabilise or strengthen current arrangements, such as through specialist centres or sharing clinical teams
  - Medical and clinical oncology
  - Paediatrics, neonatology and paediatric surgery
  - Spinal/neurosurgery
  - Cardiac surgery/cardiology
  - Planned orthopaedics
  - Diagnostics
  - Specialised commissioning

## 12. Improving hospital services

The solutions that are being explored include:

- **Increased networking:** enabling clinical teams to work together across hospitals by sharing expertise and access to specialist equipment. This already happens in Barnstaple, where doctors from Exeter travel to treat patients
  - **More services for Devon and Cornwall:** providing more procedures in the Peninsula's hospitals so that fewer people have to travel outside the area
  - **Improving diagnostics:** sharing access to diagnostic equipment or creating rapid diagnostic centres to speed up referral and reduce waiting times
  - **Establishing centres of excellence:** for more specialised treatments so as to deliver best practice standards of care and improved waiting times
- 🗣 **If you could be seen more quickly, or receive a better standard of specialist care, how far would you be willing to travel (in Devon or Cornwall) for non-emergency hospital treatment (for example, hip and knee surgery)?**

# 13. Tackling our workforce challenges

**NHS and social care staff are our greatest asset. They play an invaluable role in caring for local people**

**However, there are serious shortages. 1 in 10 nurse jobs and 1 in 12 social worker posts in Devon remain vacant as demand for services increase**

**There is also a shortage of trained people to undertake these roles**

- We are working towards better managing our workforce across all organisations to aid retention and boost recruitment
  - We are aiming to create a Devon-wide recruitment bureau
  - We will introduce workable, flexible shift patterns that meet the needs of modern workers
  - We will train staff so that they can use new technology
- Q What could we do to promote careers in health and social care (for example, working with schools and young people)? Could you help with this?**

# What happens next?

# Who we are engaging with

- Over the years, we have engaged with thousands of people across Devon on a range of topics, such as maternity, children's services and mental health. This has helped us to improve services for local people
- More recently, Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay spoke to more than 1,000 local people regarding their experiences of health and care services
- We have also been engaging with all three Health and Wellbeing Boards and Overview and Scrutiny Committees in Devon, Plymouth and Torbay
- We are now speaking to local people on developing our Long Term Plan from **11 July to 5 September 2019**
- We will collate all feedback in a common form to help shape our plan and how we deliver the key priorities for Devon

# Who we are engaging with

- Between 11 July and 5 September, we are actively talking to local people and our staff, county-wide and more locally:

## County-wide

- Two surveys through our new **Devon Virtual Voices Panel** (1,700 people)
- Three **face-to-face focus groups** (technology, workforce and helping people to stay well)
- Patient and Participation Group (PPG)** survey (online)
- Telephone survey with patients**
- Engagement session with all **Devon MPs**
- Hard-to-reach** – Living Options Devon to run six focus groups – children and young people's mental health

## Locally

- Our **four localities** in Devon (Northern, Eastern, Western and Southern) are planning local events and surveys with local people
- The activities will ensure they **engage with local staff, patient groups, politicians and other important groups, such as those who are seldom heard**
- They are **choosing themes and issues that are relevant to local people**

# Thank you

Working together to develop our  
Long Term Plan for health and care

