

Wednesday, 28 August 2024

**ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY
SUB-BOARD**

A meeting of **Adult Social Care and Health Overview and Scrutiny Sub-Board**
will be held on

Thursday, 5 September 2024

commencing at **2.00 pm**

The meeting will be held in the Banking Hall, Castle Circus entrance on the left
corner of the Town Hall, Castle Circus, Torquay, TQ1 3DR

Members of the Committee

Councillor Tolchard (Chairwoman)

Councillor Fellows

Councillor Johns

Councillor Foster (Vice-Chair)

Councillor Douglas-Dunbar

A Healthy, Happy and Prosperous Torbay

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ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY SUB-BOARD AGENDA

1. **Apologies**

2. **Minutes**

(Pages 5 - 10)

To confirm as a correct record the minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Sub-Board held on 8 August 2024.

3. **Declarations of Interest**

- a) To receive declarations of non pecuniary interests in respect of items on this agenda

For reference: Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

- b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(Please Note: If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)

4. **Urgent Items**

To consider any other items that the Chairwoman decides are urgent.

5. **Director of Public Health Annual Report - Women's Health**

(Pages 11 - 20)

To consider the Director of Public Health's Annual Report: Women's Health.

(Note: presented by Lincoln Sargeant, Director of Public Health, Torbay Council and Sarah Aston, Public Health Specialist, Torbay Council).

6. **Building Heart Healthy Communities in Torbay** (Pages 21 - 36)
To consider a report on Building Heart Healthy Communities in Torbay.

(Note: presented by Sam Trethewey, Registrar, Public Health; Julia Chisnell, Consultant in Public Health, Torbay Council and Dr John McGuinness, GP).
7. **Healthwatch Annual Report** (Pages 37 - 96)
To consider the Healthwatch Annual Report.

(Note: presented by the Chief Executive Officer of Healthwatch Torbay and Engaging Communities South West/Strategic Lead for Healthwatch in Devon, Plymouth and Torbay).
8. **Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker** (Pages 97 - 100)
To receive an update on the implementation of the actions of the Sub-Board and consider any further actions required (as set out in the submitted action tracker).

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Minutes of the Adult Social Care and Health Overview and Scrutiny Sub-Board

8 August 2024

-: Present :-

Councillor Tolchard (Chairwoman)

Councillors Foster (Vice-Chair), Johns, Douglas-Dunbar and Brook

(Also in attendance: Councillors Bryant, David Thomas and Tranter)

1. Apologies

It was reported that, in accordance with the wishes of the Conservative Group, the membership of the Sub-Board had been amended to include Councillor Brook in place of Councillor Fellows.

2. Minutes

The minutes of the meeting of the Sub-Board held on 11 April 2024 were confirmed as a correct record and signed by the Chairwoman.

3. Peninsula Acute Sustainability Programme (PASP) draft Case for Change

The Chief Executive, South Devon NHS Foundation Trust and the Chief Medical Officer, South Devon NHS Foundation Trust presented an outline of the Peninsula Acute Sustainability Programme (PASP) Draft Case for Change.

Members were informed that the Case for Change was a technical document that used data to evidence the need to change and was currently being developed. A summary of the document would also be produced to support local populations and stakeholders to understand the challenges.

The purpose of the Peninsula Acute Sustainability Programme (PASP) was to ensure clinical, workforce and financial sustainability of services at the five acute hospitals in Devon, Cornwall and the Isles of Scilly. The primary role was 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. However, this needed to be aligned with short-term tactical improvements to ensure support for recovery of elective, cancer and diagnostic services for example.

It was recognised that the pandemic had exacerbated the challenges and that acute service transformation was required to address services that were struggling to meet the increasing demand and needs of patients. In addition, there was a need to support staff to deliver safe and high quality care whilst ensuring that services conformed to national and professional standards. It was important to provide safe and high quality services across the whole geography to meet demand now and into the future whilst making best use of limited resources. It was acknowledged that medicine was getting more specialist and that currently it was necessary for some patients to travel outside the locality to receive the specialist care they needed. With innovative thinking, the aim was to provide the same specialist care locally.

Members welcomed the fact that preliminary progress had already been made. For example, the One Devon Elective Pilot enabled use of the Nightingale Hospital as a specialist centre for orthopaedic, ophthalmology and spinal surgery services. Staff and clinical networks enabled hospitals across the peninsula to work together in a networked way to provide care (for example, neonatal networks and an interventional radiology rota) and the use of technology such as Shared Picture Archive System enabled radiologists to share images across all Peninsula Trusts.

The starting point for the acute services model was to recognise different approaches to delivering the non-core services and that would start to address some of the significant workforce challenges facing the Peninsula.

Phase Two of the PASP would now be undertaken and would include developing a detailed formal case for change in partnership with staff and local people together with undertaking some detailed modelling in conjunction with staff and patients to further explore possible ways to tackle the challenges.

Members asked questions around how people would be encouraged to support the proposed changes and document; whether the nurse/staff ratio could be increased alongside staff retention; whether the initial survey included social media feedback and if this was sought solely from patients and why was there only a small number in terms of feedback; how would access to other services be achieved; whether accessible and layman terminology would be used in the summary document and survey; how would effective engagement with people be achieved; whether there were comparisons with other Local Authorities and how those who remained in hospital but did not require acute care (particularly the elderly) could be assisted so that they could return home.

In response, Members were informed that change was always challenging but that there was a desire to improve and that meant working differently. A recent example involved developing a joined-up rota which resulted in shorter waiting lists which demonstrated positive results for both staff and patients. The current delays and frustration in respect of front door care meant that people were generally open to considering change with a view to improvement. Pressure on staff was acknowledged and it was felt that if funding was used well, there was a join up in services, coupled with only admitting people to hospital where really needed, that pressure could be alleviated. Growth and development opportunities were key to staff retention as well as jobs that people wanted to do. Nursing staff were becoming more and more specialist.

The design work was predominately focussed on acute hospital care but improvements in acute care were dependent upon what happened outside the hospital, for example, integrated care in the community. Digital access to health records would give people access to healthcare across the wider Devon area with clinicians in any area being able to view records. In relation to the initial feedback from patients and staff, this was just a start in trying to understand the problem at a very early stage. In relation to the Summary Document it was vital that it was readable and honest to gain real and honest responses. The safest care was getting more complex and it was seen as important to be honest with service users so that challenges could be fully understood through effective engagement.

People needed to be informed where it had gone wrong and what could be done differently to put it right. It was imperative to get the engagement with people right. Initial enquiries focussed around talking to patients and families with some focus groups and written feedback. It was not a full programme of consultation but a measure of the reflection of challenges and whether those had been understood correctly. There had not been a comparison with other Local Authorities but previously best practice examples had been looked at. The local voice was really important as there were some unique things about local communities in terms of needs. The quality and level of delivery of acute care was dependent on community and social care working well. In relation to those patients who did not have an acute need but remained in hospital, it was hoped that digital innovations could assist with the process in enabling a return home.

Resolved (unanimously):

That the Adult Social Care and Health Overview and Scrutiny Sub-Board notes the report provided by Torbay and South Devon NHS Trust in relation to the Peninsula Acute Sustainability Programme Draft Case for Change and that the Integrated Care Organisation be requested to ensure:

1. that the Summary Document and Survey contain accessible language to encourage effective engagement;
2. engagement with the Voluntary Sector to encourage survey responses from individuals who may not otherwise be confident in participating, articulating or responding directly to the survey;
3. further consultation includes the use of both social media and surveys;
4. further consultation includes engagement with patients, families and local charities; and
5. further consultation includes engagement within a clinical setting (for example, hospital and GP waiting rooms).

4. Draft Homelessness and Rough Sleeper Strategy 2024 - 2030

The Divisional Director of Community and Customer Services, the Head of Service for Safeguarding, Early Help and Business Intelligence and the Strategic Lead for Community Protection, Torbay Council provided Members with an outline and overview of the draft Homelessness and Rough Sleeper Strategy 2024 – 2030.

Members were reminded that the Homelessness Act 2022 required local housing authorities to take strategic responsibility for tackling and preventing homelessness. The draft Homelessness and Rough Sleeper Strategy 2024 – 2030 set out the framework of what needed to be achieved and why. It linked in with other strategies and areas of work so would have an impact on the wider system.

An evidence based document had been produced and engagement sessions had been held in April – June 2024 which concentrated around:

- rough sleeping including hidden homelessness;
- young people affected by homelessness;
- homelessness that impacted the wider population;
- overall session with elected members; and
- a series of structured conversation which included hearing the voice of those that have lived experiences.

Members were informed that the draft Strategy was out for consultation until the end of August 2024, following which there would be a review of the document and development of the action plan. This would then be submitted through the relevant governance structures for approval.

The priorities concentrated upon increasing early help and prevention, intervention and better outcomes, better lives which involved supporting people independently, particularly those with complex needs, assisting with quality of lives which in turn would enable people to create a home.

Members acknowledged that the key objective of the Strategy was to provide the right advice at the right time and provide targeted prevention to reach people whose homelessness was hidden from services and to reduce repeat homelessness, rough sleeping and youth homelessness. The main reason for homelessness in Torbay was loss of private rented accommodation, this was due to various factors around stability and affordability.

Members asked questions around how much support was provided by other services, for example, upon prison release and whether such groups had been consulted; why, during the pandemic, there was no-one sleeping on the streets and what had been done differently to achieve that; whether there was engagement with schools already in terms of education and prevention; whether the report data timeline could be widened to provide a clearer view of the overall issues against priorities; whether key data could be provided over the last five years, broken down into specific areas to show where there had been intervention, so that the data could inform actions going forward; how performance against the priorities and objectives of the Strategy would be measured; what were the numbers in respect of those individuals who refused to

accept support; how did Torbay compare with other seaside towns; what the intention was in terms of working with the voluntary sector; how would feedback be measured and how would that influence the Strategy; and how would it be possible to bring together local charities to tackle the situation.

In response Members were informed that all homelessness has a far and wide reaching impact on other services and organisations. There were ongoing dialogues, for example, with Mental Health Services and the Probation Service.

There was currently an officer who provided that link between an individual's prison release date, planning for release and accommodation. The ability to plan was becoming more difficult because of an increase in early release dates. During Covid-19 there was a clear direction from Central Government to protect health and place everyone into temporary accommodation which was provided under very challenging circumstances with the use of B&B's and hotels, for example. This was a short term situation enacted by government and not sustainable in the longer term. This has now changed and the ability to source accommodation has become increasingly challenging. In terms of education and prevention, work was already underway, working with young people and families who could be at risk and developing independent living skills. There were challenges around affordability and suitable accommodation for families being available. There was a rise in seeing working parents seeking assistance because they could not afford the rise in private rents and this had created a different type of family referral with the potential for family breakdown, children in need and/or increase in the need for child protection. Members were informed that when families were placed in temporary accommodation, children often were displaced from school and this was disruptive to their education and overall development. Significant work had been undertaken to mitigate this.

Members were informed that as part of the Strategy implementation there would be clear key performance indicators to measure intervention against impact. It had to be recognised that there could be external influences as well and that the impact of any intervention would not always be felt immediately.

Accommodation and support needed to be appropriate and as part of the assistance, Council officers engaged with services in a preparatory way and needed to work with landlords in order to provide assurance, for example providing some finance in setting up tenancies. It was acknowledged that there were ongoing efforts to assist each person that needed help and support and that there were some people who would choose to be in an area such as Torbay, so that created more of a flow of people. Members welcomed the fact that the Hostel was being purchased and services were back 'in house' so that there was control over help, stabilisation and moving on. There was work underway with landlords particularly in terms of maintaining quality of accommodation.

In the development of the Strategy, in terms of co-design work, there was a lot of alliance work taking place which included hostels, domestic abuse and drug and alcohol services.

Members heard that different organisations operated within the rough sleeping sector and that Council officers liaised with them. There was co-ordination in terms of supported efforts and weekly multi-agency meetings where individuals might be discussed. This ensured that work was not duplicated and that complementary help was available. It was very much focussed around housing and safeguarding.

Councillor David Thomas spoke under Standing Order B.4 and highlighted that coastal towns had a significant additional challenge as compared to land locked towns and asked whether there were any figures to show how Torbay compared with other coastal towns and that he believed Torbay should be represented on the Coastal Towns Group.

In response, it was confirmed that research had been undertaken on comparators especially in relation to the housing provision in Torbay to allow a coastal and housing provision assessment. It had been difficult to find similar comparators, however, research was being undertaken in respect of other coastal towns to see which could be the best comparator. Meetings occurred regularly with six other Local Authorities where experience and details on trends and flows were exchanged, so the evidence base was well informed.

Members acknowledged the good work that was already happening and it was recognised that homelessness was far more complex and was not an issue that could be resolved entirely by placing people into accommodation.

Resolved (unanimously):

That the Cabinet be advised that the Adult Social Care and Health Overview and Scrutiny Sub-Board supports the Draft Homelessness Strategy 2024 – 2030 being included within the Council's Policy Framework and that the Cabinet be recommended that:

1. a key data table with clear key performance indicators be included within the Action Plan, to measure performance of the Strategy and impact, including details of external influences.

5. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker

The Sub-Board noted the submitted action tracker.

Chairwoman

Meeting: Adult Social Care and Health Overview and Scrutiny Sub Board

Date: 5 September 2024

Wards affected: All

Report Title: Annual Director of Public Health report 2024: Women's Health

When does the decision need to be implemented? As soon as possible.

Cabinet Member Contact Details: Cllr Hayley Tranter, Cabinet lead for Public Health, hayley.tranter@torbay.gov.uk

Director Contact Details: Dr Lincoln Sargeant, Director of Public Health, Lincoln.sargeant@torbay.gov.uk

1. Purpose of Report

- 1.1 This paper outlines the key themes and recommendations from the forthcoming Annual Director of Public Health report which focuses on the health and wellbeing of women.
- 1.2 The report has been informed by interviews and engagement with community groups and organisations, commissioned services, peer networks and individuals living in Torbay. This has been supported by further research and evidence.
- 1.3 The full findings and supporting films of interviews will be presented to strategic leads, contributors and stakeholders at a launch event on Wednesday 9th October in Paignton.
- 1.4 The report will outline future strategic areas of focus for improving health and wellbeing of women recognising the benefits to the wider population in Torbay.

2. Reason for Proposal and its benefits

- 2.1 The proposals in this report help us to deliver our vision of a healthy, happy and prosperous Torbay. The Directors Annual report strategically aligns to all key themes of Community and People, Pride in Place and Economic growth.
- 2.2 Women make up 51.3% of the Torbay population. Despite progress made, taking a focus on women is as important as ever as gender and sex-based barriers to health remain.

Taking time to focus on these barriers as well as facilitators and enablers means that recommended actions for senior leaders and decision makers can be smarter, sharper and more effective.

2.3 Gender based violence, biases, prejudice, misogyny and discrimination – whether conscious or unconscious continue to pervade within society. Outdated stereotypes about women’s roles can hold back the potential of men and women when it comes to family life, employment, education and health and wellbeing.

2.4 By exploring sex and gender-based issues within Torbay, this report aims to inform a series of recommendations which will create the conditions to address health inequalities and disparities and improve outcomes for all.

2.5 The reasons for the proposal and need for the decision are to support and endorse the themes and recommendations for the 2024 Annual Director of Public Health Report.

3. Recommendation(s) / Proposed Decision

3.1 The current draft recommendations within this report are intended to be broad, strategic and inclusive to all directorates within Torbay Council and the Health and Wellbeing Board including strategic partners.

3.2. The draft themes emerging from interviews and research are:

- Women, employment and household labour
- Working with vulnerable women
- Discrimination, inclusion and exclusion
- Connecting with communities
- Reproductive Health
- Barriers to being physically active

3.3 The recommendations for the Adult Social Care and Health Sub-Board to consider are:

That the Adult Social Care and Health Overview and Scrutiny Sub-Board notes the Director of Health’s Annual report 2024: Women’s Health and that the Cabinet be requested to support:

1. development of flexible and inclusive employment practices to reflect and encourage women into education and employment;
2. raising awareness of the impact of domestic abuse on women who experience it, and the sensitivity of response needed to meet their needs;

3. improvement to access, experience and outcomes for women's healthcare through Torbay's women's health hub;
4. recognition and support of grass roots women's groups and activities as integral components of mental health and wellbeing provision;
5. development of integrated service delivery pathways for women's health care, reducing the need to attend multiple appointments for routine health care; and
6. development of inclusive approaches that facilitate and support girls and women to become more physically active.

Supporting Information

1. Introduction

- 1.1 Focusing on women's health opens further opportunities to centre our understanding of the causes, opportunities, and solutions for improving outcomes for all residents. For example, women in Torbay live slightly longer than men, but are more likely to spend longer in poor health. Our rates of domestic violence and sexual assault demonstrate that women are at significantly higher risk of being subject to such behaviours, either on our streets or in homes.
- 1.2 This report is intended to go beyond describing the issues and seeks to set a course of direction which will support our local areas of strength and potential, as well as outlining opportunities to work together within the council and with external partners to address disparities amongst Torbay residents.

2. Options under consideration

- 2.1 Not applicable

3. Financial Opportunities and Implications

- 3.1 There are no direct financial implications of this report.
- 3.2 By adopting the recommendations, the economic outcomes for women and families can be improved in the long term for Torbay.

4. Legal Implications

- 4.1 There are no direct legal implications for this report.
- 4.2 By adopting the recommendations of this report, Torbay will be demonstrating its commitment to gender equality and its duties under the Equality Act 2010.

5. Engagement and Consultation

- 5.1 A broad range of community organisations focussed on women and girls have been approached and engaged in co-creating and influencing the content of this report.
- 5.2 The views of a range of different girls and women in Torbay have informed the report narrative, but where contributors have felt able to, we have invited them to participate in film content.
- 5.3 Film contributors have been invited to the launch event to see the impact of their participation with decision makers and strategic leads in Torbay and Devon.

6. Procurement Implications

- 6.1 There are no direct or immediate procurement implications as a result of this report

7. Protecting our naturally inspiring Bay and tackling Climate Change

- 7.1 There are no direct environmental or climate change impacts as a result of this report.

8. Associated Risks

- 8.1 There are no significant associated risks as a result of this report.

9. Equality Impact Assessment

Protected characteristics under the Equality Act and groups with increased vulnerability	Data and insight	Equality considerations (including any adverse impacts)	Mitigation activities	Responsible department and timeframe for implementing mitigation activities
Age	<p>18 per cent of Torbay residents are under 18 years old.</p> <p>55 per cent of Torbay residents are aged between 18 to 64 years old.</p> <p>27 per cent of Torbay residents are aged 65 and older.</p>	<p>This report and its recommendations are likely to have a positive impact on women of all ages and stages of the life course.</p>	<p>None</p>	
Carers	<p>At the time of the 2021 census there were 14,900 unpaid carers in Torbay. 5,185 of these provided 50 hours or more of care.</p>	<p>This report and its recommendations are likely to have a positive impact on women.</p>	<p>None</p>	
Disability	<p>In the 2021 Census, 23.8% of Torbay residents answered that their day-to-day activities were limited a little or a lot by a physical or mental health condition or illness.</p>	<p>This report and its recommendations are likely to have a positive impact on women</p>	<p>None</p>	
Gender reassignment	<p>In the 2021 Census, 0.4% of Torbay's community</p>	<p>This report and its recommendations are likely to have a positive impact on</p>	<p>None</p>	

	answered that their gender identity was not the same as their sex registered at birth. This proportion is similar to the Southwest and is lower than England.	women, trans and non-binary people in Torbay.	None	
Marriage and civil partnership	Of those Torbay residents aged 16 and over at the time of 2021 Census, 44.2% of people were married or in a registered civil partnership.	This report and its recommendations is unlikely to have either a positive or negative impact on those in a marriage or civil partnership or none. No differential impact.	None	
Pregnancy and maternity	Over the period 2010 to 2021, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but significantly higher in Torbay (average of 63.7 per 1,000) than England (60.2) and the South West (58.4). There has been a notable fall in the numbers of live births since the middle of the last decade across all geographical areas.	This report and its recommendations are likely to have a positive impact on women and pregnant people.	None	
Race	In the 2021 Census, 96.1% of Torbay residents described their ethnicity as white. This is a higher proportion than the South West and England. Black, Asian and minority ethnic individuals are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England.	This report and its recommendations are likely to have a positive impact on women from minority ethnic groups and populations.	None	

Religion and belief	64.8% of Torbay residents who stated that they have a religion in the 2021 census.	This report and its recommendations are unlikely to have either a positive or negative impact upon populations with a stated faith or religion, or none. No differential impact.	None	
Sex	51.3% of Torbay's population are female and 48.7% are male	This report and its recommendations are likely to have a positive impact on women. It is likely to improve outcomes for men too, but the report is focussed on females in Torbay.	None	
Sexual orientation	In the 2021 Census, 3.4% of those in Torbay aged over 16 identified their sexuality as either Lesbian, Gay, Bisexual or, used another term to describe their sexual orientation.	This report and its recommendations are likely to have a positive impact on women, including Lesbian and Bisexual Women.	None	
Armed Forces Community	In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. In Torbay, 5.9 per cent of the population have previously served in the UK armed forces.	No differential impact.	None	
Additional considerations				
Socio-economic impacts (Including impacts on child poverty and deprivation)		This report and recommendations are likely to have a positive impact on women and girls and support deeper solutions to addressing generational poverty and deprivation.	None	

Public Health impacts (Including impacts on the general health of the population of Torbay)		This report and its recommendations are likely to have a positive impact on the social and wider determinants of health, specifically those of women and girls in Torbay.	None	
Human Rights impacts		This report and its recommendations are likely to have a positive impact on Human Rights, particularly gender and sex-based rights.	None	
Child Friendly	Torbay Council is a Child Friendly Council and all staff and Councillors are Corporate Parents and have a responsibility towards cared for and care experienced children and young people.	This report and its recommendations are likely to have a positive impact on girls and women and families across Torbay.	None	

10. Cumulative Council Impact

- 10.1 A potential cumulative impact for the council is the possibility of improving lives and outcomes for women in Torbay. This can have a positive knock on for revenue and benefits, adult social care, children's social care, place based and community and environmental services and demand.

11. Cumulative Community Impacts

- 11.1 A potential cumulative impact for communities could be improved community cohesion, social mobility and impact for small and large grass roots and VCSE (Voluntary, Community and Social Enterprise) organisations within Torbay.

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Meeting: Adult Social Care and Health Overview and Scrutiny Sub-Board

Date: 5 September 2024

Wards affected: All

Report Title: Public Health update on cardiovascular disease in Torbay

When does the decision need to be implemented? n/a

Cabinet Member Contact Details: Hayley Tranter, Cabinet member for Adult and Community Services, Public Health and Inequalities, hayley.tranter@torbay.gov.uk

Director Contact Details: Lincoln Sargeant, Director of Public Health, lincoln.sargeant@torbay.gov.uk

1. Purpose of Report

- 1.1 This report seeks to summarise the work of the Public Health team and system partners in the prevention of cardiovascular disease (CVD) in Torbay, following on from the Annual Public Health Report 2023 (Getting to the heart of the matter: cardiovascular disease in Torbay - <https://www.torbay.gov.uk/council/policies/health/public-health-annual-report-2023/>).
- 1.2 This report also outlines key areas for improvement and future plans to address these areas and seeks engagement from the Adult Social Care and Health Overview and Scrutiny Sub-Board around the suggested actions.
- 1.3 From a public health perspective, our main objectives are centred around prevention, detection and early intervention for CVD. Aligned with these three key areas, in the Torbay Public Health Annual Report 2023 we proposed a range of strategies to tackle CVD.
- 1.4 Structurally the Public Health team is taking forward the CVD agenda through the new **Torbay CVD Prevention Partnership**. Team members are also participants of the wider Devon ICS CVD Prevention Group, the South West CVD Prevention Workstream and the South West Health Checks Network.

2. Reason for Proposal and its benefits

- 2.1 The proposals in this report will help us to deliver our vision of a healthy, happy and prosperous Torbay by helping to prevent, identify and treat CVD and its associated complications.
- 2.2 CVD is associated with increased morbidity, disability, emergency hospital admissions and premature mortality. In Torbay, around 1 in 4 deaths of people aged 50-74 are from CVD, and GPs in Torbay report higher rates of CVD than GPs in England on average.

- 2.3 Beyond the direct health effects, increased CVD can also have a range of other adverse impacts for health and wellbeing, including increased mental health problems, social isolation and wider economic impacts such as increased healthcare costs and productivity losses.
- 2.4 CVD is also one of the conditions most strongly associated with health inequalities. People living in the most deprived areas are much more likely to have CVD and experience higher rates of emergency hospital admissions and early death due to CVD.
- 2.5 In terms of prevention, in the 2023 annual report we highlight the important roles of ‘Getting more active’, ‘Healthy eating’, ‘Stopping smoking’ and ‘Using our planning and transport systems’. A range of actions have been implemented across these areas.
- 2.6 To have a chance of reducing the impact of CVD, we also need to identify risk factors and catch the signs and symptoms as early as possible, including major risk factors/conditions such as atrial fibrillation, high blood pressure and high cholesterol. We can then start treating people early to prevent future heart attacks or strokes.
- 2.7 In Torbay, one way that this is being achieved is via GP practice-based NHS Health Checks (commissioned by Public Health). However, primary care and Public Health teams have also been piloting new ways to offer the full health checks in addition to more targeted risk factor testing such as outreach blood pressure checks.
- 2.8 This has involved working to reach out into our communities in partnership with local community organisations. The aim is to overcome barriers to accessing healthcare and work with community organisations to reduce the burden of CVD.
- 2.9 Much of the work we are doing as part of the CVD agenda involves close partnership working across the Integrated Care System. This work therefore stands to provide wider benefits to a range of partner organisations including NHS providers.
- 2.10 There are also good opportunities to strengthen relationships with the voluntary, community and social enterprise (VCSE) sector through a variety of outreach initiatives including via the Paignton Library Community Hub.
- 2.11 CVD is strongly associated with aging and the incidence of heart attacks and strokes is substantially higher in older adults. Given that Torbay has an aging population, we may see increases in the prevalence of CVD over time. This has systemwide implications including for health and social care services. Efforts to reduce the burden of CVD are therefore likely to reduce the demand on services in the long-term.

3. Recommendation(s) / Proposed Decision

- 3.1 That the Adult Social Care and Health Overview and Scrutiny Sub Board note the report.

Background Documents

- 1.1. Torbay Annual Public Health Report 2023. Getting to the heart of the matter: cardiovascular disease in Torbay - <https://www.torbay.gov.uk/council/policies/health/public-health-annual-report-2023/>

- 1.2. Cardiovascular disease in Torbay – 2-page profile
<http://www.southdevonandtorbay.info/media/cwjb1nwj/cardiovascular-diseases-2024.pdf>

Supporting Information

1. Introduction

Background

- 1.1 Cardiovascular disease (CVD) is an umbrella name for conditions that affect our heart or blood vessels. It includes things like coronary heart disease (narrowed or blocked blood vessels in the heart), strokes and vascular dementia. It also covers conditions that affect our heart's muscle, valves or rhythm.
- 1.2 CVD is usually associated with a build-up of fatty material inside arteries, and an increased risk of blood clots. It can also be associated with damage to arteries in organs such as the brain, heart, kidneys and eyes.
- 1.3 CVD is not just a condition of old age. The risk factors are present throughout our lives. This is why it's important we understand what we can do to keep our hearts healthy at every stage of our lives.

Morbidity and mortality

- 1.4 As outlined in our Annual Public Health Report 2023 (Getting to the heart of the matter: cardiovascular disease in Torbay - <https://www.torbay.gov.uk/council/policies/health/public-health-annual-report-2023/>), CVD is the leading cause of death globally, taking around 17.9 million lives each year.
- 1.5 More than 4 out of 5 deaths due to CVD are caused by heart attacks and strokes. One third of these deaths occur prematurely in people under 70 years old.
- 1.6 In the UK, CVD affects around seven million people and is a significant cause of disability and premature mortality. It is responsible for one in four premature deaths in the UK and accounts for the largest gap in healthy life expectancy.

Health inequalities

- 1.7 CVD is also one of the conditions most strongly associated with health inequalities. People living in the most deprived areas are much more likely to have CVD and experience higher rates of emergency hospital admissions and premature mortality due to CVD. Furthermore, CVD is more common where a person is male, older, has a severe mental illness or is of South Asian or African Caribbean ethnicity.
- 1.8 Part of this picture is that people living in the most deprived areas are more likely to experience risk factors for CVD, like smoking, being physically inactive or being obese. They are less likely to

access preventative treatment, like cardiac rehabilitation or elective heart procedures, but have higher rates of emergency hospital admissions.

Torbay picture

- 1.9 In Torbay, around 1 in 4 deaths of people aged 50-74 are from CVD, and GPs in Torbay report higher rates of CVD than GPs in England on average.
- 1.10 Emergency hospital admissions for CVD in Torbay are highest among people 70 to 80 years old, although they occur in a range of age groups. There are twice as many admissions for men than women.
- 1.11 There are stark health inequalities in Torbay: people in the most deprived 20% of the population are three to four times as likely to die early from CVD than those in the least deprived 20% (see Cardiovascular disease in Torbay – 2-page profile <http://www.southdevonandtorbay.info/media/cwjb1nwj/cardiovascular-diseases-2024.pdf>).
- 1.12 From a public health perspective, our main objectives are centred around prevention, detection and early intervention for CVD. Aligned with these three key areas, in the Torbay Public Health Annual Report 2023 we proposed a range of strategies to tackle CVD.
- 1.13 Structurally the Public Health team is taking forward the CVD agenda through the new **Torbay CVD Prevention Partnership**. Team members are also participants of the wider Devon ICS CVD Prevention Group, the South West CVD Prevention Workstream and the OHID South West Health Checks Network.

Prevention

- 1.14 In terms of prevention, we highlighted the important roles of ‘Getting more active’, ‘Healthy eating’, ‘Stopping smoking’ and ‘Using our planning and transport systems’. A range of actions have been implemented across these areas.
- 1.15 **Getting more active** - Consistent moderate physical activity reduces risk from CVD in several ways, including lowering blood pressure and improving cholesterol. However, 30% of Torbay adults are not physically active (doing around 150 minutes of moderate intensity activity per week). 21% are inactive (less than 30 minutes a week).
- Our ‘Torbay on the Move’ strategy (see <https://www.torbay.gov.uk/leisure-sports-and-community/torbay-on-the-move/>) aims to support and encourage residents to be active in a way that works for them and at a level that provides significant benefits to physical and mental wellbeing.
 - A range of partners across Torbay contributed to the creation of the vision for Torbay on the Move: *‘More people, more active, more often’*. Torbay on the Move has eight strategic areas and describes how we can be active in outdoor environments, schools and workplaces.
 - With investment and capacity, increasing activity levels across Torbay has the potential to make a positive contribution, not just to health and wellbeing agendas but also to the local economy

and the environmental agenda with an established link to cleaner air, less carbon, and cleaner and safer roads.

1.16 **Healthy eating** – Diets with high levels of salt and fatty foods can increase our risk of CVD. Conversely, nutritious diets including high amounts of fruit, vegetables, legumes, and fish are associated with lower risk of developing and dying from CVD. However, in Torbay only 37% ate “5 a day” the previous day.

- We have developed guidance and support for schools through the Torbay Healthy Learning offer. This supports schools to promote healthy eating, maintain a balanced diet and make healthy choices in school, home, and the community (see <http://www.healthylearningtorbay.co.uk/>).
- Work is also ongoing to identify ways to reduce food insecurity and better support the development of sustainable food communities, with a whole system approach led by Local Motion (see <https://www.torbaycdt.org.uk/localmotion/>).
- Torbay Council, alongside sector partners, primarily Local Motion (see <https://www.torbaycdt.org.uk/localmotion/>), is leading on the development of a local Food Partnership and Food Strategy, plus has also overseen a successful application to the national Sustainable Food Places Network.

1.17 **Stopping smoking** – Smoking can narrow blood vessels, substantially increasing the risk of CVD. In Torbay, the smoking prevalence in adults is 16.9% (2022/23), which is higher than the England average (14.7%).

- The Devon Smokefree Alliance is a systemwide partnership that oversees and coordinates activity to prevent and reduce smoking within the local population (see <https://www.smokefreedevon.org.uk/about-the-smokefree-devon-alliance/>).
- The NHS Long-Term Treating Tobacco Dependence programme offers support to pregnant women and their partners to stop smoking. In Torbay, women who wish to stop smoking are offered support from an advisor and access to nicotine replacement therapy or e-cigarettes.
- Health Visitors in Torbay are working to embed recommendations from national guidance to support smokefree homes to encourage parents or carers to stop smoking and reduce smoke exposure to infants.
- A range of information and guidance is made available on Torbay Healthy Learning to help teachers inform students about the risks of smoking and vaping to deter them from taking it up (see <http://www.healthylearningtorbay.co.uk/>).

1.18 To support individuals with behaviour change we commission ‘Your Health Torbay’ through ABL Health Ltd, a service providing support to Torbay residents to stop smoking, lose weight, to move more and to eat more healthy foods (see <https://yourhealthtorbay.co.uk/>).

1.19 **Using our planning and transport systems** - Torbay adopted its first Local Cycling and Walking Infrastructure Plan in 2021, the first of its kind to look at the whole network of Torbay and provide a blueprint for connecting the three towns by active travel (see <https://www.torbay.gov.uk/roads/travel/active-travel/local-cycling-and-walking-infrastructure-plan/>).

- Further development and delivery of this plan (alongside other plans such as the Torbay Local Plan and Healthy Torbay Supplementary Planning Document) is a key aspect of creating a Torbay which enables active travel.
- Linking these infrastructure plans into wider system change and community activation strategies such as through Torbay on the Move is a critical next step. Work is also ongoing to embed health promoting principles into the Devon and Torbay Local Transport Plan which is under development.

Detection and early intervention

1.20 To have a chance of reducing the impact of CVD, we need to identify risk factors and catch the signs and symptoms as early as possible. We can then start treating people early to prevent future heart attacks or strokes.

1.21 To improve the way in which we collect data on CVD, the Torbay Public Health are supporting development of an ICS CVD dashboard led by Devon Public Health team. The first iteration is due to be released imminently and will be piloted with the Torbay CVD Prevention Group.

1.22 Across Devon we have agreed targets to increase the number of people identified early, and treated effectively, for three key CVD risk factors/conditions: A) atrial fibrillation, B) high blood pressure and C) high cholesterol.

1.23 Please see below for a summary of how common these three key risk factors/conditions are in Torbay:

- (A) Atrial fibrillation – 3.2% of patients on Torbay’s GP registers (all ages) had atrial fibrillation (QOF, 2022/23)
- (B) High blood pressure - 18.6% of patients on Torbay’s GP registers (all ages) had high blood pressure (QOF, 2022/23)
- (C) High cholesterol - 4% of patients on Torbay’s GP registers (all ages) had high cholesterol (QOF, 2022/23)

1.24 It should be noted that all three percentages above are higher than the England averages and are likely to be significant underestimates of the true underlying prevalence. This is because there is likely to be under-detection (for example, due to a lack of testing) and because they include all age groups.

NHS Health Checks

1.25 The NHS Health Check is a free check-up for adults aged 40-74. The check assesses our risk of developing heart disease, stroke, kidney disease or diabetes. Most checks are arranged via GPs.

- 1.26 By promoting healthy ageing and tackling the top 7 risk factors for early death and disability, NHS Health Checks provide a cornerstone for the prevention of CVD and other diseases that share common risk factors.
- 1.27 In Torbay, the overall percentage of people receiving an NHS Health Check (as a proportion of the eligible population) is better than both the South West and England overall (latest full year performance for 2023-24).
- 1.28 Although all GP practices are signed up to deliver NHS Health Checks across Torbay, there is a high degree of fluctuation in activity with some practices doing disproportionately fewer checks than others.
- 1.29 Moreover, although rates offer and uptake are good overall, the percentage of patients returning a QRisk score >20 (high risk) remains low. This suggests that NHS Health Checks may not be targeted towards those most likely receive benefit and remains a challenge for all local authorities across the region.

Outreach work

- 1.30 In Torbay, primary care teams and public health have been piloting new ways to offer the full health checks in addition to blood pressure checks, working to reach out into our communities in partnership with local community organisations. The aim is to overcome barriers to accessing healthcare and work with community organisations to support healthy hearts in the community.
- 1.31 Outreach NHS Health Checks were trialled last year at three organisations in Torbay including The Haven, Paignton Community Hub & The Crafty Fox Café and Hub. The primary care teams have gone on to upskill the host community organisations in doing blood pressure checks for their clients.
- 1.32 Most notably, since launching the service at Paignton Community Hub earlier this year, over 300 blood pressure readings have been taken and over 100 of these were identified as either low, raised or high, with these people recommended to regularly monitor their blood pressure for a longer period and some referred to their Surgery to seek further guidance from a trained medical professional.

Know Your Numbers! Week

- 1.33 As part of our outreach work, Torbay is promoting 'Know Your Numbers! Week' this year (2nd to 8th September) the UK's biggest blood pressure testing and awareness event. Every September, blood pressure checks are taken by thousands to prevent heart attacks and strokes.
- 1.34 This year, partners across Torbay have come together to organise a range of free events to promote 'Know Your Numbers! Week' and carry out as many blood pressure checks as possible (see below):
- **Paignton Community Hub – daily BP checks and signposting service.** Engaging Communities South West staff are offering free opportunistic BP checks, BMI checks and signposting health advice at Paignton Community Hub. Other free services are available on set days, including digital support sessions.

- **Paignton Library BP monitor scheme launch.** Local GP Dr John McGuinness from Corner Place Surgery has been working with the Torbay Public Health team and Paignton Library staff to develop a new library-based BP monitor scheme. This free scheme enables residents to loan a BP monitor for 7-day home BP measurement.
- **‘Happy Hearts’ group - coffee morning in Brixham.** Members of the Happy Hearts peer-support group in Paignton are running a free ‘heart health coffee morning’. BP checks will be on offer and heart health messages will be shared with attendees. This short interview with heart attack sufferer Rod Fry discusses his experiences of joining the Happy Hearts group and how everyone can look after their heart
- **Paignton Community Hub – mini-health checks.** Free BP checks and health screening are being carried out by local GP Dr John McGuinness and Pharmacist Josh Coulson at Paignton Community Hub. This also celebrates the launch of the Library BP monitor scheme.
- **Torbay Pride – ‘Your Health Torbay’ led BP checks and outreach.** A team from Your Health Torbay will be attending the Torbay Pride event. Your Health Torbay will have a stall in the event village and will be taking blood pressure readings, providing general lifestyle advice and linking attendees in with further support where needed. There will be specialist stop smoking advisors, nutritionists and healthy lifestyle advisors on hand to chat to attendees.
- **Torquay United Football Club – community pharmacy led BP checks and outreach.** Community pharmacists will be providing free opportunistic BP checks for attendees at a Torquay United Football Club home game against St Albans City. A team from Your Health Torbay will also be providing general lifestyle advice and linking attendees in with further support where needed

2. Options under consideration

- 2.1 There is a need to increase public health focus and support for **outreach CVD prevention work** and events in partnership with communities. A key part of this is working with partner organisations such as Healthwatch, Engaging Communities South West and local GPs to build upon the Paignton Library Community Hub model. Similarly, further work is needed to develop the community pharmacy-led outreach blood pressure testing work. Collectively, this work aims to:
- raise awareness of CVD associated with key risk factors including atrial fibrillation, high blood pressure, high cholesterol and smoking
 - promote early identification and intervention for CVD
 - target higher risk groups of the population
 - promote equity of access to services and CVD prevention initiatives
- 2.2 There is a need to maximise best practice and **NHS Health Check activity** across all GP practices in Torbay, including supporting individual practices by providing the best available evidence. This involves directing resources to support specific GP practices in improving rates of offers and uptake of NHS Health Checks and improve targeting and QRisk scores (QRisk is an algorithm which calculates an individual’s 10-year risk of having a heart attack or stroke – see <https://www.qrisk.org/>). A range of actions are underway to achieve these recommendations:

- Torbay GP survey (underway) to understand current practice around identifying and inviting eligible members of public for NHS Health Checks
- Putting together a 'NHS Health Check Resource and Guidance Pack' (for all practices).
- Arranging follow-up meetings with practice managers to provide targeted support for practices to increase rates of offers and uptake of NHS Health Checks
- Present findings at Practice Managers Forum in October
- Engage in upcoming South West OHID review of NHS Health Checks
- Ardens searching to target NHS Health Checks

2.2 There is also a need to strengthen existing **peer-support models** in Torbay. We are tackling this through ongoing close partnership working between Public Health and the Paignton 'Happy Hearts' group on the development and expansion of the peer-support offer.

3. Financial Opportunities and Implications

3.1 None identified

4. Legal Implications

4.1 None identified

5. Engagement and Consultation

5.1 Previous engagement work carried out in partnership with the public health team identified a range of CVD-related topics that were important to members of the Torbay community (See 'What does heart health mean to you?' - <https://www.torbay.gov.uk/council/policies/health/public-health-annual-report-2023/what-does-heart-health-mean-to-you/>). This helped the public health team understand some of the challenges facing the community in terms of looking after heart health and has helped to inform some of the strategies to address these challenges. For example, issues with awareness and access to services can be mitigated by effective outreach schemes.

6. Procurement Implications

6.1 None identified

7. Protecting our naturally inspiring Bay and tackling Climate Change

7.1 We have not identified any substantive potential negative impacts of the actions/recommendations in this report on the environment and climate change. The actions/recommendations are not expected to increase carbon emissions, produce large quantities of waste, encourage the use of motorised transport or reduce the quality of our natural environment and biodiversity.

7.2 Conversely, the evidence is clear that climate change has adverse consequences for human health including CVD (see 'Climate change and the prevention of cardiovascular disease' - <https://doi.org/10.1016/j.ajpc.2022.100391> and 'Cardiovascular effects of climate change' - <https://doi.org/10.1093/eurheartj/ehae401>).

- 7.3 If implemented effectively, the actions outlined in this report are likely to have indirect positive impacts on the environment and climate change. Reduced CVD will result in reduced requirements for healthcare services and reduced pharmacologic management, both of which will result in reduced carbon emissions and reduced generation of waste.
- 7.4 Some of the actions to improve cardiovascular health will also provide direct co-benefits for the environment and climate change. For example, recommendations to increase physical activity and active travel can reduce the need for motorised vehicles (reducing carbon emissions and air pollution) and recommendations to eat a healthy balanced diet can also have significant benefits for the environment through a reduction in greenhouse gas production (see The Planetary Health Diet - <https://eatforum.org/learn-and-discover/the-planetary-health-diet/>).

8. Associated Risks

- 8.1 The major risks associated with a failure to effectively implement this agenda are health related. Inadequate prevention and early intervention is likely to increase the burden of CVD across the population in Torbay, resulting in increased morbidity, disability and premature mortality.
- 8.2 Beyond the direct health effects, increased CVD can also have a range of other adverse impacts for health and wellbeing, including increased mental health problems, social isolation and wider economic impacts such as increased healthcare costs and productivity losses (see 'Economic burden of cardiovascular diseases in the European Union: a population-based cost study' - <https://doi.org/10.1093/eurheartj/ehad583>).

9. Equality Impact Assessment

Protected characteristics under the Equality Act and groups with increased vulnerability	Data and insight	Equality considerations (including any adverse impacts)	Mitigation activities	Responsible department and timeframe for implementing mitigation activities
Age	<p>18 per cent of Torbay residents are under 18 years old.</p> <p>55 per cent of Torbay residents are aged between 18 to 64 years old.</p> <p>27 per cent of Torbay residents are aged 65 and older.</p>	<p>Age is a strong risk factor for CVD, with the incidence of most types of CVD increasing with age. CVD therefore disproportionately affects older adults. NHS Health Checks are only available to adults aged 40-74 years old, however outreach work has a broader age remit. Initiatives to prevent CVD from an earlier age are likely to provide long-term benefits and reduce the incidence of CVD in older adults.</p>	None required	
Carers	<p>At the time of the 2021 census there were 14,900 unpaid carers in Torbay. 5,185 of these provided 50 hours or more of care.</p>	<p>Outreach work may make services more accessible to carers</p>	None required	
Disability	<p>In the 2021 Census, 23.8% of Torbay residents answered that their day-to-day activities were limited a little or a lot by a physical or mental health condition or illness.</p>	<p>Outreach work may make services more accessible to individuals with disabilities. Initiatives that prevent and reduce the burden of CVD are likely to reduce CVD-related morbidity and disability.</p>	None required	
Gender reassignment	<p>In the 2021 Census, 0.4% of Torbay's community answered that their gender identity was not</p>	<p>It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.</p>	None required	

	the same as their sex registered at birth. This proportion is similar to the Southwest and is lower than England.			
Marriage and civil partnership	Of those Torbay residents aged 16 and over at the time of 2021 Census, 44.2% of people were married or in a registered civil partnership.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	
Pregnancy and maternity	Over the period 2010 to 2021, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but significantly higher in Torbay (average of 63.7 per 1,000) than England (60.2) and the South West (58.4). There has been a notable fall in the numbers of live births since the middle of the last decade across all geographical areas.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	
Race	In the 2021 Census, 96.1% of Torbay residents described their ethnicity as white. This is a higher proportion than the South West and England. Black, Asian and minority ethnic individuals are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	
Religion and belief	64.8% of Torbay residents who stated that they have a religion in the 2021 census.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	

Sex	51.3% of Torbay's population are female and 48.7% are male	Given the higher burden of CVD in males, as described in the introduction section, this work may bring about increased benefit in this population specifically. However, it is important to note that CVD also affects women. Therefore, services are not restricted to males but are available to all.	None required	
Sexual orientation	In the 2021 Census, 3.4% of those in Torbay aged over 16 identified their sexuality as either Lesbian, Gay, Bisexual or, used another term to describe their sexual orientation.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	
Armed Forces Community	In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. In Torbay, 5.9 per cent of the population have previously served in the UK armed forces.	It is not anticipated that the service will have a specific positive or negative differential impact based on this characteristic.	None required	
Additional considerations				
Socio-economic impacts (Including impacts on child poverty and deprivation)		To maximise impact, services and providers should consider how to implement a proportionate universalism approach whereby CVD prevention efforts are targeted according to level of need.	None required	
Public Health impacts (Including impacts on the general health of the population of Torbay)		As detailed in the main text of this report, the various services and initiatives aim to prevent, detect and facilitate early intervention against CVD. Collectively these actions can bring about significant public health benefits by reducing morbidity, disability and premature mortality.	None required	

Human Rights impacts		Services and providers will remain cognisant of human rights, including the right to life, health, privacy, education and prohibition of discrimination.	None required	
Child Friendly	Torbay Council is a Child Friendly Council and all staff and Councillors are Corporate Parents and have a responsibility towards cared for and care experienced children and young people.	This work is not directly aimed at children, therefore it is not anticipated that the service will have a specific positive or negative differential impact in this area.	None required	

10. Cumulative Council Impact

- 10.1 CVD is strongly associated with aging and the incidence of heart attacks and strokes is substantially higher in older adults. Given that Torbay has an aging population, we may see increases in the prevalence of CVD over time. As mentioned previously, CVD is also associated with increased disability and a loss of independence, which has implications for the Adult Social Care sector. Efforts to reduce the burden of CVD are therefore likely to reduce the demand on Adult Social Care services in the long-term.

11. Cumulative Community Impacts

- 11.1 Much of the work we are doing as part of the CVD agenda involves close partnership working across the Integrated Care System. This work therefore stands to provide wider benefits to a range of partner organisations including NHS providers. There are also good opportunities to strengthen relationships with the voluntary, community and social enterprise (VCSE) sector through a variety of outreach initiatives including via the Paignton Library Community Hub.

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The value of listening

Healthwatch in Devon,
Plymouth and Torbay
Annual Report 2023–2024



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"Over the last year, local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities."

Louise Ansari, Chief Executive at Healthwatch England



Message from our Chair

“Welcome to our 2023–24 Healthwatch Annual Report.

This report describes the wide range of engagement, representation and impact undertaken by Healthwatch in Devon, Plymouth and Torbay over the past year – a particularly challenging one for health and care services dealing with issues such as a waiting list backlog and industrial action. It is a testament to the hard work and commitment by Healthwatch volunteers and staff and highlights the importance of listening to patients’ voices.

Healthwatch continues to play a vital role in gathering information and feedback on services in order to capture what is working well and what may need to be improved. We further recognise the potential of true co-design and co-delivery of services alongside our diverse communities. We have worked closely with our local voluntary, community and statutory partners to ensure that residents’ voices, including the most vulnerable and marginalised, is considered in service design by our commissioners.

The 2022 Health and Care Act has been such a key change that is impacting all aspects of the way health and social care is delivered locally. It introduced new legislative measures that aim to make it easier for health and care organisations to deliver joined-up care for people who rely on multiple different services, building on earlier recommendations by NHS England and NHS Improvement.

The main purpose of the Health and Care Act is to establish a legislative framework that supports collaboration and partnership-working to integrate services for patients. Among a wide range of other measures, the Act also includes targeted changes to public health, social care and the oversight of quality and safety.

This year was also the first full year working with our new integrated care board (ICB), following their transition from NHS Devon Clinical Commissioning Group (CCG) in July 2022. A difficult year for all of us to work through, as NHS England moved the ICB and its member trusts into the ‘recovery support programme’ – formerly known as special measures. We continue to play a vital role in gathering information and feedback on services as we support NHS Devon ICB’s journey of recovery.

With these key changes to healthcare affecting us all, we therefore welcome the progress made by ‘One Devon’, our Integrated Care System, and much appreciate the openness of its officers and system leads. Our common objective is the wellbeing of our communities.

Relationships between local organisations are consequently robust, and we look forward to our partnerships continuing and strengthening.”



“I would like to thank all those that have supported Healthwatch in our mission to monitor and improve health and social care, particularly members of the public from our local communities. It is very important continue to feedback on the services they use so that we can all make a real difference.”

Dr Kevin Dixon
Chair of Healthwatch in Devon, Plymouth & Torbay



Our Mission

Healthwatch in Devon, Plymouth and Torbay is your local health and social care champion.

We're here to speak up for the 1.2 million people in Devon, Plymouth and Torbay, making sure NHS leaders and other decision makers hear their voices and use their feedback to improve care. We can also help them find reliable, trustworthy information and advice.

We offer dedicated walk-in centres in Torbay and Plymouth, and in wider Devon 'Healthwatch Champions' are located at Citizens Advice offices based throughout the county to carry out Healthwatch core functions. Healthwatch Champions have offices based in East Devon, North & West Devon, Exeter, South Hams, Torridge & Mid Devon and Teignbridge.

Our vision

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



Our mission

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



Our values are:

- **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.



Who we are

Why do we exist?

Healthwatch was established under the Health and Social Care Act 2012 to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. Healthwatch exist on a national and local level, working towards the same goal of enabling people to have a voice about their health and social care systems.

Healthwatch England

Healthwatch England (HWE) are a statutory committee of the independent regulator the Care Quality Commission (CQC). Their main statutory functions are to:



- Provide leadership, guidance, support and advice to local Healthwatch organisations.
- Escalate concerns about health and social care services which have been raised by local Healthwatch to CQC. CQC are required to respond to advice from the Healthwatch England Committee.
- Provide advice to the Secretary of State for Health and Social Care, NHS England and English local authorities, especially where we are of the view that the quality of services provided are not adequate. Bodies to whom advice is given are required to respond in writing. The Secretary of State for Health and Social Care is also required to consult Healthwatch England on the NHS mandate, which sets the objectives for the NHS.

Local Healthwatch

There are 152 local Healthwatch set up across each local authority in England. Their main statutory functions are to:

- Obtain the views of people about their needs and experience of local health and social care services. Local Healthwatch make these views known to those involved in the commissioning and scrutiny of care services.
- Make reports and make recommendations about how those services could or should be improved.
- Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Provide information and advice to the public about accessing health and social care services and the options available to them.
- Make the views and experiences of people known to Healthwatch England, helping us to carry out our role as national champion.
- Make recommendations to Healthwatch England to advise the CQC to carry out special reviews or investigations into areas of concern.

One Healthwatch

Healthwatch England and local Healthwatch work together to share information, expertise and learning to improve health and social care services in England.

How it works locally

How it works in Devon, Plymouth and Torbay

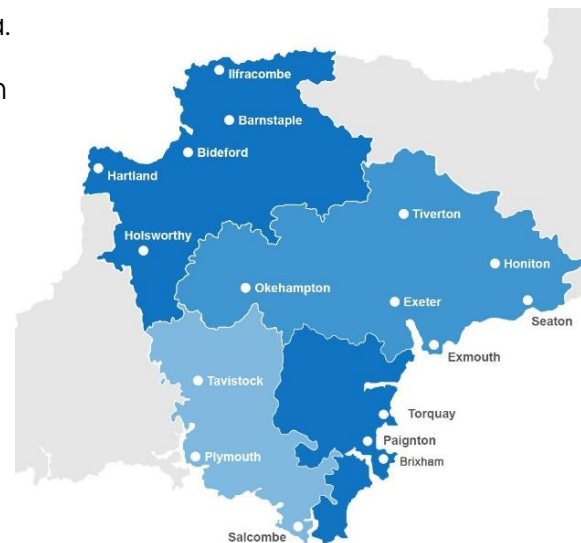
Devon County Council, Plymouth City Council and Torbay Council jointly commission local Healthwatch in Devon, Plymouth and Torbay. Although these three services are jointly commissioned, each local authority area retains the distinct identities of their own local Healthwatch.

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are delivered by a collaborative partnership of Colebrook (SW) Ltd, Engaging Communities South West and Citizens Advice Devon.

The partnership provides the vision, infrastructure, staffing and overall governance, ensuring delivery of the contract as the hosted organisation. As Healthwatch Devon, Plymouth and Torbay are independent services driven by local people, independent steering groups – led by local lay people – have been set up, alongside a Healthwatch Assist Network.

The role of each steering group is to support the delivery of its local workplan, priorities and statutory functions, working in partnership with the staff team to create a successful local Healthwatch to deliver the vision for the service. Our Steering Groups meet quarterly and use local insight to decide on engagement priorities for their area.

Our staff work in key specific areas to ensure the Healthwatch in Devon, Plymouth and Torbay service delivers its workplan, meets its statutory functions and achieves its set targets.



healthwatch

in Devon, Plymouth and Torbay

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.

This money is essential to ensuring each local Healthwatch has the resources to provide a high-quality service for you. Although local Healthwatch are funded by and accountable to local authorities, they are completely independent.

Year in Review

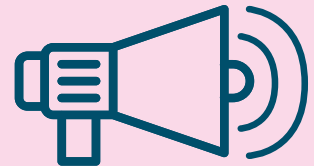
Reaching out:

3395 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

620 people

came to us for clear advice and information about topics such as dental services and GP appointments.



Making a difference to care:

We published

10 reports

about the improvements people would like to see in health and social care services.

Our most popular report was

Emergency Departments in Devon

which highlighted the experiences of **over 500** people.



Health and social care that works for you:

We're lucky to have

26

outstanding volunteers who gave up their valuable time to make care better for our community.

We're funded by our local authority.
In 2023 - 24 we received

£560,000

which is the same as the previous year.


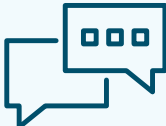

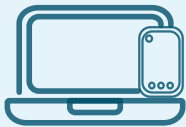




We currently employ

15 staff

who help us carry out our work.



Some of the ways we've made a difference this year

Spring	 <p>We collected feedback from men of all ages who access healthcare services in Torbay and South Devon, to help Health Trusts understand what matters to men and how they can be better informed about their health and wellbeing.</p>	 <p>We facilitated a series of focus groups to enable them to find out about people's experiences of acute medical services across Devon, Cornwall and Isles of Scilly – including what went well and what could have been better.</p>
Summer	 <p>We visited Emergency Departments across Devon's four Acute Hospital sites to speak to over 500 patients to better understand what informed and influenced their decision to attend the emergency department that day.</p>	 <p>We ran a social media campaign and online survey to find out if the cost of living was having an impact on people in Devon, Plymouth and Torbay and if so, in what way.</p>
Autumn	 <p>We gathered feedback on what patients and their relatives have told us about their experiences of pharmacy services and shared a report of these findings with NHS stakeholders in Devon and made key recommendations for them.</p>	 <p>We shared experiences relating to difficulties accessing dental services with Adult Social Care and Health Overview and Scrutiny Boards, NHS Leaders in Devon to produce joint communications to raise awareness of and promote access to dental provision.</p>
Winter	 <p>We gathered feedback from 224 people on the impact of providing unpaid care at home on Carers' wellbeing and feelings of isolation. The information gathered will be used anonymously to help us and Carers groups in Devon, Plymouth and Torbay.</p>	 <p>We co-designed research to get feedback on issues relating to accessibility, lack of public transport, inadequate signage, written communications and visual impairment related to the new Royal Eye Infirmary building in Plymouth.</p>

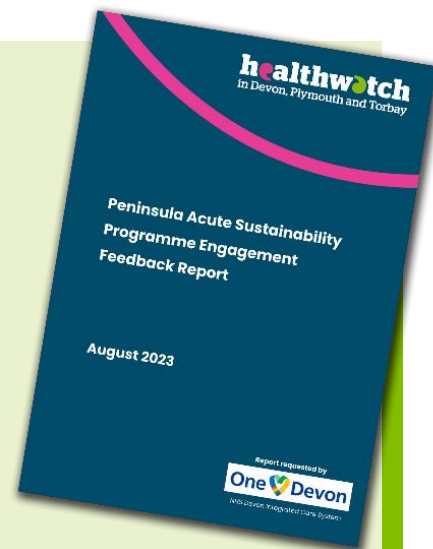
Your voice heard at a wider level

We collaborate with other local Healthwatch to ensure the experiences of people in Devon, Plymouth and Torbay influence decisions made about services at Integrated Care System level across the South West region. This year we've worked with Healthwatch across the South West to find out more about people's experiences of acute medical services.

As part of a Peninsula wide (Devon, Cornwall and Isles of Scilly) NHS Acute Sustainability Programme, the NHS are looking at ways to improve the way that acute hospital services are delivered.

To help them to do this, NHS Devon asked Healthwatch in Devon, Plymouth and Torbay (HWDPT) to facilitate a series of focus groups to enable them to find out about people's experiences of acute medical services across Devon, Cornwall and Isles of Scilly – including what went well and what could have been better. At the same time, NHS leaders in Devon, Cornwall and Isles of Scilly listened to the experiences and ideas of ten patients and family members through a series of online focus groups and ran a peninsular wide online survey and reached out for feedback through social media.

The collective feedback of 335 people was anonymized, independently analysed and collated by us at Healthwatch to form the body of our detailed consultation report. The key findings of which were then reported back to the NHS in Devon, Cornwall and Isles of Scilly.



"NHS Devon and NHS Cornwall and the Isles of Scilly would like to thank Healthwatch in Devon, Plymouth and Torbay and Healthwatch Cornwall for their commitment, support, and flexibility to such an important piece of involvement and producing such valuable insight through this report..."

The depth and quality of the feedback shows that by taking a system approach with the blend of involvement approaches through the focus groups, individual conversations, the online survey, and social media campaign, we were able to get a wide and diverse range of views.

The feedback contained within the report will influence our early discussions on how we can improve the way acute hospital services are delivered in the future. As this work progresses there will be further opportunities for involvement and for the people of Devon, Cornwall and Isles of Scilly to be able to share their experiences.

Statement from Devon Integrated Care System



Listening to your experiences

Services can't make improvements without hearing your views. That's why, over the last year, we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.

Reading our Annual Report Online?

If you click this image on the right within this report it will take you directly to the corresponding report on our websites.



Emergency Departments in Devon

In the Spring of 2023 we were commissioned by NHS Devon to visit Emergency Departments (EDs) across Devon's four Acute Hospital sites to speak to patients to better understand what informed and influenced their decision to attend the Emergency Department (ED). 511 people conversed with us during 34 visits at various times and days, which included daytime, evenings and weekends.

This work follows an initial piece of engagement work with people attending EDs in Devon undertaken in 2021 that started NHS Devon's look into patients journeys. A brief summary of themes gathered from patients by us and included in the final report we produced are below:

- **Awareness** – patients had very high levels of awareness of the other NHS services available.
- **GP services** – many patients indicated they would have preferred to be seen by their GP rather than ED but were unable to book an appointment.
- **Multiple services** – the majority of patients tried to access their GP first before being referred to ED by other services such as NHS 111 or MIU/UTC.
- **Emergency Departments** – the majority of patients felt that ED was the correct choice for their treatment.
- **NHS 111** – the majority of patients that used NHS 111 were referred to ED.
- **Delays** – there was no clear indication that the delays in waiting times for ongoing treatment or surgery is significantly impacting ED numbers.
- **Minor Injury Unit /Urgent Treatment Centre** – more than half of those accessing a Minor Injuries Unit (MIU) or Urgent Treatment Centre (UTC) were referred to ED because the services needed were not available in the community (e.g. CT scan, x-ray, blood tests, etc.).
- **Location** – the majority of patients accessed the ED closest to their home.
- **Access** – some patients highlighted the issues of accessing services, and ED, in rural areas.
- **Information screens** – there is evidence to suggest inconsistent information in EDs about other services and waiting times between sites.
- **Waiting Rooms** – waiting rooms appeared busier due to large numbers of those accompanying the patient (e.g. relatives, children, friends).

Following the report's release, we were asked to jointly present its findings with NHS Devon at the South West Clinical Senate Conference in Exeter. **Ajike Alli Ameh, Head of the South West Clinical Senate thanked us for our presentation, saying:**

"On behalf of the South West Clinical Senate, I write to thank you for taking time out of your busy schedule to speak at our Senate Assembly conference "Reimagining the NHS... the next 75 years". It is much appreciated and contributed to the success of the conference. Feedback received on the day was that the conference topic is timely and thought-provoking particularly, given the challenges and pressures faced by the NHS over the last couple of years."



What difference did this make?

NHS Devon welcomed the findings of the report and shared it with our trusts and Urgent and Emergency Care Boards. The report has also been presented at the NHS Devon Primary Care Commissioning Committee and the South West Clinical Senate to help them to make the best possible decisions about health and care provision in the South West.



Patient Experiences of Pharmacy Services

Following a report released by Healthwatch England earlier in the year which found that people are experiencing serious issues when trying to get their repeat prescriptions, we decided to perform a deeper dive into the Devon area to find out more.

We gathered feedback on what patients and their relatives have told us about their experiences of pharmacy services and shared a report of these findings with NHS stakeholders in Devon and made key recommendations for them.

Our report on Patient Experiences of Pharmacy Services, detailed a total of 141 experiences about Pharmacy Services across Devon, Plymouth and Torbay during an 18-month period. Issues raised by those surveyed include medication delays and supply problems that affect the prescription/repeat prescription service, patients not knowing when their medications are ready for collection, and phone calls going unanswered.

What we did

We escalated your concerns and our recommendations around pharmacy services and particularly the potential effect on Community Pharmacy Services to NHS Devon, specifically to The Primary Care Commissioning Committee, Quality and Patient Experience Committee and to The System Quality & Performance Group. We have raised the same concerns with the Devon Local Pharmaceutical Committee at an online meeting. Additional discussions continue to take place with NHS England Southwest and NHS Devon around our concerns and actions that are taking place to mitigate some of the issues affecting patients described in this report.

109 experiences shared with us (77%) were negative in sentiment and of those 82 experiences (75%) recorded related to pharmacy services in Plymouth. This prompted us to make a recommendation for University Hospital Plymouth NHS Trust to work with Healthwatch Plymouth in monitoring patient experience feedback once proposed changes to the Outpatient Pharmacy service are fully implemented. **Devon Local Pharmaceutical Committee responded to the report by saying:**

“Community Pharmacy Devon would like to thank Healthwatch Devon, Plymouth and Torbay for their commitment to ensuring patient experience in relation to pharmacy service is heard. The report highlights many of the issues faced by pharmacies across Devon and how they have a direct impact on patient’s experiences. Community Pharmacy Devon will review all recommendations made by the report and ensure that they are considered in full as part of processes for developing and improving pharmacy services, with the providers and the commissioners in Devon.”

What difference did this make?

Following the release of our report, University Hospital Plymouth NHS Trust concluded the procurement of a new outpatient Pharmacy and promised that by April 2024, they will have moved their outpatient pharmacy to a new on-site location that will be more than triple the size of the current premises. In February 2024 they announced a new community partnership with Boots to launch a bigger, modern, and welcoming new outpatient pharmacy in Spring 2024.

NHS Devon have said it will use the outputs of this report to directly inform the development of its Pharmacy strategy, which is currently in development, enabling them to show how the experiences of patients in Devon have been used to develop and improve services for patients.

Community Pharmacy Devon have said they will review all recommendations made by the report and ensure that they are considered in full as part of processes for developing and improving pharmacy services, with the providers and the commissioners in Devon.



Experiences of Adult Social Care

The new duty on the Care Quality Commission (CQC) to assess local authorities' delivery of their Adult Social Care duties came into effect in April 2023. Healthwatch Torbay has been working closely with Torbay Council and Torbay and South Devon NHS Foundation Trust to ensure service user voices are heard and represented in their new Adult Social Care Strategy.

In addition to promoting a survey to Carers, members of the public, all the local members of the Healthwatch Assist Network and the wider Voluntary Sector network in Torbay, we organised six independent focus groups with 70 local residents who provided their feedback and experiences on the local Adult Social Care landscape, detailed in a full consultation report we produced.

The opportunity to be involved in this important work with Torbay Council provided valuable insight about people's experiences and knowledge. The flexibility in approach taken by Torbay Council has also enabled participants to engage in a meaningful way, ensuring that they have felt listened to. The Adult Social Care Strategy identified the following key aims:

- Helping people to live well and independently
- Helping people to regain their independence
- Helping people with care and support needs to live independently, safely, and with choice and control



What difference did this make?

The report and our suggestions were used to further develop the Council's Adult Social Care strategy ensuring it was reflective of what people think is important and was approved by the Council in Autumn 2023.



"I would like to thank Healthwatch for their support during the Torbay Council's consultation in relation to the Adult Social Care Strategy. Healthwatch were a great organisation to work with and pulled the events together in a very professional way and they added an element of independence to the process which the Council greatly appreciated. By working together in partnership, we were able to maximise the benefits of the client feedback we received for both health and social care. The work will be used to further develop the Council's Adult Social Care strategy ensuring it is reflective of what people think is important."

Cathy Williams – Strategic Lead for ASC Quality & Assurance in Torbay

Follow up consultation on digital information



Following this successful Adult Social Care consultation and our work championing digital inclusion in Torbay, we were invited to join a Torbay Adult Social Care Webpages workstream group with the aim of finding out what service users thought about the website.

We joined representatives from Torquay and South Devon NHS Foundation Trust, Torbay Council, Age UK the Torbay Community Helpline and users of the Torbay adult social care webpages. The group produced a survey and held two online focus groups with members of the public and one was face to face with local learning disabilities ambassadors.

These allowed us to explore views about the webpages in more detail and produce a report containing several key recommendations for Torbay Council to take forward to make positive user-led improvements to their online provision.

Three ways we have made a difference in the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Creating empathy by bringing experiences to life

It's important for services to see the bigger picture. Hearing personal experiences and the impact on people's lives provides them with a better understanding of the problems.



In 2023 Healthwatch England published their findings and a set of immediate actions for the Government and the NHS, in relation to the cost of living and the detrimental impact it is having on people's decisions about their own health and wellbeing.

Their national research found that if you are disabled, on means-tested benefits or aged 18-24, you're more likely to avoid vital health services due to the fear of extra costs.

In light of these findings, we wanted to find out if the cost of living was having an impact on people in Devon, Plymouth and Torbay and if so, in what way.

To do this we ran a social media campaign to try and find out what steps people were taking locally in response to the rising cost of living.

Key Findings

- More than two thirds of respondents (68%) described their current financial situations as either not very or not at all comfortable.
- Most respondents (92%) said their financial situation had worsened over the last six months.
- Almost three quarters of respondents (72%) said their physical health and mental health had worsened over the last two months.
- Almost half of respondents (46%) said they have avoided going to the dentist because of the cost of check-ups or treatment and almost a quarter (22%) said they are anticipating this.
- Almost a third of respondents (32%) have cut down or stopped support from services that they pay privately for, such as physiotherapy, earwax removal or counselling.
- Half of respondents (50%) said that changes they have made because of the cost of living have negatively impacted on their ability to manage an existing long-term condition.
- Almost three quarters of respondents (73%) said the changes they have had to make due to the cost of living have negatively impacted on their levels of stress and anxiety.

The final report was shared with key stakeholders and Healthwatch in Devon, Plymouth and Torbay will continue to monitor patient and public feedback and report the findings to those who plan and deliver health and social care services in Devon to inform service delivery and change.



Three ways we have made a difference in the community

Getting services to involve the public

Services need to understand the benefits of involving local people to help improve care for everyone.



The first report we released this financial year was centered on men's health following a report by UK Parliament states that Suicide in England and Wales is three times more common among men than among women. In Devon this is even higher, with male and female suicide rates 19.0 and 5.3 respectively – male rates are 3.6 times higher than the female rate (2018–20), according to the 2022–23 DCC Suicide Prevention Statement and Action Plan.

Torbay and South Devon NHS Trust approached Healthwatch in Torbay and Devon to support them in collecting feedback from men of all ages who access healthcare services in Torbay and South Devon, to help them to understand what matters to men and how they can be better informed about their health and wellbeing.

This report forms part of a wider engagement project by Torbay and South Devon NHS Trust, who are looking at how local health services can be developed and improved to ensure men are better informed about the health issues that affect them now and in the future. We created and distributed a survey in Torbay and Devon, of which 132 men responded, and then independently analysed the feedback to produce a report of its findings for the Health Trust.

A statement from the Trust's Chief Executive Liz Davenport and Health and Care Strategy Director Joanne Watson said:

"We are very grateful to Healthwatch in Devon, Plymouth and Torbay for carrying out this valuable men's health survey amongst our local people. The results give detailed insights into how men approach their health and what matters to them specifically.

We are provided with a wide range of data which we will be taking into consideration as we focus on better health and care for all for the people of Torbay and South Devon. Mental health comes to the fore with the survey results and the suicide statistic is so stark, with men reporting that this area of health is difficult for them to talk about.



Liz Davenport

There is clearly much to do to improve the situation here and this endorses the active focus on mental health in Devon, in particular on developing a suicide prevention plan. We will continue to support this work as strongly as we can and look forward to a time when our concerted, joined up efforts will make things much better for everyone.

Finally, a powerful aspect of this report is the voices of men themselves. Their words explain so much about men's health behaviours and concerns, and clearly show us how we can provide more (and better) support and guidance. We would like to thank the men who have taken the time to express their views when given this opportunity."

This report was shared with Torbay and South Devon NHS Foundation Trust, NHS Devon and Torbay and Devon Public Health Intelligence Teams. Healthwatch in Torbay and Devon will continue to work with and support Torbay and South Devon NHS Foundation Trust's work focussing on men's health to ensure the local voice is at the heart of any service change or development.



Three ways we have made a difference in the community

Improving care over time

Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change.



Through our engagement with Carers groups in local communities during the summer, we started to hear that some Carers are experiencing difficulties trying to arrange replacement care for the person they care for, to enable them to take a break from their caring role. We have started to raise the issues surrounding these experiences with the local authorities in Devon and Torbay to try and understand how Healthwatch can work with them, as well as local Carers services and other relevant stakeholders, to help improve access to information, advice and support for people who need to arrange replacement care, particularly if they are approaching crisis point.

In December 2023 Healthwatch Torbay, in partnership with Engaging Communities South West, were commissioned by Torbay Carers' Service to help shape the new Torbay Carers' Strategy by independently analysing extensive survey data from Carers and producing a report on its findings.

377 Carers responded to the survey. Some of the issues included replacement care and mental health support for both adults and children. We have raised those issues with Torbay Council and Adult Social Care and will work with them to prioritise these. Torbay Carers have stated that all the key issues in the report will be translated into the Carers Strategy action plan which will be signed off in June 2024.



This feedback has prompted us to work further with Carers in wider Devon. At the time of writing this report, Healthwatch in Devon, Plymouth and Torbay has analysed feedback from 224 people who took part in focused engagement activities that we helped to independently facilitate. These included guided conversations on the impact of providing unpaid care at home on Carers' wellbeing and feelings of isolation. The information gathered will be used anonymously to help us and Carers groups in Devon, Plymouth and Torbay explore the links between:

- Carers mental/physical health and wellbeing and number of hours unpaid care provided.
- How long a Carer had been providing this role (longevity).
- Type of care role provided e.g. physical caring, supportive caring, dementia/cognition caring or mixture.

A full report on this will be produced in the next financial year to highlight unpaid Carers' needs and to influence a wider Devon Carers' strategy and complement our ongoing work supporting Carers in Devon, Plymouth and Torbay.

The information we are gathering from Carers in Devon, Plymouth and Torbay will allow leading Carers Services providers to develop support for Carers, develop a risk scale for Carers to help medical professionals identify when a Carer may be reaching a tipping point, to identify gaps in service provisions and communications and to identify gaps in knowledge for future engagement and research.



Hearing from all communities

Over the past year, we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently to gather their feedback and make sure their voice is heard, and services meet their needs.

This year we have reached different communities by:

- Reaching out to unpaid carers, their families and their loved ones in Devon.
- Talking with new patients of the new Royal Eye Infirmary (REI) building in Plymouth.
- Listening to the voices and experiences of children, young people and their families in Torbay.

Supporting communities to have their say in Devon



Independently chairing and collating feedback from a stakeholder group on the possible future use of the Teignmouth Hospital site.

In late 2022 Torbay and South Devon NHS Foundation Trust submitted a full planning application to Teignbridge District Council of a new health and wellbeing centre for Teignmouth – a proposal which we formally consulted with the public about in 2020 and produced an extensive report for commissioners. In 2023 we were commissioned to independently chair and collate feedback from a series of stakeholder panel meetings. The panel was created to discuss future plans for the Teignmouth Hospital site, listen and respond to the concerns of the Teignmouth community and surrounding areas and to share updates from the Trust and other stakeholders.

Devon County Council's Health Overview and Scrutiny Committee will use this feedback to look into the possible impact of proposals before taking a view on whether the Teignmouth Hospital closure should be re-referred to the Secretary of State for review. This work has continued into 2024, with decisions regarding potential funding delayed until after the General Election in July.

Engaging with new patients in Plymouth

Making sure patient experiences are used to ensure that a new Plymouth service is performing and meeting patient needs.



Our most recent piece of engagement work involved Healthwatch Plymouth and the Patient Experience team at University Hospitals Plymouth (UHP) co-designed piece of conversational research using a short survey, in order to get feedback on issues relating to accessibility (issues raised by patients since opening of the building; lack of public transport, inadequate signage, written communications and making the building easier for people with visual impairment to navigate) of the new Royal Eye Infirmary (REI) building in Plymouth.

Four of our volunteers attended the REI over 2 weeks to have informal conversations with patients about their experience of using this new service and were able to capture 35 conversations with people as they sat in the waiting areas. Healthwatch Plymouth will feedback to UHP Patient services and to the team at the REI, along with a brief report of what patients have told us.

Helping children and young people access support in Torbay



Using the voices and experiences of young people and their families to improve Child and Adolescent Mental Health Services.

We were called to give evidence at a recent spotlight review into Child and Adolescent Mental Health Services (CAMHS) and emotional wellbeing support, by Torbay Council. We shared concerns on behalf of parents, families and representatives of local community groups about the long waiting times for mental health support for children and young people and we emphasised the importance of the voices and experiences of young people and their families being embedded in the process for measuring impact.

After listening to young people sharing their stories and hearing from service leaders responding to concerns, the review concluded with a list of recommendations, which rely on a multi-agency approach to making improvements to communication, signposting and access to services to support children and young people in Torbay. The review also recommended the development of a Joint Strategic Needs Assessment on children and young people's mental health and wellbeing. This data will be used to inform the design of services and to enable progress monitoring of the delivery and improvement of the services going forward.

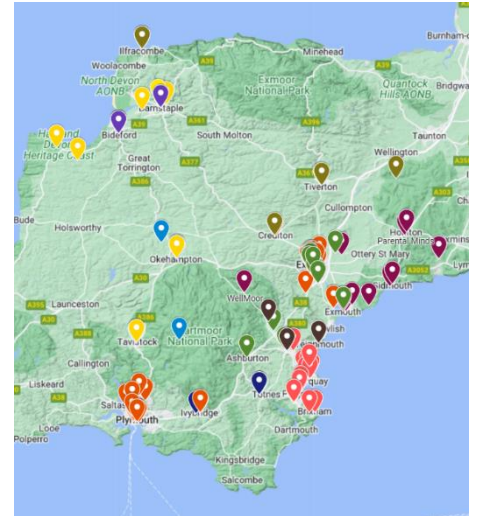


Healthwatch Assist Network

Our Healthwatch Assist Network allows us to build links with communities in Devon, Plymouth and Torbay so we can gather information about the health and care services they use.

This information is fed back into the community and shared with key healthcare decision makers who can learn from good practice and make improvements to local services.

We currently have 150 Healthwatch Assist Network members, including local support groups, school councils, parent groups, committees and sports groups.



Pictured above, the map shows some of the locations of our Healthwatch Assist Network members across Devon, Plymouth and Torbay



Our Healthwatch Assist Network's in Devon, Plymouth and Torbay have been integral in gathering feedback and supporting our next focussed engagement on the impact of providing unpaid care at home. We are working in collaboration with Devon Carers, Caring for Carers Plymouth, and Torbay Carers services. This is a follow up to an earlier report we did in 2022 and will focus on the impacts on carers, especially around their wellbeing and feelings of isolation.

The Healthwatch Torbay Assist Network met up with volunteers and staff to discuss the work of Healthwatch, how we can help support local people and to raise any issues they or the people they support had experienced locally. They were joined by Guest speaker Karen Button, who spoke about the new community pharmacy strategy. Assists had chance to feedback about health and social care issues they're picking up from their respective service users, as well as ask questions on changes happening with community pharmacies.



The Healthwatch Devon Assist Network met up to discuss the ongoing work of Healthwatch, how we can help support local people and to raise any issues they or the people they support had experienced locally. Some members shared health and social care concerns for the people they support around:

- Access to mental health services
- Access to information
- Waiting lists for services
- Access to specialised services
- Accessing social care assessments
- Impact of rurality
- Access to GP services
- Delays in care reviews
- Digital Exclusion

All the feedback gathered is shared with key healthcare decision makers who can learn from good practice and make improvements to local services.



Advice and Information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, making a complaint or choosing a good care home for a loved one – you can count on us.

This year we've helped people by:

- Providing up-to-date information people can trust
- Helping people access the services they need
- Helping people access NHS dentistry
- Supporting people to look after their health during the cost-of-living crisis

Promoting key messages around access to dental care



People need reassuring that the information and support they need are available. This means better communication so they know what to do if urgent dental care is required.

Experiences relating to difficulties accessing dental services in Torbay and wider Devon were shared by Healthwatch to Torbay Adult Social Care and Health Overview and Scrutiny Sub-Board in November. We also asked how Healthwatch could further help to promote key messages to the public around access to dental services.

Healthwatch Torbay provided evidence which highlighted that between April and November 2023, 109 people contacted local Healthwatch because they could not access an NHS dentist. Where possible we were able to contact 77 of them to signpost them to Access Dental – NHS Devon Dental Helpline.

As a result of discussions, NHS Leaders in Devon were recommended to produce joint communications to raise awareness of and promote access to dental provision, how to maintain good oral health and what to do if urgent dental care is required.

They were also requested to develop communication resources for use by frontline services and supporting web content to raise awareness of how to maintain good oral health, how to access routine dentistry and what to do if urgent dental care is required within Torbay.

We continue to regularly contribute feedback to the Local South West Regional Dental Network and the local Primary Care Committee.

Triggering important communications changes

It's essential that people have clear, accurate communication about their care.



Thanks to the efforts of Healthwatch Torbay, Torbay Hospital Cardiology Department have reviewed the way they dictate letters to patients to make sure they avoid harmful miscommunications. They'll more closely scrutinise all letters, and double-check them across departments.

Healthwatch Torbay were made aware of potential issues after John*, who has a heart condition, was advised to "stop" taking his medication. He checked in with healthcare professionals, who realised the word "stop" should be a full-stop. The mistake, which was due to a misunderstanding during the letter's dictation, could have proved very serious if John hadn't questioned it.

John shared the incident with Healthwatch Torbay, who raised his concerns with Torbay and South Devon NHS Foundation Trust. They asked about what measures were in place to ensure the accuracy of patient communications, leading to a discussion and review that will make patient communications safer for the future.

**Name changed*

How we share advice and information to the community

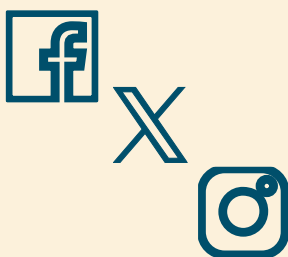
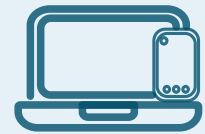
Here are just some of the ways we helped people access information in the last 12 months.



Over a thousand people were provided with information, advice or signposted to other services who could help via our contact centre - a dedicated, phone, email and online service. The online live webchat service is available via our three websites for people in Devon, Plymouth and Torbay to find out more information. You can call the contact centre free on **0800 520 0640**.

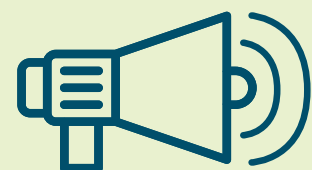
Hundreds of thousands of people visited our three websites where they can view local services and rate their experiences with them anonymously. You can visit via our websites via:

www.healthwatchdevon.co.uk, www.healthwatchplymouth.co.uk, and www.healthwatchtorbay.org.uk.



Last year tens of thousands people followed us on social media via our three separate Facebook, Twitter and Instagram accounts for Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay, where we received hundreds of thousands engagements to our posts last year overall! Join our online community today!

Over 3000 people now subscribe to our Email Bulletins where we share the latest updates from Healthwatch in Devon, Plymouth & Torbay and the health, care and voluntary sector locally every week. You can subscribe via any of our websites.





Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Visited communities to promote their local Healthwatch and what we have to offer.
- Collected experiences and supported their communities to share their views.
- Helped us decide on our priorities for the year by being part of our Healthwatch Devon, Plymouth and Torbay Steering Groups.

Our volunteers have been taking our information stands out into the community and attended events in Devon, Plymouth and Torbay, capturing experiences of local health and social care along the way.



HW Champion Kim Murray (left) with HW Devon Service Coordinator Georgina McKenzie at an MS Society event in Dawlish



The HW Plymouth volunteer engagement team attending 'Wellbeing Wednesday' at University of Plymouth



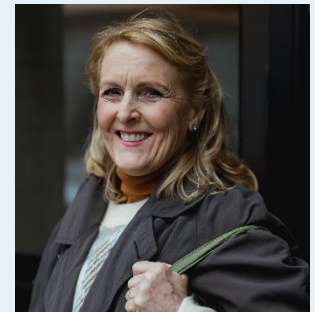
Healthwatch Torbay volunteers at the Winter Wellbeing Event at Paignton Library



"I have had various volunteering roles with Healthwatch this year.

- I took minutes at an operation follow up meeting, which included patients.
- I "manned" promotional stalls and visited local care homes for assessment and rating purposes – chatting to residents and getting their views.
- I also visited local Hospitals for similar research with patient surveys.

I have enjoyed these roles and I hope to be of use in the future."



Quote from a Healthwatch in Devon, Plymouth and Torbay Volunteer



"Volunteering with Healthwatch is a wonderful way to make use of your skills and to learn new ones, from, in my case over the last ten years or so:

- presenting a radio show
- writing a weekly news column
- editing newsletters and website information
- promoting volunteering itself by visiting local groups, organisations and schools."



Quote from a Healthwatch in Devon, Plymouth and Torbay Volunteer



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



www.healthwatchdevon.co.uk
www.healthwatchplymouth.co.uk
www.healthwatchtorbay.org.uk



Freephone 0800 520 0640



Info@hwdevon-plymouth-torbay.org



Recognition

The National Healthwatch Impact Awards recognises outstanding examples of where the views of local people have been used to make positive changes to local NHS and social care services.

This year our Healthwatch in Devon, Plymouth and Torbay team have:

- Represented Healthwatch in Devon, Plymouth and Torbay at various national Healthwatch England meetings and their national leadership conference.
- Achieved a commended award at the National Healthwatch Impact Awards, after submitting a nomination for each of Healthwatch Devon, Plymouth and Torbay. This year the Awards reflected on local Healthwatch's work over the past ten years to recognise the 10th anniversary of Healthwatch.
- Shared numerous stakeholder briefings of the work of the wider Healthwatch Network, including Healthwatch England reports, publications and responses to national health and social care stories.

This year Healthwatch Torbay were commended in the annual National Healthwatch Impact Awards, recognising outstanding work over the last 10 years that used local people's views to improve health and care support.

In the running against 18 other shortlisted projects, the team was commended for their work on helping to improve care for local people in Torbay and South Devon.

The National Healthwatch Impact Awards recognises outstanding examples of where the views of local people have been used to make positive changes to local NHS and social care services.

This year, to recognise the ten year anniversary of Healthwatch, the award reflected on an improvement to people's care that has resulted from a local Healthwatch's work at any point over the past ten years, and work that still benefits people today. The team at Healthwatch Torbay were commended for their work highlighting concerns about local domiciliary care, which led in 2017 to the Care Quality Commission (CQC) placing the care organisation into special measures until improvements were made.

At the time Healthwatch Torbay were invited to raise their social care concerns and offer key recommendations nationally during an accountability hearing with the CQC and the Government's Health Select Committee. They now have regular meetings with the local authority, commissioners and local CQC lead inspectors and continue to work with key service users to monitor improvements to ensure the voice of local people is listened to.



Dr Kevin Dixon, Chair for HWDPT with Strategic Lead Pat Harris receiving a National Healthwatch Award in 2017

Joanna Williams, Director of Adult and Community Services in Torbay said:



"This is fantastic news and a real testament to the joint working relationship between Healthwatch and local social care providers and commissioners, it's a relationship we are committed to and very grateful for. At the time Healthwatch Torbay's input was invaluable and allowed us to re-commission new services for local people based on the learning that they provided. They continue to be a key part of service user co-production and involvement so that we don't get back to that situation again. I congratulate them on winning this nationally commended award."

Commenting on the award, Louise Ansari, Chief Executive of Healthwatch England said:



"The team should feel really proud. Our awards recognise outstanding work that makes a real difference to local people, and the competition this year from across England was very high. Being recognised is also a testament to all the local people who were prepared to speak up and the health professionals who listened. It just shows what can be achieved when we work together to improve care."

In September our Strategic & Operational Leads Pat Harris & Sarah Lonton joined leaders from the Healthwatch network at the Healthwatch England Leadership Conference in London to share ideas on the future role of Healthwatch in helping to improve local health & social care services. Pat took the opportunity to talk on stage about the importance of local Healthwatch gathering patient feedback at the national Conference, which began with a speech from newly appointed Healthwatch England Chair Professor David Croisdale-Appleby. Representatives from across the country discussed Healthwatch's role in improving access to services and the next steps in Primary Care.



Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012. This year we received:

Our income and expenditure

Income		Expenditure	
Local Authority Funding	£560,000	Expenditure on pay (staffing)	£433,421.69
(Devon)	(£348,573)	Non-pay expenditure (operational)	£43,261.42
(Plymouth)	(£115,427)	Office and management fees (support)	£90,228.14
(Torbay)	(£96,000)		
Additional income	£236.50		
Carry in	£25,165.11		
Total income	£585,401.61	Total expenditure	£566,911.25

Additional income is broken down by:

- £236.50 received from Healthwatch Birmingham for work supporting a data project.

Our Priorities for 2024/25

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will also focus on how we can improve the issues that concern local people the most, including GP access, waiting times, women's health, and social care.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

To help us carry out our work our volunteer Steering groups have agreed on the following engagement priorities for each of Healthwatch Devon, Plymouth & Torbay's local service:

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

healthwatch
Devon

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

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

Equality: Equitable access to health services for all patients including those with learning disabilities/language barriers/sight impairment/hearing loss/young people.

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

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

healthwatch
Plymouth

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

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.

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

healthwatch
Torbay

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

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

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

Wellbeing: Impact of cost of living on individual/family health & wellbeing.



Statutory Statements

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are provided by Colebrook Southwest in partnership with Engaging Communities South West and Citizen’s Advice Devon, William Sutton Memorial Hall, 6 Shelley Way, St Budeaux, Plymouth, PL5 1QF.

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay use the Healthwatch Trademark when undertaking our statutory activities as covered by the license agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making

As Healthwatch Devon, Plymouth and Torbay are independent services, driven by the voice of local people, an independent steering group has been set up in each locality in Devon, Plymouth, and Torbay – led by lay people. The role of each steering group is to support the delivery of its local workplan, priorities and statutory functions, working in partnership with the staff team to create a successful local Healthwatch to deliver the vision for the service. Our Steering Groups meet quarterly and use local insight from public information and signposting enquiries to decide on engagement priorities for their area. These priorities are detailed on the next page of this report.

Methods and systems used to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of using services. During 2023/24 we have been available by phone, email, provided a webform on our website and through social media, as well as attending meetings of community groups and forums, both face-to-face and virtually. We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on each of our websites – www.healthwatchdevon.co.uk, www.healthwatchplymouth.co.uk, and www.healthwatchtorbay.org.uk.

Responses to recommendations or requests for information

We made 26 Requests for Further Information (RFIs) to stakeholders based on public feedback. There were no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations. In addition, we responded to all 13 requests from external stakeholders for further evidence from Healthwatch in Devon, Plymouth and Torbay about various health and social care related topics.

As part of the annual statutory Quality Account process for NHS Trusts and specific service providers, we also provided responses to all the relevant reports in 2023/24.

Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us. Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are also represented on numerous different relevant meetings locally, regionally and nationally. This year for example in our local authority areas we have taken information to each of the Devon, Plymouth and Torbay Health & Wellbeing Boards, Health & Adult Social Care Overview & Scrutiny Boards, Safeguarding Adults Partnerships, Local Outbreak Engagement Boards and Local Care Partnerships.

As well as being on the Devon Integrated Care Partnership Board, we also take insight and experiences to other decision makers in Devon, Plymouth and Torbay. For example, this year we have shared the public voice on the Learning Disability Partnership Board in Devon, the Carers Strategic Partnership Board in Plymouth and have been a key founding member of the voluntary, community or social enterprise (VCSE) Health & Wellbeing Network in Torbay.

We also share our data with the Care Quality Commission (CQC) and Healthwatch England (HWE) to help address health and care issues at a national level and are part of the regional HWE South West Network with our neighbouring local Healthwatch.

Final Message from One Devon Devon Integrated Care Service

"2023/24 marked our first full year as an integrated care board (ICB), following our transition from NHS Devon Clinical Commissioning Group (CCG) in July 2022. As a new organisation we have needed to make adjustments to how we work in the face of different responsibilities and with many of our services facing significant pressures. Our challenges are not unique in England, but our starting position was one of the most difficult and, while we are beginning to see some signs of an encouraging turnaround, they remain critical priorities to be addressed without losing sight of our need to go further on health prevention and inequalities. **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 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.

As an example, Healthwatch in Devon, Plymouth and Torbay led a significant piece of engagement for the ICB speaking to people in Devon's four Emergency Departments (ED) to better understand the patient journey through the health system to ED. The findings showed that 98% of people are aware of the NHS services available to them, 68% had accessed their GP practice prior to attending ED,

and 86% of people who accessed ED as a first choice, felt it was the right place for them. Presenting this work together with Healthwatch at the 2024 Clinical Senate was a real demonstration of our commitment of working together to ensure the voices of the people of Devon are instrumental in the development of our services.

People using health services do often experience real inequality, and the information that Healthwatch collated will contribute on our future design of urgent and emergency care services across the county.

We look forward to another year of close working with our partners in Healthwatch Devon, Plymouth and Torbay."

Steve Moore - Chief Executive Officer for NHS Devon



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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In partnership with Colebrook
South West Ltd, Engaging
Communities South West &
Citizens Advice Devon

If you require this report in any
other format please contact us

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 Devon

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are independent services with a 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.



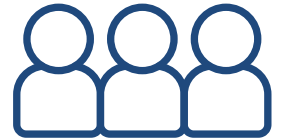
Who funds us?

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

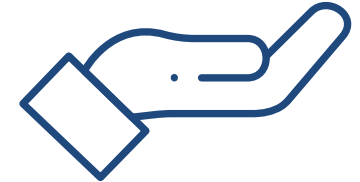
Our Mission

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

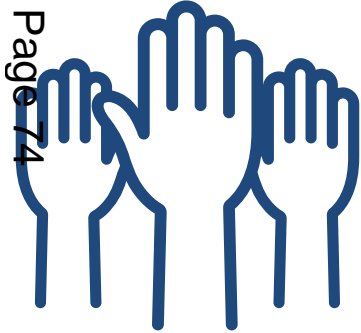
- Listening to people and making sure their voices are heard.
- Including everyone in the conversation – especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers,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

Working and volunteering in HWDPT



- We to have **26** excellent volunteers and continue to recruit on a regular basis.
- We employ **13** staff members – not all are FTE (still have two vacancies).
- 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 Devon.

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

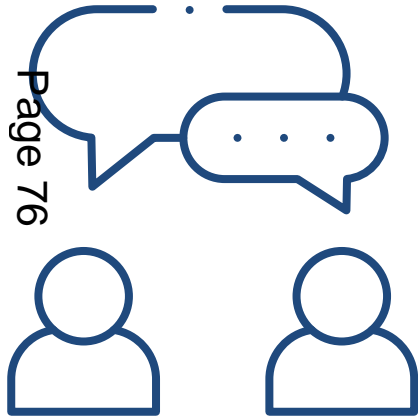
How many people we reached in 2023/24



Page 75

- **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 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 centre. 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 now sign up for our Email Bulletins. We share the newest updates from Healthwatch in Devon, Plymouth & Torbay.

Examples of what people tell us

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"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

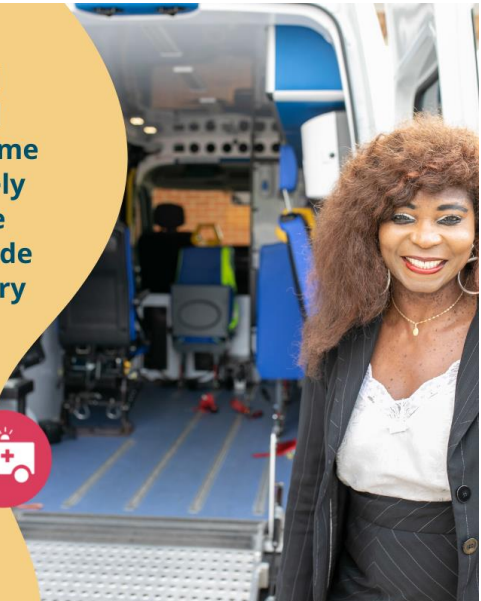


All the staff are caring and supportive, the stroke and medical team took their time to explain as I am extremely deaf. The paramedics were exceptionally kind and made me feel at ease as I was very confused and afraid."



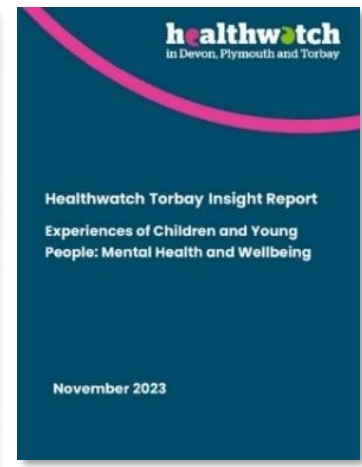
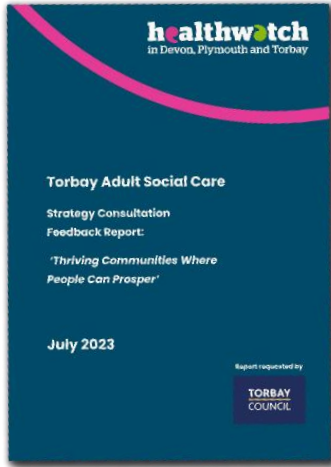
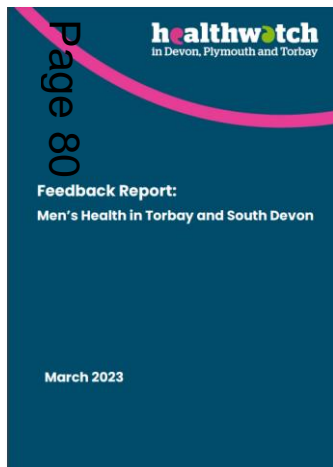
#yourvoicecounts

healthwatch
in Devon, Plymouth and Torbay



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:



More details on some of these key reports are on the next few slides

Men's Health in Torbay and South Devon

- Torbay and South Devon NHS Foundation Trust approached Healthwatch in Torbay and Devon to support them in collecting feedback from men of all ages, to help them to understand what matters to men and how they can be better informed about their health and wellbeing.
- The feedback formed part of a wider engagement project by Torbay and South Devon NHS Trust, to find out how local health services could be developed and improved to ensure men are better informed about the health issues that affect them now and in the future.
- 132 men responded to the survey. On analysing the data, we found that:
 - ✓ 81% of respondents said they wanted to know more about prostate issues and prostate cancer
 - ✓ 77% of respondents said they had never been shown how to carry out a testicular examination or told what to look for
 - ✓ 65% of respondents said they found it difficult to talk about erectile dysfunction.

What is the impact of this work?

- At a national level, the evidence that we gathered through this joint project with Torbay and South Devon NHS Foundation Trust, was presented to the [UK Parliamentary Health and Social Care Committee Inquiry into Men's Health](#), to be considered at Parliamentary level.
- Locally, the report findings enabled us to shine a spotlight on and raise awareness of men's health issues during [Men's Health Week in 2023](#), particularly around:
 - Prostate Cancer
 - Erectile Dysfunction
 - Testicular examinations and
 - Mental Health.
- The report and the experiences men shared around mental health helped to inform the [Torbay Suicide Prevention Plan 2024 – 27](#).

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Adult Social Care in Torbay

Torbay Council approached us to facilitate discussions directly with people across Torbay on their new draft Adult Social Care Strategy. We ran six focus groups with 70 residents, who provided their feedback and experiences of local adult social care services.

The overall response to the strategy was positive, with participants feeling it was a good approach, however the following was noted:

- Participants highlighted the difficulties of finding the right service or someone who can help them with the information they need.
- Communication is a key issue and a barrier for people who are in receipt of services and for those seeking support.
- Access to services, including housing, health and care services, replacement care and preventative support was discussed frequently. The delays and waiting lists for services was evident in the discussions.
- Participants recognised the difficulty of the current economic climate and the financial requirements placed on Torbay Council.

What is the impact of this work?

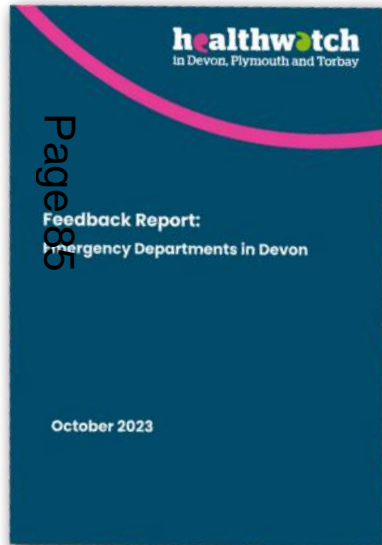
- The opportunity to work with Torbay Council on this engagement provided valuable insight about people's experiences and knowledge, particularly those in caring roles, or those who experience difficulties accessing information online or in accessible formats.

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The flexibility in approach taken by Torbay Council in working with Healthwatch enabled participants to engage in a meaningful way, face to face, ensuring that people felt listened to and that their views and experiences were important.

- The report and our findings were used to further develop Torbay Council's Adult Social Care Strategy, ensuring it was reflective of what people think is important to them. The Strategy was approved by the Council in Autumn 2023.

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.

What is the impact of this work?

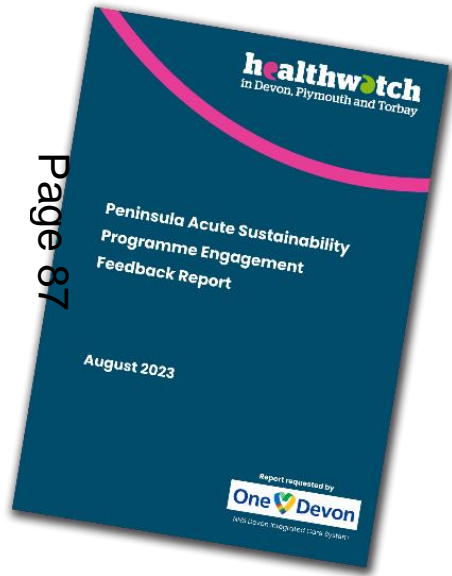
Torbay and South Devon NHS Foundation Trust took the findings relating specifically to the experiences at Torbay Hospital and formed an action plan to directly address the issues raised, which related to:

- ✓ The comfort of the waiting room
- ✓ Triage of patients who had been referred from III
- ✓ Patient waiting times and
- ✓ Information screens

The Trust has recently reported back several changes that have been made to improve the environment in the Emergency Department which include:

- ✓ The waiting area being reconfigured to improve patient flow.
- ✓ The hard seats have been replaced with padded seating.
- ✓ Patient waiting times have significantly improved within the department.

Peninsula Acute Sustainability (PAS)



- 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 PAS programme as it moves forward.

What is the impact of this work?

- NHS Devon have welcomed the findings of the report and have shared it with the local NHS Trusts and the Urgent and Emergency Care Boards. The report has also been presented to the NHS Devon Primary Care Commissioning Committee and the South West Clinical Senate to help them to make the best possible decisions about health and care provision across the southwest peninsular.
- The report demonstrates the value of patient experience in service design and improvement, which has prompted the need for further engagement with the public as the programme moves forward.

Patient Experiences of Pharmacy Services



- 141 people shared their experiences with pharmacy services.
- 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.

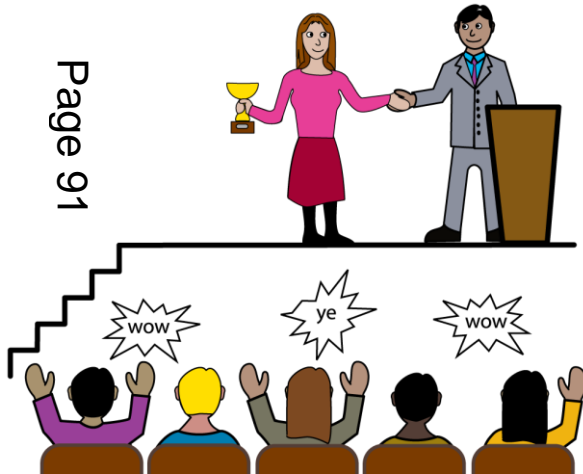
Other examples of communities we have supported to have their say this year

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

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- Children and young people** - We submitted evidence to Torbay Council's Children's Scrutiny Committee CAMHS Spotlight Review, sharing concerns on behalf of parents, families and representatives from local community groups in relation to young peoples' access to emotional wellbeing support.
- **Carers** - We gathered feedback from 224 Carers about the impact their caring role has on their own health and 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.

Recognition – This year we have:



- **Attended different national Healthwatch England events.**
- **Shared the work we did around urgent care 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 Healthwatch Torbay 2024 – 25

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 next year are:

- **Health:** Accessing Primary Care, Secondary Care and Mental Health services.
- **Mental Health:** Accessing Mental Health services under the Community Mental Health Framework.
- **Social Care:** Accessing Social Care Services and residential and home support services.
- **Children & Young People:** Development and integration of Children & Young People services.
- **Wellbeing:** Impact of cost of living on individual/family health & wellbeing.



Quote from Devon Integrated Care Service



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**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 in Healthwatch Devon, Plymouth and Torbay.”

Quote from Devon & Cornwall Police



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

“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?

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Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker

Date of meeting	Minute No.	Action	Comments
08/08/24	4	That the Cabinet be advised that the Adult Social Care and Health Overview and Scrutiny Sub-Board supports the Draft Homelessness Strategy 2024 – 2030 being included within the Council’s Policy Framework and that the Cabinet be recommended that a key data table with clear key performance indicators be included within the Action Plan, to measure performance of the Strategy and impact, including details of external influences.	The Draft Homelessness and Rough Sleeper Strategy 2024 – 2030 is due to go to Cabinet on 12 November 2024 and to Council on 5 December 2024. The Sub-Board’s recommendations will be appended to the report to Cabinet/Council.
08/08/24	3	(Item: Peninsula Acute Sustainability Programme – draft case for change) That the ICO be requested to ensure further consultation includes engagement within a clinical setting (for example, hospital and GP waiting rooms).	CEO and Chief Medical Officer, Torbay and South Devon NHS Foundation Trust have received a copy of the minutes of the meeting including recommendations. They have indicated that the revised Case for Change should be complete by November 2024. This has been noted on the Sub-Board’s work programme so that NHS can be invited to provide an update at a future meeting.
08/08/24	3	(Item: Peninsula Acute Sustainability Programme – draft case for change) That the ICO be requested to ensure further consultation includes engagement with patients, families and local charities.	CEO and Chief Medical Officer, Torbay and South Devon NHS Foundation Trust have received a copy of the minutes of the meeting including recommendations. They have indicated that the revised Case for Change should be complete by November 2024. This has been noted on the Sub-Board’s work programme so that NHS can be invited to provide an update at a future meeting.

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08/08/24	3	<p>(Item: Peninsula Acute Sustainability Programme – draft case for change)</p> <p>That the ICO be requested to ensure further consultation includes the use of both social media and surveys.</p>	<p>CEO and Chief Medical Officer, Torbay and South Devon NHS Foundation Trust have received a copy of the minutes of the meeting including recommendations. They have indicated that the revised Case for Change should be complete by November 2024. This has been noted on the Sub-Board’s work programme so that NHS can be invited to provide an update at a future meeting.</p>
08/08/24	3	<p>(Item: Peninsula Acute Sustainability Programme – draft case for change)</p> <p>That the ICO be requested to ensure engagement with the Voluntary Sector to encourage survey responses from individuals who may not otherwise be confident in participating, articulating or responding directly to the survey.</p>	<p>CEO and Chief Medical Officer, Torbay and South Devon NHS Foundation Trust have received a copy of the minutes of the meeting including recommendations. They have indicated that the revised Case for Change should be complete by November 2024. This has been noted on the Sub-Board’s work programme so that NHS can be invited to provide an update at a future meeting.</p>
08/08/24	3	<p>(Item: Peninsula Acute Sustainability Programme – draft case for change)</p> <p>That the ICO be requested to ensure that the Summary Document and Survey contain accessible language to encourage effective engagement.</p>	<p>CEO and Chief Medical Officer, Torbay and South Devon NHS Foundation Trust have received a copy of the minutes of the meeting including recommendations. They have indicated that the revised Case for Change should be complete by November 2024. This has been noted on the Sub-Board’s work programme so that NHS can be invited to provide an update at a future meeting.</p>

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11/04/24	34	<p>(Item: Torbay Hospital – delivery of capital programme and re-design of the hospital)</p> <p>The Cabinet Member for Adult and Community Services, Public Health and Inequalities be requested to write to the Health and Social Care Minister for confirmation as to when the next tranche of funding will be released; making the case for increased revenue and capital funding for the Hospital in future; highlighting the structural issues with the current Hospital estate buildings and the subsequent maintenance cost and highlighting the results of the recent Care Quality Commission report and the challenges identified.</p>	Update awaited.
18/01/24	26	That the Director of Adult and Community Services be requested to encourage the CQC inspector to engage with the Voluntary, Community and Social Enterprise Sector.	Director of Adult and Community Services will action when inspection date is known.
17/08/23	3	<p>Draft Strategy for Adult Social Care in Torbay</p> <p>Information concerning a website based approach for accessing care be provided to local MP's offices and other information offices within Torbay.</p>	<p>Director of Adults and Community Services and Head of Policy, Performance and Community Engagement to action.</p> <p>Communications Team will start to work towards an awareness campaign from early September.</p> <p>Further update awaited.</p>

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17/08/23	3	<p>Draft Strategy for Adult Social Care in Torbay</p> <p>A briefing note is circulated to all Councillors with information concerning the website based approach for accessing care.</p>	<p>Director of Adults and Community Services to action.</p> <p>The timing of this needs to align with completion of the work on developing the Torbay Council website. A lot of improvements have already been made including incorporating feedback from users and exploring ways to make the website more accessible to people.</p> <p>Further update awaited.</p>
17/08/23	3	<p>Draft Strategy for Adult Social Care in Torbay</p> <p>The Head of Policy, Performance and Community Engagement is instructed to publicise information about the approach to accessing care to inform wider communities.</p>	<p>Director of Adults and Community Services and Head of Policy, Performance and Community Engagement to action.</p> <p>Communications Team will start to work towards an awareness raising campaign from early September.</p> <p>Further update awaited.</p>
17/08/23	4	<p>The Director of Adults and Community Services provides an exempt report on the options appraisal and when it will be implemented to a future Adult Social Care and Health Overview and Scrutiny Sub Board.</p>	<p>Added to the work programme as a future item - "Case management record replacement system".</p> <p>Director of Adults and Community Services to advise when update available.</p>
17/08/23	4	<p>The Director of Adults and Community Services provides an update on the timeframe for the new data system at a future date to the Adult Social Care and Health Overview and Scrutiny Sub Board.</p>	<p>Added to the work programme as a future item - "Case management record replacement system".</p> <p>Director of Adults and Community Services to advise when update available.</p>