

# Stakeholder Reference Group Information Pack



Public consultation: North  
Delivering care closer to home

Version 1: July 2015

## Introduction

In May 2015, the Northern, Eastern and Western Devon Clinical Commissioning Group (CCG) concluded the first phase of its consultation on Care Closer to Home which looked at different ways that community healthcare services could be run in the future in North Devon and Torridge.

At that time, it announced that the number of community hospital inpatient beds across North Devon and Torridge will be reduced and replaced by enhanced community services.

As the provider of community services, the Northern Devon Healthcare NHS Trust is working jointly with the CCG on the next phase of the consultation process, to identify where the remaining beds should be located.

Inpatient beds are currently located across four towns in Northern Devon: Bideford, Holsworthy, Ilfracombe (although these are temporarily closed) and South Molton. As the total number of beds is being reduced by approximately half, the CCG has indicated in its bed modelling that it is likely that inpatient services will be delivered from two community hospitals in the future.

No community hospitals will close as part of this process, rather the use of the building will change and the hospital will become a Health and Wellbeing hub which will continue to support the local health and social care needs of the community and surrounding parishes. Even those hospitals that retain their inpatient services will see an increase in the support provided by the NHS to help people maintain their independence and health in their own home.

For more information on Health and Wellbeing Hubs, please see page 12.

## What is the alternative to community hospital inpatient beds?

As the number of beds reduces in Northern Devon, the NHS, social services and the voluntary sector will be investing resources into our community health and social care teams to ensure we have the services in place that can look after people in their own home.

While we realise this feels like a very different way of delivering care, it is not new to our clinical teams who are always looking to get people home as soon as possible and are already delivering this model of care in a growing number of towns across Devon: Torrington, Budleigh and Exmouth, Barnstaple, Cullompton and Moretonhampstead.

In Northern Devon, our population is ageing and we have a higher prevalence of long-term conditions such as dementia. Evidence suggests that looking after people at home is a much better way of providing the same care to many patients. It is also more cost-effective.

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We know that there will always be a need for patients to receive care in a healthcare setting which is half-way between an acute hospital and home; however we believe that the first option for healthcare treatment should always be in the person's own bed where it is safe to do so.

The care closer to home model means there will be much more focus on preventing you from getting ill or not becoming more unwell if you have a long-term condition, such as diabetes. Doctors, nurses, physiotherapists and others will come to, or closer to, people's homes, preventing people travelling any further than necessary to receive the care they need.

This is not new to us. Over the past few years the Northern Devon Healthcare Trust has been looking after more people at home.

Nowadays, people who would previously have been looked after in their local community hospital are now looked after at home. Evidence suggests that this care has been just as good as the care received in the community hospital and more information on this data/evidence can be found on pages 13 and 14.

## How will we determine the future location of community hospital inpatient beds?

The process we will be going through to make these decisions is as follows:

Phase 1: Initial stakeholder briefings

Phase 2: Stakeholder reference group meetings

Phase 3: Public consultation

Phase 4: Final decision and implementation

We are committed to doing this work in partnership with the CCG, our stakeholders, and during August 2015, with the wider public as well.

## Stakeholder Reference Group Meetings

At the Stakeholder Reference Group meetings in August, we will:

- Review and weight the criteria identified during the CCG's consultation (see the attached criteria document)
- Work through the process of applying these criteria to the potential options in order to produce an option or number of options on which we can consult publicly.

This document is designed to help our stakeholders to review and weight the criteria. You will find it helpful to have read this document before attending the meetings.

It is important that we have shared sufficient information to allow an evidence-based decision to be made so we have distributed these materials in advance of the meeting to allow our stakeholders sufficient time to consider the criteria and supporting information.

If you have any questions regarding this process or any of the information contained in this document, please contact Gemma Steele by email at [gemma.steele@nhs.net](mailto:gemma.steele@nhs.net) or by post at:

Communications Department,  
North Devon District Hospital,  
Raleigh Park,  
Barnstaple, EX31 4JB.

Or you can call us on 01271 322460.

**The following section details all the information we have gathered to help you when reviewing and weighting criteria. We don't expect this document to be a final version and will supplement it with additional data and information as requested by the community through this process. If you think anything is missing, please contact us and we will do our best to provide this information.**

## Patient safety and patient experience

### Patient experience

#### Every day we ask our patients...

How likely are you to recommend our hospital / ward to friends and family if they needed similar care or treatment?

	Target (%)	Oct-14 (%)	Nov-14 (%)	Dec-14 (%)	Jan-15 (%)	Feb-15 (%)	Mar-15 (%)	Apr-15 (%)	May-15 (%)
Bideford - Elizabeth Ward	75	100	No data	100	100	No data	100	100	100
Bideford - Willow Ward	75	100	100	No data	100	100	100	No data	100
Holsworthy	75	100	100	100	100	No data	100	No data	100
Ilfracombe	75	100	Beds closed						
South Molton	75	100	92	100	100	80	67	100	No data

#### Harm events

Hospital	Jun-14	Jul-14	Aug-14	Sep-15	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Total	Average per 100 bed days
Bideford	14	12	10	11	14	15	14	17	19	14	9	13	162	1.5
Holsworthy	3	4	3	5	7	10	8	7	12	6	12	14	91	1.8
Ilfracombe	3	6	2	0	2	Beds closed							14	1.1
South Molton	2	7	7	6	6	2	6	8	8	5	3	4	64	1.0

A harm event is where the patient experiences avoidable harm, i.e. a fall, or a pressure ulcer. This is measured in harm events per 100 bed days.

### Safer staffing

Safer staffing means that the minimum number of beds per unit has to be 16. This is the most effective and safe nurse to patient ratio and avoids situations where registered nurses on the wards work on their own, without any professional support or supervision (what we call lone-working).



## Hospital facilities

### Number of beds

#### Maximum bed space capacity at each hospital

Hospital	Number of possible beds	Current number of beds
<b>Bideford</b>	28 Willow Ward 12 Elizabeth Ward	24
<b>Holsworthy</b>	28	20
<b>Ilfracombe</b>	12	10 (temporarily closed)
<b>South Molton</b>	28	20

Work has been done with the local community in Ilfracombe to review the current available bed space at the Tyrrell hospital. It has been found that the maximum number of beds the Tyrrell could currently accommodate is 12. Therefore it does not meet our minimum requirement of 16 beds. Approximately £2.5 million of investment would be required to make the necessary alterations to the building in order for it to hold 16 beds or more.

### Quality of hospital environment

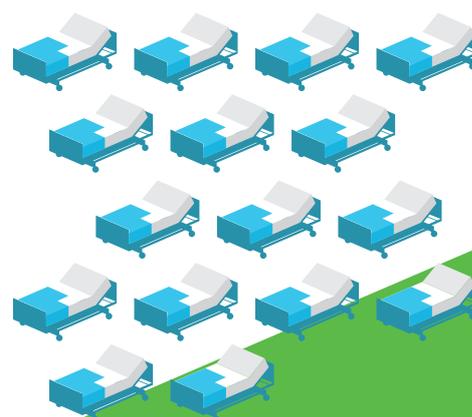
#### PLACE scores (2013/14)

Hospital	Cleanliness	Condition and appearance
<b>Bideford</b>	93.01%	77.27%
<b>Holsworthy</b>	97.49%	89.74%
<b>Ilfracombe</b>	94.26%	78.65%
<b>South Molton</b>	98.21%	88.89%

Good environments matter. Every NHS patient should be cared for with compassion and dignity in a clean, safe environment.

Patient-led Assessments of the Clinical Environments (PLACE) were launched in 2013 as a way of assessing the quality of the patient environment, replacing the old Patient Environment Action Team (PEAT) inspections.

All 17 of our hospitals are inspected every year.



## Car parking facilities

Hospital	Description
<b>Bideford</b>	Availability of parking is an issue at Bideford. We will be introducing pay and display for visitors and patients to the site in mid August and the charges will be in line with those already charged by Northern Devon Healthcare Trust at other sites. We have only 35 spaces for public parking plus some disabled badge holder spaces. There is no capacity for further extension of car parking as the site is very restricted. There is a local pay and display car park that is approximately 10 minutes' walk away from the hospital complex. There will be distinct parking areas for staff additional to these 35 spaces.
<b>Holsworthy</b>	On-site parking is free and there are approximately 30 spaces. The hospital isn't particularly near residential parking however some visitors may park on roads nearby. There is no segregated staff and visitor parking and this is the total number of spaces for this site.
<b>Ilfracombe</b>	On-site parking is free but extremely limited, there are only approximately 10 spaces, there are areas to park on nearby roads but again we ask visitors to be sensitive to local residents when leaving vehicles. There is no segregation from visitors or staff parking.
<b>South Molton</b>	On-site parking is free of charge. Approximately 29 spaces and also another 15 on the road however we do ask visitors to be sensitive to local residents when leaving vehicles on the roads nearby. Staff try to park around the back of the building away from these spaces.



## Financial sustainability

The care we provide has to be safe and high quality within the budget we are given.

We are often asked how much services cost to run and have provided the information we have available. However, because each site is unique, with its own unique range of services in addition to inpatient beds, comparison between them on a financial basis is difficult.

### Nursing costs (community hospital nursing)

Hospital	Nursing cost (£K)	Current number of beds
Bideford	886	24
Holsworthy	709	20
Ilfracombe	538	10 (temporarily closed)
South Molton	791	20
<b>Total</b>	<b>2,924</b>	

### Medical costs (inpatients)

#### Cost of GP cover in the inpatient units

Hospital	Medical costs (£K)
Bideford	109
Holsworthy	98
Ilfracombe	99
South Molton	96
<b>Total</b>	<b>402</b>

### Current hospital costs

#### Premises costs

Site	Maintenance (£K)	Energy (£K)	Rates/C Tax (£K)	Hotel services (£K)	Total premises costs (£K)
Bideford	83	110	81	445	719
Holsworthy	35	57	41	168	301
Ilfracombe	46	30	20	131	227
South Molton	43	54	42	188	329
					<b>1,575</b>

## Capital costs

These are the finance capital costs and include both a percentage charge for capital and depreciation of the existing assets.

Properties	2012/13 Total GIA floor area (m <sup>2</sup> )	Capital charges (assets)		Building depreciation	
		2014/15 (£K)	2014/15 cost per m <sup>2</sup> (£)	2014/15 (£K)	2014/15 cost per (m <sup>2</sup> )
Bideford Hospital	4,192	188	45	197	47
Holsworthy Hospital	2,025	92	45	97	48
Ilfracombe & District Tyrrell Hospital	1,511	35	23	59	39
South Molton Community Hospital	2,263	112	50	106	47

## Total costs per unit

Site	Premises (£K)	Capital (£K)	CH nursing (£K)	Medical (£K)	TOTAL (£K)
Bideford	719	385	886	109	2,099
Holsworthy	301	189	709	98	1,297
Ilfracombe	227	95	538	99	959
South Molton	328	219	781	96	1,424
<b>Total</b>	<b>1,575</b>	<b>888</b>	<b>2,924</b>	<b>402</b>	<b>5,789</b>

## Cost of community healthcare teams

This includes community nursing, therapy and coordination, but excludes area-wide services (e.g. rapid response, bladder and bowel). This does not include the cost of social care staff.

Town	Cost of community NHS teams (£K)
Barnstaple	826
Bideford	1,611
Holsworthy	750
Ilfracombe	1,208
South Molton	988
Torrington	1,289
<b>Total</b>	<b>6,672</b>

## Income

This is income from rental of space to other NHS providers.

Hospital	Rental income (£K)
Bideford	259
South Molton	39
<b>Total</b>	<b>298</b>



# Workforce

## Registered nurse vacancies and agency usage

Hospital	Sep 14		Oct 14		Nov 14		Dec 14		Jan 15		Feb 15		March 15	
	Substantive (%)	Agency (%)												
Bideford (Elizabeth)	98.01	1.99	90.74	9.26	80.92	19.08	75.56	24.44	77.75	22.22	78.92	21.08	77.7	22.2
Bideford (Willow)	95.65	4.35	91.94	8.06	89.9	10.10	88.94	11.05	72.81	27.19	76.85	23.15	72.81	27.19
Holsworthy	96.69	3.31	90.45	9.55	94.01	5.99	92.39	7.61	90.27	9.73	90.53	9.47	90.27	9.73
Ilfracombe	88.18	11.82	89.11	10.89	-	-	-	-	-	-	-	-	-	-
South Molton	77.08	22.92	77.75	22.75	75	25	90.55	9.34	80.69	19.31	68.5	31.47	80.59	19.31

There is evidence that agency usage of over 20% has a negative impact on safety and quality. Bideford and South Molton have the highest levels of agency usage, with Bideford having significant issues since December 2014.

## Medical cover for inpatient beds

Hospital	Will the GPs accept out of area patients in hospitals that retain beds? (yes/no)
Bideford	Yes
Holsworthy	Yes
Ilfracombe	Yes
South Molton	Yes

\* These are conditional offers based on the contract and level of payment.



## Care closer to home

### Health and social care team caseloads in each area

There are teams of community health and social care teams across Northern Devon that support people's health and independence in their own home. These teams are made up of community matrons, community nurses, physiotherapists, occupational therapists and social care workers. The case load figures refer to the number of people currently being supported by the teams in their own homes in each area.

Area	Case Load	Total number of patients seen in last 12 months	Total population covered	Aprox number of people +65	Total % of people +65 receiving care at home in 1 year
	At any one time in the year, caseload will be between these figures				
Bideford (also covers Northam)	600 - 700	1269	39,090	9,385	14%
Holsworthy	250 - 300	998	14,463	3,524	28%
Ilfracombe (also covers Braunton and Lynton)	600 - 700	1269	18,987	4,048	31%
South Molton (also covers Chumleigh)	250 - 300	858	13,736	3,419	25%

### Number of admissions to community hospitals in the last two years from local population

Hospital	Admissions last 12 months	...of which local	Admissions previous 12 months	...of which local	Total admissions last 2years	...of which local
Bideford	446	293	501	332	947	625
Holsworthy	241	231	327	290	568	521
Ilfracombe	175	173	197	192	372	365
South Molton	284	145	276	162	560	307



## Health and Wellbeing Hubs

Health and Wellbeing Hubs form an important part of our strategy of focusing on prevention and a delivering a pro-active approach to sustaining health and wellbeing within the community.

The CCG describes Health and Wellbeing Hubs as:

*'integrated Hubs that bring together health (including mental health) and social care with the voluntary and commercial sector to provide services for the community in a much more joined up way than has previously been possible....these Hubs may not contain inpatient beds, but will have a range of clinical services to enable a range of services to be provided to patients that would otherwise be provided in acute hospitals'*

The exact configuration of services at each Hub varies according to local need, the space available and the services already available within the area.

Health and Wellbeing Hubs are currently being set up in Budleigh, Moretonhampstead and Torrington and we are working with communities and stakeholders in Ilfracombe and Crediton to develop new services and test new ways of working in areas where inpatient beds have been temporarily closed.

Our aim is to create a community focal point with a range of integrated services across all sectors, which match demand from the local population and meet health and social needs. These Hubs offer a holistic approach to health, providing a facility to assess, evaluate, manage and monitor individuals' health and well-being. Hubs are a valuable source for the local voluntary and community groups, a place where people can find out about and access their services.

Hubs also give people the opportunity to extend social networks and reduce isolation, something which is central to maintaining and improving people's health.

As an example, the following services could be based from a Health and Wellbeing Hub:

- Geriatric outpatient clinics
- Community nursing
- Practice nurse clinics
- Day hospital / Age Concern social care
- Café (internet facilities, public Wi-Fi will be key for the success of the Hub)
- Audiology
- Podiatry
- Physiotherapy / gym
- Mental health service
- Dementia focused services, memory café and respite
- Transport
- Health promotion
- IV antibiotics
- Blood transfusions

At Budleigh, in addition to these services, a wide number of other services have also expressed interest in being based at the Hub (Neighbourhood Health watch; Rethink; domiciliary care provider/training; Young Devon; Bicton College – student work placements; Devon Youth Service; Devon Disability Network; Devon and Cornwall Police; Devon Domestic Abuse Support Service (Splitz); National Youth Advocacy Service; Hospice Care; pharmacy; opticians; dental surgeries; nursery/toddler groups; cinema facility).

## Evidence from towns where community inpatient beds have closed

These tables show the effect on local residents when compared to the wider population.

### Have there been additional hospital admissions since the inpatient beds closed?

	Ilfracombe		Torrington	
	Last 5 months vs same 5 months from previous years*		Last 18 months vs previous 18 months*	
	Ilfracombe residents	Northern Devon overall	Torrington residents	Northern Devon overall
Acute A&E attendances	4% decrease	4% increase	3% increase	3% increase
Acute non-elective attendances	4% decrease	2% increase	6% decrease	9% increase
Community hospital admissions	79% decrease	–	62% decrease	–

\* Since inpatient beds removed

#### A&E attendances

It would appear that when compared to the Northern Devon trends of +4%, there has not been an increase in the numbers of patients coming to A&E from Ilfracombe or Torrington. Indeed the levels of A&E attendances has dropped in Ilfracombe.

#### Non-elective attendances

These are patients who find their way to NDDH via a non-planned, urgent way. This measure is often used as an indication to show how well-managed patients' care plans are. High non-elective admissions suggests that people are experiencing sudden and unanticipated deterioration in their health. Lower non-elective admission rates can indicate that the health and social care services are supporting people well in the community and avoiding health crises.

#### Community hospital admissions

The number of people being admitted into a community hospital in these towns has been significantly reduced, despite the fact that if they need to be in a community hospital, they will be admitted into a neighbouring hospital. This, combined with the acute data, indicates that more people are therefore being looked after in their own homes.

### Are more people being visited in their own home?

	Ilfracombe			Torrington		
	Last 5 months vs same 5 months from previous years*			Last 18 months vs previous 18 months*		
	Number in Ilfracombe (5 months post-change)	% change Ilfracombe residents	Northern Devon overall	Number in Torrington (18 months post-change)	% change Torrington residents	Northern Devon overall
Individuals visited	662	2% increase	–	710	9% increase	–
Total visits	7,081	9% increase	5% increase	22,644	34% increase	7% increase
Urgent visits	636	60% increase	7% increase	3,885	46% increase	10% increase
Face-to-face time with patients	3,698 hrs	28% increase	7% increase	13,082 hrs	33% increase	10% increase
Face-to-face time with patients (urgent visits)	394 hrs	71% increase	10% increase	1,889 hrs	52% increase	12% increase

\* Since inpatient beds removed

There are more visits to patients and more face-to-face time with patients in these towns.

### Patient satisfaction

One of the ways we measure patient satisfaction is through the Friends and Family Test. This is a single question which asks patients whether they would recommend the service they have received to friends and family who need similar treatment or care. The percentages below are the people who would be extremely likely + likely to recommend, as a percentage of all responses.

Community nursing teams in North	Average patient satisfaction over last 12 months	94%
Community therapy teams in North	Average patient satisfaction over last 8 months (since data available)	94%

All Friends and Family Test scores can be found on our website at: [www.northdevonhealth.nhs.uk/about/patient-experience](http://www.northdevonhealth.nhs.uk/about/patient-experience)



## Outpatient clinics taking place at each hospital

Bideford	Holsworthy	Ilfracombe	South Molton
Arrhythmia	Arrhythmia	Audiology	Ante natal clinic
Audiology	Audiology	Cardiac rehabilitation	Audiology
Cardiology	Balance class	Cardiology	Balance class
Care of elderly clinic	Bladder & bowel care	Chichester	Bladder & bowel
Chest/respiratory	Cardiologist	physiotherapy	Child and adolescent
Children's orthoptic	Cardiac nurse – heart function	Chiropody	mental health service
clinic	cardiac nurse – heart function	Community	Cardiac rehabilitation
Continence nurse	cardiac nurse – heart function	rehabilitation	Cardiology
Depression & anxiety	Cardiac rehab class	Continenence care	Cardiology nurse
Devon Carers	Care of the elderly	Family planning	Depression & anxiety
Diabetic nurse	Consultant clinic	Genito-urinary medicine	service
Ear nose and throat	Depression & anxiety service	General surgery	Encompass – voluntary
(ENT)	Devon Partnership Trust (OPMH,	Gynaecology	advice
Eyes	Mental Health and Learning	Health trainer	Glaucoma monitoring
Family planning	Disability Services)	Heart failure clinic	Gynaecology
Genito-urinary medicine	Diabetic clinic	Lower limb class	Heart function nurse
Gastro nurse	Diabetic liaison	MS nurse	IV day treatments
Gastro-enterology	Family planning	Orthoptist	MS specialist nurse
General surgery	Genito-urinary medicine	Paediatric care	Neurology
Glaucoma monitoring	General cardio clinic	Paediatric diabetes	Occupational health
Gynaecology	General clinic	Parkinson's nurse	Ophthalmology
Healthy lifestyle	General medicine	Physiotherapy	Orthoptist
Heart failure nurse	Heart failure nurse	Psychiatry	OT - Chronic fatigue
MS nurse	Midwives – from 1/9/15	Regen (befriending	clinic
Neurology	MS nurse	service)	Paediatric bladder &
Orthopaedic	Nephrology	Urology	bowel
Orthopaedic interface	Nurses clinic	X-ray	Paediatrics
Paediatric diabetic	Orthoptic clinic		Parkinsons specialist
Paediatrics	Parkinson's nurse		nurse
Pain team	Physiotherapy		Physiotherapy
Reflexology	Podiatry		Podiatry
Rheumatology	Reflexology		Psychiatry
Smoking cessation	Rheumatology		Rheumatology
Urology	Speech & Language Therapy		RISE
Wheelchair clinic	(SALT)		Urology
	Transfusion, infusions, IV day		
	treatments		
	Urology		
	Wheelchair clinic (assessments)		
	<u>Voluntary Services</u>		
	Alzheimer's Society		
	Cornwall Mobility (assessments)		
	Day Centre – 3 days a week		
	Devon Carers		
	Holsworthy Forum		
	Macular Society		
	Stroke Club		

## Links with the voluntary sector

Hospital / area	Comments
<b>Bideford</b>	Voluntary Care Sector representative forms part of the complex care team core groups and we refer individuals to the voluntary sector. Specific VCS partners include Taw and Torridge Voluntary Services: Aging Well and Taw and Torridge Caring.
<b>Holsworthy</b>	Voluntary Care Sector reps form part of the complex care team core groups and we refer individuals to the voluntary sector. Specific VCS partners include TorrAGE (provide befriending and wellbeing watch), Holsworthy Help (provide befriending and form-filling assistance), Holworthy Rural Community Transport and NTCTA (provide 'ring and ride' wheelchair accessible minibus weekly for shopping market day).
<b>Ilfracombe</b>	Good links with voluntary sector, Braunton has reasonable links. For each Complex Care Team there is a Voluntary Sector representative who is paid 8 hours a week to ensure we make maximum use of available community and voluntary resources. Westbank provides Devon Carers (support for carers) and Time for Life (Age UK befriending and enabling).
<b>South Molton</b>	South Molton and Chulmleigh have a Voluntary Sector representative and have good links to voluntary and community groups. Westbank provides Devon Carers (support for carers) and Time for Life (Age UK befriending and enabling).

## Availability of nursing/residential care homes and day centres

Care homes with nursing (not residential homes).

	Care homes with nursing (capacity)	Day care services
<b>Bideford</b>	Kenwith Castle Country House Care (54) The Warren Care Home (28) Donness Nursing Home (34)	Springfield Centre Northam Lodge Day Services and Respite
<b>Holsworthy</b>	Deer Park Nursing Home (56) Burdon Grange (20) Halwill Manor (25) Hatherleigh Nursing Home (48)	Holsworthy Day Centre
<b>Ilfracombe</b>	Edenmore (48) Barchester Tyspane Care Home (69) The Harriet Nanscawen Nursing Home (23)	None found
<b>South Molton</b>	Eastleigh Care Homes - Raleigh Mead Limited (60)	None found
<b>Barnstaple</b>	Park Lane Care Home (40) Fremington Manor Country House Care (59) Heanton (64) Swimbridge House Nursing Home (22)	Rosebank Day Centre
<b>Torrington</b>	Hatchmoor (64)	

# Population and demographic information

## Demographics

### Age of the population

Age group	Bideford	Holsworthy	Ilfracombe	South Molton
	Number of people	Number of people	Number of people	Number of people
0 to 4	1998	593	1023	629
5 to 9	1828	742	1021	698
10 to 14	1981	830	996	741
15 to 19	2223	897	1158	803
20 to 24	2060	705	1029	742
25 to 29	1829	605	925	584
30 to 34	1921	537	97	584
35 to 39	2057	654	1006	645
40 to 44	2583	979	1300	798
45 to 49	2840	1070	1422	1069
50 to 54	2739	1115	1307	1026
55 to 59	2601	1026	1330	941
60 to 64	3045	1186	1450	1057
65 to 69	2923	1174	1402	1095
70 to 74	2165	831	917	715
75 to 79	1746	638	670	621
80 to 84	1298	449	520	508
85+	1253	432	539	480
<b>Total</b>	<b>39090</b>	<b>14463</b>	<b>18987</b>	<b>13736</b>

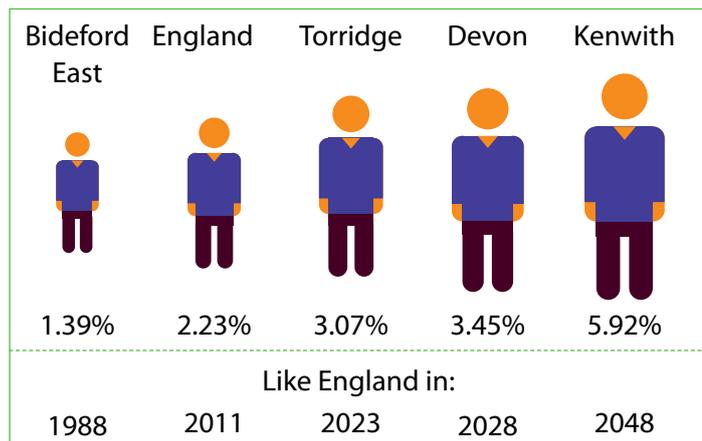
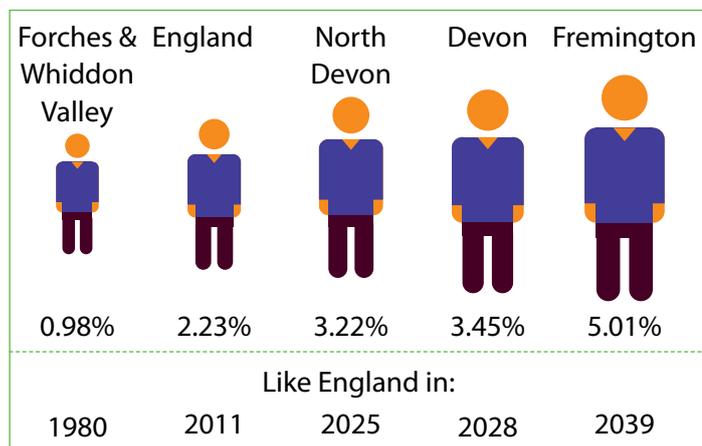


## Age projections

Figures predicted between 2011 and 2026.

Age Group				
	Bideford	Holsworthy	Ilfracombe	South Molton
<b>Total population increase prediction</b>	9689 people, a rise of 23.7%	1140 people, a rise of 7.9%	412 people, a rise of 2.2%	1003 people, a rise of 7.3%.
<b>0-19 age band</b>	Increase by 1363 people, a rise of 15.6%	Decrease by 62 people, a fall of 2.1%	Decrease by 194 people, a fall of 4.8%.	Decrease by 43 people, a fall of 1.5%
<b>20-44 age band</b>	Increase by 1196 people, a rise of 15.1%.	Decrease by 34 people, a fall of 1.3%	Decrease by 400 people, a fall of 12.4%	Decrease by 208 people, a fall of 9.1%.
<b>45-64 age band</b>	Increase by 2100 people, a rise of 14.1%	Increase by 12 people, a rise of 0.2%	Decrease by 505 people, a fall of 7.3%.	Decrease by 225 people, a fall of 4.4%
<b>65-84 age band</b>	Increase by 3958 people, a rise of 49.7%	Increase by 963 people, a rise of 32.5%	Increase by 1103 people, a rise of 31.2%	Increase by 1087 people, a rise of 37.1%
<b>85+ age band</b>	Increase by 1072 people, a rise of 81.1%	Increase by 261 people, a rise of 61.8%	Increase by 407 people, a rise of 65.3%	Increase by 391 people, a rise of 80.9%

## People aged 85 and over



### Average life expectancy

Town	Years
Bideford	81.2
Holsworthy	81.3
Ilfracombe	80.2
South Molton	81.9

### People living with dementia

Area	Projected number of people who will have dementia			
	2011	2016	2021	2026
Bideford	585	687	830	1,011
Holsworthy	201	227	264	308
Ilfracombe	266	307	355	415
South Molton	222	262	310	369

### Number of people living alone

Town	% of houses with single occupancy
Bideford	33%
Holsworthy	25%
Ilfracombe	32%
South Molton	29%

### Number of people who are carers

Town	Number per 1,000 population
Bideford	1.15
Holsworthy	0.76
Ilfracombe	2.25
South Molton	0.89



## Quality of housing

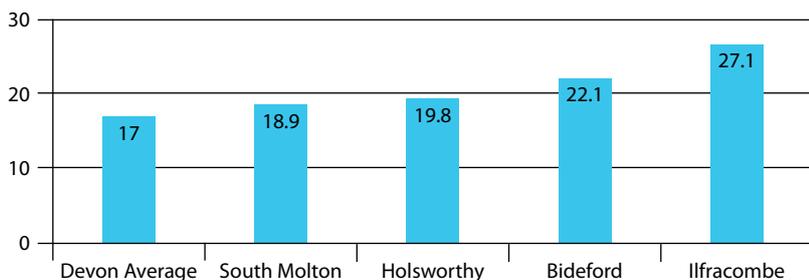
### Levels of town deprivation

Hospital	Score (according to national deprivation quantile)
Devon Average	17
Bideford	22.1
Holsworthy	19.8
Ilfracombe	27.1
South Molton	18.9

The dimensions of deprivation are:

- Employment: Any member of the household aged 16-74 who is not a full-time student and is either unemployed or permanently sick.
- Education: No member of the household aged 16 to pensionable age has at least 5 GCSEs (grade A-C) or equivalent AND no member of the household aged 16-18 is in full-time education.
- Health and disability: Any member of the household has general health 'not good' in the year before Census or has a limiting long term illness.
- Housing: The household's accommodation is either overcrowded (occupancy indicator is -1 or less); OR is in a shared dwelling OR does not have sole use of bath/shower and toilet OR has no central heating.

Score according to national deprivation quantile



## Equality and diversity

### Protected groups

	Overview	Devon Population (aged 40 to 74)	
<b>Age</b>	Behavioural risk factors (smoking, alcohol usage, mental illness etc.) highest in younger age groups within the cohort (40-49). Resultant health-related factors (high BP, cholesterol etc.) increase with age. High in-migration in Devon at retirement age influences local patterns.	40-44	49,200
		45-49	55,200
		50-54	52,500
		55-59	49,400
		60-64	54,200
		65-69	54,100
		70-74	38,600
<b>Disability</b>	People with a learning disability are more likely to experience ill-health and die prematurely and use of screening and health services in this population are known to be low. People with disabilities are more likely to smoke, have a poor diet and limited physical activity, and a higher prevalence of diabetes and heart disease.	PANSI/POPPI estimate for any learning disability is 7,900. 2011 Census figure for persons with a long-term health problem or disability that limits activities a lot is 27,500.	
<b>Gender</b>	Behavioural risk factors and resulting health problems are usually more common in males.	Female	182,600
		Male	170,500
<b>Gender re-assignment</b>	No definitive evidence around the distribution of risk factors and resultant health problems associated with gender reassignment.	Estimate < 100	
<b>Marriage and civil partnership</b>	No definitive evidence around the distribution of risk factors and resultant health problems associated with marital status.	Married	233,600
		Civil	900
		Single	39,200
		Separated	9,600
		Divorced	52,100
		Widowed	16,900
<b>Pregnancy and maternity</b>	While most older mothers have a healthy pregnancy and birth, there is an increased risk of developing on-going health conditions such as diabetes and high blood pressure.	350 births p.a. for females aged 40 and over.	
<b>Race</b>	The pattern of risk factors and the likelihood of developing health conditions vary by ethnic group. Smoking rates are particularly high in Black Caribbean and Bangladeshi men. Heart disease risk is highest in Bangladeshi and Pakistani groups, stroke risk is higher in Black Caribbean groups and type 2 diabetes is highest in Black Caribbean and Indian men.	White British	341,200
		White Other	7,500
		Mixed	1,400
		Asian	2,000
		Black	500
		Other	500
<b>Religion and belief</b>	No definitive evidence around the distribution of risk factors and resultant health problems associated with religion and belief.	Christian	353,100
		Buddhist	1,500
		Hindu	200
		Jewish	400
		Muslim	600
		Other	2,800
		None	78,500
		Not Stated	29,400
<b>Sexual Orientation</b>	Some evidence around higher levels of smoking prevalence for lesbians, gays and bisexuals, but no definitive evidence around the distribution of other risk factors and resultant health problems associated with sexual orientation.	LGB Population estimate	3,800

## Transport distance and travel times

### Access to North Devon District Hospital

Hospital	Access to NDDH			
	Number of miles to NDDH	Estimated travel time by car	Estimated travel time by public transport*	Estimated public transport cost to travel to NDDH
Bideford	11.9	20 minutes	45 minutes	Day rider ticket £3.80
Holsworthy	29.8	55 minutes	1 hour 15 minutes	Day rider ticket £3.80
Ilfracombe	9.9	26 minutes	1 hour 10 minutes	Day rider ticket £3.80
South Molton	13.1	23 minutes	45 minutes	Day rider ticket £3.80

\*Times may vary depending on bus timetables

### Access to other community hospitals

Hospital	Other community hospitals	Access to NDDH			
		Number of miles to other community hospitals	Estimated travel time by car	Estimated travel time by public transport*	Estimated cost to travel by public transport
Bideford	Holsworthy	18.9	38 minutes	40 minutes	£3.80
	South Molton	20.6	38 minutes	1 hour 35 minutes	£3.80
	Ilfracombe	22.6	42 minutes	1 hour 35 minutes	£3.80
Holsworthy	Bideford	18.9	38 minutes	40 minutes	£3.80
	Ilfracombe	37.9	1 hour 4 minutes	1 hour 40 minutes	£3.80
	South Molton	30.9	53 minutes	1 hour 40 minutes	£3.80
	Okehampton	20	36 minutes	1 40 minutes	£7.30
Ilfracombe	Bideford	22.6	42 minutes	1 hour 35 minutes	£3.80
	Holsworthy	37.9	1 hour 4 minutes	2 hour 5 minutes	£3.80
	South Molton	25.8	47 minutes	2 hour	£3.80
South Molton	Bideford	20.6	38 minutes	1 hour 35 minutes	£3.80
	Holsworthy	30.9	53 minutes	1 hour 40 minutes	£3.80
	Ilfracombe	25.8	47 minutes	2 hours	£3.80

\*Times may vary depending on bus timetables

- Bideford to Barnstaple 21 or 21A service runs every 10 minutes taking 35 minutes.
- Ilfracombe to Barnstaple 21 service runs every 20 minutes taking 1 hour
- South Molton to Barnstaple 155 service runs every hour taking 35 minutes
- Holsworthy to Barnstaple 85 service runs 5 times daily taking 1 hour and 5 minutes
- Barnstaple to NDDH 19a service runs every 20 minutes taking 10 minutes
- South Molton to Ilfracombe requires a change at Barnstaple
- South Molton to Bideford requires a change at Barnstaple
- Okehampton to Holsworthy day rider ticket does not apply to this area.

### Car ownership

Town	% of households without a car
Bideford	26%
Holsworthy	9%
Ilfracombe	23%
South Molton	13%

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