Hospital services in northern Devon

Feedback from our engagement

Wednesday 2 October 2019
Purpose of this meeting

- To update you on the hospital services work and the next steps
- To give an overview of our engagement approach and to explain why it was important to us to hear your views
- To share the headlines from patient, staff, public and stakeholder feedback
- To give you the opportunity to ask any questions about our engagement approach
Overview: collaborative agreement

• Collaborative agreement in place since June 2018 and lasts two years
• Joint chair and chief executive, and some shared executive appointments
• Committed to do two things:
  - Take action to stabilise NDDH services and performance
  - Develop sustainable future plans
Overview: stabilising services

• During the first 6-12 months we focused our efforts on stabilising acute services and improving performance
• Included support to a number of key clinical specialties through providing workforce:
  – Acute medicine
  – Neurology
  – Oncology
    • Including bringing immunotherapy to North Devon so patients no longer to need to travel
  – Maternity (obstetrics and gynaecology)
    • Initial support from a joint director of midwifery and joint clinical director with RD&E
    • Three consultant obstetricians and gynaecologists (shared posts with RD&E)
    • Appointed a head of midwifery to implement new model of care
    • Improving experience for mothers through providing continuity of care
Overview: developing future plans

- There is still more work to do
- We need to determine organisational form of NDHT and future relationship with RD&E
- We have been undertaking a review of services and engaging with patients and public to ensure decision is based on what best meets the needs of the population of northern Devon
- Agreed starting point that NDDH has an A&E
- Took a selection of the most acute services - looking at where they are facing challenges and what support would help maintain local access to these services
# Overview: developing future plans

<table>
<thead>
<tr>
<th>Essential to support an ED</th>
<th>Identified as facing challenges</th>
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<tbody>
<tr>
<td>A&amp;E</td>
<td>Care of the elderly</td>
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<tr>
<td>Intensive Care (ICU)</td>
<td>Stroke</td>
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<tr>
<td>Acute Surgery</td>
<td>Oncology</td>
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<tr>
<td>Acute Medicine</td>
<td>Maternity (Obs and Gynae)</td>
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<td>Paediatrics (assessment in ED)</td>
<td>Radiology</td>
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<td>Trauma</td>
<td>(Trauma and) Orthopaedics</td>
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<td></td>
<td>Acute Medicine</td>
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<td>Paediatrics (wider service)</td>
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Overview: developing future plans

Exploring the three challenges affecting our clinical and financial sustainability:

**Remoteness** - NDDH is the most remote acute hospital in mainland England.

**Workforce** - remote hospitals tend to experience heightened workforce challenges, in the context of local and national shortages.

**Finance** - this has led to increased pressure on the Trust’s financial position.
Overview: developing future plans

• By end of 2019, a decision will be made on organisational form
• Service development work will inform this decision
• There will be further opportunities for engagement
• The Board is driven by the NHS values and committed to doing our best for the population of northern Devon with the resources we have available
Jessica Newton
Head of communications
Overview of engagement approach
Engagement approach

Engagement programme made up of four main areas of activity:

1. Engagement through stakeholder meetings
2. Targeted and representative patient engagement
3. Staff engagement
4. Public survey
Who have we heard from?

• 500 patients and public through our targeted engagement
• 1,319 members of the public through our public survey
• 100s of staff through various channels
• 100s of people through attending meetings of numerous community groups
• Thank you to everybody who helped promote our engagement
Why did we carry out targeted engagement?

• To ensure we engaged with patients and carers with lived experience of our services

• To ensure we engaged in line with our NHS values, promoting equal involvement and representation:
  – Hearing views from a wide range of people, including people of different ages and backgrounds
  – Speaking to people whose views we do not usually hear (e.g. those in harder to reach groups)
What did our targeted engagement look like?

• Worked with external agency to support targeted and representative approach
• Telephone survey with representative 400 members of the public
• Four public focus groups with different audiences (families with under 5s, families with older children, over 65s, unemployed)
• Focus groups and interviews with patients and carers
Public survey

• We created and promoted a public version of the survey
• The survey closed on 30 September with 1,319 responses, including 58 paper copies
• Detailed analysis is underway to ensure we capture all of the themes, but in general the findings echo what patients told us through targeted engagement
Engagement themes

We engaged on the following key themes:

1. What matters to you about hospital services?
2. Awareness and perceptions of hospital services
3. Access and travel
4. Care delivered in partnership
5. Using technology to access healthcare
What matters to you about hospital services?
What matters to you?

• Since March 2019, we have been meeting with key stakeholder groups through our existing meetings to understand what’s important to people about hospital services.

• Groups we engaged with included:
  • Primary care Patient Stakeholder Network
  • One Northern Devon and One Towns
  • Town and parish councils
  • Devon Senior Voice
  • Save Our Hospital Services
  • Involving Patient Steering Group
  • Healthwatch
  • GP Forum
‘What matters to you?’ themes

The following primary and secondary themes emerged from these discussions:

**Access** – Travel vs. outcome | Support for patients travelling further e.g. overnight accommodation | Localising where possible – making the best use of community hospitals | Digital | Improves choice for patients

**Workforce** – having the required staff | Exploring innovative workforce models | Increasing specialist education opportunities | Workforce availability

**Infrastructure** – Having the right space and equipment

**Partnership working** – Improving the transitions between primary and secondary care | Improving advice and guidance for GPs | Providing more support to patients after discharge | Enhancing support to mental health patients

**Equal outcomes** – Addressing health inequalities | Improving general health

**Patient-focussed** – Learning from patient feedback – what patients want us to do differently

**Future-proof** – Ensuring long-term sustainability of services

**System strategy** – Compatible with Devon-wide plans and priorities
‘What matters to you?’ themes

We considered this feedback and took it to the leadership team, who added the following three themes:

<table>
<thead>
<tr>
<th>Primary theme</th>
<th>Secondary theme/definition</th>
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<tbody>
<tr>
<td>Quality</td>
<td>Provides a service built on safety, effectiveness and experience</td>
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| Affordability | Is financially sustainable  
                 | Is as efficient as possible  
                 | Provides value for money |
| Feasibility   | Is operationally achievable |
Awareness and perceptions
What patients told us

• We started by understanding how aware people are of hospital services and how they perceive them:
  • Almost half of people had been a patient within the past 12 months
  • Almost half said a family member had been a patient within the last 12 months

• This gave us confidence that we were speaking to people who have experience of our services
Patients rated NDDH highly

NDDH was rated an average of 4.2 out of 5

How would you rate North Devon District Hospital as an acute hospital, on a scale of 1 (very poor) to 5 (very good)? (388) [TELEPHONE]
Patients rated NDDH highly

When asked to explain their rating:

Scores 4-5:

• Experience of good quality of care (118)
• Positive experiences with staff (55)
• Being seen in a timely way (14)

Improvements (scores 1-3):

• Reduce waiting times (18)
• More staff (11)
• Higher quality of care (10)
What the public told us

• Half had been a patient in the last 12 months and half said a family member had been

• When asked to rate NDDH, an average score of 3.6 out of 5 was given:
  – 48% gave a rating of 5
  – 32% gave a rating of 4
Staff are proud of NDDH

- 87% of staff are proud of NDDH
- When asked what their service does well for patients, themes included:
  - Providing a good care environment
  - Patient-centred care
  - Working well with other departments in delivering care
  - Good communication with both patients and staff
Staff are proud of NDDH

• When asked what could be improved, themes included:
  – Improvements to the pathway or ‘journey’ patients take through hospital services
  – Waiting times
  – Partnership working across Trust
  – Staff shortages
What this has told us

• A high proportion of our local community are familiar with NDDH and on the whole rate it highly as an acute hospital
• The quality of care and staff were highlighted as positives
• Both staff and patients highlighted waiting times and staff shortages as areas for improvement, so future plans should address these areas
Access and travel
Focusing on what’s important

• We know from what you have told us that people in northern Devon experience difficulties with travelling and accessing services

• People will always travel outside of northern Devon to access specialist care. We wanted to understand that experience

• We also wanted to understand more about how travel and access impacts people
What patients told us

When accessing services at NDDH:

• The vast majority of people would travel to NDDH by car (82%)

• The over 65s and unemployed groups were more likely to ask for a lift or use public transport

• The majority of people think NDDH is accessible (80%)

• Suggested improvements include more parking, providing more care locally and improving road and public transport links
What patients told us

• A quarter of people accessed specialist services at another hospital at some point in their care. In the majority of cases, this was the RD&E.

• When accessing services outside of northern Devon:
  – 95% drove themselves or were driven by a relative
  – 1/5 of people found it difficult to travel to the other hospital
  – Suggested improvements include improving car parking, providing care closer to home and increasing NHS and community support with travelling
What the public told us

• The vast majority (91%) would travel to NDDH by car
• Other methods were public bus (14%), walking (6%) or taxi (5%)
• 74% would describe NDDH as easily accessible
• Over half (55%) had been referred to a hospital other than NDDH for treatment
What staff told us

We wanted to understand whether there was anything that staff felt would make it easier for patients to access hospital services.

The common themes were:

- Improving parking
- Improving support with patient transport
- Use of technology including video appointments
What this has told us

• Our engagement has confirmed our understanding that:
  – Access and travel are really important and influence people’s experience of care
  – People in northern Devon experience challenges with accessing and travelling to receive healthcare services
• This will therefore need to be a key consideration in our planning
Care delivered in partnership
What patients told us

• NDHT already works in partnership with other organisations to provide care for the population of northern Devon

• One of the areas this works particularly well is cancer care, where we have a long-standing partnership which sees RD&E doctors travelling up to NDDH to provide care

• We wanted to understand how this worked for patients
What patients told us

Positives

“I think it’s good for the two hospitals to work together, but I hope that cancer treatment will still be provided at both hospitals.”

“My oncologist is Exeter-based and that’s fine. His care has always been excellent. I am entirely happy with the treatment I have received.”
What patients told us

Areas for improvement

“At the start of my treatment I was assured that I would see the same doctor, but this was not the case. It would have been much better if the former had happened.”

“I think the care is disjointed.”
What this has told us

• Our partnership working with the RD&E has supported patients to access high quality cancer care in northern Devon
• There are opportunities to improve how joined-up our services delivered in partnership are and how coordinated this feels for patients
Using technology to access healthcare
What patients told us

• Developments in digital technology offer us the opportunity to do things differently and to offer patients choices about how they access care

• We wanted to explore people’s attitudes towards using technology to access healthcare
The majority would be happy to use technology to access healthcare

- Receive a link to an appointment letter by SMS (text message): 81%
- Receive an appointment letter by email: 72%
- Book the appointment online: 69%
- Conduct the appointment with your consultant by video-conference / Skype type platform: 41%
- None of the above: 12%
What patients told us

• A quarter of people said they would have some concerns about using technology to access healthcare. These included:
  – preferring personal interaction
  – not being a technical person
  – data protection
  – internet connection

• Comfort with using technology decreased as age increased
What the public told us

This echoed what we found through the patient engagement:

• Again, the vast majority (79%) of people were happy to use technology in some way to access healthcare

• Around a quarter of people (28%) told us they would have concerns about using technology
What staff told us

• The majority (65%) of staff felt that a greater use of technology would improve services. Suggestions included:
  – e-prescribing
  – video clinics
  – electronic patient records
  – portable IT systems
What this has told us

• There are opportunities to increase the use of technology to offer patients more choice in how they access services

• Levels of comfort with technology and appetite for using it to access healthcare vary and therefore our plans need to offer options that meet everybody’s needs
Looking ahead

• We want to ensure you have a shared understanding of our strengths and the challenges we face
• Events like this are just the start of our dialogue with you in exploring – as a community – how we work together to overcome our challenges
• We can see, by your participation in our engagement and attendance tonight, that you share our commitment to great local NHS services
• I want to ensure that the patient voice is evident in all our plans and we will need your help to ensure that happens
Questions and Feedback