

# HEALTH AND CARE INSIGHTS

## Issue 15 – November 2018

### The Headlines

#### New telephone-based health coaching supports frequent A&E attenders

From 15 October we introduced a new telephone-based coaching service, delivered by a professional team of clinicians who are all trained as health coaches (pictured left). This is part of our Health and Wellbeing offer, which also includes [Wellbeing Co-ordinators](#) and our [Help Overcoming Problems Effectively](#) (HOPE) programme. The service is aimed at patients who frequently attend Torbay Hospital's A&E and aims to reduce the number of avoidable attendances and admissions, as we know that many people who come to Torbay Hospital could receive appropriate support or care in their home or in their community. We are working with [Health Navigator](#) who has been commissioned to provide this new telephone based health coaching service. Nikki Goodhew, one of our five coaches says: "Where a patient has been identified as appropriate to receive the service, one of us will meet them either in hospital before they are discharged, or will write to them after discharge, and then for the next three to four



Back, standing: Pippa Chase, Bev Moxon, Liz Topps.  
Front: Charlotte Bramwell, Nikki Goodhew.

months we will give them coaching support over the telephone. A patient has the same coach throughout the process. Through these coaching interventions, our aim is to empower these patients to be able to take more control of their health and wellbeing, helping to improve their quality of life."

It is early days to be able to determine how many A&E attendances and admissions this service is preventing, but one month on and already over 50 people have been identified and invited to access coaching. This includes people with chronic illnesses aged 18 and over. We will report on the progress of this new service and share some patient experiences in a future issue.

#### £2.4 million investment for winter readiness



After an exceptionally challenging winter last year we have been making plans to help ensure we are equipped for the winter ahead. We consulted our staff in order to learn all the lessons we could from last winter, and as a result we have invested £2.4 million in our winter plan. This will enable us to provide safer staffing levels on Torbay Hospital wards, including additional doctors and senior nurse leadership in our Emergency Department. We are also putting in place a wide range of operational measures which together will help us create capacity and resilience over the coming months. Additionally we are recruiting more volunteer 4x4 drivers and reducing elective activity from mid-December through January so we can focus on our emergency and urgent care pathways.

#### Your Questions: This week's theme is hospital parking

##### What is being done to improve the hospital parking facilities and to help frequent visitors avoid excessive parking costs?

Like all other Trusts, we have to charge both the public and our staff who wish to park on site, as this is the only income we receive to maintain all our car parks, roadways, walkways and pavements. We make every attempt to keep parking charges as low as possible and we

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regularly review our charges to ensure they are in line with NHS Trusts within the South West region and local councils. Our charges are some of the lowest in the region.

Even so, we understand that parking charges are an unwelcome and additional burden in the face of health challenges that many people may be experiencing, either as patients or carers. We therefore offer free parking in Torbay Hospital to:

- Patients making daily or frequent visits for cancer treatments.
- All registered disabled patients who hold a disabled badge or who are transporting a patient who holds a disabled badge, and who park in a marked disabled space.
- Relatives of patients who are acutely unwell, typically in ICU needing high dependence care.
- Resident parents of children in hospital, or parents whose babies are being cared for in the Special Care Baby Unit.
- Relatives of patients receiving end of life care.
- Those visiting the bereavement office or collecting a death certificate.

People who qualify under any of the above groups, if they haven't been advised already by the hospital team treating them, simply go to the Patient Enquiry Desk in Outpatients, Level 2 or ask at Ward level; they will then be advised how to obtain the free parking pass. We also offer a £25 weekly parking concession at Torbay Hospital for other patients and their visitors who do not qualify for free parking. This can be purchased from the Cashiers Department, Outpatients on Level 2

We have recently spent over £1 million to create more public and disabled spaces at Torbay Hospital, including free 20 minute drop off/pick up bays, located adjacent to all entrances. We also have 20 minutes free dropping off/pick up point at Newton Abbot Hospital.



We are continuously looking to improve our parking solutions and are currently exploring extra parking facilities for Torbay Hospital, Newton Abbot and Totnes Hospitals. Parking at our other sites is either free, or where no parking facilities are available there are public pay and display car parks nearby.

## Let's Celebrate!

### CAMHS team win national award

With admission rates for self-harm among young people in Torbay twice the national average, our Child and Adolescent Mental Health Service set up a crisis home response team – and have won a national award owing to the team's success in reducing the number of young people facing emergency mental health crises. Their aim was to provide intensive support to



young people experiencing mental health crises in their own homes, avoiding the need for them to be admitted to hospital. Over the last year the team has achieved a 35 per cent reduction in A&E attendances; a 53 per cent reduction in hospital bed days; and an 80 per cent reduction in the number of young people being referred out of the area for an inpatient stay in a specialist mental health unit. The team beat stiff competition to win the top award, with 10 other finalists from around the UK. They were also shortlisted for

'Team of the Year.' Read more [here](#) including 'Gracie's story' which relates how CAMHS gave timely support to a single mum and her two daughters.

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**Audiology services receive full accreditation from UKAS** The Trust's audiology services have maintained full accreditation for their service from the United Kingdom Accreditation Services (UKAS). Our audiology services were the first service in the South West to receive accreditation back in 2014. This year's report commended the service on the exceptional skills of the staff to tailor their patient focus for each appointment. Dr Laura Booth, Assessment

Manager from UKAS said: "The assessment teams that have been involved in the accreditation process for this service are impressed with the passion for patient care, the service innovation and the persistent drive for continual service improvement." Claire Rockett, Head of Audiology services at the Trust said: "Lots of work goes into getting the accreditation and the process has its challenges. It involves all our team being committed to meeting, maintaining and improving standards of patient care and safety and being able to evidence this. The accreditation provides our patients with a high level of confidence in our ability to deliver a service that is patient focused, safe and delivers a high quality service." The audiology service is completely free and provides people with impartial advice tailored to their own specific hearing needs. All patients are offered an assessment appointment within 20 days of referral.



**National research recognition for local podiatrist** Richard Collings (pictured), podiatrist, has been named as one of only 13 Allied Health Profession (AHP) research champions newly appointed by the National Institute for Health Research (NIHR) and Council for Allied Health Professions Research (CAHPR).

AHP Research Champions will serve as ambassadors to champion the research work of AHPs, encouraging more AHPs to be aware of and get involved in health and social care research and the work of the NIHR for the benefit of patients.

Richard has worked at Torbay for 11 years as a podiatrist and has had a long interest and involvement with research. He currently works part time clinically and, following a NIHR doctoral studentship, is now studying part time for his PhD with the University of Plymouth, researching into offloading for ulcer prevention for people with diabetes. Well done Richard!

**Patient-led assessments give hospitals top ratings** Hospitals across Torbay and South Devon have received some top ratings in a report published by the Health and Social Care Information Centre.

The patient-led PLACE are annual 'Patient-Led Assessments of the Care Environment.' The assessments are carried out by teams of governors, nurses, matrons, doctors, catering staff, domestic service managers, and – most importantly – patients and service users. PLACE assessments review key areas from a patient perspective across a range of non-clinical services within six main categories:

- Cleanliness of the environment
- Food and hydration – the quality and availability of food and drinks
- Privacy, dignity and wellbeing – how well the environment protects people's privacy, dignity and wellbeing
- Condition, appearance and maintenance – the internal and external condition of the buildings, fixtures and fittings. How well the building meets the needs of those who use it, such as through signage and parking facilities.
- Dementia – the facilities provided within a Dementia friendly environment
- Disability – how accessible the facilities are

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Brixham Hospital scored above the national average in all six categories with patients calling it a “very well maintained hospital” and a “clean and safe environment.” All of the hospitals in the area performed above the national average in most of the key assessment areas. The assessments did identify some areas for improvement and as part of our commitment to providing the highest quality of care, over the next 12 months a number of minor improvement works will be carried out. Karen Robertson, Associate Director of Estates and Facilities, said: “For patients, visiting hospital can be a worrying time and environment, food and privacy and dignity are all an important part of a patient’s overall experience.

“We are always grateful for the assessment results as they help us to ensure that our hospitals are the very best they can be and help us to prioritise our improvement plans. We have put together an action plan to start to undertake some improvements in areas identified in the assessments. I know staff at our hospitals will take pride in knowing the hard work and dedication they put in each day has helped achieve these results.”

## How we are Making a Difference

**Since investing in Intermediate Care we have cared for nearly 2,300 more people at home**

Since we formed our integrated care Trust just over three years ago we have put measures in place to try to prevent people being admitted to hospital, wherever this is medically appropriate, and to bring forward their discharge from hospital where they have been receiving hospital care. This is because hospital is where we provide acute care to those needing this level of specialist care, and as well as being expensive, it is not always in a person’s best interests to be admitted to hospital if they can be supported and cared for at home. We provide intermediate care to people who need nursing and/or therapist care but do not need to be in a hospital setting, and from late 2016 we began investing heavily in our Intermediate Care community teams in order to provide more of this care to people at home. Ruth, featured in the case study below, is one simple example of how we are providing this care – giving people the care they need in the place they feel safest – at home.

**Ruth who is over 100 years old had lived at home with the support of carers. Unfortunately she suffered a fall and was short of breath so was admitted to Torbay Hospital where she was diagnosed with pneumonia.**

**After a stay in the general hospital she was transferred to a community hospital where the intermediate care team and therapists saw her to look at how she could be supported to return home. She received daily input to improve her mobility but had lost her confidence and stamina; yet with regular input she became more confident again. It was felt that with the right support Ruth could return home, where she wanted to be.**

**The care she had previously had at home was put back in place with additional care for the first three nights to help settle her, as there was a risk she might have a further fall. The carers reported that Ruth was doing well and was much more confident. Ruth has continued to live at home with the support of her carers.**

Since October 2016 we have been investing over £2 million extra a year in order to be able to provide more intermediate care to our local people, including during weekends and Bank Holidays. In the two years since we began making this investment we have seen a 36 per cent increase in the number of intermediate care referrals; this translates into our having cared for nearly 2,300 more people in their homes as a direct result of this on-going investment.