

Community Conversation

Turning talk into action



Castle Place Practice joins the RD&E

At the beginning of 2018 the practice and its 50 members of staff joined the Trust - the first venture of its kind in Devon.

Dr James Squire, GP at Castle Place, explains: "The whole of the healthcare system is needing to adapt and respond to the ever increasing challenges and pressures it faces. Our focus has always been on providing person-centred, continuity of care and this has helped us to fare some of these challenges well but we knew that to maintain this for our current patients and future generations we needed to explore new ways of working. It was important for us that we secured a future which was true to our core values and principles. Joining the RD&E gives us an opportunity to concentrate our efforts on leading and providing excellent clinical care in a way that's right for our community."

"This was a bold step for us but the whole team here is motivated to test new ways of working, not only to benefit the practice and the community hospital which we are co-located with but also for our wider population. We are really keen to share our experiences and learning as this journey continues."



with how it went - everybody who came was hugely enthusiastic and had lots to contribute.

"I think we all came away with an improved understanding about the health and care sectors operate in our area and have started to build that shared ambition to strengthen our community, ensuring it is well supported and looking to the future. A priority will be to make sure that those who need support get the right care in a way that adds value to their life but equally important is the focus on prevention and wellbeing for all.

"We all agreed that only by bringing people to work together and build positive relationships can we achieve this aim and make a difference. Whilst this is just the early stages of what will no doubt be a longer-term journey over the next 5 to 10 years, it has been really encouraging to see the drive and commitment from right across the community to set-off in the right direction."



Further Community Conversations will be organised over the coming months. If you would like more information or want to get involved please contact: office@involve-middevon.org.uk

The first Tiverton community conversation took place at the end of March bringing together a wide representation of local health and wellbeing services from across the community. The aim was to start a dialogue about what could be achieved by working together to develop a common understanding of what Tiverton currently has to offer, what the current needs are and how are they changing, in order to better shape a happy and healthy future for those living in the area.

The event, organised by Involve Voluntary Action Mid Devon and the RD&E, was a lively mix of presentations from speakers including the local GPs, Age UK and Carers Unite and then breaking into working groups to explore innovative as well as the simple ways of meeting the health and care needs. All who attended were open and willing to look at changing current approaches and ways of working between the voluntary sector, health providers and commissioners to enhance services for those that live and work in the community.

Taking the time to really understand the needs of the community will help inform and direct the projects and initiatives undertaken. So one of the first actions to come out of the conversation is to build on the knowledge gathered and undertake a community survey to map and analyse the strengths and identify the gaps. From here collaborative and co-produced plans can be developed.

Reflecting on the event Karen Nolan, Chief Officer at Involve, said: "I was really pleased

A big thank you

With the much awaited warmer weather now upon us it seems odd to be talking about snow! However, I wanted to take this opportunity to say thank you to the Tiverton and Culm Valley healthcare team whose response to the unprecedented snowy weather was fantastic. Many staff made alternative arrangements the night before the predicted snowfall so that they could walk to work. For those unable to get in, they instead set-off on foot around their local area visiting patients that urgently needed care and support. Everyone went the extra mile in order to keep people safe and well. I am extremely proud of all of them as they continued to demonstrate their care and compassion in the most difficult conditions.

Also a huge thank you to the other local emergency services, especially the firefighters who cleared the way into the hospital and to the amazing community volunteers who provided 4x4 transport to help ensure staff could get to patients in the more rural areas.

Julia Brown
Community Services Manager
Tiverton and Cullompton



Trust rated highly by staff

RD&E staff have given the Trust another positive report in the 2017 NHS staff survey. Staff highly recommend the Trust as a place to work and to receive treatment placing it above average of Acute and Community Trusts nationally.

The Trust was rated better than average in 21 out of 32 key findings compared to all Acute and Community Trusts in 2017. This included staff involvement in improvements at work, effective team working, support from immediate managers and placing the care of patients as the organisation's top priority.

The results build on positive the NHS Staff Friends and Family Test results which showed that 93% of staff would recommend the RD&E as a place to receive treatment – compared to 81% for similar Trusts.

Tracey Cottam, RD&E Director of Transformation and Organisational

Development, said: "At a time when the NHS has been under significant pressure, it is really pleasing to report that we have continued to perform well in the latest staff survey. Our staff are central to providing great care each and every day and the survey underlines that our people deliver kind and compassionate care, that we have a strong team ethos and that we are always seeking to improve our services. We will continue to focus on improving the way we engage with staff because we know that is central to delivering high quality, safe care and better patient experience. This includes building on what we are doing well as well as focusing on areas that need improvement."

The NHS Staff Survey is the largest annual workforce survey in the world and participation is mandatory for all NHS organisations in England. To see the full report visit www.nhsstaffsurveys.com.

Working together to provide the right care, in the right place

Occupational Therapist and first responder, Kirsty Clifford, shares an example of how professionals from primary, community, acute and social care work together to ensure that care at home is responsive to individuals' needs.

As a first responder it's my job to assess what support and care is needed to keep people well at home. These visits, usually the same day as the referral - within a couple of hours if necessary, ensure rapid care and support can be put in place. I recently went to see a patient who had a fall at home, a trip to their local minor injury unit thankfully confirmed no significant damage was done but after a few days she was struggling with rib pain and mobility. We discussed what support would help her to stay safely at home. As well as mobility equipment, I organised an urgent care support worker for an evening visit and two night sits. This gave her and the family peace of mind knowing that support with personal care and getting into bed would reduce the chance of another fall and aid recovery. On a follow-up visit it was clear that the patient wasn't improving so I asked her GP to visit - it was agreed that hospital was the best option. Working closely with the acute ward staff, the community team kept informed of her treatment and progress so that on discharge, short-term support, including more night sits, could be put in place to ensure that her return home was safe with no gaps in care. The social worker involved in her on-going care plan explained that the family were very anxious of another fall so we organised a support worker to visit the patient at home to practise getting in and out of bed. Once the patient felt confident, the night sits were no longer needed which was great for her regaining her independence.