

Health Overview & Scrutiny Committee

Tuesday 12 January 2021 at 10.00 am

Supporting Documents



Supplementary Documents

6	Fit for the Future Consultation (Output Presentation) (Pages 1 - 34) To consider outputs from the Fit for the Future Consultation. The Interim Output of Consultation Report relating to the Fit for the Future consultation is published on the One Gloucestershire website and can be viewed at the following link: https://www.onegloucestershire.net/yoursay/	Becky Parish
7	New Forest of Dean Community Hospital Consultation (Output Presentation) (Pages 35 - 54) The Interim Output of Consultation Report relating to the Forest of Dean Community Hospital Consultation is published on the One Gloucestershire website and can be viewed at the following link: https://www.onegloucestershire.net/yoursay/	Caroline Smith

Membership – *Cllr Brian Robinson (Chair), Cllr Paul Hodgkinson (Vice-Chair), Cllr Brian Oosthuysen, Cllr Nigel Robbins OBE, Cllr Terry Hale, Cllr Stephen Hirst, Cllr Pam Tracey MBE, Cllr Robert Vines and Cllr Suzanne Williams*

Co-opted Members - *Cllr Martin Horwood, Cllr Dilys Neill, Cllr Helen Molyneux, Cllr Collette Finnegan, Cllr Steve Lydon and Cllr Jill Smith*



This page is intentionally left blank

Fit for the Future

Developing specialist hospital services in Gloucestershire

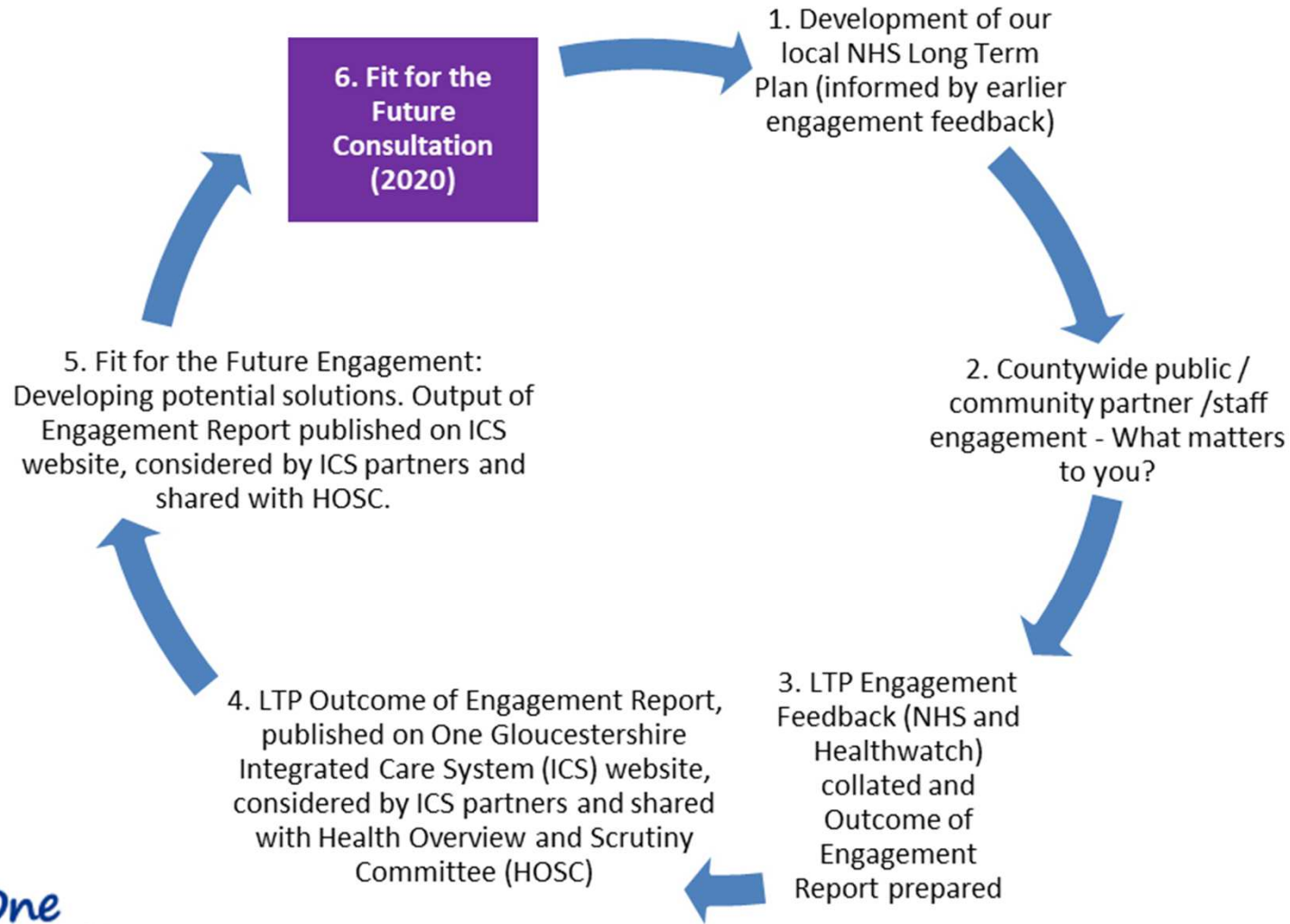
Output of Consultation

Health Overview and Scrutiny Committee
12 January 2021

Consultation Key Facts

- **Approximately 5,000** Consultation booklets distributed
- **297,000 door-to-door leaflets** distributed, generating **1700+** requests for information
- **75+** consultation events
- **More than 1000 socially distanced face-to-face contacts** with members of the public/over **350 staff**
- **20+ Facebook posts** with a reach of over 140,000 with over 1,500 'engagements', incl. over 1,000 clicks on the link
- **35+ tweets** generated over **30,000 impressions** and almost **800 engagements**
- **700+** Fit for the Future surveys completed

Journey to Consultation



What the Fit for the Future consultation is about

The purpose of the consultation was to seek views on the future provision of five specialist hospital services in Gloucestershire:

- Acute Medicine (Acute Medical Take). This is the coordination of initial medical care for patients referred to the Acute Medical Team by a GP or the Emergency Departments and where decisions are made as to whether patients need a hospital stay.
- Gastroenterology inpatient services; medical care for stomach, pancreas, bowel or liver problems.
- General Surgery conditions relating to the gut. Specifically, emergency general surgery, planned Lower Gastrointestinal (GI) (colorectal) and day case Upper and Lower GI surgery.
- Image Guided Interventional Surgery (IGIS) including vascular surgery. IGIS is where the surgeon uses instruments with live images to guide the surgery.
- Trauma and Orthopaedic inpatient services (T&O) diagnosis and treatment of conditions relating to the bones and joints.

What the Fit for the Future consultation is not about

- **Cheltenham General Hospital Accident & Emergency (A&E) Department:** A public commitment has been made to the future of the Accident and Emergency (A&E) Department in Cheltenham.
- **COVID-19 Temporary Changes:** some of the medium to long term changes proposed relate to some of the same clinical services where temporary changes have had to be made recently in order to keep our hospitals safe.
- **Outpatients, Community and Primary Care Services:** No changes to outpatient, community or primary care services are included within this consultation.

Our approach to communications and consultation

- **Working with others**
- **Equality and Engagement Impact Analysis (EEIA)**
 - Groups potentially impacted, issues identified and actions taken
 - Issues identified pre-consultation in the EEIA and action taken ahead of consultation
- **Covid 19: A socially distanced consultation**

Consultation approach & responses... **Future**

Fit for the
Developing specialist hospital
services in Gloucestershire

Two key consultation routes:

- 1. Promoting formal consultation routes & encouraging participation**
– on-line & face to face events, social media, media, County & Borough Councils, PCNs, Governors etc.
- 2. Proactive consultation with targeted groups as informed by Integrated Impact Analysis (IIA)** – BAME community, LGBTQT+, gypsy/traveller community, mental health and learning disability groups, frail elderly, long term condition groups, low income areas, people living with a disability, adult & young carers, young people homeless

Responses:

- **700+ survey responses** (full & *easy read* versions)
- **~30% staff** (*health or social care professional*)
- **19 separate e-mail/written responses**

Communications: Developing understanding and supporting Fit for the Future consultation

- Door to Door awareness raising leaflet
- Media releases, Media advertising and stakeholder briefings
- Printed engagement booklets
- 'Your Say' area on the One Gloucestershire Health website and Get Involved in Gloucestershire online participation platform
- Further engagement to address the homogeneity of participants
- Social media: Facebook and Twitter
- Staff communication and engagement

Other stakeholder communication and engagement

- Elected Representatives: MP briefings, District/Borough Council Member Seminars
- REACH Campaign, regular meetings

Public Consultation Activities

- Gloucestershire Media: Live social media partnership (@GlosLiveOnline)
- Gloucestershire Hospitals: Facebook live (@GlosHospital)
- Gloucestershire Patient Participation Group Network
- NHS Information Bus Tour
- Cuppa and Chats
- Targeted activities
- Fit for the Future Surveys
- Other surveys and petitions

- Black, Asian and Minority Ethnic (BAME) communities, in particular people aged over 65
- People with mental health conditions [and learning disabilities]
- Over 65s who are more likely to have long term conditions such as cardiovascular disease, obesity or diabetes
- Frail older people who are more likely to experience falls
- People from BAME communities who are living with a long term condition
- People living with a disability (includes physical impairments; learning disability; sensory impairment; mental health conditions; long-term medical conditions)

Consulting people with protected characteristics/others identified in the Independent Integrated Impact Analysis

Continued:

- Young people
- Adult Carers and Young Carers
- Homeless people (and rough sleepers)
- Gypsy/Traveller communities
- LGBTQ+ people
- People living in low income areas

Fit for the Future survey:

- Proportionally more people from Cheltenham completed the survey
- More women than men completed the survey (55% / 39%)
- Good age range of respondents from Under 18 - Over 75 years
- Between a quarter and a third of responses came from staff
- Over 20% of responses came from people who considered themselves to have a disability
- Over a quarter of respondents were 'unpaid' carers
- 15% of respondents were not white British

Targeted consultation activities took place with: people from Black, Asian and Minority Ethnic (BAME) communities, people living with long term conditions such as cardiovascular disease, obesity or diabetes, people living with a disability (includes physical impairments; learning disability; sensory impairment; mental health conditions; long-term medical conditions, Adult Carers and Young Carers, Homeless people, Gypsy/Traveller communities and LGBTQ+ people.

**We only know about survey respondents who completed the 'About You' questions in the survey*

Responses to the consultation

Feedback to the consultation was received in two main ways:

- Fit for the Future survey (Main and Easy Read) responses (700+)
- Other correspondence/written responses (19) + REACH survey

The qualitative feedback from completed surveys and correspondence has been grouped into a series of themes: Access, Capacity, Diversity, Efficiency, Environment, Facilities, Interdependency, Integration (with primary and community services), Patient Experience / Staff Experience, Pilot, Quality, Resources, Transport and Workforce.

Level of support for proposals (Fit for the Future Survey / Easy Read)

Proposal	Strong support/ support			Strongly oppose/ oppose			No opinion		
	Survey	Staff	Easy	Survey	Staff	Easy	Survey	Staff	Easy
Acute Medicine to GRH	68%	72%	73%	25%	21%	19%	7%	7%	8%
EGS to GRH	68%	78%	67%	23%	17%	23%	9%	5%	10%
Centralise EL Colorectal ^[1]	79%	85%	73%	8%	3%	12%	13%	12%	15%
DC general surgery to CGH	73%	80%	67%	9%	4%	13%	18%	16%	20%
IGIS hub at GRH, spoke at CGH	67%	63%	77%	15%	17%	10%	18%	20%	13%
Vascular to GRH	60%	59%	68%	20%	20%	15%	20%	21%	17%
Gastro to CGH	72%	68%	68%	7%	6%	10%	21%	26%	22%
T&O split	76%	76%	70%	11%	9%	13%	13%	15%	17%

[1] View on location of centralised elective colorectal surgery service:

Group	CGH	GRH	No opinion
All survey responses	51% (28%)	20% (28%)	30% (45%)
Staff only	57%	13%	30%

Fit for the Future Survey: Acute Medicine (Acute Medical Take)

Preferred option to develop: A ‘centre of excellence’ for Acute Medicine (Acute Medical Take) at Gloucestershire Royal Hospital.

- 67.61% (Easy read: 72.09%) of survey respondents either strongly supported or supported the proposal
- 24.83% (Easy read: 18.60%) of survey respondents either strongly opposed or opposed the proposal
- 7.55% (Easy Read: 9.30%) of survey respondents had no opinion

- 72.17% of staff respondents either strongly supported or supported the proposal
- 66.23% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Preferred option to develop: A 'centre of excellence' for Emergency General Surgery at Gloucestershire Royal Hospital.

- 68.31% (Easy read: 66.67%) of survey respondents either strongly supported or supported the proposal
- 23.44% (Easy read: 22.99%) of survey respondents either strongly opposed or opposed the proposal
- 8.24% (Easy Read: 10.34%) of survey respondents had no opinion

- 77.62% of staff respondents either strongly supported or supported the proposal
- 65.01% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Fit for the Future Survey: Planned Lower GI (colorectal) surgery

Preferred option to develop: to develop: A 'centre of excellence' for Planned Lower GI (colorectal) general surgery at Cheltenham General Hospital (CGH) or Gloucestershire Royal Hospital (GRH).

- 79.1% (Easy read: 72.84%) of survey respondents either strongly supported or supported the proposal
- 7.83% (Easy read: 14.81%) of survey respondents either strongly opposed or opposed the proposal
- 13.06% (Easy Read: 12.35%) of survey respondents had no opinion

- 85.31% of staff respondents either strongly supported or supported the proposal
- 76.84% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Fit for the Future: Location for Planned Lower GI

Where do you think we should do planned Lower GI (Colorectal) General Surgery?

- 50.76% (27.50% Easy Read) survey respondents chose Cheltenham General Hospital
- 20.27% (27.50% Easy Read) of survey respondents chose Gloucestershire Royal Hospital
- 30.30% (45% Easy Read) had no opinion
- Staff:
 - 56.64% Cheltenham General Hospital (CGH)
 - (GRH) 13.29% Gloucestershire Royal Hospital
 - No opinion 30.07%
- Public and Community Partners:
 - (CGH) 48.14% Cheltenham General Hospital
 - 22.37% Gloucestershire Royal Hospital (GRH)
 - No opinion 30.85%

Fit for the Future Survey: Planned day case, Upper and Lower GI

Preferred option: to develop: A ‘centre of excellence’ for planned day case Upper and Lower GI (colorectal) surgery at Cheltenham General Hospital (CGH).

- 73.49% (Easy read: 67.47%) of survey respondents either strongly supported or supported the proposal
- 8.52% (Easy read: 13.25%) of survey respondents either strongly opposed or opposed the proposal
- 17.99% (Easy Read: 19.28%) of survey respondents had no opinion

- 79.58% of staff respondents either strongly supported or supported the proposal
- 71.24% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Fit for the Future Survey: IGIS Including Vascular Surgery

Preferred option: to develop: A 24/7 Image Guided Interventional Surgery (IGIS) 'Hub' at Gloucestershire Royal Hospital and a 'Spoke' at Cheltenham General Hospital.

- 66.54% (Easy read: 76.54%) of survey respondents either strongly supported or supported the proposal
- 15.39% (Easy read: 9.88%) of survey respondents either strongly opposed or opposed the proposal
- 18.08% (Easy Read: 13.58%) of survey respondents had no opinion

- 63.12% of staff respondents either strongly supported or supported the proposal
- 67.81% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Preferred option: to develop: A 'centre of excellence' for Vascular Surgery at Gloucestershire Royal Hospital.

- 60.27% (Easy read: 68.35%) of survey respondents either strongly supported or supported the proposal
- 19.97% (Easy read: 15.19%) of survey respondents either strongly opposed or opposed the proposal
- 19.77% (Easy Read: 17.72%) of survey respondents had no opinion

- 58.86% of staff respondents either strongly supported or supported the proposal
- 60,80% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Fit for the Future Survey: Gastroenterology inpatient services

Preferred option to develop: A ‘centre of excellence’ for Gastroenterology inpatient services at Cheltenham General Hospital.

- 71.96% (Easy read: 68.35%) of survey respondents either strongly supported or supported the proposal
- 6.67% (Easy read: 10.13%) of survey respondents either strongly opposed or opposed the proposal
- 21.37% (Easy Read: 21.52%) of survey respondents had no opinion
- 68.08% of staff respondents either strongly supported or supported the proposal
- 73.44% of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Fit for the Future: Trauma and Orthopaedics (T&O) inpatient services

Preferred option: to develop: Two permanent 'centres of excellence' for Trauma at Gloucestershire Royal Hospital and Orthopaedics at Cheltenham General Hospital.

- 76.02% of survey respondents either strongly supported or supported the proposal
- 10.53% of survey respondents either strongly opposed or opposed the proposal
- 13.45% of survey respondents had no opinion

Easy Read (2 questions)

Trauma: Support:70.51% Oppose:12.82% Not sure:16.67%

Orthopaedics: Support:73.08% Oppose:14.10% Not sure:12.82%

- 75.35% of staff respondents either strongly supported or supported the proposal
- 76.28 of respondents to the Fit for the Future Survey (excluding staff) either strongly supported or supported the proposal

Main themes from free-text responses

Fit for the Future survey: The qualitative feedback from completed surveys and correspondence has been grouped into themes under the following headings

- Access
- Capacity
- Diversity
- Efficiency
- Environment
- Facilities
- Integration (with primary and community services)
- Interdependency
- Patient Experience / Staff Experience
- Pilot
- Quality
- Resources
- Transport
- Workforce

Fit for the Future Survey: Impact of our proposals on you and your family

The predominant impact identified from respondents from all areas of the county is Access to centralised services; whether at Cheltenham General Hospital or Gloucestershire Royal Hospital.

Frequently respondents have linked Access with either expected improvement in quality of services or deterioration in quality of services.

Several respondents highlight Environmental aspects of increased travel.

Fit for the Future Survey: Limiting negative impact

Survey respondents shared the following mitigations to limit potential negative impacts of centralisation of specialist hospital services:

- Retain services on both sites
- Improve Patient Communications
- Improve integration between hospitals, community services and GP practices
- Reduce the number of patient transfers between Acute hospitals
- Build a new Acute Hospital on a Single Site
- Improve public transport
- Speed up payment of eligible Travel Claims
- Encourage more staff to work in Gloucestershire

9 written responses were received during the consultation (A-Z):

- Cheltenham Borough Council [about Access, Capacity, Interdependency + commitment to Cheltenham General Hospital A&E]
- Cllr Martin Horwood, Liberal Democrat, Cheltenham Borough Council [about Capacity, Access, Pilot + timing of consultation]
- Leckhampton with Warden Hill Parish Council [about Capacity, Access, Pilot + timing of consultation]
- REACH: Restore Emergency At Cheltenham General Hospital campaign (including REACH survey interim report) [about Capacity, Access, Interdependency, Facilities, Quality, Pilot + commitment to Cheltenham General Hospital A&E]
- Tewkesbury Borough Council [about Access + commitment to Cheltenham General Hospital A&E]
- 4 x members of the public [#1: about Quality, Resources, Workforce, Facilities, Staff Experience, Pilot. #2: about Workforce. #3: about Quality, Patient Experience. #4: about Efficiency, Resources, Capacity, Workforce]

REACH Survey

REACH created an alternative survey to gather views to inform their response to the Fit for the Future consultation proposals [from REACH website) <https://www.reachnow.org.uk/>

REACH launch their Fit for the Future Survey (19 November 2020)

REACH are concerned that the One Gloucestershire Fit for the Future survey that forms part of the consultation has been constructed in such a manner that the results can be used to justify a decision that the respondents would not have supported. Because of this REACH have chosen to launch their own survey, to gather the real preferences of those local people in Gloucestershire and surrounding areas, who will be affected by these proposals.

The REACH survey asked different questions to those in the Fit for the Future Survey and Fit for the Future Easy Read Survey.

REACH survey: Respondents generally did not support any proposals to centralise specialist services at Gloucestershire Royal Hospital; for some proposals respondents were neutral as they believed services should be available in both Cheltenham and Gloucester. For day case services, respondents wanted these provided in multiple sites in Gloucestershire* Respondents believed that a permanent reconfiguration along the lines of the T&O “Pilot Study” should not be enacted until the results of the “Pilot” have been fully evaluated.

*NB community hospital services did not form part of the Fit for the Future consultation

Other correspondence/written responses

10 email responses were received from members of the public during the consultation from members of the public about:

- #1 Efficiency, Resources.
- #2 Access, Resources.
- #3 Patient Experience, Access, Resources, Facilities, Integration (use North Cotswolds Community Hospital).
- #4 Integration (use North Cotswolds Community Hospital), Access.
- #5 Access, Integration (use North Cotswolds Community Hospital).
- #6 Access.
- #7 Access + commitment to Cheltenham General Hospital A&E Department.
- #8 Access, Patient Experience.
- #9 Interest in Stroke services.
- #10 Copy of Member of the Public Letter 4: Efficiency, Resources, Capacity, Workforce.

Other comments received during the consultation (Not directly related to the consultation)

During the consultation, members of the consultation team spoke to participants about matters unrelated to the Fit for the Future proposals. Other subjects included:

- national and local response to the Coronavirus pandemic, including practical questions about Covid-19 testing and vaccination
- timing of the consultation taking place during a pandemic
- feedback about services such as primary care (GP) services and mental health services.

There were a significant number of messages of thanks to health and care staff and other frontline workers for their efforts to maintain services during the pandemic.

Survey Appendices

– to be reviewed by Decision Makers

Appendix 1: Survey responses by specific groups:

- i) Full survey
- ii) Easy Read
- iii) Feedback from targeted groups (identified through independent Integrated Impact Assessment) from Full survey
 - a. BAME
 - b. Over 66 living with a disability
 - c. BAME living with a long term condition
 - d. People living with a disability
 - e. People with mental health problems and/or learning difficulties
 - f. Unpaid Carer
 - g. People who identify as LGBTQ+
 - h. People who live in 12 most deprived wards in Gloucestershire (Indices of Deprivation 2019)
 - i. Staff
 - j. Public and Community Partners
 - k. Postcodes from East of county
 - l. Postcodes from West of county

All appendices are available at:
www.onegloucestershire.net

Appendix 2: Other Correspondence

Appendix 3: Glossary

Next steps...

Completing the communication, engagement and consultation for the Fit for the Future programme

- **Citizens' Jury #2** - *“What are the most important findings of the public consultation that decision makers should take into account?”* - Jan 21 (x8 2hr sessions run by Citizens Juries CIC)
- **Refresh Integrated Impact Assessment** – Jan
- **Recommended solution for General Surgery** – 4th Feb
- **Consultation review period/ implementation planning** – Jan/ Feb
- **Decision Making Business Case** – Jan/ Feb
- **Decision making** - March
- **Implementation** - April onwards

Further Updates

The feedback from the consultation, the recommendations and observations of the Citizens' Jury and the final decision made by the CCG Governing Body will be published at:

www.onegloucestershire.net/yoursay

and shared on the online participation platform Get Involved in Gloucestershire at:

<https://getinvolved.glos.nhs.uk>

This page is intentionally left blank



Gloucestershire Health and Care
NHS Foundation Trust



Gloucestershire
Clinical Commissioning Group

A new Community Hospital for the Forest of Dean

Output of Consultation

Health Overview and Scrutiny Committee
12 January 2021



www.fodhealth.nhs.uk

Consultation Key Facts

- 3,400 Consultation booklets distributed, 495 requests for information following door-to-door leaflet distribution.
- 20 consultation events.
- More than 250 socially distanced contacts with members of the public & community partners and over 100 with staff.
- 10 Facebook posts with a reach of over 56,000 and 200 'engagements'.
- 8 tweets generated over 7,000 impressions and 100 engagements.
- 554 consultation surveys completed.
- Support for the proposals variable, depending on geographical location



Background to Consultation

- January 2018: Following earlier engagement and Consultation, GCCG Governing Body and GHC (formerly GCS) Board approved the proposal to develop a new CH in the Forest of Dean.
- August 2018: Approval of Citizens' Jury recommendation to build the new hospital in, or near, Cinderford.
- August 2019: Engagement to help develop ideas about the range of services in the new hospital.
- December 2019: Site for the new hospital announced.
- October – December 2020: Consultation about the range of services to be provided in the new hospital



What the consultation is about

Range of services provided at the new hospital

- Inpatient unit: 24 beds
- Urgent care – 8am – 8pm, seven days a week
- Outpatient services: a range of consultation rooms, treatment rooms, group room
- Diagnostic services – X-ray, ultrasound, endoscopy unit, access for mobile units

What the Consultation is not about:

- The decision to move to a single community hospital for the Forest of Dean.
- The location of the new hospital, which was approved following a Citizens' Jury in August 2018.



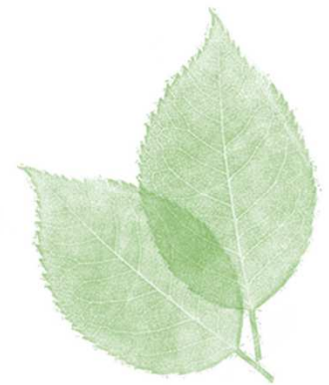
Communications

- Door to Door awareness raising leaflet
- Media releases, Media advertising and stakeholder briefings
- Printed engagement booklets and Easy Read
- ‘Your Say’ area on the FODhealth website and Get Involved in Gloucestershire online participation platform
- Social media: Facebook and Twitter
- Staff communication and engagement
- Stakeholder briefings: Primary Care Network, Forest of Dean Locality Reference Group, Community Partners, County/District Council Members, Forest of Dean MP



Covid 19: A socially distanced consultation

- NHS Information Bus Tour
- A new hospital for the Forest of Dean Surveys
- Cuppa and Chats
- Targeted activities; e.g. FODDC Members Seminar, Primary Care Network meeting, Gloucestershire Patient Participation Group Network
- Working with community partners to reach those identified in Equality Impact Assessment
- Other campaigns and correspondence



www.fodhealth.nhs.uk

Responses to the Consultation






- Feedback to the consultation was received in two main ways:
 - Survey responses – 554, including 57 Easy Read surveys
 - Other correspondence/written responses (33)
- Qualitative feedback, both positive and negative, reflects on capacity of the new hospital and access to services.
- Strength of support across all services dependent upon respondent's geographical partiality. Respondents from the south of the district (195) are less supportive than those in the central (127) and northern (8) parts of the Forest.



Inpatient care

Providing 24 beds – proposal is for single bedrooms, all with en-suite bathrooms

We think that the range of services proposed in this Consultation will meet the needs of local people. Please tell us whether you agree with this statement, for:

1. Inpatient care:			Response Percent	Response Total
1	Strongly agree		21.9%	105
2	Agree		21.9%	105
3	Disagree		19.8%	95
4	Strongly disagree		32.6%	156
5	No opinion		3.8%	18
			answered	479

Inpatient care – Qualitative feedback

A local hospital which we can get access to inpatient and outpatient services will be good and the travelling will be less than having to go out to Gloucester or Cheltenham

Need to be able to provide end of life care in a hospital - not all patients wish to die at home and no hospice inpatient facility in forest Concerned about reduction in beds. Beds currently occupied by many Glos and Chelt patients as they do not have a community hospital. This will not change.

As a staff nurse who currently works at the Dilke the resources we are having to work with, or lack of inhibits our ability to care for our inpatients to the standard at which everyone should expect from a modern NHS.

There are numerous patients from the forest area in hospitals outside the area atm, with all these new houses being built throughout the forest there is no way 24 beds will cover the 'locals' needs.

Better facilities in the single rooms would be more beneficial






I think individual rooms whilst helpful to a degree with infection control do not overall aid care or recovery.

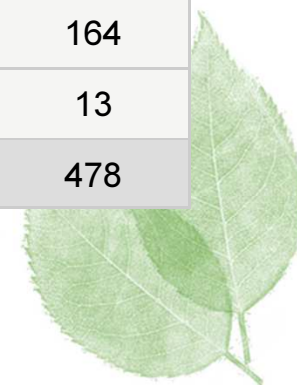


Urgent Care

8am – 8pm, 7 days a week urgent care service.

We think that the range of services proposed in this Consultation will meet the needs of local people. Please tell us whether you agree with this statement, for:

2. Urgent care:			Response Percent	Response Total
1	Strongly agree		23.4%	112
2	Agree		19.2%	92
3	Disagree		20.3%	97
4	Strongly disagree		34.3%	164
5	No opinion		2.7%	13
			answered	478



Urgent care – Qualitative feedback

Over 100 people interested in participating in the discussions about urgent care in the south of the Forest.

The distance to travel to the new hospital from Lydney and its surrounding villages is too great for "Urgent" care

With hours being 8 am to 8 pm it means for urgent care (A&E) you will have to go to Glos which can cause delay to treatment.






Urgent care - locating all MIU services in one area, namely Cinderford, severely disadvantages people who live in the south of the Forest. Access to local GPs is becoming increasingly difficult and being able to call in at a local 'urgent care centre for reassurance is most important.

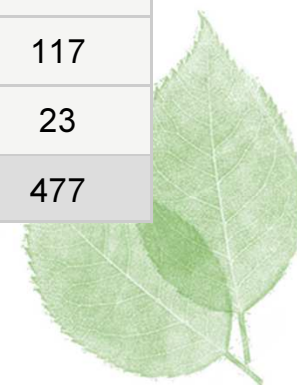


Diagnostic Services

Supporting inpatient, urgent care and outpatient services: X-ray, ultrasound, endoscopy unit, access for mobile units.

We think that the range of services proposed in this Consultation will meet the needs of local people. Please tell us whether you agree with this statement, for:

3. Diagnostic services:			Response Percent	Response Total
1	Strongly agree		24.1%	115
2	Agree		31.4%	150
3	Disagree		15.1%	72
4	Strongly disagree		24.5%	117
5	No opinion		4.8%	23
			answered	477



Diagnostic Services – Qualitative feedback

More diagnostics and minor surgical procedures would be welcome to save the trips to Gloucester or Cheltenham.

Diagnostic services in one place should not preclude x ray in Lydney which needs ready access and already has a state of the art facility funded by local people.

I welcome the additional diagnostic services over the weekend, but you need to ensure that staff are sufficiently competent to provide the right level of care






Lydney hospital is super important for people like me, I can't drive and I have 4 children. The buses to anywhere are practically impossible and I can't afford a taxi to Cinderford or Gloucester for a hospital visit. It would be detrimental to the health of myself and my children.

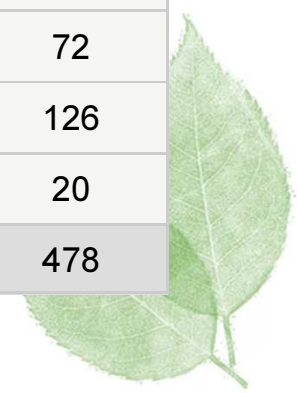


Outpatient services

A range of consultation and treatment rooms offering a similar range of services to that provided at the two current hospitals.

We think that the range of services proposed in this Consultation will meet the needs of local people. Please tell us whether you agree with this statement, for:

4. Outpatient services:			Response Percent	Response Total
1	Strongly agree		25.9%	124
2	Agree		28.5%	136
3	Disagree		15.1%	72
4	Strongly disagree		26.4%	126
5	No opinion		4.2%	20
			answered	478



Outpatient services – Qualitative feedback

I think it would be great to also consider outpatient services with the availability to connect with consultants digitally/ remotely rather than driving to Gloucester /Cheltenham.

We need as many outpatient clinics as possible because getting to Gloucester/Cheltenham by car is bad enough, (time, traffic, parking) but without a car can mean several buses and a whole day taken. Recently I have had to visit orthopaedics several times for follow up consultations. I was told neither of these clinics were available at the Dilke or Lydney.

This once in a life time opportunity to get it right – don't combine services assuming they will work it out. Space is a necessity when providing rehabilitation for complex people with multiple disabilities. Having all community services within the hospital space will enhance the holistic management of patients and the patients journey. That is why investing in multidisciplinary teams is the gold standard approach.



Impact of proposals – Positive and negative

Having access to better, more up-to-date services has to be a good thing.

I think that having a new hospital with more facilities would be more beneficial for myself and my parents as it would reduce the amount of time it would take to get to the local hospital rather than have the stress of having to get to Gloucester or Cheltenham.

I think having single rooms will be nicer for people, I think people want to die at home and not in hospital if they can so I agree with this.

We feel our needs in the south of the Forest are being ignored and that proposals to base all services in Cinderford will make them inaccessible to us as we get older.

We will be deprived of having services locally and MIU will be hugely missed. I would go to Gloucester rather than Cinderford not knowing if it was open or not or being referred on to there anyway.

I believe it would have a negative impact on my family and the general populace due to lack of access to care. Cinderford is closer to Gloucester and should not have investment where as Lydney is more accessible and further to any other hospital.

If you think any of our proposals could have a negative impact on you and/or your family, how should we try to limit this?

Three main themes:

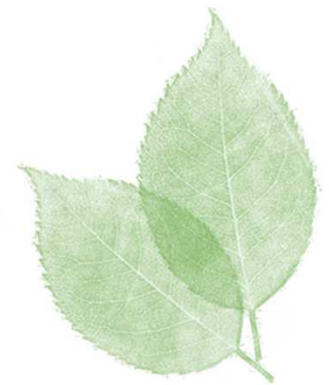
- Improvements in public transport and infrastructure;
- Retention of existing facilities, or the provision of a new facility in the south of the Forest;
- Extension of the services proposed, i.e. additional inpatient care, extended hours for urgent care



Other correspondence

Themes and feedback received via the survey were reflected in other correspondence about the Consultation:

- 33 emails and letters from members of the public, including 20 adapted versions of HOLD letter
- Response from Primary Care Network
- 5 responses from town/parish councils and Green Party
- Motion from Forest of Dean District Council



Next steps

- Consultation review period – January 2021.
- Approval of Commissioning Plan - CCG Governing Body meeting – 28 January 2021.
- Approval of Full Business Case for new Community Hospital – Gloucestershire Health and Care NHSFT Board – March 2021 (date to be confirmed).

Feedback from the consultation and response made by the CCG Governing Body/GHC Board will be published at:

www.fodhealth.nhs.uk

and shared on the online participation platform Get Involved in Gloucestershire at: <https://getinvolved.glos.nhs.uk>



www.fodhealth.nhs.uk

This page is intentionally left blank