FIT FOR THE FUTURE
Developing urgent and hospital care in Gloucestershire
FOR PUBLIC DISCUSSION

www.onegloucestershire.net @One_Glos
In Gloucestershire we are aiming high. We want you and your family to have access to the very best healthcare and to be best placed to manage your own health in partnership with us.

We recognise the value you place on local care, but you’ve also told us that you are happy to travel further to access the very best specialist care and experience the best possible outcomes.

Our expectations of healthcare, the demands on health services and the incredible progress made through science and technology have dramatically changed the environment that we are operating in; this means we need to respond differently.

Whilst these changes present some challenges, they present many more opportunities to improve the ways in which we deliver healthcare – for example, our two hospital sites, whilst once viewed as a challenge can play their full part in providing outstanding care which we set out in our vision for creating centres of excellence.

We look forward to hearing your views – these are exciting times and together we can not only rise to the challenges ahead, but seize the many opportunities to achieve our vision of a healthy county, with exceptional healthcare.

You can find out more about the need for change, by reading the FACT SHEET at www.onegloucestershire.net

One Gloucestershire NHS partners
(see listing on back cover)
What is this engagement about?

This engagement is an opportunity to talk about ways services could be organised so that you can get the very best urgent advice, support and care across the county and benefit from two thriving specialist hospitals in the future in Cheltenham and Gloucester.

It’s important to:

- Make it easier, faster and more convenient to get advice, support and services, 7 days a week
- Ensure care is co-ordinated for you from the moment you first make contact with the NHS
- Provide the majority of care in, or near, your home
- Ensure high quality services with the right care, staff skills and equipment in the right place
- Provide outstanding hospital care when you are very unwell.

Ways to get involved

There are a number of ways to get involved and share your views:

- Complete the survey in this booklet or on-line
- Come to an Information Bus Public Drop-In Event at local venues
- Participate in or observe a participation event (details on page 27)
- Follow us on Twitter - @One_Glos

All the details, including events information can be found at www.onegloucestershire.net

This engagement is an open dialogue. It is an opportunity to discuss ideas and involve people in developing potential solutions to meet future health and care needs.

Through sharing information and exchanging views, the engagement will provide a wealth of feedback to inform future planning. The public and staff will be consulted on any significant changes proposed that follow on from this engagement programme.
YOU HAVE AN IMPORTANT ROLE IN SHAPING BETTER LOCAL SERVICES

There is a lot to celebrate about the NHS in Gloucestershire, but we want to make things even better.

We can only do this by listening and understanding what matters to you about local services and what you think the best solutions are to tackle the problems we face together.

You can play your part by responding to the questions in this discussion booklet and by talking with us at events across the county (visit www.onegloucestershire.net and see local and social media for details).

Wherever you live or spend time in the county, it is important to get involved because although we are looking to make it easier for everyone to get help from the NHS, there will always be differences in how care is provided in each area across Gloucestershire, reflecting the needs of local communities and local expertise and circumstances.

As part of developing our local plans for Gloucestershire over the last few years, we have been asking staff, patients, carers, public and community partners, what matters to them about local health and care services.

Here’s a summary of what you have already told us:

- **72%** of respondents agreed: A greater amount of the budget should be spent on supporting people to take more control of their own health
- **88%** of respondents agreed: There should be a greater focus on prevention and self-care
- **95%** of respondents agreed: We should develop joined up community health and care services
- **69%** of respondents agreed: We should bring some specialist hospital services together in one place
- **70%** of respondents agreed: We should focus on caring for people with the greatest health and care needs
If you need to see a specialist, the most important thing to you would be:

- The expertise of the specialist I see: 59%
- The distance I have to travel: 8%
- The time I have to wait for an appointment: 29%
- Having as few appointments as possible: 4%

If you need urgent or emergency care services, the most important thing to you would be:

- Prompt assessment and decision making: 35%
- 7 day access to services: 33%
- Centres/services staffed by specialists: 14%
- Joined up services: 10%
- Distance to travel: 8%

Developing our local NHS Long Term Plan

In Spring 2019, we asked you what you thought about our exciting 10 year vision for the NHS.

Do you think we have set out a clear way to develop advice, support and service locally?

- Yes: 62.8%
- No: 15.2%
- Don't know: 22%

Do you think we have identified the right priorities for developing advice, support and services?

- Yes: 69.8%
- No: 13.5%
- Don't know: 16.7%

We have listened to what people have told us and this has helped us to develop some early ideas over the last few months. We now want to test these with you. We hope you will take the opportunity to get involved, comment on our ideas and share your own ideas with us.
URGENT ADVICE, ASSESSMENT AND TREATMENT SERVICES

How services are currently organised

If you need urgent advice or care for an illness or injury today, you can get help through a range of services in Gloucestershire:

- Community pharmacies – there are 113 pharmacies in the county on the high street and in supermarkets. Many are open into the evening and at weekends
- On-line and telephone advice – there are a number of national and local NHS websites and Apps and the 24/7 NHS 111 telephone service which local people also use to contact the Gloucestershire Out of Hours GP service
- GP surgeries (for illness). There are currently 74 GP practices across Gloucestershire and they are already taking positive steps to plan for the future:
  - GP surgeries are working together where you live to offer more appointments in the daytime, evening and weekends – an additional 100,000 this year across our county
  - Locally, many will be offering on-line GP consultations – with some surgeries offering the service this year
  - Other health experts are now working in, and with, local GP surgeries, such as clinical pharmacists, physiotherapists, paramedics and mental health workers. This is freeing up GP time to care for you when you really need it

*We are also going to talk with local people about the next stage of development of our proposals for the new hospital for the Forest of Dean*
You have asked us to explain the difference between urgent and emergency care.

- **Urgent care** – an illness or injury that requires urgent attention i.e. generally needs to be assessed and dealt with on the day, but is not a life threatening situation.

- **Emergency care** – is when you have a life or limb threatening illness or injury which requires rapid and intensive treatment.
WHAT WE NEED TO CONSIDER CHANGING

Improving urgent care services in local communities

Despite our best efforts, more and more of us are going to the two Emergency Departments (A&E) with minor illnesses and injuries which could be dealt with just as well elsewhere; and often closer to home.

It also means that if you have a more serious condition, you can experience delays that could be avoided if these specialist emergency care services were preserved for people who are very sick.

We think there are ways to make it easier, faster and more convenient for you to get urgent advice, support and services, 7 days a week and ensure care is co-ordinated for you from the moment you first make contact with the NHS.

It’s important you always get high quality services with the right care, staff skills and equipment in the right place.

Here is what you need to know to help us

We all want to know that good quality advice and care is available when we or a loved one needs it, that we can get a GP surgery appointment when we need one; that there are reliable community services, equipment and facilities to support our day to day health needs and the very best hospital care when we are very unwell.

We want to make sure that when you need to see a doctor or other health professional quickly, you can easily find out where to go and get an appointment.

In Gloucestershire, we currently have a range of services (see page 6). However, there are challenges with these services, particularly with urgent care (when you need medical help on the same day, but it’s not a life threatening emergency).

For example:

- You have told us that when you are unwell, you do not always know when to visit the pharmacy, call your GP surgery or when to go to hospital
- We have also heard that because there are a range of different opening times at community minor injury and illness units across the county it can be confusing to know which service to use and when
• The number of people going to community minor illness and injury units in Gloucestershire can be very low at times, particularly in the evenings. In some places that can be between 1 and 2 people an hour

• Tests such as x-rays and scans are only available when specialist staff are available, which isn’t all the time, everywhere

• Around 1 in 3 visits to the Emergency Departments (A&E) at Cheltenham and Gloucester are for injuries and problems that could be treated safely by a different NHS service

• People who choose to attend the Emergency Departments (A&E) for treatment for minor illnesses and injuries find they have to wait longer as their needs are less critical than seriously ill emergency patients.
We have been working on how to improve the way you get advice, assessment and treatment when you have urgent, but not life threatening needs. Our aim is to offer care in, or as close to your home, as possible.

We call this a **New Model of Care for Urgent & Emergency Care** – when you need us in a hurry think **ASAP**

- **Advice and Assessment**
- **Same Day**
- **A&E**
- **Personalised Care**
You would be able to get advice and your needs assessed in three ways:

- Going on-line (e.g. www.nhs.uk or the NHS App)
- Making a phone call to:
  - your GP surgery
  - *NHS 111 - for advice when your GP surgery is closed or you have a non-life threatening injury
  - 999 – if it’s a life threatening emergency

* We are introducing a new service for healthcare professionals and patients through NHS 111.

Staffed by doctors and nurses, it will give information on looking after yourself when you can, provide health advice and will be able to book an appointment with a local service at a time that is convenient for you.

We are introducing a new service for healthcare professionals and patients through NHS 111.

On an average day in Gloucestershire, around 5,000 people would need to find advice and get assessed (excluding pharmacy).

We would assess you and advise you on what to do next, including if looking after yourself with the right care advice is an option. If you need same day care, we would book you an appointment or arrange a home visit e.g. a booked appointment at your GP surgery or an urgent care service (usually within a 30 minute drive from where you live), a home visit from a Paramedic or Community Team or we may advise you to attend a Hospital Assessment Unit.

On an average day in Gloucestershire, around 4,000 people would need same day care (excluding pharmacy), of which around 3,500 would have an appointment at their GP surgery.

A&E would be there for you if you had a life and limb threatening medical emergency.

Around 100 people a day would have a life and limb threatening emergency and would need to access an Emergency Department (A&E).

Our priority would be to ensure you receive the right care for your urgent medical needs. More services would be booked on the day to reduce the need to walk in and wait. We would join up your care records and people with long term health conditions e.g. diabetes or lung disease would have care plans with more support to look after their own health.

To find out what ASAP could mean for you in the future, take a look at the ‘case studies’ at www.onegloucestershire.net

We have produced a Fact Sheet, also available at www.onegloucestershire.net, which provides more information about the need to change how urgent care services are organised locally over the next few years.
WHAT MATTERS TO YOU?

Your experiences of local services are important to us. We want to hear what you have to say about our ideas and we look forward to hearing your own.

Most people who need urgent help with an illness (not life threatening emergencies) can get the right advice and care in local pharmacies or GP surgeries, including in the evenings and weekends.

However, healthcare professionals in your area will need to consider what other same day urgent illness services (not life threatening emergencies) are needed in the community, including in Cheltenham and Gloucester.

There are big opportunities to improve the care we offer for minor injuries, making services more consistent and making it easier to get the right treatment, first time.

Your minor injury service could be delivered in a local hospital or in a GP surgery. We would also like to give you the opportunity to book an appointment in advance through NHS 111, rather than having to turn up and wait to be seen.

80% of injuries seen at our current Minor Injury and Illness Units (MIIs) do not require x-ray. This suggests that these patients could safely be seen at a centre which doesn’t have x-ray facilities.

With your help, we need to consider the best way of providing diagnostic services, like x-ray. We want to provide services as close to home as possible, but equally we want you to get an outstanding service, every time. Things to look at include availability of staff with the right skills, access to the best equipment and facilities and the money available.
All of this means, we need to consider with your help what, and from where, these services are provided – in our two big urban centres and in other places across the county.

In terms of ‘where’, we need to think about how many places and what kind of places will deliver injury and illness services.

Help us to develop local solutions that work for you.

When looking at how services could be organised we have to take into account things (criteria) such as **quality, achievability, affordability and sustainability**.

What other important things do you think we should consider when organising community urgent advice, assessment and treatment services?

Here is a reminder of some of the things we think are important:

<table>
<thead>
<tr>
<th>Encouraging healthier lifestyles</th>
<th>Self care advice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Booked same day appointments for urgent treatment</td>
<td>Access to reliable X-ray and other diagnostic tests</td>
</tr>
<tr>
<td>Online advice</td>
<td>Telephone advice</td>
</tr>
<tr>
<td>30 minutes’ drive from a centre (for the majority of people)</td>
<td>Skills and expertise of staff</td>
</tr>
<tr>
<td>Reduced waiting times</td>
<td>A&amp;E treatment only for people who need it</td>
</tr>
</tbody>
</table>

If we are going to come up with solutions to ensure that everyone can access the very best same day community urgent care advice, assessment and treatment, we need to know what matters to you and people across the area.

**To share your views, please turn to Page 23**
IMPROVING SPECIALIST HOSPITAL SERVICES AND DEVELOPING CENTRES OF EXCELLENCE

There are huge opportunities to develop services at the two large hospitals - Cheltenham General Hospital (CGH) and Gloucestershire Royal Hospital, Gloucester (GRH).

These hospitals provide more specialist care and treatment that require the skills and facilities that can only be provided in a hospital setting.

The hospitals recently received a ‘Good’ rating from the Care Quality Commission. They are well placed to deliver their vision of Best Care for Everyone. To support this, one idea is the development of the two main hospital sites into what we are calling centres of excellence.

There is an exciting opportunity to turn our two sites into thriving hospitals that each have their own distinct identity and role and are organised to ensure you receive the very best care delivering the best outcomes for your health.

How specialist hospital services are currently organised

We have already achieved some of this vision, bringing together services like stroke, children’s care and oncology (cancer care) onto one or other of the two sites.

Our experience in these areas has shown us that where we bring scarce specialist staff and equipment together, we are able to deliver care as good as the best in the country.

Where we provide services on both sites, such as emergency general surgery, this duplication is leading to challenges, for example, it means we have to spread scarce staff and other specialist resources across two sites which can impact on the care and quality of treatment you receive.

It also means that clinical staff, like doctors, need to spend time travelling between the hospital sites; time which could be better spent caring for you and working alongside fellow expert staff.
Business as usual in Cheltenham General and Gloucestershire Royal Hospitals is no longer enough to meet the challenges we face and those that are coming our way, nor will it allow us to make the most of the exciting opportunities waiting to be seized.

We are determined to rise to this challenge because, after all, rising demand and expectations come from things that are good for us all: people living longer and enjoying a higher quality of life, even in the face of personal health issues.

Healthcare is also coming on leaps and bounds through advances in medical science, innovation and technology and we want to take full advantage and be at the leading edge of these new possibilities.

So, this is an exciting time for our hospitals as we embark on an ambitious new journey that builds on our recent successes and gives us every opportunity to provide the best possible care for you, the people you care about and the next generation of patients.

We are lucky in Gloucestershire in that we have two large hospital sites that offer us a fantastic chance to introduce new ways of delivering future-fit specialist hospital care, which could be brought to life through our vision for centres of excellence.
A vision for centres of excellence

Imagine a single, ground-breaking specialist hospital for Gloucestershire, operating out of two campuses one in Cheltenham and one in Gloucester. Imagine knowing that all of the specialist care and expertise you need will be right on hand: whether you’re coming to us for planned surgery, or in an emergency situation.

To achieve this vision, we need to change the way we work and organise our services. This will not only mean we can use our scarce resources, such as specialist staff and equipment more effectively, but improve the safety, experience and health outcomes for you.

We also know that developing services in this way is more attractive to staff and are confident it would help us recruit and retain the very best.

There is an opportunity to consider a greater separation between emergency care and planned care i.e. care that is scheduled in advance, for example cancer treatment or hip replacement.

Across the UK and the world, doctors recognise that an element of separation between planned and emergency care services can improve care for everyone.

Separating facilities for emergency care

would ensure that, if you have a life or limb threatening emergency, the right facilities and staff would always be available to give you the best possible chance of survival and recovery.

Good emergency care involves a large number of different specialist teams in a hospital, and all of these experts need to be on hand to get the right treatment started, whatever time of day or night.

Getting it right would improve your chances of survival and recovery, reduce the amount of time you have to spend in hospital and sometimes even avoid a hospital stay altogether.

Separating facilities for planned care

would reduce the number of operations that get cancelled when beds or operating theatres are needed for the most unwell patients who arrive in the Emergency Department (A&E) and need urgent operations or treatment.

Working this way would also reduce the risk of hospital acquired infections, for example because you can be screened for infection in advance of your surgery date, and because you are less likely to be moved between wards to make way for emergency patients.

To meet your needs and those of everyone across Gloucestershire in the future, more services and expertise could be brought together for the benefit of the whole county.

This could include:

• Creating a centre of excellence for emergency care and a
• centre of excellence for planned care.

For example, there could be a campus on the Cheltenham General Hospital site that is a thriving hub for world-class treatment, specialising in offering innovative, effective and efficient planned care.

Meanwhile, on the Gloucestershire Royal campus, we could concentrate on delivering excellent emergency care.

Both thriving hospital sites would have their own strong identities and benefit from the very best expertise and facilities to reduce the risks to you and maximise chances of survival and good recovery. Two campuses, one vision and one team providing outstanding specialist hospital care.

Outpatient and day case appointments would continue to be available at both sites and in community hospitals, as well as 24 hour access to urgent care services.

This engagement is an opportunity to test out these ideas with you and to listen to your own ideas and views.
If we were to create *centres of excellence*, the benefits would include:

- Improving health outcomes - ensuring you are treated by the right specialist team with timely access to the support you need

- Reducing waiting times and fewer cancelled operations - leading to a more reliable and positive experience for you and your family

- Ensuring timely assessment and decision making from senior professionals when you arrive at hospital - leading to prompt diagnosis, treatment and timely recovery

- Ensuring safe and consistent staffing levels, including senior doctors – 24 hours a day – leading to safer care and shorter hospital stays

- Supporting joint working between care professionals; including links to related services, facilities and equipment to avoid the need for multiple visits and hospital stays

- Ensuring specialist staff see enough patients to maintain their skills so they can provide the very best care and outcomes for you

- Creating flagship centres for research, training and learning - attracting and keeping the best staff in Gloucestershire and ensuring you have access to ground breaking treatments.

During the last two years, we have been piloting changes to the way Trauma and Orthopaedic and Gastroenterology inpatient services are provided across our two large hospitals. Later this year, we propose to talk with you about whether these changes should become permanent.

You can read more about the ideas for *centres of excellence* and find out more about the pilot schemes in the FACT SHEET at www.onegloucestershire.net
Ideas for the next two to three years

The overall centres of excellence vision described above could take up to ten years to achieve. It is dependent on a number of ‘building blocks’ such as having the right buildings, equipment, technology, staff and money in place.

Today, we would like to hear your views on potential solutions for accident, emergency and assessment services (including A&E), general surgery and image guided surgery.

Accident, Emergency and Assessment Services (including A&E)

Alongside exploring ideas to make sure everyone can access consistent community same day urgent care and reflecting on our vision for our two acute hospital sites, we would like to involve you in exploring ideas for how we provide hospital emergency care services in the future.

How services are currently organised

Currently in Gloucestershire, there is a full Emergency Department (A&E) service at Gloucestershire Royal Hospital (GRH) open 7 days a week, 24 hours a day and at Cheltenham General Hospital (CGH) 7 days a week (8am-8pm).

Between 8pm and 8am in Cheltenham, emergency ambulances are sent to GRH’s Emergency Department. A nurse led walk in service provided by Emergency Care Practitioners is available at CGH overnight and if you have previously been seen by your GP, you can be referred directly to an assessment unit to see a doctor.

If you are assessed as not needing life-saving emergency care, paramedics also have the ability to treat you at home, or to refer you directly to this assessment unit within defined protocols (written agreements between health services).
The assessment unit in GRH is open 7 days a week, 8am – 9pm, and there is also an acute medical unit which is open 24/7. More than three quarters of patients who arrive with us as an emergency will go to an acute assessment unit and around three quarters of patients seen in these assessment units will be able to go home within 1 to 2 days.

GRH is also currently a specialist centre for related services such as stroke care, high risk maternity care, emergency care for children and is a designated Trauma Unit.

Both hospitals also provide a range of other ‘walk in’ same day urgent care services (not life threatening emergencies).

**What we need to consider changing**

As described in ASAP on pages 10 & 11, Emergency Department (A&E) services are part of a wider network of urgent care services.

We see both Cheltenham General and Gloucestershire Royal hospitals continuing to provide a range of same day, walk in, urgent care services 24 hours a day, 7 days a week for local patients.

We are committed to local access to services, where it can be delivered without compromising on the quality of care you receive, your experience, health outcomes and safety.

However, if you have a life and limb threatening illness or injury that needs a 999 response, evidence suggests you have the best chances of survival and good recovery if you receive treatment in a centre with the right staff expertise, facilities and equipment.

This engagement is an opportunity to discuss ideas and share views on the range of services provided at the two hospitals in the future.
General Surgery

Although the words ‘general surgery’ might suggest this is a catch-all for all types of surgery performed in a hospital, general surgery is actually a term we use for the surgical management of conditions relating to the abdomen, specifically the digestive system or gastrointestinal (GI) system.

In hospital care, we have specialists who look after the ‘upper’ part of the gut or the ‘lower’ part of the gut - also known as Upper GI and Lower GI (Colorectal). There are some instances of cross over between the two specialist teams.

How services are currently organised

General surgery services are predominantly based in our main (acute) hospitals – Cheltenham General (CGH) and Gloucestershire Royal (GRH). There are also some services provided in the community hospitals. All of these services are currently provided by Gloucestershire Hospitals NHS Foundation Trust. The same staff provide emergency and planned care, although the staff are separated into four teams (two teams at each site), providing either emergency or planned care at any one time. Many of the staff provide care at both hospitals.

Currently the way in which general surgery is provided across both hospital sites does not meet national standards, and is falling behind the best centres nationally. This has an impact on your care, the well-being of our staff and our ability to attract and keep the very best staff.

What we need to consider changing

Our priority is to deliver care that meets national standards and is comparable with the best centres in the country.

We are considering whether to centralise emergency general surgery on one site. If we do this, our doctors believe a greater number of patients who are unwell would be able to see the right specialist first time, 7 days a week and receive prompt senior assessment, treatment and surgery.

In simple terms, this means that those patients presenting with symptoms and conditions affecting their upper gastrointestinal tract, such as oesophagus, stomach and gall bladder will see an Upper GI specialist surgeon and those presenting with problems of the lower bowel, would access a specialist colorectal surgeon.

Rapid access to the right specialist not only leads to better care, but can significantly reduce the length of your hospital stay.

We have also been thinking about the best way to organise planned general surgery (care that can be planned in advance) in the future to improve outcomes, reduce waiting times, ensure fewer cancelled operations and improve your experience.

There are several possible variations for how we could organise our services in future. For example, we could separate day surgery from longer planned surgery, and there are variations for the ways we could arrange our services across the two sites. We look forward to hearing your ideas about how we could develop services with you. You can find out more about General Surgery by reading the FACT SHEET at www.onegloucestershire.net

Image guided interventional surgery hub

Image guided surgery is when doctors use interventional radiology to perform surgery and avoids the need for more invasive, open surgery. This reduces the risk to you and can reduce the amount of time you need to stay in hospital and your recovery time.

Interventional radiology means using real time images of the inside of the body,
captured by x-ray, MRI, ultrasound scans and CT scans to diagnose or treat problems with blood vessels.

Image guided surgery can also be used if you need emergency care, for example if you have internal bleeding as a result of an injury.

One of the benefits of image guided surgery supported by interventional radiology is that when you need an operation the surgeon does not need to make a large cut and instead can perform your surgery via a small ‘keyhole’, which means you can heal and recover more quickly.

Cardiology (heart medicine and surgery), vascular surgery (surgical sub-specialty of arteries, veins and the circulatory system) and interventional radiology use similar equipment, similarly trained support staff and have similar processes for caring for you following a procedure.

These services also regularly need specialist input from each other. In many cases these services are treating the same group of patients.

How Image guided services are currently organised

At the moment interventional radiology and cardiology services are split across both hospital sites; whilst vascular surgery is centralised on the Cheltenham General Hospital site. This does not allow us to treat as many patients using image guided surgery as we would like.

Some people who need image guided surgery have to travel to hospitals outside of the county, including some emergency situations e.g. to Bristol, Oxford and Birmingham. We would like to treat more people locally in the future.

What we need to consider changing

One idea is to bring together the staff and resources we have and establish a hub for image guided interventional surgery on one site, with vascular surgery at the same site.

This would mean investing in new technology and equipment for our hospital to deliver some of the most cutting edge services in the NHS today. It is an innovative approach that would make Gloucestershire amongst the best NHS services in the country for providing a full range of interventional radiology.

We believe it would bring the following benefits:

- Allow us to provide 24 hours a day, 7 days a week coronary angioplasty, which is a treatment for certain types of heart attack. Currently, around 250 Gloucestershire residents a year travel to Oxford or Bristol for this care
- Enable us to increase the range and number of interventional radiology procedures we offer – ensuring you are able to access the most effective treatment for both emergency and planned operations
- Reduce the likelihood of you needing to be transferred between hospital sites, or to a hospital outside of the county
- Help us to attract and keep some of the very best staff in the country
- Reduce the duplication of equipment and enable investment in new cutting edge technology in our image guided interventional radiology hub.

We have the opportunity to create one of the best district general hospital interventional radiology services in the country.

If our ideas for an image guided surgery hub are achieved, our ambition is to be a British Society of Interventional Radiology ‘Exemplar Site’ within two years. This would not only increase the chances of a better outcome for your health, but also reduce the likelihood of you needing to travel further afield for care.
Local people have told us that it is a good idea to bring some specialist services together and the most important thing when they need to see a specialist is the skills and expertise of the staff looking after them.

When looking at how we can organise services we have to take into account things such as quality, achievability, affordability and sustainability.

What other important things do you think we should consider when organising specialist hospital services? Here is a reminder of some of the things we think are important:

<table>
<thead>
<tr>
<th>Encourage Healthy Lifestyles</th>
<th>Quality of outcomes from treatment</th>
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</thead>
<tbody>
<tr>
<td>Safe care</td>
<td>Recruiting and keeping staff</td>
</tr>
<tr>
<td>Timely access to services</td>
<td>Value for money</td>
</tr>
<tr>
<td>Easy transfer between Cheltenham General and Gloucestershire Royal Hospitals sites</td>
<td>Gloucestershire recognised as amongst the best in the country</td>
</tr>
<tr>
<td>Skills and expertise of staff</td>
<td>State of the art equipment</td>
</tr>
<tr>
<td>Good patient experience</td>
<td>Reduced waiting times</td>
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</table>

If we are going to come up with good solutions to ensure that everyone can access improved specialist hospital services (including Accident, Emergency and Assessment Services, General Surgery and Image Guided Surgery) in the future, we need to know what matters to you and people across the area.

To share your views about specialist hospital services, please turn to Page 24
What matters to you? – Freepost and online Survey

Improving urgent care services in local communities

After reading pages 6-13, please share your views below:

In your view, what are the most important things to be considered in developing services to ensure everyone can access consistent urgent advice, assessment and treatment?

What do you think about our ideas for urgent advice, assessment and treatment services ASAP?

What other ideas do you have to help us? Do you have a solution to the challenge of developing services to ensure everyone can access consistent urgent advice, assessment and treatment services – if so what is it?

If the way you receive services changes, what are the most important things to be considered to reduce any negative impact on you or people you know?

Anything else you would like us to hear in relation to making sure everyone can access consistent urgent advice, assessment and treatment services?
Improving specialist hospital services and developing ‘centres of excellence’

After reading pages 14-22, please share your views below:

In your view, what are the most important things to be considered in improving specialist hospital services (Accident, Emergency and Assessment Services, General Surgery and Image Guided Interventional Surgery) and developing centres of excellence?

Do you have ideas about how to improve specialist hospital services (Accident, Emergency and Assessment Services, General Surgery and Image Guided Interventional Surgery) and developing centres of excellence – if so what are they?

If the way you receive services changes, what are the most important things to be considered to reduce any negative impact on you or people you know?

Anything else you would like us to hear from you in relation to improving specialist hospital services (Accident, Emergency and Assessment Services, General Surgery and Image Guided Interventional Surgery) and developing centres of excellence?
ABOUT YOU

Completing the “About You” section is optional, but the information you give us helps us to ensure that we hear from people with a wide range of experiences and circumstances. Your support with this is really appreciated.

What is the first part of your postcode? eg. GL1, GL20

Which age group are you?

- Under 18
- 18-25
- 26-35
- 36-45
- 46-55
- 56-65
- 66-75
- Over 75
- Prefer not to say

Are you:

- A health or social care professional
- A community partner/member of the public
- Prefer not to say

Do you consider yourself to have a disability? (Tick all that apply)

- No
- Mental health problem
- Visual Impairment
- Learning difficulties
- Hearing impairment
- Long term condition
- Physical disability
- Prefer not to say

Do you look after, or give any help or support to family members, friends, neighbours or others because of either a long term physical or mental ill health need or problems related to old age? Please do not count anything you do as part of your paid employment.

- Yes
- No
- Prefer not to say
Thank you for taking the time to tell us what matters to you. Your feedback is important to us.

Please return your completed questionnaire to the freepost address (no stamp required) by 14 October 2019.

FIT FOR THE FUTURE

FREEPOST
RRYY-KSGT-AGBR
Fit for the Future
NHS Gloucestershire Clinical Commissioning Group,
5220 Valiant Court,
Gloucester Business Park,
Brockworth, GL3 4FE
Feedback, what next?

Views on local services will continue to be welcomed throughout the period of engagement. However, it would be helpful to have specific survey feedback by Monday 14 October 2019. This feedback will then be read, put into themes and included in an Outcome of Engagement Report.

This Report will be made publicly available and will form part of evidence considered by an independent Citizens’ Jury, made up of local people. The Citizens’ Jury will be focusing on the subject of improving specialist hospital services (Accident, Emergency and Assessment Services, General Surgery and Image Guided Surgery) and developing centres of excellence.

Locality Development Workshops, attended by local people and local clinicians will consider the subject of ensuring everyone can access community ‘same day’ urgent care services.

The Citizens’ Jury and Localities recommendations will be considered by NHS Boards and you would be consulted as required about the NHS Boards conclusions about the possible changes.

Would you like to be further involved?

As well as telling us your views in the ways set out on Page 3, there are a number of other ways you could get more involved:

Locality Development Workshops: Making sure everyone can access community ‘same day’ urgent care services – Autumn 2019

If you would be interested in participating in a Locality Workshop (Cheltenham, Cotswolds, Forest of Dean, Gloucester, Stroud and Berkeley Vale, Tewkesbury) please register your interest by emailing GLCCG.participation@nhs.net and request an expression of interest form to complete. Places are available for local residents at each workshop. Deadline for expressions of interest to participate in a Locality Workshop: 6 September 2019.

Engagement Hearing – date and venue to be confirmed (see website)

The Hearing is an opportunity to present your ideas to a panel of clinicians and other health professionals who have to develop local solutions.

Hearings are independently chaired and are a public opportunity for you to share your thoughts and ideas about what you think should be taken into account, what you think is essential in arriving at the best solution, plus any new ideas or alternative proposals you may have. Hearings are live events held in public, live streamed to the internet, and recorded. They are an opportunity for good quality discussion and debate.

If you would like to attend you will need to book a timeslot; you will have a maximum of 30 minutes to put your point of view across and then there will be an opportunity to discuss what you have shared. If you want to book a timeslot (and submit information beforehand/this is optional) you can do so by sending an email to GLCCG.participation@nhs.net telling us your name, organisation or group (if applicable), daytime phone number and email address by 30 September 2019.

Citizens’ Jury – Improving specialist hospital services and developing centres of excellence – dates and venue to be confirmed (see website)

You can apply to be a member of the Citizens’ Jury between 1 and 28 October 2019 through www.citizensjuries.org

If you would be interested in observing the Citizens’ Jury (25 places are available for observers each day) please email GLCCG.participation@nhs.net by 28 October 2019 to register your interest.

Solutions Appraisal Exercise – dates and venue to be confirmed (see website)

The Appraisal Exercise will be completed by clinicians and other health professionals, together with some members of the public who have been involved in developing the proposed solutions to be appraised. If you would be interested in observing the Appraisal process (25 places are available for observers) please register your interest by emailing GLCCG.participation@nhs.net

Deadline for expressions of interest to observe the Appraisal Exercise: 28 October 2019.
One Gloucestershire is a partnership between the county’s NHS and care organisations to help keep people healthy, support active communities and ensure high quality, joined up care when needed.

The NHS partners of One Gloucestershire are:

• NHS Gloucestershire Clinical Commissioning Group (CCG)
• Primary care (GP) providers
• Gloucestershire Care Services NHS Trust
• 2gether NHS Foundation Trust
• Gloucestershire Hospitals NHS Foundation Trust
• South Western Ambulance Service NHS Foundation Trust

We are grateful to members of the Healthwatch Gloucestershire Readers Panel for contributing to the development of this discussion booklet.

For any enquiries about local participation please email: GLCCG.participation@nhs.net

Other useful information:

www.onegloucestershire.net

To discuss receiving this information in large print or Braille please ring: 0800 0151 548

To discuss receiving this information in other formats please contact:

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