Foreword

Earlier this year we welcomed publication of the national 10 year Long Term Plan for the NHS, which is consistent with how support and services are developing locally.

The Long Term Plan highlights the ambitions:

- to make sure everyone gets the best start in life;
- to deliver world class care for major health problems;
- and support people to age well.

The plan acknowledges there will be challenges along the way across the country.

In Gloucestershire, these challenges also present great opportunities to make the county a healthier place to live, increase support in local communities, improve care in our hospitals and make the most of the skills and expertise of our great staff.

From March to May 2019 One Gloucestershire Integrated Care System (ICS) partners sought to involve the public and local stakeholders by seeking their views on how we develop our NHS Long Term Plan for Gloucestershire.

Local health and care leaders invited the views of staff, community partners and the public to help shape the local version of the plan, which will be published later this year.
The subjects covered during the engagement included everything from helping people and communities to stay healthy and active to developing support and services in people’s homes, local GP surgeries, the community and specialist services in hospital.

Local people have been encouraged to share their thoughts on how they get advice, support and services – in their home, neighbourhood, community and county; discuss health priorities at different stages of life – for example during pregnancy; living with a long term health condition; experiencing mental health problems or trying to keep healthy in older age. They were also encouraged to share their views on how new technology, medical advances and working better together can transform the NHS for the better in the years to come.

Making the best use the information provided in this Report

You said – we did

This Report is intended to be used as a practical resource for ICS partners to inform the development of ICS priorities and programmes. It will be shared widely across the local health and care community and is available to all on the One Gloucestershire Integrated Care System website. ICS partners are invited to consider the feedback from engagement and indicate how it has influenced their thinking and future planning.
There are elements of feedback which will be relevant and of interest to all readers; these can be easily found in the main body of the report.

More detailed themed feedback, such as comments relating to specific areas such as ‘starting well’ or ‘Getting advice’ has also been grouped into a series of online Appendices. These Appendices include all comments collected including copies of individual submissions received in addition to the LTP survey. The grouping of the qualitative feedback in the online appendices has been undertaken by members of the One Gloucestershire Communications and Engagement Group and Healthwatch Gloucestershire.

Key word searches have been undertaken to assist this selection process. However, we acknowledge that such an exercise includes a subjective element and we recognise that others may have chosen to place items of feedback under alternative headings. To provide assurance, all qualitative written feedback from both survey respondents, comments and individual correspondence received and collected by representatives of ICS partners during the engagement period is included within this report and/or the online Appendices. The feedback collected by Healthwatch Gloucestershire (provider Evolving Communities) is identified within the report and included in full in the appendices.

*Note: Some qualitative feedback received may appear in more than one Appendix, as the feedback relates to more than one theme.

This report is produced in both print and on-line (searchable PDF) formats. The appendices are available on-line. For details of how to obtain copies in other formats please turn to the back cover of this Report.

**Equality Impact Assessment (EIA)**

Equality, diversity, Human Rights and inclusion are at the heart of delivering personal, fair and diverse health and social care services. All commissioners and providers of health and social care services have legal obligations under equality legislation to ensure that people with one or more protected characteristics are not barred from access to services and decision making processes.

An Equality Impact Analysis (EIA) of the planned engagement activities was undertaken prior to the commencement of engagement. The LTP Engagement exercise was open to all and engagement activities were designed to facilitate feedback from as wide a cross-section of the local community as possible. The EIA can be found under in the online appendices at [https://www.onegloucestershire.net/yoursay/](https://www.onegloucestershire.net/yoursay/)
Previous engagement

In 2017/18, the One Gloucestershire Sustainability Partnership undertook a period of engagement to help us to define our thinking going forward. 638 completed engagement surveys were received during the engagement period; below is a summary of the feedback received. One Gloucestershire ICS partners have built on this feedback when developing our local response to the NHS Long Term Plan.
Developing our local NHS Long Term Plan: Communications and Engagement

Our approach to communications and engagement

Our approach to communications and engagement seeks to ensure:

- A comprehensive engagement plan is in place and is fully integrated with programme milestones;
- Clinicians, staff, community partners, patients and carers and the public are fully engaged, in a systematic way, in the Long Term Plan locally and the developing One Place service model;
- Key stakeholders understand their role in shaping our plans; how they can have their say and influence potential service change through the engagement and consultation process;
- Plans are in place to demonstrate (due regard) and inform stakeholders of the impact their feedback has made;
- Communication, engagement and consultation activity, materials and messages are relevant to each target audience e.g. ‘communities of interest’ within protected characteristic groups and/or geographical areas; a flexible/dynamic response is integral to the engagement process.

Working with Healthwatch Gloucestershire

Nationally NHS England has been working with Healthwatch England, the independent national champion for people who use health and social care services, to make sure people’s views inform development of local plans. Locally, we have been working with Healthwatch Gloucestershire (provider Evolving Communities) to promote the Long Term Plan across the county. A summary of the feedback collected from the public by Healthwatch Gloucestershire is included later within the report. Healthwatch Gloucestershire’s full report is included as an appendix to this Report and can be found on the One Gloucestershire website at: https://www.onegloucestershire.net/oursay/
Developing understanding and supporting LTP engagement

A range of communications and engagement methodologies were used during the LTP Engagement period. These are detailed below:

Engagement booklet

A booklet entitled: *Developing our local NHS Long Term plan* was produced in both print and online versions. This document set out the details of the LTP and the printed version included a freepost feedback survey form.

The online booklet was available on the One Gloucestershire website: [https://www.onegloucestershire.net/yoursay/](https://www.onegloucestershire.net/yoursay/)

Approximately 7000 copies of the printed booklet were distributed widely across the county to venues such as GP practices, council offices, community centres and libraries. The Gloucestershire County Council online resource ‘Your Circle’ [https://www.yourcircle.org.uk/](https://www.yourcircle.org.uk/) was used to identify locations.

External communications

During the engagement period there has been a comprehensive/proactive system wide media schedule to increase profile of LTP themes and raise profile of LTP engagement process.

Advertisements were placed in local newspapers to promote the LTP and to advertise Public Drop-Ins. Press releases were issued to raise awareness of the LTP and to draw attention to relevant news items. Social media was used to raise awareness of the LTP and to encourage feedback. Extensive use of Twitter reached a wide number of local people. ICS partners and stakeholders such as Healthwatch Gloucestershire and community and voluntary groups promoted the LTP through their own networks.
Vox Pops

10 short Vox Pops were created with patients and clinicians speaking about what matters to them. This included Betty, who started wing walking when she was 87 to keep active, and Meg, a young woman who is passionate about support for people with mental health problems. The films are available to watch on the One Gloucestershire website: https://www.onegloucestershire.net/watch/nhs-long-term-plan-what-matters-to-you/

Facebook
During the engagement there were 15 Facebook posts, with a total reach of 15,551. There were 438 ‘engagements’ with these posts (i.e. actions such as comments, likes, or shares) of which 107 were shares.

Twitter
During the engagement there were 27 tweets, with a total of 24,217 impressions. There were 520 ‘engagements’ with these tweets (i.e. actions such as retweets, likes, or comments) of which 62 were retweets and 45 were clicks through to the One Glos website.

Advertising
Public Drop-in engagement events were advertised in local media titles (Citizen, Forest of Dean and Wye Valley Review, Wilts & Glos Standard, Stroud News & Journal)

One Gloucestershire website visits
The website analytics show that during the engagement there were 1731 views of the One Gloucestershire website, including the following engagement related page views:

- Have your Say page: 1,051 views
- Engagement Events: 139 views

Engagement activities
During the engagement period there has been a comprehensive/proactive system-wide engagement approach

- Total recorded events: 46 One Gloucestershire Partners /16 Healthwatch Gloucestershire (Total 62)
  - Information Bus (12 visits)
  - Staff engagement
  - Targeted engagement; recognising diversity in the county
  - Invited engagement; attendance at meetings of local community groups
Staff engagement:

- **Gloucestershire Hospitals NHS Foundation Trust (GHT):** issued awareness raising information to all staff, receiving 229 views. The Long Term Plan engagement booklets were distributed to all GHT hospital sites.

- **Gloucestershire Care Services NHS Trust (GCS):** published an article in Team Talk briefing, which is verbally delivered by Trust Execs at 8 sites across Gloucestershire, with a cascade to all Trust teams. The Long Term Plan has been discussed at the monthly Senior Leadership Network, by approximately 100 leaders from across GCS & 2gether Trust. The Long Term Plan engagement booklets were distributed to all of Gloucestershire community hospital sites (x7). Finally, information about the Long Term Plan has been shared across social media channels.

- **2gether NHS Foundation Trust (2GT):** Published 3 articles on the Trust intranet about the Long Term Plan and local engagement. Booklets have been distributed across all Trust sites in Gloucestershire and highlighted in the weekly staff newsletter, ByteSize. Details of the local engagement have been shared on social media channels, with Trust Twitter and Facebook pages having over 6,000 followers. An article about the Long Term Plan was published in the Trust’s Team Talk briefing, which is verbally delivered by Trust Executives at 8 sites across Gloucestershire with a cascade to all teams.

- **Gloucestershire County Council:** Circulated information about the Long Term Plan engagement to all staff working across the Commissioning Hubs for Older People; Children & Families; Disabilities; Place Hubs Management Team and Prevention, Wellbeing & Communities.

Total number of **face-to-face contacts:** One Gloucestershire Partners 945 / Healthwatch Gloucestershire 500+ (Total 1445+)

Total number of **completed surveys:** One Gloucestershire Partners 204 / Healthwatch Gloucestershire general survey 215, conditions specific survey 26 (Total 445)

Total number of comments collected: 2802 One Gloucestershire Partners survey; 565 One Gloucestershire Partners comments cards; 215 Healthwatch Gloucestershire general/conditions survey; 360 other Healthwatch Gloucestershire comments.

Total number of 3 individual written responses: (individual responses can be accessed in the online appendices and print copies on request): 1 response from 38 Degrees Gloucestershire and 2 responses from local residents (1 relating to greater awareness of services for people with Learning Disabilities, and 1 relating to integration of physical and mental health, an online course). These responses (redacted to remove personally identifiable information) can be found in full as an Appendix to this Report on the One Gloucestershire website: [https://www.onegloucestershire.net/yoursay/](https://www.onegloucestershire.net/yoursay/)
Developing our local NHS Long Term Plan: Engaging stakeholders, the public and staff

Survey

The public and local stakeholders were invited to say ‘what matters’ to them through an online and printed survey. The following information regarding completion of the survey was provided in the engagement booklet.

The questions that follow reflect the information in our engagement booklet:

Developing our local NHS Long Term Plan. In each question we have suggested some prompts to get you thinking. These are only suggestions. It’s important that we hear about what matters to you. You may not have views on all the areas below. That’s okay, just tell us about the ones you are interested in. When you have done that, please tell us a bit “About You”. 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. The information you provide will be treated in the strictest confidence, stored securely and only used for the purposes of developing our plans and services. Further information is available at: www.gloucestershireccg.nhs.uk/about-us/privacy-statement/
**Engagement events**

The public and local stakeholders were invited to say ‘what matters’ to them and to attend, or drop in to a range of LTP related events. These events were held on different days of the week and at different times of the day. These events provided an opportunity to hear presentations and to discuss the content of the LTP during Question and Answer sessions and workshops. Several groups were able to take part in the engagement via targeted events e.g. Young Adult Carers, GP Patient Participation Groups (PPGs). These events provided an opportunity for focussed debate targeted to meet the interests and needs of participants.

To reach the wider local population, Public Drop-Ins were held across the county. These took place either on the GCCG Information Bus at venues such as supermarkets and sports venues, or as static displays at community events such as Nailsworth Town Meeting. Visitors were able to take away information or ask questions about the LTP. We also joined a number of community discussions about the draft Health and Wellbeing Strategy.

On several occasions, the Information Bus STP Drop-Ins were enhanced by combining the activity with promotion of Your Circle, the county’s directory to help individuals find their way around care and support and connect with people, places and activities in Gloucestershire. Staff and Foundation Trust Members briefings were circulated.

**Engagement activity timeline**

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Locality</th>
<th>Type of event</th>
<th>Group targeted</th>
<th>Recorded participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>21/02</td>
<td>GL3 Community Hub, Churchdown, GL3 1HX</td>
<td>Tewkesbury</td>
<td>Regular Group Meeting</td>
<td>Know your Patch (community stakeholders)</td>
<td>18</td>
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<td>26/02</td>
<td>Friendship Café</td>
<td>Gloucester</td>
<td>Health &amp; Wellbeing Strategy Meeting</td>
<td>Asian Elders Women’s Group</td>
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<td>26/02</td>
<td>Sandford Education Centre</td>
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<td>Facilitated discussion</td>
<td>Groups rep Protected Characteristics</td>
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<td>Forest of Dean</td>
<td>Regular Group Meeting</td>
<td>Forest Health Forum</td>
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<tr>
<td>Date</td>
<td>Location</td>
<td>Locality</td>
<td>Type of event</td>
<td>Group targeted</td>
<td>Recorded participants</td>
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<td>Tewkesbury Methodist Church</td>
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<td>Regular Group Meeting</td>
<td>Churches together</td>
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<td>Bedford Building BE104, Park Campus, Cheltenham</td>
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<td>Health &amp; Wellbeing Strategy Meeting</td>
<td>LGBT Partnership &amp; Healthwatch Glos</td>
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<td>Newent Surgery</td>
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<td>TNS Reference Group members</td>
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<td>Cheltenham Borough Council Offices</td>
<td>Cheltenham</td>
<td>Facilitated discussion</td>
<td>Borough Council members - Seminar</td>
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<td>The Real China, Cheltenham</td>
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<td>Chinese Point of Contact Information Grp</td>
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<td>21/03</td>
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<td>Social Science Students</td>
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<td>23/03</td>
<td>Cirencester, Tesco</td>
<td>Cotswolds (S)</td>
<td>Information Bus</td>
<td>Public</td>
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<td>25/03</td>
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<td>District Council members.</td>
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<td>Regular Group Meeting</td>
<td>Cancer Patient Reference Group</td>
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<td>Westbury Village Hall</td>
<td>Forest of Dean</td>
<td>Regular Group Meeting</td>
<td>Know your Patch (community stakeholders)</td>
<td>39</td>
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<td>26/03</td>
<td>Stroud, Tesco</td>
<td>Stroud &amp; Berkeley Vale (BV)</td>
<td>Information Bus</td>
<td>Public</td>
<td>59</td>
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<td>Cinderford, Co-op</td>
<td>Forest of Dean</td>
<td>Information Bus</td>
<td>Public</td>
<td>34</td>
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<td>Information Bus</td>
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<td>Facilitated discussion</td>
<td>Key stakeholders</td>
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<td>Facilitated discussion</td>
<td>Key stakeholders</td>
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<td>Newerne Street Car Park, Lydney</td>
<td>Forest of Dean</td>
<td>Information Bus</td>
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<td>Shire Hall</td>
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<td>Regular meeting</td>
<td>Housing Associations</td>
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<td>Shire Hall</td>
<td>Countywide</td>
<td>Partner Meeting</td>
<td>Project Board Housing with Care Programme</td>
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<td>Forest High</td>
<td>Forest of Dean</td>
<td>Regular Group Meeting</td>
<td>Schools</td>
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<td>Dowtys Sports and Social Club</td>
<td>Countywide</td>
<td>Regular Group Meeting</td>
<td>Mental Health &amp; Wellbeing Stakeholder Event</td>
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<td>Support Group Meeting Mental Health Carers</td>
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<tr>
<td>Date</td>
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<td>04/04</td>
<td>Churchdown Community Centre</td>
<td>Gloucester</td>
<td>Regular Group Meeting</td>
<td>Schools</td>
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<td>09/04</td>
<td>Unit 26, Daniels Industrial Estate, Bath Road, Stroud, GL5 3TJ</td>
<td>Stroud &amp; BV</td>
<td>Health &amp; Wellbeing Strategy Meeting</td>
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<td>Regular Group Meeting</td>
<td>Young people, Carers</td>
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<td>Tewkesbury</td>
<td>Information Bus</td>
<td>Public</td>
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<td>Tewkesbury</td>
<td>Councillors Meeting</td>
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<td>Cotswolds (S)</td>
<td>Information Bus</td>
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<td>23</td>
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<td>27/04</td>
<td>Nailsworth Annual Town Meeting</td>
<td>Stroud &amp; BV</td>
<td>Market Place</td>
<td>Public</td>
<td>21</td>
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<td>27/04</td>
<td>Gloucester Cross</td>
<td>Gloucester</td>
<td>Information Bus</td>
<td>Public</td>
<td>104</td>
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<tr>
<td>02/05</td>
<td>Parsonage St, Dursley</td>
<td>Stroud &amp; BV</td>
<td>Information Bus</td>
<td>Public</td>
<td>48</td>
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<td>Walls Club, Gloucester</td>
<td>Countywide</td>
<td>Regular Group Meeting</td>
<td>Personality Disorder Group</td>
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<td>Walls Club, Gloucester</td>
<td>Countywide</td>
<td>Market Place</td>
<td>Stakeholder &amp; Staff meeting (re 2GT/GCS Merger)</td>
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<td>Information Bus</td>
<td>Public</td>
<td>21</td>
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<td>14/05</td>
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<td>Countywide</td>
<td>Regular Group Meeting</td>
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<td>15/05</td>
<td>Matson Baptist Church</td>
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<td>Regular Group Meeting</td>
<td>Community Friendship Group (Elderly)</td>
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<td>17/05</td>
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<td>Countywide</td>
<td>Patient Participation Group (PPG) Network</td>
<td>PPG representatives</td>
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<td>23/05</td>
<td>Tewkesbury Borough Council</td>
<td>Tewkesbury</td>
<td>Regular Group Meeting</td>
<td>Partners Forum</td>
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</tbody>
</table>

**46 events across Gloucestershire** 945

*Throughout the engagement period, updates have been provided to the Health Overview and Scrutiny Committee (HOSC).*
Healthwatch Gloucestershire Campervan Tour

Extract from draft Healthwatch Gloucestershire Report (June 2019)
Healthwatch Gloucestershire wanted to make sure that they reached as many people as possible across the county to collect their views and promote the two online surveys. They did this by going ‘on tour’ in a converted Volkswagen Campervan called Milo. The ‘Campervan and Comments’ tour took place between the 23rd and the 28th of March 2019. During this time Healthwatch Gloucestershire staff and volunteers visited 13 different venues across the county from local markets and GP surgeries to community and district hospitals and supermarkets.

Listed below are all of the venues and tour dates. As well as pointing people towards the online surveys, the team created picture boards with key questions from the survey where people were able to stick coloured dots by the issue that was most important to them. Hard copies of the surveys were also available. Local people also shared their experiences of individual health and care services and any concerns they had about these services. Altogether, the team collected over 360 pieces of general feedback across the duration of the tour. In addition, 150 people added their dots to the picture board.

Tour Dates

- **Saturday 23 March:** Stroud Farmers Market – 8am-2pm
- **Sunday 24 March:** Gloucester Car Boot Sale, Hempsted Meadows – 9am-12pm
- **Monday 25 March:** 3Shires Garden Centre, Newent – 9am-12pm Clock Tower, Coleford – 1pm-5pm
- **Tuesday 26 March:** Gloucester Cathedral Grounds – 9am-12pm Tesco Supermarket, Brockworth – 1pm-4pm
- **Wednesday 27 March:** Fairford Market – 8am-12pm ~ Information Stand at Tesco Supermarket, Cirencester – 10am-12pm North Cotswold Community Hospital, Moreton in Marsh – 1pm-4pm ~ Information Stand at Budgens Supermarket, Moreton in Marsh – 1pm-3pm
- **Thursday 28 March:** Tewkesbury Community Hospital – 9am-12pm ~ Information Stand at Morrisons Supermarket, Tewkesbury – 10am-12pm Springbank Community Resource Centre, Cheltenham – 1pm-4pm
Demographic information

Demographic information relating to protected characteristics\(^1\) was collected from respondents to the online and print surveys. Completion of this information was optional.

The demographic results represent a sample of responses from some protected characteristic groups and local residents and localities.

<table>
<thead>
<tr>
<th>What is the first part of your postcode?</th>
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<tbody>
<tr>
<td>Cheltenham</td>
<td>24.6%</td>
</tr>
<tr>
<td>Cotswolds</td>
<td>21.8%</td>
</tr>
<tr>
<td>Forest of Dean</td>
<td>9.9%</td>
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<tr>
<td>Gloucester</td>
<td>18.3%</td>
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<tr>
<td>Stroud &amp; Berkeley Vale</td>
<td>12.0%</td>
</tr>
<tr>
<td>Tewkesbury</td>
<td>11.3%</td>
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<tr>
<td>Other</td>
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<table>
<thead>
<tr>
<th>Are you:</th>
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</thead>
<tbody>
<tr>
<td>A health or social care professional</td>
<td>22.9%</td>
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<tr>
<td>A community partner/member of the public</td>
<td>64.0%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>13.1%</td>
</tr>
</tbody>
</table>

\(^1\)https://www.equalityhumanrights.com/en/equality-act/protected-characteristics
Which age group are you?

- Under 18: 0%
- 18-25: 3.1%
- 26-35: 5.0%
- 36-45: 13.8%
- 46-55: 16.9%
- 56-65: 24.4%
- 66-75: 21.3%
- Over 75: 14.4%
- Prefer not to say: 1.3%

Do you consider yourself to have a disability?

- No: 58.5%
- Mental health problem: 9.4%
- Visual Impairment: 5.7%
- Learning difficulties: 2.5%
- Hearing impairment: 10.1%
- Long term condition: 25.8%
- Physical disability: 11.3%
- Prefer not to say: 4.0%

Do you look after, help or support anyone (not paid employment)?

- Yes: 43.3%
- No: 50.0%
- Prefer not to say: 7.0%
Which best describes your ethnicity?

- White British: 89.8%
- White Other: 2.6%
- Asian or Asian British: 0.0%
- Black or Black British: 0.6%
- Chinese: 0.6%
- Mixed: 1.3%
- Prefer not to say: 5.0%

Which of the following best describes your religion or belief?

- No religion: 29.8%
- Buddhist: 0.6%
- Christian: 57.0%
- Hindu: 0.0%
- Jewish: 0.0%
- Muslim: 0.6%
- Sikh: 0.0%
- Other: 1.3%
- Prefer not to say: 10.8%

Are you:

- Male: 31.9%
- Female: 63.1%
- Transgender: 0.0%
- Prefer not to say: 5.1%
Do you identify with your gender as registered at birth?

- Yes: 95.6%
- No: 0.0%
- Prefer not to say: 4.4%

Which best describes how you think of yourself?

- Heterosexual or straight: 87.1%
- Gay or lesbian: 1.3%
- Bisexual: 2.6%
- Other: 0.0%
- Prefer not to say: 9.0%

Are you currently pregnant or have given birth in the last year?

- Yes: 0.6%
- No: 65.8%
- Not applicable: 30.0%
- Prefer not to say: 3.8%
Targeted engagement

Demographic information about individuals participating in the engagement in other ways e.g. attending an event, or visiting a public drop-in, is currently not routinely collected. This is an area for future consideration (see Evaluation: Considerations and learning points for future engagement and communication activities).

To achieve broader representative engagement with the public, targeted engagement was undertaken with local groups whose members share protected characteristics. Workshops, presentations and discussions groups were facilitated together with One Gloucestershire partners (see Engagement activity timeline).

In addition to One Gloucestershire partner led engagement activities, and the Healthwatch Gloucestershire Campervan Tour, **Healthwatch Gloucestershire** also held three listening events which targeted seldom heard community groups:

- Chinese community (13 participants)
- LGBT+ community (16 participants)
- Young people classed as Not in Employment, Education or Training (NEET): Gloucestershire HITZ (7 participants)
Extract from Healthwatch Gloucestershire Report (June 2019)

In particular, we wanted to explore what, if any, impact being part of one of these communities had on people’s ability to access good quality healthcare. Therefore, they visited a local Chinese group, spoke with members of the LGBT+ Community and visited HITZ Gloucestershire. HITZ is a national initiative and ‘uses rugby’s core values of teamwork, respect, enjoyment, discipline and sportsmanship to get young people not in education, training or employment (NEET) back into education, training, apprenticeships and/or employment’ (https://www.gloucesterrugby.co.uk/community/gloucester-rugby-community-charity/hitz/). It is delivered nationally by England’s 12 professional rugby clubs. In Gloucestershire, Gloucester Rugby Community Charity are delivering this service. In total, the Healthwatch Gloucestershire Team and volunteers spoke with 48 people across the three groups.

The main themes coming out of the groups were:

- People want quicker access to and longer, better quality interactions with a named GP.
- In order to help them to stay healthy, people would like easier and cheaper access to exercise classes, gyms and cycleways.
- People would like to see better quality, accessible and easy to read information about specific conditions and how they can live healthier lives (e.g. dietary information).
- Those with dementia and other complex and long-term conditions would like to have access to a Care Navigator to help them to navigate the care system and provide them with practical advice.
- Carers would like better support to enable them to carry out their caring role. In particular, community-based support.
- Consideration needs to be given to those for whom English is not their first language. In particular, instructions on medication packets to be translated, translation services that are consistent and meet the needs of the individual e.g. using the correct dialects and dental/GP registration forms made available in different languages or translators provided to assist in completion.
- The needs of the LGBT+ community should be considered when local and national plans are being put together. In particular, mental health issues and support around transition for the trans community.

Quantitative and Qualitative feedback

This section sets out feedback from the LTP engagement. Attendees at each event were provided with information about the development of the local NHS Long Term Plan and invited to tell us: “What matters to you...” when considering the things you have read about in the NHS Long Term Plan, and most importantly “Why” do they matter.
At the launch of the engagement in March 2019, One Gloucestershire partners said:

We want to hear from as many people, groups and communities as possible to ensure the local plans reflect the needs of our population. We want to hear about what works, what doesn’t and how people think local health services should be improved. No matter how big or small the issue, we want to hear about it.

The LTP engagement survey included two questions which asked respondents to provide a ‘yes’, ‘no’, don’t know’ answer (quantitative responses collected), with space given for respondents to make further comments. The remaining survey questions invited respondents to tell us (free text) about ‘what matters to them’ and ‘why’ (qualitative responses collected) in two parts: Part 1 ‘The Life Course’ and Part 2 ‘The Place’.

**Summary of feedback received**

Many of comments received were collected at face-to-face engagement events.
A total of **2802** comments were received through One Gloucestershire survey.

A total of **565** comments were collected at One Gloucestershire face-to-face engagement events (public drop ins, presentations, workshop discussions).

A total of **360** pieces of feedback were received through the Healthwatch Gloucestershire campervan tour. In addition **150** people contributed to the Healthwatch Gloucestershire picture board.

**Quantitative feedback**

**Our priorities and approach**

<table>
<thead>
<tr>
<th>Do you think we have identified the right priorities for developing advice, support and services?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td><strong>No</strong></td>
</tr>
<tr>
<td><strong>Don’t know</strong></td>
</tr>
</tbody>
</table>
What other priorities matter to you?

A total of 153 comments were received in this section: The main themes included:

- Timely access to appointments – both GP and hospital
- Use of technology
- Mental health (regarding Children and Young People, Learning Disability, Carers and Funding)
- Navigating information and services
- Local provision of services

Local provision of specialist services... to save patients having to travel to centres... for treatment. As the population ages this will become difficult for them to do

Knowing where to go to get what I need is a little confusing... clear communications, who offers what in which place

Being seen in a timely manner by knowledgeable, kind staff. Being treated as an individual.

Having timely access to GP appointments...

...we are now in the age of the internet and the NHS is far too slow in taking advantage of the opportunities to be gained from this

...it remains difficult to do things yourself as there is so many places you have to navigate to find things out

Ensure carers are supported for their mental and physical wellbeing and not become isolated due to the caring they are doing...

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

<table>
<thead>
<tr>
<th>Answer</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>62.8%</td>
</tr>
<tr>
<td>No</td>
<td>15.2%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>22.0%</td>
</tr>
</tbody>
</table>
What else should we consider?

A total of 105 comments were received in this section. The main themes included:

- Prevention
- Travel and transport
- Use of technology, including greater use of social media
- Local provision of services.

…everything starts with prevention...

Good decisions are made on the basis of good well balanced information (being informed) feeling empowered or enabled to make decisions for themselves, and understanding the impact of daily decisions (lifestyle factors).

How will people get to hospital – transport links

Community care is vital. Specialist centres are essential for the big things, smaller, less serious matter should be dealt with locally

More proactive preventative stuff – what there is, is very good.
Qualitative feedback

The qualitative feedback from completed surveys, comment cards and correspondence has been grouped into a series of themes under the main headings: The Life Course and The Place. All comments are included in the appendices to this report.

The Life Course – Starting Well

A total of 318 comments were received about starting well. The main themes were:

- Children and Young People’s mental health (and mental health more broadly);
- Maternity/Family support – parenting skills;
- Healthy lifestyles.

The Life Course – Living Well

A total of 309 comments were received about living well. The main themes were:

- Healthy lifestyles – wide range of comments relating to information/support to stay healthy and self-manage;
- Personalisation – choice and control.

The Life Course – Ageing Well

Young people’s mental health needs a lot more investment as the services are just not fast enough to access and Young people are not getting what they need we all need to take better control of our health and wellbeing so that the NHS becomes a prevention service

Retaining active lifestyle and independence as long as possible Early identification of frailty, support for the frail and vulnerable in our community. Also early planning for end of life care and support for people to die in comfort in a place of their choice.

….was diagnosed at aged 33 and do not feel that I was given adequate information and the support to self-manage my condition and feel that I am lost in between secondary and Primary care, with no community care and no help to self-manage.

To be in control when living with long term conditions you need very easy access to information and help when needed

Promoting healthy life styles in school age children, with focus on both physical and mental well being.

I think it is important to support new mums. As we move to a society where it is more common for Grandparents to work (women will be moving to a retirement age of 67 in the very near future) there is less family support available and first time mums no longer get the same support

Having the right support and being able to access it.
A total of 283 comments were received about ageing well. The main themes were:

- Help to maintain independence – support to self-care and remain independent for as long as possible;
- Be connected to community, active locally;
- End of life planning, a “good” death.

...I want to grow older safe in the knowledge that I will be treated with dignity and respect. I want to stay independent for as long as I can. Yet I am fearful of growing old as were I to fall ill and not be able to look after myself I have no family to rely upon...

As a carer I need to keep well physically and mentally despite aging myself...

...to maintain independence by increasing community therapy and ensuring people are educated about their care needs and what is available...

I don't want to become isolated when I'm older.

Good choices at end of life

The Place – Getting advice

A total of 271 comments were received about getting advice. The main themes were:

- Good quality advice and support available; easily accessible (both in terms of information in a variety of formats and “local”) and in a timely way;
- Need information/improved promotion of existing services;
- Best use of technology.

What matters to me is being able to access care easily and simply without having to navigate and interpret corporate or clinical jargon.

Good online advice (NHS.uk) prevents need to seek help for minor issues.

I am most likely to access information online. A lot of people have internet-capable phones and the ability to access the internet, but may be lacking in being able to sort good information from bad.

Being able to get advice conveniently and quickly from a trusted source.

having access to local support, and facilities available in rural areas, not only in big towns.
The Place – Getting support from your local GP practice

A total of 289 comments were received about getting support from your local GP practice. The main themes were:

- Access – wait times for appointments are too long, more extended hours, access by telephone is poor;
- Continuity of care - seeing the right professional (not always GP);
- Make best use of technology e.g. online booking, email communication.

The Place – Getting support and services in your community

A total of 246 comments were received about getting support and services in your community. The main themes were:

- Good access; appropriate support available in a timely manner;
- Local support; care at home if possible;
- Mental health; more support available.

Use of IT, Skype etc, to book appointments, get results, request drugs and get quick advice on treatments when we are not well. Use other staff and not just doctors to assist patients. Most of us don’t need to see a doctor there should be other professional we could see.

I want quick health advice when I need it, I don’t want to have to hang on the phone waiting for it to be answered and not able to get an appointment on the day that suits me.

Speaking to someone that day if I feel it is urgent - local GP practice runs triage phone back service which I feel is good compromise as you feel you have talked it through with a professional and an appointment can be offered if appropriate.

I would like health services to be as simple and accessible as managing banking or other consumer transactions...

...The 8.00am mad scramble for appointments is madness...

Improve our lives by having services available quicker but this needs to be in line with self-management and prevention so that we do not over use them.

Having services either close to home or where it is easy to access by public transport. This is particularly important in the rural areas where bus services are few and far between

That everyone can access adequate mental health resources

Timely support for mental health issues, understanding the range of community services available...

That support is accessible locally particularly for vulnerable groups
The Place – Getting urgent advice and treatment

A total of 240 comments were received about getting urgent advice and treatment. The main themes were:

- 24 hour a day, 7 days a week access to urgent care services;
- Walk in services in local areas;
- Access to a range of services in a range of locations.

Reducing long waits for urgent treatment and being more efficient (avoiding duplication)

When people are ill and frightened they feel vulnerable and may be less coherent, kindness and courtesy from an advisor can only help

Knowing which service to access appropriately and having a range of different options.

Easier access to advice and support would take pressure off emergency services and also mean less time spent for patients waiting to access care

We’re often told not to go to A&E, but the reality is that our local services can’t provide a reliable service - I have visited Minor Injury Units, only to end up going to A&E because there was no X-ray, doctor, etc - but the problem wasn’t life threatening

The Place – Getting support in hospital if you need specialist care

A total of 233 comments were received about getting support in hospital if you need specialist care. The main themes were:

- Quality of staff – expertise and compassion;
- Discharge planning and after care;
- Choice and timeliness of appointments;
- Reduce cancellations of appointments and operations.

...What mattered to me was being kept updated, being able to choose, and confidence in the experts around me.

Getting an appointment quickly and at a time that I want without impacting adversely on my working day.

Better service at home after hospital

Seeing patients timely and having enough appointment time

Good communication/ information regarding procedures and aftercare. Expert advice available easily if problems post procedure...
The Place – Supporting better care: best use of resources

A total of 243 comments were received about supporting better care through best use of NHS resources. The main themes were:

- Reduce waste and duplication;
- Best use of technology;
- Support workforce; staff training.

So much waste in duplicating online information, creating additional websites and apps with the same information on them. Would be good to have one clear route into the NHS (whether GP, mental health, hospital or community care) using technology you're familiar with, being communicated with simply, clearly and without jargon.

Staff in all areas, training, training, training, so important and often due to pressure of workload side-lined.

Reduce waste. There is no follow up when equipment (crutches / frames etc are borrowed and not returned

Technology to allow staff to work together. Email instead of paper copies of reports to reduce waste
Evaluation and next steps

Considerations and learning points for future engagement and communication activities

One Gloucestershire has previously used a Sustainability and Transformation Partnership Checklist for governance and engagement. Although One Gloucestershire now operates as an Integrated Care System (ICS), this Checklist remains relevant. It sets out a series of questions which can be asked locally to support effective discussion and decision-making. The questions cover: governance, scrutiny and accountability; system-wide control totals; public engagement; and partnerships and collaborative working. The checklist for engagement asks the following:

- How does the communication strategy support meaningful engagement with patients, carers, the public and their representatives? Is the substance of our plan being communicated in a way that is understandable and meaningful to different populations?
- How has the engagement plan made the case for ‘public value’? Do plans clearly communicate what changes mean for patient experience and outcomes and help explain how efficiency savings will be made and the impact on patients?
- How are plans being co-produced with patients and the public? What more can be done to involve patients in developing the plans and supporting the delivery of proposals?
- Does our engagement plan clearly link to existing plans and demonstrate how this plan is a continuation of plans already being delivered within our footprint? Or does the plan contain new ideas that go beyond existing plans?


We have applied the following evaluation framework.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Definition</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inputs</td>
<td>Engagement, experience and inclusion inputs include the time, skills and money that are invested</td>
<td>62 engagement events were held across the county. 7000 information booklets were produced and</td>
</tr>
<tr>
<td>Outputs</td>
<td>Engagement, experience and inclusion outputs are the activities we undertake and the resources that we create.</td>
<td>Some feedback received related specifically to the LTP communications and engagement process itself. Feedback received was a mixture of positive and negative comments. An example would be the use of QR codes on future publications to allow people to link quickly to website materials.</td>
</tr>
<tr>
<td>Reach</td>
<td>Reach has two main elements:</td>
<td>Total face-to-face contacts was approx. 1445, with 445 surveys complete. Social media reached over 15,500 with 24,217 Twitter impressions. We do not routinely collect demographic information about individuals participating in events/drop-ins etc. Demographic information is collected through our survey, but these questions are optional and consequently not always completed. However, the demography of the county is considered during engagement planning and events/meetings targeted to reach a wide range of communities of interest.</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Outcomes are the way that audiences respond to the engagement, experience and inclusion activity – completed event evaluation forms, independent observation reports</td>
<td>Working with Healthwatch Gloucestershire has provided a degree of independent scrutiny to our engagement processes. It has provided an alternative feedback mechanism for people, in addition to the One Gloucestershire offer.</td>
</tr>
<tr>
<td>Processes</td>
<td>Processes are the way we work to plan, develop and deliver our engagement, experience and inclusion activities. They include our approaches to quality assurance and following good practice.</td>
<td>Working with ICS Partners and Healthwatch Gloucestershire we have been able to plan and deliver a range of engagement activities.</td>
</tr>
</tbody>
</table>
ACT

The following actions will be undertaken to support future communications and engagement associated with the LTP and One Place service development:

- Further consideration given to the collection of demographic information relating to participants at public engagement events.
- In partnership with Inclusion Gloucestershire, Healthwatch Gloucestershire and ICS Partners we will endeavour to actively seek the views of people who are representative of the protected characteristics.
- We will continue to test our engagement materials with lay representatives to ensure that they are written in plain language which is easily accessible and understandable. Wherever possible we will ask open questions which will facilitate, but not “lead”, responses to engagement and consultation.
- We will continually review our approach to engagement to ensure that it reflects good practice, working with The Consultation Institute to quality assure our processes.

Next Steps: Future communications, engagement and consultation for the NHS Long Term Plan and One Place

A period of further engagement is planned over the summer 2019 to involve local people in the development of potential solutions to inform the development of urgent and hospital care in Gloucestershire.

Any proposals for ‘significant’ change will be brought back to the public for formal consultation. The public, patients and carers, staff, community partners and elected representatives will have the opportunity to scrutinise new proposals.

Ultimately it is the responsibility of One Gloucestershire ICS partners together to pay attention to the feedback received during the LTP Engagement and to any subsequent public consultation. They will use this information to support decision-making about how to transform and sustain Gloucestershire’s health and care system.

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2 There is no national definition of ‘significant variation’ set out in the legal duties relating to engagement and consultation. Gloucestershire ICS partners are working with the GCC Health Overview and Scrutiny Committee (HOSC) and Healthwatch Gloucestershire to agree a Memorandum of Understanding regarding the local definition of key terms.
Copies of this report

This report is available on the One Gloucestershire website at: https://www.onegloucestershire.net/yoursay/

Print copies of the report can be obtained from the Engagement and Experience Team by calling Freephone 0800 0151 548 or email: GLCCG.participation@nhs.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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