

One Gloucestershire
Transforming Care, Transforming Communities

FIT FOR THE FUTURE

NHS

Output of Engagement

Becky Parish - Associate Director, Engagement and Inclusion
NHS Gloucestershire Clinical Commissioning Group (CCG)

Caroline Smith - Senior Manager Engagement & Inclusion
NHS Gloucestershire Clinical Commissioning Group (CCG)

Key Findings

A comprehensive Output of Engagement Report can be found at:
www.onegloucestershire.net

Date: January 2020

What was the engagement about and what did NHS partners of One Gloucestershire ask the public and staff to help with?

The engagement was an opportunity to talk about :

- the ways services could be organised to get the best urgent advice, support and care across Gloucestershire
- The benefits of having two thriving specialist hospitals in future in Cheltenham and Gloucester

NHS partners of One Gloucestershire said 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
- provide most care in or near home
- ensure high quality services in the right place: right staff, skills and equipment
- have outstanding hospital care when you are unwell

What was the engagement about and what did NHS partners of One Gloucestershire ask the public and staff to help with?

- **to help to develop ideas** to support easier, faster and more convenient ways to get urgent same day advice and care wherever people live in Gloucestershire
- **what's important to them** in getting urgent (not life threatening) same day advice and care
- **to say what they think about** the ideas for a 'centres of excellence' approach to providing specialist services at the two large hospital sites in the county
- **to help with developing potential solutions** for some specialist services: Emergency and Acute Medicine, General Surgery and Image Guided Interventional Surgery
- **to consider** the new hospital for the Forest of Dean



What did NHS partners of One Gloucestershire do during the public engagement and how many people got involved?

A comprehensive programme of communications and engagement activities took place during the Engagement, offering participants a range of choices of how to get involved:

- **18,872*** views of the One Gloucestershire website, including **4,755*** views of the *Fit for the Future* engagement page
- **1,800*** visits to the Forest of Dean website
- **21 Facebook** posts (non- paid for activity), with a total reach of 34,406
- **Facebook** advert that linked to the engagement section on the One Gloucestershire website, achieved a reach of **57,440** with **82** shares
- **49 tweets**, with a total of 42,625 impressions
- **7,000** Hardcopy engagement **booklets** distributed to local venues such as libraries, GP practices, community centres
- **Staff** communication and engagement
- **Media** advertising



(* individuals may have visited more than one page and more than once)

What did NHS partners of One Gloucestershire do during the public engagement and how many people got involved?

- **1230** FFTF online surveys completed
- **1252** FFTF surveys (template) received from Cheltenham MP
- **153** FoD Hospitals surveys completed
- **28** Public Drop in Events
- **12** Independently facilitated workshops
- **1** Engagement Hearing
- **13** Other events



OVER 3300 local people participated in planned activities – but the focus of engagement is not about numbers it is about receiving qualitative feedback from a broad range of people



Does the feedback reflect the views of a cross-section of people in Gloucestershire?

Worked with **Inclusion Gloucestershire** to ensure the voices of people with protected characteristics were heard



Collected a range of demographic data from the FFTF survey respondents*

Age, Role, Postcode, Disability status, Carer status, Ethnicity, Religion/belief, Gender identity, Sexual orientation, whether Pregnant or recently given birth.

Respondents to the demographic survey questions are a small % of the overall population of Gloucestershire but broadly represent the local population profile. Exceptions are a high response rate from people with a Cheltenham postcode and people who identify as an unpaid carer.

All feedback received during engagement is collated, read and considered; no 'weighting' is applied to feedback.



*note individuals self-select to complete surveys

What were the main feedback themes?

These are some of the things people said about:

Urgent Care Services in Local Areas

- **Cheltenham** Keep A&E at CGH/ Restore 24/7 A&E at CGH
- **£/Funding** Additional investment needed in the NHS / ensure value for money/best use of resources
- **111:** Need improved 111 people have confidence in / directs to the most appropriate service
- **Accessible and timely** opening hours, travel times/location essential / Services provided in a timely manner / consider the needs of population/demographic, now and into the future
- **Quality and Equity** Ensure provision is resilient; of a high quality; is fair and equitable across the county



What were the main feedback themes?

These are some of the things people said about:

Urgent Care Services in Local Areas (cont.)

- **Pathways and communication** Ensure people know where and when to seek support / Establish simple, accessible pathways
- **Access to GP services** Improved access to GP appointments, both urgent and routine and “out of hours” / Better use of range of healthcare professionals at GP practices
- **Integration & workforce** More joined up way of providing care / Make the most of diversity of workforce / Ensure sufficient staff, with mix of skills deliver range of services / staff recruitment and retention
- **Minor Illness and Injury Units (MIU)** Ensure MIUs provide local, equitable access, are well-resourced (staff and equipment) with access to a range of diagnostics / Introduce MIUs for Gloucester and Cheltenham



What were the main feedback themes?

These are some of the things people said about:

Emergency and acute medicine

- **Cheltenham** Retain CGH A&E / Re-instate A&E 24.7 at CGH / CGH is a General Hospital
- **Centres of excellence** Emergency Medicine is not a specialist service / GRH A&E won't have capacity to cope with increased demand / Some support for ED at GRH only
- **Quality/Equity/Sustainability** Safety risk – people will have poorer outcomes / Important: Quality of care/ Outcomes/Safety/Patient experience / Not sustainable as it is, the system is going to have to change
- Ensure **mental health** is considered and built into the system

What were the main feedback themes?

These are some of the things people said about:

Emergency and acute medicine (cont.)

- **Communications/pathways** NHS 111 sends too many people to A&E / Better communications – public don't know where to go
- **Access/Population** Access from the east of the County = Inequality / A&E attendance increased by poor GP access / Travel delays / Poor public transport / Car parking charges / consider population growth
- **Workforce / Technology** Attract next generation of A&E clinicians / More joined up way of providing care / Make the most of diversity of workforce / Ensure sufficient numbers of staff, with appropriate mix of skills to deliver range of services required / Focus on staff recruitment and retention

What were the main feedback themes?

These are some of the things people said about:

General (incl. Emergency) Surgery

- **Cheltenham or Gloucester** Retain General Surgery at CGH and GRH / Centralise General Surgery at GRH
- **Centres of excellence** Centralising emergency general surgery enables running of a daily emergency surgical clinic / Would one hospital site have capacity for all emergency general surgery beds?
- **Access/Population** Concern about having a site without critical care or general surgery
- **Workforce** Attract next generation of sub-specialist surgeons to Gloucestershire

What were the main feedback themes?

These are some of the things people said about:

Image Guided Interventional Surgery (IGIS)

- **Cheltenham or Gloucester** Establish IGIS at both CGH and GRH / at GRH only/ or at CGH only
- **Centres of excellence /Sustainability** Why aren't we doing this already?
- **£Funding** Cost effective to establish IGIS on one site
- **Access** Surprise at current situation (patients having to go out of county for treatment); an assumption that a fuller range of IGIS services are available locally now

What were the main feedback themes?

These are some of the **Other** things people said:

- Build one hospital half way between CGH and GRH
- Charge 'timewasters': sports injuries, drunks and health tourists
- Car parking too expensive
- Extend hours of shuttle bus between CGH and GRH
- Join up services with social care better
- Prevention and self care a priority to manage demand
- More investment in NHS
- Staff recruitment into Gloucestershire vital
- Maximise use of digital/technology
- Concentrate on staff morale
- Sustainability: Increasing population/housebuilding
- *Centres of excellence* = Parcels for privatisation
- Reduce administration and management costs

Summary of key feedback and next steps

Key feedback

- *Centres of excellence*: Both positive and negative feedback about this approach to future hospital service configuration
- Quality/Equity/Sustainability
- Access
- Population growth/demographic
- £Funding
- Workforce / Technology
- Communications/pathways
- Access to GP services
- Integration
- Workforce

Over 3300 local people took part in planned activities

Over 50 events

Feedback Report published and considered

Next steps

First stage

- Consideration of Output of Engagement Report
- Citizens' Jury
- Solutions Appraisal

Second stage

- Development of business cases
- NHS England Assurance

Third stage

- Consultation (as required)
- Consideration of Output of Consultation
- Decisions