

Fit for the Future - A New Hospital for the Forest of Dean

Inpatient services - what other things should we be taking into account in planning inpatient services in the new Forest of Dean hospital?			Response Percent	Response Total
1	Open-Ended Question		100.00%	126
1	Access to bathrooms- eg enough room for 2 people to stand to stand either side of the toilet when doing therapy. Adequate space between bents to allow for better therapy. Location of a therapy room, with kitchen space and rehab area including, practice steps, plinth and parallel bars.			
2	Will you be looking at the aging population as well increases in new housing development and the necessary change in population that these will be bringing?			
3	There is a significant assumption that the trend over the past 3 years will continue and there does not appear to be any provision should this trend reverse to cope for increased numbers. I think using numbers based on 3 years does not form a good starting point and consideration should be given to reviewing a longer period.			
4	Population is growing considerably in the Forest and bed numbers needed now are not indicative of bed numbers that will be needed in as little as 10 years' time. Rehabilitation for all illnesses, including strokes, should be provided in an environment as close as possible to a patient's home as that is where they will get the most support from friends, family and neighbours. Beds should be provided for those who will (presumably) be having operations performed on them at the new hospital and if there are an adequate number of beds then this will allow more operations to be performed rather than less.			
5	We need a decent A&E service locally and not told you have to go to Gloucester etc. It seems they want nothing to come to the Forest at all Westgate Bridge seems like a Brick wall to us Foresters. Also more Consultation done locally.			
6	The total number of beds currently available and the numbers that are regularly in use by everyone from anywhere. People come in to the Forest to recover from other areas as there is a lack of beds in those areas. The hospital needs to serve everyone and have at least the same capacity and services as the sum of the 2 current hospitals.			
7	The demographic picture of the Forest of Dean residents will change as the extensive new housing developments are occupied, by people moving to the area.			
8	The number of beds will be too small. Until you closed the maternity services at the Dilke we had a decent maternity unit in the Dilke This consultation is a con you have no idea how to consult with the public just how to spend money on faux consultations.			
9	Day hospital services Dementia support Physio/OT/Well-being groups Freshly cooked meals proper nutrition Respite care			
10	Free visits parking!			
11	Stroke patients should not have to go to Dursley, too far, they need support from family and friends.			
12	You have failed to mention the need for end of life beds not everyone wants to die at home the majority or patients want to remain at home for as long as possible but still want to have an option to die in a community hospital this has not been described .Feedback form our local families is that they want this as an option You have not really described the option for Gloucester patients should they need a community bed as options described will not work for everyone			

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13	Respite care for people with long term conditions and for the frail elderly. This may be to prevent carer breakdown or to prevent hospital admission.		
14	Ability of relatives to visit using public transport, especially if either the patient or relatives visiting are elderly/disabled. Parking charges and space to park also need to be reasonably priced and plentiful.		
15	Spaces should be reserved for the local population and not used for people from outside the Forest area		
16	I'm unclear how community ongoing support can be improved as this is managed by adult social care and is not within GCS control. The need for space amongst beds and not to have all single side rooms as learning from other new hospitals. Therapy space for inpatients to use for privacy and dignity.		
17	The number of new houses being built and continuing to be built over the coming years.		
18	The Forest of Dean requires two hospitals, each with duplicated services.		
19	Survey how many people from FoD stay in Gloucester/ Cheltenham hospitals and offer same quantity, or more, in proposed new hospital.		
20	Maternity Services		
21	Accessibility and the need for more beds. Not less Outpatient clinics run by Consultants from Gloucester or Cheltenham Physiotherapy department X ray department Ultrasound dept A & E All the things Lydney currently has that you are planning to scrap.		
22	The number of new houses being built, plus the withdrawal of the tolls on the Severn Bridge crossings, which are both contributing to an increase in the population of the Forest of Dean.		
23	To remove the so called 'Bed Blockers' from their hospital environment. Why can't people who 'just' need a bed be located in a type of care home environment? I am thinking of palliative care. BUPA used to be a regular supplier of beds for people in such circumstances and it freed up the hospital beds. I note that the former care home in Mitcheldean (St Johns Care trust) has now closed and is up for sale. This is just the sort of place that the clinical commissioning group should be taking on board to reduce the immediate bed crisis in some hospitals, and also to make the number of beds available in the new hospital more realistic. It also keeps the journey distances down for relatives who live in the forest and wish to visit.		
24	I do think that some children's services would be nice to have in the FoD in addition to the adult care proposed.		
25	Does the specialist workforce already exist or does it need developing and training how will this be managed so that complexity can be managed from the outset?		
26	Needs more clinic's to reduce waiting times.		
27	How many elderly live in the Forest of Dean		
28	Inclusive for all and also		
29	The elderly and disabled struggle with travelling to Gloucester and other hospitals because of how big it is, the distance and getting around a complicated layout! The new hospital should help those most vulnerable in its local area! The Vale is a good example of this!		
30	I have yet to meet anyone who is in favour of a new hospital. Money would be better spent refurbishing our two present hospitals which are so valued by us. We feel decisions are taken above our heads and for the wrong reasons. Please reconsider, in view of support for keeping the Dilke and Lydney.		
31	Need to ensure good alternative services for Gloucester residents before reducing the number of beds. Elderly people need improved access to social care to help keep them well at home. You need to consider future population when deciding on the number of beds		

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		Response Percent	Response Total
32	Local facility in Gloucester city is crucial if the number of beds is going to be reduced. Have you taken a realistic look at the increasing population and in particular the increase in elderly population? What about people who can't die at home because of their social circumstances. Couldn't people choose to go to the new hospital and stay close to the place they love?		
33	Transport difficulties which may make it very costly or even impossible for families to visit, and that is an essential part of recovery and mental well-being.		
34	Need at least as many beds as we have now between both Dike and Lydney Hospitals. People with End of Life care needs may not want care in their own homes they may want to be in hospital.		
35	I feel that the new hospital will need 50 beds to cope with the local population.		
36	As a nurse who has worked at both Forest Hospitals, having fewer beds will be very difficult to manage - people will have to be discharged home quicker and the infrastructure for this i.e. social care and looking after people in their own homes is just not there. The pressure on beds from the acute hospitals will be immense.		
37	Diagnostics , such as X-ray , phlebotomists, ultrasound, physio, these services should be available everyday		
38	End of life 24 beds are not enough, there is nothing between Gloucester and Forest of Dean to warrant 24 beds		
39	Just leave it as it is but you people won't		
40	More beds would be good, patients need to be close to families		
41	What assurance would there be that Forest beds are for Forest people? When capacity elsewhere is low it will be inevitable that those requiring beds will transfer / decant to the forest! these people will then occupy the reduced number of beds meant for the Forest people.		
42	I would like services that would help me with my learning disability and borderline personality disorder. Would like people to consider my accessibility need and give me the time to do this e.g. explain procedure to me		
43	The number of beds in GRH or the fact that there is no community beds available in Gloucester. Increasing population (large numbers of new houses being built and increasing elderly population		
44	Maternity		
45	There is a figure for patients from Gloucester city in this report, but no figure for how many patients from FOD area in Gloucester and Cheltenham hospitals. So should beds be available for specialist care / rehabilitation etc. after operations for FOD residents to help families with travel etc.		
46	The ratio of beds to elderly patients in the Forest of Dean		
47	I live in Tidenham Parish. A new hospital at Cinderford is of no use to me, my family, friends or neighbours. It is easier for us to get to Gloucester by train as would Lydney be. I understand there is now a limited bus service to Gloucester via Cinderford but doubtful this would coincide with visiting times for anyone who needed to visit a relative. Cinderford was the wrong choice - no doubt already chosen before the consultations began.		
48	Current usage of inpatient / day-care services by FOD residents both locally and throughout other places New procedures / diagnostic tests which are planned to be used within next 5/10 years Recruitment and selection of staff, training opportunities Building and services to be "fit for purpose" as well as medical services, catering, car parking, liaison with community services		
49	As there is virtually no resources for care in the home - for elderly, dementia or stroke, it is pointless assuming this will be provided. Therefore you need to provide for Lydney and the Dilke and growth as we all get older and those currently in care homes, which are about to close - or lose this nursing provision, as a result of the present NHS and council budgets. This is all a mess, covering a great deal of stress, heartache and suffering to people within FOD now!		
50	I don't particularly have a problem with beds being used by people elsewhere in the county especially those from Gloucester city or Tewkesbury borough, which adjoin the FOD district, perhaps because of a shortfall of beds in their own area. I am all for patients being treated as close to home as possible but in terms of		

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	beds to be provided the number should be as high as reasonably practicable bearing in mind an ageing population will potentially lead to higher demand. It would be ironic if in the future there were insufficient beds in the new hospital to meet local needs. Palliative care is not always possible in a person's own home and there might be circumstances where a hospital bed is needed locally		
51	According to the listed items on pages 6/7 you assume that all people living in the Forest of Dean should or want to die at home. This is not very often the case. Families are scared when loved ones die and normally want nurses around to help them through. Great oaks are fantastic but are already stretched thin. End of life beds need to be provided if only used for end of life not counted in bed numbers. Hospital also needs dementia type rooms to calm dementia patients - there is a growing demand for this.		
52	You should provide a link back to pages 6 and 7. It is very difficult to follow. The services within the FoD are already terrible. The community within the forest of Dean is very close knit, the infrastructure appalling and the ability to get from Woolaston to Gloucester/ Cheltenham for any inpatient appointment is very tricky and very slow. Lydney is a life saver quite literally for many.		
53	If the number of beds is determined by the number of patients from Glos and Cheltenham what is to happen to these patients if only 25 beds are agreed in the new hospital? How will you ensure that only Forest patients are admitted to Forest Beds? If 50% of the beds are at present used by non-Forest patients, how many Forest patients are in beds in different Community hospitals? If no end of life beds are available will the Trust be injecting large sums of money into Great Oaks? Care home beds are hard to obtain therefore end of life beds are required in the new hospital.		
54	Although the points you make about patients in future not coming from the Gloucester area to the Forest are the ideal. I think in reality this is unlikely to happen unless they have an inpatient facility in the Gloucester area, mostly because there is generally a reason why that patient has been admitted and not discharged directly from an acute hospital. Whether it is due to ongoing medical support, wound care, social needs or difficulties with discharge. Until adequate and comprehensive Community support can be guaranteed in the population centres that are without a community hospital, it seems foolhardy to consider a significant reduction in inpatient beds which they may not be available for local residents.		
55	You should answer your own question - "Can you safely provide care at home?" I think not. What about cancer victims who have to travel for chemotherapy or other treatments some as far as London / Bristol. How about some of these services at a local hospital we pay for the same services from the NHS as someone in a city. Then there are dementia victims - small chance of home care. You only have to visit Gloucester / Cheltenham hospital to witness that more than one ward is closed, others with empty beds. Why is it you state non Forest of Dean residents occupy our local hospital beds and then my own 93 year old mother was denied a bed in our local hospital and instead wanted to transfer her to Cirencester, meaning how was it possible for her 93 year old husband to visit!!		
56	Good Transport links. Current bus services are very long winded and patchy. If new hospital is located in Cinderford near Gloscol campus it would benefit both as bus services could be focused on this area.		
57	Why is the new hospital near Cinderford and not Lydney?		
58	All beds to be reserved for patients from Forest of Dean - NOT FOR OUT OF AREA PATIENTS		
59	you say that additional cover to be provided in Glos will reduce bed number needed in Forest but no definite information on this fictional provision. 23 beds definitely not enough especially given the ageing population and increase in housing. District nurse teams would need to be increased to enable sufficient "care at home" provision		
60	Access by bus		
61	Growing local population Population growing and dementia patients		
62	Leave Lydney Hospital alone! Just extend the range of service. no need to spend money on buildings		
63	Wards as at Dilke today A birthing room would be very much needed as was recommended by the government		

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		Response Percent	Response Total
64	Wards as at Dilke today A birthing room at the Dilke as was recommended by the government		
65	Better signage for departments, maybe coloured lines on the floors to show departments. No trees or plants in the grounds - in the winter months the leaves fall and blow into the hospital corridors, drainpipes, drains making it difficult to keep clean in areas to include outside - this becomes more hazardous in wet conditions! A good bus service to serve hospital, doctors surgery and dialysis units - from bus stations and surrounding local areas.		
66	I think it is important to consider paediatric inpatient services as well. As a paediatric nurse myself, there is a lot of families within the area who struggle immensely with finances and transportation. It isn't just the elderly who need closer services.		
67	There is no mention of end of life beds not everyone wishes to die at home or there accommodation is suitable this is very short sighted to assume the offer to die in hospital is not included. Feedback form families and patients inform us that patient wish to remain at home for as long as possible but some people do not wish to die at home even when correct support is available. The number of beds needs to be a minimum of 30 whilst there are new initiatives Gloucester patients still need the option of an inpatient rehabilitation offer 24 beds is too small a number and is based on old data		
68	Gloucester too far		
69	Good Kitchens! Staffing levels		
70	We need all the beds which are available now in 2 hospitals. I Can't believe only half number of beds are considered acceptable		
71	'Providing local services for people who live in Gloucester would significantly reduce pressure on the Forest of Dean community hospital beds.' Is this part of the plan so that all beds in the FOD are available to FOD residents? If so, how will it be enforced?		
72	Maternity care		
73	Maternity, out of hours GP & Prescription services		
74	The services described do not refer to end of life care. There are many people who chose not to spend their last days at home, for many reasons. The community currently rely on the excellent end of life service offered in the Forest hospitals and this must be considered in the role of the Inpatient Unit in the new hospital. As a therapist working in the Forest Inpatient Unit, the rehabilitation space is also key to the rehabilitation we can provide. Privacy, space and a practical environment are vital to inpatient rehabilitation. An safe outdoor space would be extremely beneficial for outdoor mobility practise, with different surfaces, gradient's etc.		
75	Sufficient free parking for patients & visitors. Suitable visiting hours.		
76	Minor operations (eg hernia) Therapies for conditions such as cancer that cannot be accommodated by Great Oaks Physiotherapy Dermatology X ray Ante and Post Natal care Convalescent care following a serious operation Treatment fir minor Injuries		
77	Great Oaks is good as far as it goes but we need a proper hospice for those people who are not able to be cared for in their own homes to free up hospital beds. Day care is not adequate		
78	Personally as I am in the Forest of Dean area now but from the Surrey Area and the USA / California. Following a divorce from a film maker after 3 children (Now grown and following in both our footsteps) I don't feel qualified to give my honest opinion as the NHS let me down back in 2004 (Cheltenham area) I was living in Stroud (Avening) at the time.		

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		Response Percent	Response Total
79	Community hospitals can take pressure off main hospitals and help with acute shortage of bed situations. Provision just for Forest of Dean patients is failing to see bigger picture With increasing populations and longer life expectancy only 20 plus beds is ludicrous		
80	There is no mention of end of life care for those patients who do not want to die at home but want to die in hospital 24 beds will not be enough. A minimum of 30 should be provided		
81	Cinderford is too far to travel for the people of Lydney, especially those who rely on public transport. With the recent bus changes, it is not fair to take the Lydney hospital away, as it would be easier to get to Gloucester than Cinderford, and this then has a massive impact on families. As a rural area, we rely on our local hospitals, taking Lydney away is not practical and totally unfair.		
82	When needing to see a specialist locally, would save having to clutter the roads getting to Gloucester. Also having treatment locally would free up Gloucester Royal.		
83	Provision of large scale free parking for visitors is very important. The interior décor should be homely and not 'clinical' looking. Inpatients need to be relaxed as much as possible to hasten recovery		
84	Free parking for patients and visitors Many disabled parking spaces provided		
85	Access to the hospital services 24/7. It sounds like you are just closing 2 community hospitals to replace this with one. If people are going to be able to stay in the new hospital for long periods then its like a nursing home, we need a new hospital but I think the Dilke needs to be kept open to deal patients needing long term recovering		
86	The people of Coleford who have always had to travel to hospital		
87	The number of beds in the new hospital should exceed the number of beds currently available at Lydney and Dilke hospitals. I do not believe that 50% and sometimes 60% of the beds are being used by people who live in Gloucester city. People living longer now so more beds are needed for the ageing population		
88	The survey states that half of the beds in the Forest are taken up by others from outside the area, but it's not clear how many people from the Forest are in beds in other hospitals who could be catered for in the Forest if the beds were available. Clearly access to any of the other services outside of the Forest is a major issue for some people - especially if they have no family locally who can help get them to appointments etc. Working with transport providers is vital and many of the local transport services have been reduced, cut or changed which makes it difficult to get to hospital early or late in the day, without involving long travel times if they are reliant on public transport. Ensuring the infrastructure is in place to help people is vital, without this people do struggle to attend appointments etc. Also ensuring readily available support is in place locally is important to ensure people can receive the help they require whether it is care or otherwise. If outpatient services are readily available locally, whether in the community hospitals or health centres then that is great, it just some of the promises don't always materialise as resources are utilised elsewhere in the county, as the Forest is not always considered to be a priority.		
89	The creasing age profile of hospital patients and those with dementia in particular must be a priority for the inpatients facilities suffering from the conditions described on pages 6 and 7, some spare inpatient capacity should be included to handle increased need when illness epidemics arise (flu etc) as these situations are usually unpredictable. Also if problems arise elsewhere in the county, temporary increases may be needed in inpatient capacity. It is unrealistic to assume that only Forest residents will occupy inpatient beds in the new hospital		
90	End of life care needs more support in a local hospital. Great Oaks does not provide 24 hour care for terminally ill patients. It is too far to travel to Leckhampton when patients need intensive care. We are a growing community - more houses are being built in the area. It is a increasingly popular place to live. We need to think to the future needs.		

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		Response Percent	Response Total
91	<p>The increase in population due to the number of new housing that has been given planning permission. The majority of these are in Lydney</p> <p>Palliative care beds - ideally patients should be supported in their own homes but sometimes this fails and an admission for 24 hour care is required. Finding a care home bed in the forest is very difficult at short notice / crisis</p> <p>Great Oaks is brilliant but has no beds. Not everyone has family support who can / will support palliative patients to die at home. An acute hospital is not the place to end your days</p> <p>The number of beds that will be provided</p>		
92	<p>Physiotherapy services - maybe this is already covered under your rehabilitation proposal.</p> <p>Also I know that previously certain minor operations were carried out at Lydney hospital and/or the Dilke Hospital. There does not seem to be any provision for this anymore???</p> <p>Also is there no provision for any "minor injuries" unit?</p>		
93	<p>Transport - I use local buses</p>		
94	<p>If 50% of FoD hospital beds are occupied by non-FoD residents, then it follows that other community hospitals will also have non-local in-patients, some of whom will be from the Forest of Dean. If the number of beds is reduced from its current (joint Dilke and Sydney hospitals) level, then it would mean that this situation of FoD patients having to be placed in non-FoD hospitals would increase. There must not be a reduction in the overall number of beds available.</p>		
95	<p>There are times when patients from the Forest of Dean have had to be placed in other community hospitals through lack of beds (places taken by patients from other areas) These figures need to be taken into account (what percentage eg beds in other hospitals are occupied by FOD residents)</p> <p>It is an ageing population. As most beds are occupied by other patients, this must be taken into account - there must be some data on future age profiles available. It is better to have enough capacity at the planning and building stage</p>		
96	<p>The paragraph on p7 regarding numbers of beds required is unhelpfully vague - especially given that this appears to be the single largest bone of contention in feedback thus far.</p> <p>I agree with the thinking that where beds are currently being occupied by patients from outside the FoD, then these beds can be excluded from the calculations of beds needed going forward. HOWEVER - this can apply only if there is a cast iron guarantee that patients from outside the FoD will in future be treated in beds in their own local areas AND NOT in the new FoD hospital.</p> <p>The calculation of beds required should also take account of projected population growth in the FoD - but there is no reference to this on pp 6-7.</p> <p>The FoD hospital will need some end of life care provision - as some patients will inevitably reach this point and moving them would be impractical - or plain wrong. Some provision for comfort of family members in this case is important (based on my own recent experiences).</p>		
97	<p>The most important thing that must be taken into account is the accessibility of the hospital transport either emergency services, local bus facilities or private vehicles</p> <p>Many of the inpatients will be elderly and the main problem will be transportation to the hospital for follow up appointments as public transport is not directly accessible to the hospital from Lydney. In Winter Cinderford can be totally isolated due to bad weather</p>		
98	<p>Agree with points covered - nothing to add</p>		
99	<p>The number of new housing estates being built or planned. Lydney 4 at present and at least one more with permission</p> <p>Tutshill 2 at present and 1 permission being sought</p>		
100	<p>If so many Gloucester patients are at present in FOD hospitals that suggests Gloucester needs a community hospital for local residents. That might allow Gloucester Royal to concentrate more fully on specialist services for the whole country.</p> <p>Has consideration been given to the vast population increased expected in the area between Tidenham and Blakeney and A48 as a result of the scale of the ongoing house building in Sedbury and Lydney, the End of Severn Bridge tolls and the high cost of housing in Bristol?</p> <p>The numbers of elderly living alone in their own home without families to assist should be given special help</p>		
101	<p>It must be taken into consideration that if the non-Forest of Dean's residents don't have beds available in their local area we should be able to provide necessary beds.</p> <p>I feel the considerations described are of an idealistic situation and most likely will NOT be possible in the future. Consideration must be given to possibilities to avoid patients not having a hospital bed (i.e. a</p>		

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		Response Percent	Response Total
	separate ward which can be used or closed as needs warrant).		
102	You are not planning to have sufficient beds. Lydney is experiencing huge growth, hundreds if not thousands more houses and people, who will all need hospital services and in the fullness of time, hospital beds. You cannot assume that new beds are to be provided out of area, the population is growing everywhere, why plan for too few? It will be more cost effective to provide sufficient now rather than having to extend in the future. Great Oaks may support people in their own homes - until the very end, when many people need increased palliative care only available in a hospital. There are 47 beds at present? Then at least 50 will be needed. At least. It would be eminently sensible to provide 60. There should also be provision for a birthing unit in the Forest.		
103	Huge number of new houses being built, so thousands more people needing beds.		
104	I do not think the extent of the population increase, new housing and the Housing Allocations Policy have been sufficiently taken into account. The housing is currently increasing at a very fast rate, especially around Lydney/Berry Hill areas. Access to Cinderford from Lydney and further west is very difficult, especially in bad weather. For the NHS to just try and 'shunt' all terminal care into the Private Sector, as suggested in the booklet is not acceptable.		
105	Rehab facilities. Family/ carer accommodation/ facilities		
106	You should take into account the number of new housing allocations in the area and the difficulty people find travelling to Cinderford which is so out of the way.		
107	IT COMMUNICATION resources directly to GP s and specialist hospitals, irrespective of postal codes which do not truly represent border families who pay their council taxes to Gloucester.		
108	Car parking and public transport needs must be considered. Hospital has to cover a wide area and beds must be for people of the forest as the trip across the River Severn is very long and if you don't have your own transport almost impossible.		
109	Due to increasing local population and continual rise of people living longer there will be a high demand for inpatient beds and any planning should allow for this accordingly It is apparent that the inpatient beds currently provided (which is more than planned) do not meet current needs and would not meet predicted needs		
110	Are you planning on wards for the new hospital or single rooms? How are you planning on reducing the need at any time for mixed sex wards?		
111	perhaps beds should also be considered for people possibly elderly who need glucose / antibiotic drips to encourage quick return to good health		
112	This applies to all services, the location of the hospital and the ease of access to it by public transport. Who will support people discharged into their own homes, will this place a large burden on relatives?		
113	The growth in total population - amount of new housing already built or planned. Although some patients in existing hospitals were not from the Forest they may well have had family and friends there, for example older patients in Gloucester could have children who had moved there. Growing number of older people in the population.		
114	Free up the two empty wards at Chepstow hospital that have been closed for the past 7 years		
115	Feeding arrangements / catering. Availability of good nourishing food using local ingredients - to be supplied by FOD age concern? Staff / volunteers on hand to help with feeding and drinking Plus staff available for toileting and washing as required End of life care must be properly managed - otherwise patients must leave hospital fitter than when admitted		
116	Dementia Access for disabled etc (which I am sure you have sorted)		
117	The fact that as it is unlikely that more beds will be provided in other parts of Gloucestershire in the		

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		Response Percent	Response Total
	foreseeable future, some of the beds in the Forest will always be used for people from elsewhere, so the number of beds MUST be maintained at the present level.		
118	Pleasant environment for visitors - café - community hospital shop The environment itself linking arts and the natural environment which we have on our doorstep. Both have been shown to improve wellbeing and potentially aid recovery - not just art on the walls (although this is important) but participation options where appropriate and easy access to outdoors. Eg. a garden project / community garden project		
119	not needed - existing facilities are acceptable. Invest in existing facilities there is no need for the expenditure involved in providing a new hospital. the decision for a new hospital was decided far in advance of any public consultation therefore such a consultation was a farce and a complete waste of money and peoples time		
120	Areas where activities and groups can take place. Boredom is not supportive to mental wellbeing. Activities will allow engagement and ongoing functional assessment Well designed bathrooms suitable for assessment of ADLs Outdoor areas / Gardens - easily assessable to all in all weathers - a place for patients, family members and staff to recuperate Quiet spaces Follow on home from hospital Access to mental health services Maternity and midwifery		
121	The new hospital should have at least as many beds as provided at Dilke and Lydney. While patients outside the area should have provision in their locality this is not always possible and therefore could result in being located here, in the same way as some patients find themselves in Stroud or Dursley which are not good for family visiting. Patients will heal much better if family members can visit		
122	The amount of new building that is forecast for the Forest of Dean and longevity of Forest people, many of whom will have children who are pensioners (if not pension age have to work until 66+ in future)		
123	Given the aging population and increased housing developments around the Forest of Dean, the reduction of beds is a disgrace and would no way support a realistic sustainable future hospital Hospice / end of life holistic care space to enhance a dignified end of life in a serene environment with views of the beautiful forest, enabling easy access to the outdoors in a hospital bed. Bariatric working spaces with ceiling track hoist systems Holistic therapy rooms on the ward and outside		
124	Should help to reduce demand on main hospitals in Gloucester by system which filters out care which does not require specialist / acute care. also supporting early discharge (?) of inpatients who still require support of care in community		
125	Human face as well as expertise Timely interventions and clear communication of situation to patient and family Access to the hospital for visitors/ parking arrangements and public transport Tourism numbers increasing and possible climbing/ Severnside accidents numbers of beds		
126	IT COMMUNICATION between specialist hospitals and GPs on the borders who use Welsh postal codes but the patients actually live in England and pay council taxes to Gloucester.		
		answered	126
		skipped	31

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

		Response Percent	Response Total
1	Open-Ended Question	100.00%	128
1	24hr A & E with doctor support		
2	Transportation- public transport services in the forest are not consistent and some local residents are not able to drive, having services available that coincide with transport timetables may be worth considering? Accessibility for elder people and those who struggle to get about- community based transport service that could collect those from more rural and remote areas. Sensible emergency opening times things don't just happen 8 in the morning until 8 at night.		
3	Accidents at home and in the wider Forest of Dean area particularly during the night time		
4	Ease of access - transport links including regular and reliable public transport for those who do not drive. 24 hour access x ray facilities GP or advanced nurse practitioners on site at all times Well staffed telephones for advice Enough parking, which should be free of charge		
5	Well trained Reception staff and adequate Medical Staff and treatment.		
6	The new hospital should have ample parking and public transport links to enable as many people as possible to easily access it. Arranging and changing appointments should be easy to do either online or by phone. Multi Language facilities should also be available as communities become more diverse.		
7	The ease of access to the service. Mobile signals in the Forest of Dean are unreliable. Accidents can occur anywhere within the Forest, not necessarily in towns or villages, but on footpaths.		
8	Accessibility from all parts of the forest which is met by the two current hospitals		
9	A well-equipped A& E facility with properly trained staff 24/7 access X-ray ultrasound. To include Doctors/ Nurses/ Paediatricians/ Midwives		
10	Wider roads to allow ambulance to overtake.40mph across the forest!		
11	Emergency treatment at the new hospital is imperative. Driving to Gloucester is not realistic when emergencies arrive. Dental emergency dept. would be good. Advice should be available 24 hours a day from a team of professionals, not a service where you tick boxes.		
12	Local service with a wide range of opening times including access to diagnostics		
13	7 day a week service Open longer hours in the summer when there are a high number of visitors to the area. Skill to cater for the types of injuries likely to be sustained in this area, such as from walkers and cyclists. The urgent care services need to include therapy staff as well as nursing staff. Occupational therapists and physiotherapists have a key role to play in admission avoidance.		
14	A&E Department with sensible triage and advice for patients turning up with non-urgent needs. The public really need to be educated in what constitutes an emergency and what doesn't! We also need doctors to be available in the A&E department. Not leave the nurses to cope and bear the brunt as we have now. Simple clear signposting in a range of formats to help people see where to go. A friendly face to respond when you arrive - not reliance on electronic booking in. Elderly people find this too difficult to manage. Not everyone knows how to use touch screens and computers.		
15	Ensure that urgent care is available within the Forest		
16	Local urgent care, a mixture of planned and drop in appointments. Range of health care professionals to provide assessment, opening times		

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

		Response Percent	Response Total
17	Simplicity accessibility to all		
18	A 24/7 A&E service		
19	Two Minor Injuries units accessible with public transport		
20	good transport system from outlying areas		
21	We regularly use the urgent care unit at Lydney for foreign bodies in eyes. Its currently no more than a ten minute visit, and an incredibly valuable thing to have.		
22	A&E facilities, maternity care.		
23	24/7 services, during weekdays and weekends		
24	Out of hours GP & Prescription Services; Access to x-rays for possible broken bones		
25	Availability and Accessibility. Vital that Emergency facilities are off a main A road that will be easy to reach on winter conditions. Lydney has all this already. Cinderford is a nightmare to reach in icy weather.		
26	Establishing a 24 hour A&E department; at the moment there just isn't one within the Forest. This should include access to mental health professionals and services.		
27	Convenience to access Cinderford is not a place people from Lydney can reach without their own transport		
28	Late Opening GP access similar to the drop-in located in Barton Street.		
29	Prompt triage by highly skilled professionals All diagnostics in one place The right teams with the right skills to offer the right treatment		
30	Sufficient staff of a high enough calibre. Sufficient equipment and space to deal with expected emergencies		
31	Need an A&E equipped to deal with most ailments, therefore saving the patient having to travel to GRH.		
32	24 hr minor injuries unit with a doctor.		
33	Accessibility for all, parking, public transports, disabilities. Acceptable waiting times, enough staff, open 24hours		
34	We need an a&e and a mental health urgent care team along with some beds! Not necessarily beds for severe cases but somewhere where people can be safe for a night until they get further help		
35	We have what we need at the moment.		
36	Need to have staff with the right skills and expertise to deliver a good service locally and avoid people having to go to Gloucester A&E. They need to be able to do the right tests and have x-ray facilities so people can be treated fully and not have to make a return visit there or to another health care service.		
37	Ensuring staff can cope with minor injuries/illness. My experience shows that they can't at the moment. I have tried to use the MIU at Dilke on a number of occasions, but have always ended up being sent to A&E in order to be treated promptly. This has been for minor problems that I don't think warrant A&E. The alternative is that I have to go back the next day and then possibly to Lydney - this means taking additional time off work when I could have been treated there and then if the right staff or diagnostics were available. All this after I've already been in MIU for a couple of hours - not a good experience that is going to encourage me to go back if I, or a family member, have a similar problem. If you want to keep people out of A&E then you have to provide a good alternative.		
38	High quality services throughout the Forest of Dean. These must be available locally, accessible and appropriate for local needs.		

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

		Response Percent	Response Total
39	District Nurses, Rapid Response, OOHours Doctors, Minor Injury Units open from 08.00 - 23.00		
40	If you want to deliver urgent care, you need Doctors, nurses, paramedics, as well as Available diagnostics 24 hours.		
41	24 hour (overnight) Care but not to be used as a "holding room"		
42	Information early		
43	Can consideration be given to those with chest pain presenting at the urgent care centres. Gloucester is 18 miles away, Cheltenham 22 miles. Ambulance response times are very poor. Urgent responders do their best. Dilke hospital saved my life while I waited 50 minutes for an ambulance		
44	Home care when phone for doctor please		
45	Would like urgent care to be available - take into account disability		
46	Getting to the hospital quickly and easily. By public transport. Getting the treatment quickly.		
47	Urgent Care services should be available at all times whether its on the phone or in person and more treatment should be available to ensure people aren't always sent to GRH		
48	May be extend x ray opening til 8.00pm or 10.00pm and weekends		
49	As listed		
50	That it is a 24 hour facility for outpatients		
51	To make access readily available to local people without the need to travel to Gloucester or long distances to access care and treatment, so less stress and worry. Keep it local services for local people I need.		
52	Don't think urgent care is provided from Cinderford to Tidenham. We are in effect a no mans land		
53	Availability Accessibility Diagnostic services - x ray, MRI, CT scans Information on services to enable patients to be knowledgeable about options		
54	Sufficient resources and equipment and expertise to give the urgent care. The NHS should NOT be relying on charitable services Sufficient ambulances and stroke beds etc. to give the urgent care to get to A&E		
55	Care and diagnosis "close to home" needs to be readily available to ensure patients take up the services and don't put off seeking advice or treatment before it's too late or conditions worsen.		
56	Enough trained staff on duty to run the services and keep up demand. Maybe a doctor on site over the weekend and 7 day week working x ray department		
57	Speed of road Location of emergency services (ambulances)		
58	MIIU and x-ray departments should work together and MIIU should be available on extended hours Consultant appointments to be available locally.		
59	Travel time and cost of parking.		
60	The new hospital should have an A&F facility, Dilke and Lydney had them. A&E facility should accommodate the need for emergency care i.e. heart attack victims where time is essential to survival, having to go to Cheltenham / Gloucester hospitals. Provide emergency transport for victims of RTA, industry of accidents at home from broken bones etc. Not all accidents are best treated miles from where they happen (use your views to endoscopy unit to A&E		
61	Walk in urgent care is a priority. The road links to Gloucester and Cheltenham are poor and heavily congested at times		
62	Cardiac and cancer treatment		

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

		Response Percent	Response Total
63	Access by bus		
64	Best location - near major roadways and easily seen Staffing not run by bank / agency staff, where they are not aware of procedures E.g. locking up! They have no commitment to the unit and leaves other care members of staff stressed		
65	24 hour A&E at Lydney hospital		
66	Doctors on duty at different times each day so people can contact them when needed		
67	Doctors		
68	To develop services in doctors' surgeries and hospital and to keep the buildings close to each other - Also renal dialysis unit. All in close proximity - All makes sense to me		
69	I think an ED would be an essential quality		
70	7 day a week service, access with 20 miles in a rural area, public transport options from key towns, open from at least 8am until 11pm Majority of patients assessment treatment and discharge small number transferred to secondary care		
71	good staffing levels adequate transport facilities OHH GPs facility		
72	At the moment - 2 hospitals in different parts of the Forest of Dean cares for the needs of the community. This means access is pretty well available to all with not too much delay in travelling. 2 local hospitals provide known well proven care - often those who care are drawn from immediate vicinity - all very helpful for inpatients		
73	Availability of GP appointments (not the common 'just turn up and wait' system that GPs like), so that referral to the local hospital can be prompt if required.		
74	extended opening hours, enough staff for demand.		
75	Out of Hours GP & Prescription Services		
76	Out of hours GP & Prescription Services; Access to x-rays for possible broken bones		
77	24 hour access .		
78	Diagnostic services which are closely linked to the GP practices		
79	24 hour A&E		
80	I strongly believe that the proposed "New " (Cinderford Area) is absolutely unfit for purpose and now with new stagecoach service totally inappropriate for those without their own transport		
81	Open 7 days a week x Ray 7 days a week Times of opening must reflect needs of the public		
82	We need local doctors on call 24 / 7. At the moment, you often just get sent to Gloucester anyway. There are so few consultants and doctors around here, the hospitals just feel like pit stops, where a lot things I am sure could be sorted out without the need to go to Gloucester if the right staff were in place.		
83	Having somewhere locally to visit or call for care advice would also be an advantage to everyone in the county.		
84	GPs should be aggressive in their requests for consultant clinics in any hospital/s. Too often patients are told they need to go to Gloucester or Cheltenham with all the hassle and expense involved. All specialist treatment should be available locally		
85	Good transport services especially not that stagecoach have drastically cut their services in the Forest		

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

		Response Percent	Response Total
86	Bus services available in the Forest		
87	Appointment booked in person or by phone. Not on the internet as I feel that's the reason people do not always turn up. Less waiting time for services to people with mental health issues		
88	A&E		
89	24 hour A&E department at the new hospital		
90	Adequate staffing levels and relevant specialist availability without having to travel to Gloucester unless this is medically essential at any time of the day or night		
91	We need more clinic so there is not the need to travel to Gloucester or Cheltenham Look at clinics which access needs of the elderly eg lung function, heart monitoring, leg ulcers etc		
92	Access to GP appointments is currently very poor in the Forest. I know they are trying to increase access with longer hours and possible weekend working.		
93	Local availability of these services is needed, also needed in a timely manner.		
94	community teams and GP surgery		
95	Full-time X-ray service should be available, including over lunchtime! (my wife fractured her arm and could not have an X-ray as the department was closed for lunch). Whilst the nurse practitioners do a wonderful job, it would be helpful to have a doctor available too.		
96	Improved urgent care services would be welcomed X ray departments need to be open 24/7 to avoid long trips to Gloucester (X ray at the Dilke even shuts at lunchtimes!) A doctor on duty could avoid long journeys and delays in Gloucester A&E (rather than a specialist nurse)		
97	The FoD Hospital document doesn't seem to make and reference to urgent care service provision? The Gloucestershire document does - but not in any way that sheds light on thinking about provision in FoD in particular. There is widespread confusion about differentiating emergency and urgent cases - NHS strategy on this needs to be communicated much more heavily and consistently. There is then a need to set out how this would work in FoD. The new FoD hospital needs to be able to provide a good level of general urgent care service. I also believe it must be able to provide at least a basic first responder / ambulance service to respond to the foreseeable times when emergency patients are brought on site.		
98	GP surgeries open in evenings and weekends - would prevent minor injuries etc turning up at local hospital		
99	Opening hours - availability of transport for those without own transport		
100	See below All services are urgent to the recipient		
101	Doctors, nurses, all staffing needs must be available to fill a full complement of staff.		
102	Access to emergency care should be available 24/7. The roads into Gloucester can be difficult, especially during rush hour and inclement weather. And even from an environmental point of view, fewer long journeys to access urgent assistance make sense. It would be helpful to have a doctor at least on call, there never seems to be a doctor around at the Dilke.		
103	Emergency service should be open 24/7.		
104	The location of the urgent care services. To close those at Lydney and have the nearest at Cinderford or Gloucester is simply not acceptable due to the very poor road links to Cinderford. Urgent care must be also provided at Lydney.		
105	Appropriate staff Diagnostics Minor injury / minor surgery - not specialised Access		
106	In view of the difficulties associated with transport from one end of the Forest to the other, in particular when the weather is frequently a problem for travellers in the Forest, and even more of a problem when one		

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

		Response Percent	Response Total
	is not well, a hospital service at both ends is highly desirable. If someone living in the south has to travel to the north they might as well go to Gloucester.		
107	By keeping two A & E services in the Forest. The telephone service of 111 is inadequate with call backs sometimes taking 48 hours.		
108	Diagnostic resources such as haematology, bio chemistry and x-ray. A & E department. Pharmacy.		
109	a reliable 24 hour help line		
110	Minor injuries unit is very important as to not overload A and E of Gloucester and Cheltenham. Getting medicines on site when other chemists are closed also important. Patients who need very regular treatment need to be able to access local help and not have their suffering made worse by spending many hours travelling,.		
111	Good geographical location centred for local use. 24 hour cover via telephone advice and staff on site to deal with relevant emergency care		
112	Sufficient resources both financial and staffing, technological options for monitoring etc		
113	A starting point is a smile from care providers. This makes the patient more relaxed and able to describe symptoms. Hopefully, services can be developed according to need, not just budgetary constraints.		
114	Location of services Extent of services in terms of hours available Infrastructure in terms of transport links and services Information on what is correct place to seek urgent care.		
115	geographical coverage in the South Forest as well as coverage in the Cinderford area . Do not forget English residents with welsh registered doctors		
116	Reopen the minor injuries unit at Chepstow which has been closed for seven years		
117	Transport availability - co-ordination of ambulance service. Facilities for distressed / anxious relatives		
118	Buses I don't drive now so no change of getting there after hours		
119	1- Illness and accidents happen at weekends as well as during the week 2 - Better GP provision would lessen pressure on hospitals that should be supporting GP work not replacing it		
120	Ability for local ambulance 999 service to take people to local hospital if relevant and appropriate care can be provided there. Enough medical staff		
121	Ease of access 24/7 Access to most common investigations – i.e. X ray, Blood tests, ECG, Endoscopy, quality of care		
122	Leave things as they are Majority of people are perfectly happy and content with the existing arrangements at the Dilke and Lydney		
123	Access to community teams - especially mental health Access to ED - current access to MIU in Forest is inconsistent		
124	It is not uncommon for patients to wait as long as three weeks for a GP appointment. Patients need better assurance that they can access someone with urgent advice / treatment		
125	24 hour access to MIU or urgent GP access		
126	Rapid response team - Great idea		
127	Use of small centres as well as hospital because of size of Forest and poor public transport. Clarity of what is being delivered where and your options.		

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

		Response Percent	Response Total
	<p>Upgrade health infrastructure urgently to cope with major increase in population, and people getting older. Link with residential homes/ home caring/ hospice/surgeries/ clinics all need to be closer.</p> <p>Patient is given all options and a say in care plan - not all will ask this.</p> <p>GP surgery capacity and health centre upgrade is delayed: do not delay this for hospital. Patient transport, ensuring location of health facility really is accessible by public transport - poorer and poorer in forest.</p>		
128	<p>A& E services including x-ray and Triage facilities that can immobilise simple fractures, alleviating long waits in corridors at specialist hospitals.</p> <p>IT links to specialist staff in city hospitals so that staff can have quick reports on emergency x-rays, diagnosis of skin diseases and advice for management. I know from experience that the dermatology patient numbers and waiting lists are colossal.</p>		
		answered	128
		skipped	29

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	130
1	Sexual Health should be based out of the new hospital instead of Coleford Health Centre		
2	sexual health and contraception services would be helpful closer to home as well.		
3	Cancer treatments		
4	<p>Dialysis</p> <p>Maternity</p> <p>Chemotherapy</p> <p>Physiotherapy</p> <p>Podiatry</p> <p>Dietician</p> <p>Consultant clinics in Rheumatology, Vascular and Diabetes and likely many others</p> <p>blood test service</p> <p>x-ray</p> <p>cafe</p> <p>chapel/religious room</p>		
5	Specialists available locally for follow up appointments at our new Hospital. Big savings in travelling costs to other Hospitals plus it gives us less pollution.		
6	At least the same facilities with the same total capacity as the sum of the two current hospitals.		
7	Anywhere the inpatients require review.		
8	<p>family planning</p> <p>GUM services</p> <p>Consultant led medical and surgical clinics</p> <p>child development</p> <p>mental health and CAMHS</p> <p>physiotherapy</p> <p>radiology and diagnostics</p> <p>phlebotomy</p>		
9	<p>MIDWIFERY/ Gynae</p> <p>RENAL</p> <p>DEMENTIA/ Parkinson's/neuro/gastrointestinal/</p>		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
	Hearing/eyes/ dermatology/ Podiatry/ terminal/palliative care support/X-ray/ultrasound/ minor surgery		
10	A top of the range scanner, like the cobalt scanner at Cheltenham .I have had a number of TIAs but can't pay 100% horizontal as required at Gloucester Royal. I have an acute balance problem IE I can't lay flat.		
11	As many as is possible. If a consultant agrees to do one day a week or month at the new hospital, this would help the forest people so much and ease the cost and anxiety of travelling. For example useful departments; Eye screening clinic, rheumatology ,orthopaedics, cataract pre-op services, diabetes, maternity, x ray, screening, scans.		
12	All Outpatient that is currently provided plus more ultrasound options Light therapy for dermatology patients and additional urology options. More ophthalmology interventions other than operations could be offered		
13	X-ray Physio OT podiatry Audiology Fracture clinic		
14	Monthly Eye clinic for those needing injections for macular problems. etc. Hearing aid fitting service - to avoid the need for travel to Gloucester. Chiropractic/Physio services for back pain. Chiropody/Podiatry		
15	Services that have been provided by GCS locally - Dental Service, Podiatry, Cardiac rehab etc.		
16	Hospital clinics and discussed in the booklet including physiotherapy MSK and also outpatient rehabilitation services for older people and those with neurological conditions, this is currently known as Assessment and rehabilitation unit.		
17	Bloods clinics Physio family planning clinics		
18	Physiotherapy, Dermatology, family planning services & maternity ward		
19	Those currently available at the existing sites		
20	orthopaedics , medical, physio, OT, X-ray and ultrasound. psychiatry, geriatrics, surgical		
21	Mental Health.		
22	A good range.		
23	Everything that Gloucester/Cheltenham offers.		
24	Out of hours GP & Prescription Services; Access to x-rays for possible broken bones		
25	All that are presently available and more.		
26	We desperately need more oncology services, in particular radiotherapy and chemotherapy. At the moment, very unwell patients are having to travel up to Cheltenham and back daily, which just adds to their fatigue and stress. The use of an online outpatient appointment booking service would be really useful; enabling patients to see available appointments so they can book the most convenient to them and arrange transport if required. An X-ray/Radiology department is needed to avoid trips to Gloucester or Cheltenham. Smoking cessation and obesity clinics would also benefit the local population.		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
27	Ex ray and consultant appointments we do not want to go to Gloucester A and E		
28	Physio PSA testing Eyesight testing		
29	As much as possible		
30	Space for providing group education sessions not just rooms for one to one appointments It would be helpful to consider which appointment s and services are provided at Glos and Cheltenham by those with a forest post code and offer the largest groups those services locally to have the biggest impact Talk to specialist teams at the hospital which teams want to provide this that don't already		
31	All those needed by persons possibly unable to get to Gloucester, particularly the disabled and elderly.		
32	Rheumatology Fibromyalgia clinic would be amazing, so many sufferers, receiving poor care due to lack of knowledge.		
33	All outpatient services saving journey to either GRH or CGH!!!		
34	All. I would be narrow minded if I answered this question as many people only really know what out patient services there are if you access them.		
35	I would suggest that the outpatient services which are most needed would be those that people in the forest have the most of and those that have the longest waiting list!		
36	Ditto		
37	Regular appointments for services so that the hospital is a real choice for people. We need respiratory, cardiology and orthopaedics regularly. Would be really good to have audiology and hearing aid services to avoid regular trips to Gloucester		
38	Regular clinics that offer a real choice. I am able to travel, so have always chosen Gloucester or Cheltenham because the waiting times in the community hospitals is significantly longer.		
39	All the services mentioned look appropriate. I am particularly interested in seeing the Social Prescribing service there as it seems to have been withdrawn in my area (Newent) and it can cover so many areas of difficulty and need that if not dealt with can lead to significant health issues. There is also a severe lack of mental health services available for anyone not in a crisis situation and that could be a crucial element in the new hospital.		
40	all existing services including: Physio, Occ Therapy, X-ray, MSKAPS, Speech and Language, Phototherapy, Diabetic Eye screening Van, Chemotherapy Van and all existing Outpatient clinics.		
41	Various clinics, where Consultants come to see patients , chemotherapy, renal dialysis, minor surgery, physio,		
42	Endoscopy, MRI scanner to be present on a rotation as patients travelling to GRH is too far. Venepuncture services results been quickly processed rather than being sent to lab		
43	Urology Eye Clinic		
44	The services being proposed are good BUT can the staffing be found to deliver them? We have seen GHFT pull x-ray staff back into the main hospital Can endoscopy suites etc. be staffed		
45	A mini bus to pick up all patients to and from the hospital outside of the area with the NHS logo in it as you know buses are now running different times		
46	Smaller procedures and drop in clinics for mental health		
47	All outpatient services		
48	There doesn't seem to be much mentioned about children and I think it's important that there are services available locally for children so they aren't travelling to Gloucester or Cheltenham all the time. I believe		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
	there should be a child friendly environment in the hospital as well due to the distressing nature that hospital visits can have on children. This combined with a dementia friendly environment would make the hospital an easier place to visit.		
49	Extend x ray opening (see previous) Blood results available online to GP practices Endoscopy services should definitely be returned in the forest		
50	As listed		
51	as many diagnostic procedures as possible Orthopaedic and respiratory procedures - minor injuries		
52	We need the same outpatient services retained as we currently have. This should be in line with the Forest population, which is growing due to extensive growth of new housing within the Forest.		
53	Too far from here for outpatient services and not enough public transport. Perhaps the NHS could provide a noble such as the breast cancer screening for this no man's land		
54	Orthopaedic ophthalmology Cancer services Paediatrics Cardiology diabetes clinics Endoscopy General Surgery Histology Rheumatology Pain relief Urology		
55	Minor A&E as at the Dilke now We all have the option to go to Gloucester but choose to get to the Dilke because the service is much better, quieter, more personable, more friendly. We try and avoid A&E in Gloucester if at all possible. Also x rays, blood tests, ECG - Everything the local doctor cannot do or will not do in a timely way. Blood tests at Newent took ages!		
56	As many as possible including the development of mobile screening services such as in cancer checks, eye screening and perhaps initial cardio checks		
57	Larger complex leg wound services Dementia and falls clinics Minor procedure clinic		
58	Everything.... why bother otherwise? If people are travelling miles to get to an appointment then everything needs to be done at that appointment in that location. For one medical issue I had to visit 3 hospitals and something so quick took over a year to resolve.		
59	Consultant outpatient appointments		
60	At least the ones that are currently available and consider increasing these to reduce reliance on the general hospitals.		
61	Certainly the need to build on the services we currently have, an increasing community requires increasing services not less!		
62	X rays, blood tests, chemotherapy, physio, Maternity		
63	The same as any major hospital		
64	Dental services and other outpatient services currently provided at the local health centre		
65	Lydney used to have 24 hour emergency cover and a minor surgery unit both used and appreciated by family members on many occasions. Cinderford is too far away from us for emergency cover. Again - why Cinderford? Clinics in Lydney are well used and essential to services		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
66	As at present		
67	Cardiology Endoscopy Dermatology Ultra sound Clinics where the carbon footprint is reduced from travelling		
68	Full time X ray availability		
69	If anyone are feeling unwell they should be able to call the hospital to speak to anyone		
70	Specialist coming out		
71	Cardiac investigations - Ultrasound - 24 hour monitoring boxes to be fitted / removed respiratory investigations Orthopaedic investigations Minor injury unit (to include doctor on site when open)		
72	Musculoskeletal, paediatric, oncology, gastrointestinal, cardiology		
73	The full range of what is currently being offered including reinstated of respiratory and cardiology Endoscopy Ability to specialise as a centre of excellence? eyes or dermatology Light therapy Day case blood transfusion and iron infusions Children's specialist clinics Midwife 10 day baby checks		
74	Defibrillators locally Diabetic services		
75	As above consultant Clinics X Ray Minor Injuries Nursing Clinics eg ulcer dressings		
76	All that are provided so ably at the moment. I benefit hugely from being able to have expert medical care from Consultants in Lydney. 2 hospitals could be upgraded to provide all facilities outlined on page 8		
77	I think the new hospital should be built in Lydney as tourists that visit the Forest of Dean would be able to find the hospital if situated in Lydney		
78	As many diagnostic services as possible so that trips to the hospital in Gloucester can be minimised. Obviously some very specialised diagnostic services will not be available locally, but as many as possible should be.		
79	Scans &/o x-rays; Maternity services;		
80	Sufficient parking .		
81	Minor surgery proceedings etc biopsies setting broken bones		
82	As now a resident at old Lydney estate, in protest I am at present not registered with a GP. My Faith in the British health service is NIL - I do have / had spinal fracture of left leg. In Texas USA and was operated on by a wonderful surgeon		
83	A range of outpatients services such as cardiology, Respiratory, General old age medicine General surgery, access to MRI scanner and CT Endoscopy		
84	Minor operations, we used to have this many years ago. X-rays and scans, we should be able to have most of these locally as well.		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
	Plus regular out of hours GP services.		
85	As I said previously, being able to see a specialist without the long drag and wait in Gloucester Royal.		
86	Definitely a state of the art X ray department and 24hr.A & E		
87	As many outpatients surgeries as possible especially any which would avoid travelling to Cheltenham by anybody living on the western side of the Forest		
88	Podiatric		
89	Follow up check-ups after surgery		
90	Any that would reduce Forest people having to struggle with such useless public transport, travel at least an hour each way for 10 minutes with consultant		
91	Appointments covering all consultants so people do not need to travel to Gloucester or Cheltenham - at the present time our local hospitals are NOT used enough for outpatients appointments		
92	All clinics which currently operate at Lydney and Dilke. No reduction in any of these should be contemplated. Also chemotherapy all year round and not occasionally as at present. X ray also essential and adequately staffed		
93	More clinics - particularly hearing / eyesight and follow up clinics when it is necessary to see a consultant. Often these clinics only take a short time but it is necessary to travel to Gloucester / Cheltenham		
94	X ray services - not always currently available minor surgery - used to be provided at Lydney minor injuries Endoscopy Chemotherapy Consultant led outpatient appointments Blood transfusions		
95	Speaking from personal experience - physiotherapy. Maybe follow-up checks/referral from more serious operations.		
96	All the services currently provided. Outpatient Rheumatology clinic and MS clinic would also be helpful.		
97	Out patients clinics for specialities not catered from presently would be a great benefit. for some elderly patients getting to Gloucester is difficult. It is a long walk from the bus station or train station. I agree with all the ideas put forward		
98	Nothing to add to the thinking set out on p8.		
99	All outpatients care has a cost and for many outpatients in the FOD it would be easier to get to Gloucester than getting to the new planned hospital due to the lack of public transport and access ability for elderly outpatients		
100	Agree with points covered		
101	Physiotherapy, Audiology, Diabetic, Eye Clinic, Diabetic X ray		
102	See Below Outpatient services best provided in local facilities - ease of access for all would allow Cinderford to give more emphasis to inpatient provision		
103	Respiratory and Orthopaedics. As stated on page 8, minor procedures and investigations should be provided. With the poor local bus service in this area it is sometimes hard to get to Gloucester for appointments.		
104	Podiatry, Physiotherapy, talking therapies, antenatal, dialysis, diabetic services, blood donation, hearing and sight treatment.....		
105	Physio, mental health, diabetic , podiatry, x-ray screening, diabetic....		
106	Cinderford is not an appropriate location for outpatient services due to its poor road communications, particularly in poor weather or in snow, which it is prone to due to its high elevation. This has not been properly taken into account. It often takes longer to get to Cinderford from Tutshill or Woolaston area than it does to get to Gloucester along the lower-lying A48.		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
107	Therapy - Physical and mental Podiatry Maternity Dialysis Cancer treatment		
108	Suitable transport for those unable to reach the hospital.		
109	All outpatient services should be available to include the clinics which are now held regularly at both Lydney and the Dilke which will take the pressure of GRH and Cheltenham.		
110	Consultations with the full range of medical, surgical, nursing (including mental health), physiotherapy, diabetic clinics, podiatry, audiology, ophthalmic services. Ante and post-natal clinics. out of hours pharmacy.		
111	Outpatient services including out of hours dental work in case of unexpected accidents.		
112	As many services as is possible (to realise outpatient departments in acute hospitals) and to provide regular treatments i.e. chemotherapy locally		
113	The options already mentioned are useful no mention to date regarding services for children - cardiology or more extensive orthopaedic / trauma. Rehabilitation and such like currently available at GRH fracture clinic		
114	X ray broken bones and resetting Attending to dislocation		
115	Whatever services are in demand		
116	X ray and other radiography if possible, eg CT scan, mammography MIU Physiotherapy Other therapies eg cardiac rehab Mental health support, adult and children Maternity		
117	Diagnostics including X-ray and scans etc. Physiotherapy MIU		
118	A wide range of outpatients services		
119	Include podiatry		
120	Cancer Dementia Eyes - if you have an accident X ray Scans Anything to avoid having to go to Gloucester Hospital - Too Far		
121	Minor Injury Department 24 hours		
122	Physiotherapy service Emergency mental health support - call line or clinic A drop in out of hours minor injuries unit to take pressure off Gloucester A&E		
123	Those most used by residents of the Forest of Dean - simply use present data		
124	Revert to the previous procedures implemented particularly at Lydney, not run them down and increase expenditure at the two existing locations		
125	clinics - pain management, CFS / ME, eye clinic, diabetes clinic, Children's services, weight management . bariatric services		
126	It would be good to have access to diabetes clinics locally, to continue to have an X ray department, eye clinics, feet clinics - some of these are already accessible in our health centres but many patients have to travel to either Gloucester or Cheltenham		

Outpatient services - What outpatient services do you think we should provide in the new hospital?

		Response Percent	Response Total
127	Maybe 24 hour A&E with X Ray also! Any that will avoid having to travel to Gloucester or Cheltenham		
128	Assessment and rehabilitation - providing patient centred holistic therapy for people with long term chronic conditions. Promoting prevention and self-management. Supporting reducing hospital admissions, active social prescribing / sign posting		
129	Planned clinics for joints, heart and diabetes, breast screening (but latter 2 can be done closer to home in selected centres eg main place Coleford.		
130	Biochem resources, X-ray facilities, including head and neck injuries. Consultations with key NHS staff, including the range of medical, surgical, nursing, physiotherapy, mental health counselling. Pharmacy, dental, ante and post-natal care, audiology. Diabetic clinics.		
		answered	130
		skipped	27

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	121
1	You have not mentioned in your booklet about ultra sound and other diagnostic imaging methods that would also reduce the need for people to have to travel to Cheltenham and Gloucester hospitals.		
2	x-ray blood tests Consultant clinics Ultrasound MRI scanner +++		
3	It would be good for the patient to get the same diagnostic service as they get the other side of Westgate Bridge but we can only dream.		
4	At least the same capacity and services as the sum of the two currently available hospitals. With space for expansion as and when required in the future.		
5	The mobile unit for Cancer care is invaluable, but with the number of patients increasing how viable is it for the screening services to be incorporated in the new hospital.		
6	Imaging ultra sound and X-ray phlebotomy		
7	Blood tests X-ray Ultrasound Endoscopy Sigmoidoscopy colonoscopy Biopsy taking ECG/24 hr tapping Optical services Hearing tests		

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
8	Top of the range scanner!		
9	Eye screening, x ray, scans, cancer screening equipment. Dialysis.		
10	Mobile MRI monthly Blood testing X-Ray 7 days service Point of care testing on hospital wards Mobile dental service		
11	Dermatology Diabetes clinic Respiratory medicine All the services currently provided at Dilke and Lydney hospitals		
12	As per current services offered at the Dilke & Lydney Hospitals. Also Back Pain Clinic.		
13	Any services that can be provided at a local hospital - eg. ophthalmology screening.		
14	X-ray department open all day		
15	X-Ray Endoscopy Ultrasound Breast Screening		
16	X-ray Blood tests ultrasound		
17	New hospital should have diagnostic services at least as good as, and complimentary to the retained existing hospitals, with the addition of a full maternity unit.		
18	radiology,		
19	Everything mentioned in the leaflet, plus perhaps MRI?		
20	Cancer etc.		
21	Everything that is offered at Gloucester/Cheltenham hospitals.		
22	X-rays, Ultrasound & associated scans		
23	X ray suite CAT scan MRI Path lab that can process local blood tests Endoscopy and Colonoscopy		
24	Oncology diagnosis and blood testing. Mental health diagnostic services are also very much needed.		
25	Everything that is needed for local people		
26	X-Ray Blood Tests Dialysis Endoscopy		
27	X-ray, Cat-Scan, Ultrasound, MIR, Blood work.		
28	Bloods scans minor investigations as much as possible in one place		
29	As for outpatients		
30	MRI, breast screening etc.		
31	All, Again, wouldn't like to list as I don't know the options that are available.		

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
32	All that we have now plus dedicated mammogram facilities as well as laparoscopic diagnosis!		
33	Reliable x-ray Endoscopy Screening 24 hour ECG		
34	Reliable x-ray facilities - particularly at the weekend when the Forest has significant numbers of visitors taking part in sports. Currently any injuries are having to go to Gloucester to be able to access x-ray. Endoscopy sounds good. Cystoscopy and colonoscopy. Monitoring facilities eg. 24 hour ECG, Sleep clinic		
35	This needs to be based on the availability of those services in GRH and Cheltenham hospital. Duplication of already-existing and efficient services shouldn't be a priority in my view.		
36	X-rays and scans		
37	X-ray/ultrasounds and endoscopies		
38	X-rays, ultrasounds, phlebotomists, CT scanner.		
39	MRI, facilities not necessary placed at the new hospital, but have a mobile one on a rotation		
40	As many as possible to avoid lengthy travel. Often someone in poor health needs services close to home		
41	Everything		
42	Mental Health /BPD / help people on the street and people with LD		
43	all diagnostic services		
44	As listed		
45	As many as possible to save going into Cheltenham or Gloucester		
46	A full and comprehensive diagnostic service should be provided to ensure patients get the best treatment and response times.		
47	Take too long to get there for any diagnosis		
48	X ray MRI CT Blood Preventative Screening		
49	X ray, ECG, Blood Test, Lung Function - all the tests		
50	permanent x ray services and a full range of basic plus specialist blood checks obviating the need for referral to Gloucester / Cheltenham hospitals. I support the provision of an endoscopy unit and mobile units that would report directly to the Forest hospital rather than as now Gloucester / Cheltenham (see previous comment)		
51	Everything...		
52	X ray		
53	Unsure		
54	The present Dilke / Lydney hospitals have x ray, Ultrasound scanning, these are a minimum necessity so improve on these and include your proposed endoscopy suite		
55	X ray, CT scan, blood tests		
56	As in any major hospital		
57	Must maintain current provision - X ray, Physio and clinics		
58	As at present and endoscopy		

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
59	Breast, eye, D.R great to have MRI or CT but no doubt impossible like everything else		
60	no new hospital needed spend money on the services onlined in the paper. Extend the number of beds for FOREST PEOPLE		
61	Endoscopy would be a good commodity as the one that was, was taken away		
62	Endoscopy as before at the Dilke but now taken away		
63	X ray Ultrasound Cardiac Monitoring - to include monitoring boxes - 24hr / 48 hour / weekly		
64	Up to date X-ray and more staff. CT and ultrasound scanner may be of benefit. I also think there needs to be observational wards.		
65	Mobile MRI monthly Ultrasound Venepuncture ECG recording 7 day X-ray service using digital imaging MSK Falls clinic		
66	X Ray Scanning (Ultra Sound)		
67	See my comments made on outpatients services - upgrade and spend money on existing hospitals		
68	C t scans would be good so Forest of Dean people do not have to travel to gloucester		
69	See previous answer.		
70	X-ray, ultra sound & related scans		
71	X-ray. Endoscopy. Colonoscopy.		
72	CT Scans, particularly cancer related Pregnancy Scans Mental Health testing for age related illnesses Ophthalmology and audiology services		
73	Cancer Dementia		
74	Confidentially I am reluctant now to trust anyone in the National Health Service in the UK. I am appalled at how I was misjudged, misdiagnosed and obliged to take Anti psychotics. Please verify with clinicians		
75	MRI 7 day X ray Breast screening		
76	Full range of scans, blood tests and other things that a bigger hospital could offer. Quite often you can't even get an X ray done locally, which is crazy considering we have two machines. But we need more scans and equipment, to get most tests completed locally.		
77	Anyone having chemo, or dialysis would benefit.		
78	X-ray ,endoscopy, basic blood testing		
79	Endoscopic Services		
80	All forms of Cancer		
81	Any X-rays or scans or biopsies that could be done safely. Endoscopy and other types of straight forward		

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
	tests. Ladies problems tests could be done as the equipment needed is small Diabetic clinics and support		
82	CT scanner MRI Scanner Ultra Sound X ray		
83	Blood tests for every person needing an urgent analysis, X ray, breast screening, hearing loss. Endoscopy and other minor orthopaedic analysis not needing specialist attention		
84	Heart Monitoring Lung Function Bowel / Bladder Cancer diabetes Scanning for DVT Hearing Eye sight Skin problems		
85	Scans - Ultrasound, DVT diagnosis Endoscopy X rays		
86	Diagnosis for as many conditions as possible. The practicality of travelling to other larger hospitals is not so easy for many elderly people.		
87	Endoscopic diagnostic suite		
88	Full time X-ray department (see previous comment). Also a phlebotomy clinic to avoid the necessity of travelling to Gloucester for blood tests.		
89	I agree with all the proposals for improved services. Is there any possibility of having a scanner in the future. I realise there would have to be a huge amount of fundraising for this. I think it is good to look ahead to the future as much as possible at the planning stage. An endoscopy unit would be an excellent idea as outlined		
90	Nothing to add to the thinking on p9.		
91	Any diagnostic services must be cost effective and not increase bureaucracy at the cost of patient care		
92	Endoscopy and dermatology - removal of small lumps and bumps - some cancer related		
93	x ray, Endoscopy, minor Injuries		
94	Everything possible Handheld scanning devices EG after failed breast scanning attempts in the usual uncomfortable machines twice, causing considerable bruising and pain, a subsequent scanning in an ordinary consulting room with a handheld device and monitor, gave a much clearer picture according to the consultant. Why can't this be the regular method and done locally? it must be a diagnostic method applicable to other conditions, much more friendly, comfortable, less time consuming and fraught than trips to Cheltenham and better than a mobile van occasionally		
95	Definitely diagnostic including endoscopy and colonoscopies. Of course breast examinations even if provided by a mobile service must be continued. I also believe wellness checks should be available for men.		
96	Sight and hearing, diabetic, x-ray, blood and urine testing, mobile breast screening, scans		
97	Blood and urine testing, scans, x-ray.		
98	Diagnostic services need to be provided, particularly X-ray and scans, but these are also needed for the large Lydney area population.		
99	As many as possible based on local need / evidence		

Diagnostic services - what diagnostic services do you think should be provided in the new hospital?

		Response Percent	Response Total
100	Highly dependent on the money available.		
101	X-ray, ultrasound. MRI scanning.		
102	Haematology, biochemistry, x-ray which includes head and neck.		
103	Cancer scanning Stroke diagnosis Heart attack diagnosis		
104	With the forest having, along with the rest of the country, an aging population help with the diagnosis and treatment of age related illness of all sorts.		
105	As deemed appropriate and workable by medical experts		
106	As many as possible		
107	Whatever is needed		
108	X-ray, etc - CT scan, ultrasound Endoscopy Out of hours GP		
109	As many as possible		
110	Access to consultancy services		
111	As technologically advanced as cost and availability of expert staff will allow - expert examination of urgent case admissions		
112	Cancer Dementia		
113	no strong feelings		
114	That's hard to make a judgement on. Definitely those mentioned on page 9 with priority for anything else that will reduce stress for people who may otherwise need to travel further so possibly mental health provision / or dementia / or a paediatric unit. Need to be based on local statistics and data		
115	Simple diagnostic Services - need to go to Gloucester or Cheltenham for anything more complex		
116	Breast screening X ray Blood tests / pathology		
117	ECGs X ray service		
118	CT scanning would be appropriate as well as ultra sound at present		
119	Radiology and ultrasound		
120	x ray and blood testing; minor injury; endoscopy ok; better physio - assessment, appointments and focused for condition		
121	Initial x-rays, haematology and biochemical services.		
		answered	121
		skipped	36

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	115
1	Sexual health - as previously mentioned I believe it should be based in the new hospital and not in Coleford Health Centre, or at least an additional service from the new hospital should be considered		
2	Maternity Palliative care		
3	Counselling services to help those with mental health problems, it can be problematic to have to travel to Gloucester or Cheltenham in order to access these services.		
4	Dental service		
5	Support for the elderly in the home by making information easy to access		
6	cataract operations dermatology clinic cafe/restaurant meeting room for education - eg diabetes care, antenatal care		
7	If possible the same services as Gloucester, Cheltenham, Tewksbury, Stroud and Cirencester.		
8	Somewhere for relatives to stay, for those with young children or people who live outside the area or cannot easily commute to and from the hospital.		
9	a set of stocks for CE of CCG to be pelted with rotten fruit		
10	All things that can be done within a community setting. To include all persons in the forest from cradle to grave. Make it a flagship hospital to be proud of . In an ideal world superb maternity/ birthing unit / excellent palliative care and absolutely everything in between		
11	Free parking!		
12	A service that allows the people to know that the new hospital will satisfy their needs and allow them to save time and money. Mental health dept. Free parking is essential for this hospital to work!		
13	The ability to accommodate and work with 3rd sectors to improve access for our patients		
14	Services to promote healthy lifestyle		
15	Any services which do not require major cost outlay in terms of equipment and staffing, but that would benefit residents not having to travel to Gloucester. As from 1/9/19 it will take 1.5 hours to travel from Coleford to the bus hub in Gloucester. This, coupled with either a walk or the free bus to GRH will require a journey time of over 2 hours in each direction. Although Gloucester is only 20 miles away, it isn't always realised that this is the time it takes on public transport. This is not at peak times. this is a standard journey time.		
16	Out of Hours/Minor Injury		
17	Maternity Ward		
18	Free parking and full public transport access from the whole of West Gloucestershire		
19	Maternity A&E		
20	24/7 A&E		
21	Counselling, Physiotherapy health visiting& occupational health		
22	Dementia Care centre Obstetrics and antenatal department		
23	An ambulance station. A maternity unit.		

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
	An operating theatre (even if for minor surgery only).		
24	Definitely a place to go for emergency treatment		
25	Late night minor injuries		
26	I would love a walk in urgent care clinic- ie. Non-emergency care for immediate access to avoid having to wait for a doctor appointment or go to A&E and waste their time.		
27	AHP services that extend further than physio and OT Dietitians speech therapy Health educators		
28	Dialysis and other regularly needed treatments. A maternity unit.		
29	Weight clinic like they have at GRH		
30	Maternity. How many babies will be born at the side of the road		
31	Don't know as don't know what falls into other services		
32	Orthopaedic care!		
33	minor operations		
34	Good physio facilities Community space and access to social prescribing		
35	I would like to see a joined-up service where local residents can get health and social care support in one visit, rather than getting bogged down in a number of different systems that don't work closely together.		
36	Maternity		
37	Endoscopy, Midwifery, One Stop minor ops, Dermatology, Neurology, Mental Health		
38	audiology		
39	Day Hospital for care of the elderly, post-natal care , antenatal care		
40	Podiatry, chiropractor		
41	As many services as provided in Cheltenham and Gloucester so patients do not have to travel 20 or 30 miles which is expensive if people do not drive and have to pay to get to Cheltenham or Gloucester		
42	Mini A&E that can be first line of treatment for potential heart attack or cardiac arrest patients to save lives		
43	Dentist Fish tank so people are more relaxed. Usual things like a shop, somewhere to eat. X ray, MRI tunnel things like that		
44	Dental service if possible		
45	all		
46	I personally think it is a shame that a Maternity unit will not be available to women in the Forest of Dean area because travelling to Gloucester is both long and sometimes arduous depending on roadworks, traffic and weather. I appreciate the need may not meet the numbers required to warrant a Maternity unit but I think from a point of view of the distance to any other Maternity unit it is inconvenient and a definite worry.		
47	hospital transport will need to be widely available and costed in as public transport from the Tutshill area is pretty much non-existent at the moment. Wellbeing and aftercare hubs to get further information and meeting place. The joining up of mental health provision with physical health		
48	Ante-natal and maternity services. Retention of the current A&E facilities for minor injuries.		
49	For there to be an minor injuries unit to be kept at the Lydney site plus outpatient services		
50	Day case Surgery		

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
	Joined up discharge policies with community care		
51	Local community hospital In bed and nursed convalescence Stroke Care		
52	I hope provision can be made so that certain operations can be carried out perhaps in the case of hernias, Knee / hip, bone breakage etc. as I think it is important to retain the concept of the hospital being a treatment centre for relatively minor / straightforward injuries		
53	Dementia friendly day rooms (Reminiscence Rooms) Café Larger relatives room - Difficult conversation room Larger skills lab and resource room for staff in-house training		
54	The return of a maternity unit, I don't agree with the statement that current birthing rates are too small to warrant a birthing unit. Again I refer to the ever increasing local community and risks associated having to travel further from home in an emergency.		
55	cognitive therapy, mental health counselling		
56	Cancer Treatment		
57	A minor surgical unit such as was previously in use at Lydney		
58	Hearing tests and deaf aid tests		
59	Dentist End of life care Dementia care Elderly care		
60	No need for a new hospital 24 Hour A&E 100% of the week X ray		
61	Special care should be given to those patients coming to the end of their life and be given great care and sympathy to families		
62	End of life care. This is despicable who ever put this forward THINK AGAIN. Families suffer at these times. Do you have any feelings for the families - NO		
63	A pharmacy department (to dispense medication as prescribed by a medical team for you to take home with you - from both outpatients and discharge from inpatient stay)		
64	I really, really would like to see paediatric services.		
65	ability for 3rd sectors to be part of the hospital holding information sessions to help patients manage their own health Age UK British Legion Dementia support		
66	Physio		
67	build and improve on existing services		
68	See previous answers re. diagnostic services, with the added point that waiting times should be as brief as possible.		
69	Maternity & out of hours GP & Prescription Services		
70	See previous answer		
71	Maternity Small surgical proceedings		
72	I love Lydney hospital and the Dilke Hospital. In fact both have signed some art work I am using to highlight daughters life limiting rare disease		

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
73	Access to third sector such as Age UK British Legion Dementia Support Health Coaching		
74	Cancer treatment, having to make someone go all the way to Cheltenham for Chemo and such treatments, from Cancer to Leukemia and everything between is bad for them and their families. They should be able to get treatment locally, and only need to travel for consultancy.		
75	Being able to ask for help and support for any one that is caring at home for a loved one.		
76	I would like to see a maternity department, a specialist paediatric team and geriatric services		
77	To continue good physiotherapy		
78	Café Area		
79	I would like to see them care as many services as possible to prevent public transport issues, long waiting times at Gloucester and Cheltenham and a minor injuries and A&E department to cut down waiting time on trolleys in Gloucester		
80	Follow up appointments for post operation cases which are a significant time waster for many patients who are making good recovery		
81	Physiotherapy Falls Clinic Room for patients families if overnight attendance is necessary Group Therapy Clinic eg. diabetes, weight problems Dementia		
82	Maternity care Stroke rehab		
83	Minor Injuries unit. Birth Unit		
84	Maternity - local provision for safe birthing		
85	Services for people receiving radiotherapy and chemotherapy. It is a long way to Cheltenham on a daily basis when people are feeling unwell. I understand there is a chemotherapy bus, but don't know of anyone who has been offered this service		
86	Nothing to add to the thinking on p9. I accept that there are limitations on what can be provided at the new hospital. However I have an expectation that the services currently available locally will continue to be provided to at least the same level when the new hospital is open.		
87	Orthodontist. Two of my grandchildren have had to see an orthodontist through no fault of their own. A dentist in Coleford had the licence to carry out this work. That has now been stopped and fittings, repair have to be carried out in Gloucester. That is not a saving as they have to be taken out of school (half day) to travel 50 miles (environmental damage). Before having new facilities sort the current ones out		
88	Sufficient beds for local people		
89	Maternity to keep "free mining" tradition		
90	Open all hours, not merely 9-5 minor injuries Direct telephone advice by trusted and knowledgeable staff including out of hours service. Staffing - Lydney X ray services - including new facilities but staff were not always provided from Gloucester for that service - go home and come back tomorrow! Cinderford staffing should be independent of Gloucester, not dependant on Gloucester Royal's good will		
91	I don't know how many people have to travel to Gloucester for dental surgery, but if enough people currently do I believe this is another service that should be available. Continuation of the mobile chemo service is also important. As this area has a growing number of elderly patients general services needed by them should be catered for.		
92	? sorry, I think I have covered everything I can think of on previous pages		

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
93	Maternity unit		
94	Good access, parking and transport links Partnership working with other organisations and links to community support: VCSE, Healthy Lifestyles, Care navigation, Volunteer support, advice services. Community space: garden, allotment, room for community groups?		
95	A large car park which hosts radiography, chemotherapy, breast screening vehicles. A car park with disability bays for patients and carers, buses and taxis. IT facilities which link directly to medical and surgical expertise for quick diagnosis, e.g. dermatology - pictures of skin lesions, and further advice on treatments.		
96	Being away from a lot of residences, access to a cafe and somewhere to sit and relax with patients, both inside and outside if possible.		
97	as deemed appropriate and workable by medical experts		
98	See previous page		
99	Full range		
100	PTSD clinics, whatever need dictates and the budget allows		
101	Stroke and cardiac rehab Dialysis & blood transfusion Diet advice		
102	Some beds		
103	A fully functioning A&E department		
104	Telephone advice Volunteers helpers		
105	Plastering if broken arm		
106	Maternity unit for births anticipated as straight forward		
107	A holistic approach to health and wellbeing through arts and nature and physical engagement activities for patients and the community ie preventative for example - dance for older people. Singing for those with lung conditions... Garden project many many more options based on well-being evidence		
108	Hub for Emergency care in the community team - aim to prevent hospital admissions if possible. Increase access to extra GP appointments especially same day appointments		
109	One stop shop for older adults services - eyes / hearing / chiropody / memory clubs / activities to reduce isolation / educational groups for managing physical and mental health		
110	Certainly we must keep physiotherapy, orthopaedic services, gynaecology, podiatry, Accident and Emergency services around the clock		
111	As I fortunately, am not a regular user of hospitals, I do not know what services are available at the local hospitals		
112	Children's physiotherapy / hydrotherapy State of the art physiotherapy and rehabilitation for neurological conditions, to become a leading centre for rehabilitation		
113	Consideration to elderly and most vulnerable in society with ease of access and communication should always be a priority		
114	Physio gym and teams working together to get best out of joint replacement and investment of time and money there by getting people better quicker. sexual clinic; falls prevention,		
115	A large carpark to host mobile service vehicles for radiotherapy, chemotherapy, breast screening and		

Other services - what other services would you like to see in the new hospital for the Forest of Dean?

		Response Percent	Response Total
	dentistry.		
	A carpark for patients' carers, buses or taxis.		
	Room for family therapy and group therapy		
		answered	115
		skipped	42

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	106
1	Early communication using a full range of methods		
2	Keeping the staff that are currently employed and ensuring that there are adequate staff for a new hospital		
3	Travelling to the hospital by public transport and the impact of winter weather conditions		
4	How far to travel? how to get somewhere and how long it takes (traffic on A40 into Gloucester or Cheltenham for example)? how much to pay to park?, how far to walk when you get there? how easy it is to find where you are going? Is it the same consultant or familiar face?		
5	Everyone should be treated the same, but self-inflicted should be at the end of the line.		
6	The total capacity of the hospital exceeds current requirements, to allow space for growth. This will be particularly important for the 1950's and 1960's baby boom years patience who will probably put additional pressure on all health services over the next 30 to 60 years.		
7	The mobility and ease of access, either by public or private transport. The reduction in time for waiting for results.		
8	Outpatient clinic/surgery/diagnostics Maternity unit Palliative care to die in the forest rather than some unit in Gloucester		
9	Adequate parking spaces in size and number!		
10	Elderly people should be considered first as they are the ones who need this new hospital to help them. They require appointments at times to allow them to attend without worry or cost.		
11	Ensure the number of inpatient beds meets our local population needs a minimum of 30 should be the option Some provision of MSK needed at Lydney		
12	It is difficult for people who don't have transport to access services in Cheltenham and Gloucester. The new hospital in the Forest of Dean needs to provide a wide range of services to meet the needs of the local people, to minimise the amount of travelling out of the Forest. The new site needs to be accessible via public transport.		
13	To include more use of dispensing services such as Specsavers or local opticians for both sight and hearing services, also the same for chiropractic, chiropody and podiatry services.		
14	Accessibility - there are areas of the Forest that do not have good public transport		
15	Communication to be clear and to understand the reasoning being involved in the consultation		

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
16	Making things as simple as possible for the elderly patients		
17	Infrastructure		
18	That they complement our existing services		
19	Currently Lydney is 'on the way home' so my other half can stop in and have his eye checked if he happens to get anything in it - despite eye protection he does get dust and metal fragments in regularly and is vigilant in having them removed. We would need the unit at Cinderford to be open late in order to enable him to safely have items removed before sleep.		
20	Consistency		
21	Make sure you offer all services that are available in Gloucester/ Cheltenham.		
22	Not applicable as I currently have had no reason to access the local hospitals		
23	Accessibility and 24 hour A&E		
24	Transport		
25	Delays to accessing treatment. Spreading specialist services too thin on the ground. the major stuff needs to be kept in Gloucs/Chelt		
26	Access to the site and transport considerations the forest is often not easy to navigate for those who don't drive Make it future proof to cope with increasing demands ahead		
27	I am happy to travel but would like to see arthritis care, imaging and therapies available locally		
28	With having a purpose built hospital, the patient shouldn't need to go to GRH.		
29	Keep people informed		
30	Length of time for diagnosis and possible treatment! Ensure that all patients no matter what their age, state of mind or disability is treated equally and with compassion and care!		
31	Being able to get to the hospital is really difficult if you are elderly or don't drive. The existing Forest hospitals are not routinely offered as a choice, or if they are the waiting times are much longer.		
32	Ensuing the hospital is offered as a choice for outpatient appointments - this would improve local use and make more sustainable clinics. Good range of diagnostic services is crucial		
33	1. Prioritise the health needs of the Forest of Dean specifically 2. Prioritise transport issues that directly limit the ability of people in some areas to access any services 3. Don't duplicate other specialised services in GRH which could provide for Forest of Dean inhabitants if they could easily get there.		
34	depends on what the changes are		
35	Enough inpatient beds, not being used as a dumping place for Gloucester Royal Hospital. Proper care with the appropriate back up.		
36	Transport Accessibility (think about the bad weather)		
37	Information in plenty of time		
38	Transport - Can't rely on the new buses		
39	Waiting lists. Travel. Quality.		
40	I just hope that people are given the treatment they require at a time that is appropriate and that all patients are treated with patience and dignity even if services are limited and staff are struggling.		
41	Transparency, information at each stage. Services continuing in existing hospitals until new hospital		

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
	provision is up and running		
42	Keeping all services local and accessible to all without the need to travel long distances to hospitals outside of the Forest.		
43	I think I have already outlined those. There was a consultation at Sedbury yesterday evening. I think the organisers didn't really want Tidenham residents to attend as despite there being advertising of all other consultations they couldn't find the extra cash to advertise Sedbury one. It just shows the contempt that NHS Gloucestershire has for residents of our parish		
44	Advice on changes Getting information to relative groups		
45	The appointments system - you say we have a choice, but there are no appointments available. When you do get an appointment DO NOT cancel it, we assume the doctor is at a meeting / holiday / playing golf which may not be true! Transport - If the only way to get to Cinderford from Newent is via Gloucester, then we might as well go to Gloucester. It's no good saying it's up to the council to provide buses as they are ALL being reduced to the FOD		
46	I think it will be important to "sell" the new hospital and clearly explain what services are available when it is finally ready to open. Concentrate on the positive aspects and don't apologise for what you can't provide. I think it might be worth targeting every forest household with a leaflet publicising the opening of a new "Royal Forest Hospital"		
47	Making sure services continue to run with correct amount of staff		
48	Proximity, speed, parking, location		
49	Ensuring that access is adequate ie on a main and regular bus route, and ensuring that parking is ample and free.		
50	Better and improved local hospital care for those in rural areas given risk commuting to Gloucester / Cheltenham hospital in an emergency especially in bad weather conditions. Use NHS monies to better use. Less money for high paid executives and more money for front line staff, nurses, more beds etc. Consider weather conditions when considering location.		
51	Minimise travelling		
52	The hospital is in the wrong place. It should be in Lydney		
53	Ensure adequate public transport services and adequate car parking space		
54	Telephone appointments for services such as physio have serious limitations and I feel are not helpful		
55	Transport to and from		
56	Give the people what they want		
57	If you leave things alone there would be no negative impact		
58	If services changes and more staff nurses, being; adult and paediatric trained - I feel the any negative impact would be on the provision itself and whether it can withstand the large population and need for the people within Forest of Dean. You will need to look into high turnover of patient care, more staffing provisions to take on the care needed by demand. Also, looking at a system within urgent care, to quickly attend to needs		
59	not having less services than is currently being provided on two sites		
60	Transport availability		
61	By providing 1 facility at Cinderford - instead of 2 - one of which would service Lydney area and surrounds - you are making life even more difficult for the elderly. bus services are almost non-existent. When I stop driving I just don't know how I will cope		
62	Reliable public transport to the hospital from town and villages in its catchment area, plus adequate car parking.		

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
63	Public Transport. Parking fees. Waiting times for appointments GPs are passed on information about procedures undertaken and results communication shared with GPs		
64	you haven't started the new so called services and you are already talking about changes		
65	As above An apology in writing hasn't been forthcoming (Even now!) I am making a documentary about the story (mine) I have post-traumatic stress disorder I have deceased parents I am sending this form by signed for! The lack of insight to people who are different or perceived to be is appalling! And I am not of no fixed abode!		
66	Accessibility to service Transport routes Inpatient beds must be provided		
67	Do not take away our local hospitals. This is putting people in a bad position socially. The people of Lydney would find it near on impossible to get to Cinderford, it would be easier to get to Gloucester. By taking away Lydney, you are going to impact a whole area.		
68	That a new hospital is fully staffed. That it meets the needs in all aspects of local people, whatever their age or disability.		
69	In the event that you build a new hospital, full paramedic services should remain at Lydney hospital and at Dilke hospital		
70	To have overnight A&E - not to go trailing over to Gloucester Royal or Cheltenham General		
71	situation - due to transport. Increased number of beds and not to be used like a nursing home. Increased clinics to avoid waiting times which are beyond a joke		
72	Help to meet additional travel expenses for those without access to a private car especially when public transport is not available or suitable for the patient. Overnight accommodation for anyone needing to stay with a seriously ill patient when returning home is not a realistically practical		
73	Both hospitals are aware of the needs of patients - do not allow the new hospital to become a faceless new building. it must be made Dementia friendly and welcoming		
74	for patients in the Forest it is very difficult attending appointments at GRH or CGH when appointments are often early mornings due to the traffic and lack of good public transport		
75	Local care, accessibility via local transport		
76	Whilst recognising the need to pool resources, it has to be remembered that the FoD is 45 minutes travelling time from Gloucester and more from Cheltenham. Anything which reduces the services currently available and thereby necessitates travelling to GRH or CGH should be avoided at all costs. Public transport to the new hospital site should also be carefully planned, both for out-patients and visitors.		
77	Access to the hospital is very important for people who do not drive. Will the new hospital be on a bus route, or maybe have a shuttle bus which picks up around the area. for drivers adequate free parking is essential		
78	Any changes should not reduce the quality and timeliness of services available and should not reduce accessibility in terms of time, expense or inconvenience.		
79	Transport. Home care back up, facilities that are accessible locally		
80	The terrain and roads of Forest of Dean district and lack of public transport for some hamlets and villages		
81	No barriers should be created to easy attendance at appointments eg - time / distance / unfamiliarity / disrespect / lack of transport. Early diagnosis is so important in many illnesses THEREFORE advice and assessment should be available in the immediate locality to residents - not only at Gloucester or Cinderford		

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
	both in the North East of the area ie those services at present available at Lydney Eg physiotherapy, consultants visits, X rays should all remain there - perhaps in the recently built annexe to the older hospital		
82	All services currently provided by both Lydney and the Dilke hospitals should be continued with the additions previously mentioned.		
83	Well, I am fortunate in that I live in Cinderford, possibly within walking distance..... You need to ensure that the quality of care at the new hospital equals that available in the two main hospitals.		
84	We should get same care quality as in Glos or Cheltenham.		
85	The current proposal to have only a single Hospital in Cinderford instead of two local hospitals, as at present takes no account of the rapidly increasing population and the poor transport links of the area. The current proposals will have a significant impact on my neighbours who will be unable to access facilities at Cinderford.		
86	How to access the services and exactly what they are. Transport options Good communication to explain to existing users, say for example of an outpatient service, what happens and what to expect.		
87	I feel that the infrastructure being imposed on the Forest of Dean and surrounding areas warrants two hospitals which are both up-to-date and running with outpatient clinics, physiotherapy and diagnostic facilities rather than drag people off to Cinderford which is difficult to get to for most people.		
88	Diagnostic, consultations, physiotherapy		
89	A few 'Open Days' at the beginning so that people can familiarise themselves with the new setup and thus remove any fear of the unknown before they need any services.		
90	I'm sure that like most people a priority is speed of treatment, both from your GP and follow on services.		
91	I would like to be confident my needs would continue to be met with minimal disruption and my personal healthcare is safeguarded		
92	Accessibility at all venues Quick appointments at all levels of care Good signposting for information		
93	Some 50 years ago before and after there was a well-used maternity unit at both Lydney and Dilke. Gloucester was only used for local people in the event of incompatible blood groups, emergencies and complications. It is illogical to say therefore that the numbers of births is currently and for the foreseeable future too small to be provided for. The population since has increased dramatically and continues to do so with a rapid increase in new housing provision particularly in Lydney		
94	Ease of access, both by telephone and physically, car parking - this should be free,		
95	Ease of access - unless public transport improves make sure there's enough parking. Hours of opening Out of hours GP-type service		
96	Travelling into big towns		
97	Local access for elderly people who don't have their own transport		
98	Encourage expression of views with public knowledge that they are being taken into account		
99	An extremely difficult question to answer as I really have no idea what it means. if you mean I am annoyed as I have lost Lydney hospital - yes I am		
100	That there are enough beds and services to prevent relatives of patients, especially the elderly having to fight their way through the increasing traffic to get to other parts of Gloucestershire		
101	Seamless transition Positive staff attitudes No discrimination in the ambulance service - this needs to be eliminated - is it present		

If the way you receive services changes, what are the most important things we should consider to limit any negative impact on you or people you know?

		Response Percent	Response Total
102	Already personally I have to travel to Gloucester or Cheltenham for Diabetes, ophthalmology. The Podiatry service is brilliant but you can't always see the same person and therefore you can't always get the right treatment because of different specialists		
103	Public transport is an issue in FOD I trust parking will be free		
104	Person centred Joined up services, especially communication Promoting proactive prevention Holistic service		
105	Communication in time: we need to know beforehand to be able to comment and have system for giving feedback that is listened to. nearer is better: public transport is getting poorer. There is little access by rail/ only certain routes by bus. What is happening on lydney/ Dilke sites- use the opportunity work with next tier effectively so that time is not lost by wrong scheduling for appointments staffing is employed not so much agency be aware of winters/ flood / snow and getting staff and patients in and out.		
106	Diagnostic and A & E facilities Physiotherapy, consultation with health specialists.		
		answered	106
		skipped	51

Anything else you would like to say?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	98
1	in your opening statement you make reference to "social prescribing" , but you do not go on to explain exactly what is meant by this term, would it possible to have this lack of clarity address in any further communication?		
2	I personally feel that the organisers of this new build do not understand how long it takes to travel across the Forest and that that is why there were two hospitals in the first place. You need to do more PR to get across how is can possibly be cheaper to build a new hospital when that money could have been spent on upgrading the existing, much loved, hospitals which, unlike Gloucester or Cheltenham hospitals, are an oasis of calm when you go in. They will be hard to beat or even equal.		
3	This Questionnaire seems to have been set by MENSA , we all don't have University degrees it seems very confusing and a very poor survey indeed it will totally confuse most people. I would think that most people within the Forest of Dean want to get equal treatment that is given by all the other Hospitals the other side of Westgate Bridge. Also we certainly don't want less beds than we have with The Dilke and Lydney hospitals combined. We have a great aftercare service for the elderly with the Warren Wing we certainly don't want to lose it is a wonderful facility which the big Hospitals within the county can't compete with.		
4	The Forest of Dean deserves a flagship hospital which is able to serve everyone from anywhere and has space to expand. It will also require plenty of parking as many rural communities rely on private cars for transport.		
5	this is a consultation premised on Henry Ford's idea of choice		
6	The forest community have been for too long overlooked with a growing elderly population we need a proper number of inpatient beds		

Anything else you would like to say?

		Response Percent	Response Total
	Limit the load in from maternity unit and have a maternity unit for those mums deemed low risk. Employ people who want to excel at their job who aren't just there because it's convenient for them		
7	A hydrotherapy pool would help me as I have Ankylosing spondylitis.		
8	I hope the new hospital will be everything that we want it to be, free from excessive travelling, consultant appointments, access to diagnostics, emergency access when needed and FREE PARKING.		
9	The hospital must be fit for purpose to meet the local needs this must include end of life beds as an option to allow patient choice please listen to those who know our local population		
10	Anything which can be done to minimise travel to Gloucester will be welcomed, as per my previous comments relating to public transport. Appointment times need to be offered which are supported by public transport to and from the new hospital. Currently, 9am appointments in Gloucester offered to Forest of Dean residents require a "leave home" time of 6.30am for public transport and 7am for driving.		
11	i think its a good idea to ask the population what they would like and consult in this was as long as it is listened to and used.		
12	Some side rooms would be nice for end of life care and family rooms for bereaved family/visitors		
13	If you really want to scrap two hospitals and replace them with one better one, you will need to triple your proposed budget! If you don't know this you need to find another job!		
14	In my opinion it would be better to upgrade the two hospitals already in the forest and considerably cheaper.		
15	Ensure there is parking facilities, free would be nice.		
16	no		
17	I don't think the decision making was as open and democratic as it could be. Moving everything to Cinderford makes no sense at all when it is closer to Gloucester than Lydney and much harder for those in Lydney and further up the A48 to reach. It flies in the face of the fact that Lydney and Dilke were built and fund-raised for by the community and is partially owned by them. Decision making was made by people unfamiliar with the terrain and history of the area. It seems very high handed and smacks of privatisation and personal gain.		
18	Just consider the needs of the local population so they don't have to travel to Gloucester		
19	keep the 2 existing ones and upgrade simples		
20	We need decent FREE carparks that are level such that wheel chair users, people on crutches can get into the building. A drop off zone really is essential. If I am diagnosed with cancer I feel like I am being mugged to have pay for a car parking space to attend for some form of treatment which could last for hours if not all day, its legalised robbery. On-site bus stop / taxi rank would be good.		
21	Please consider the needs of bariatric patients this group is increasing in numbers make doors wide enough scales large enough and provide adequate seating the current hospitals struggle to provide this due to the age of the buildings		
22	No thank you		
23	No transport to get to any villages at night		
24	Questionnaire needs rewording. You can only really answer these questions if you have a full understanding of what the NHS offers. People are only going to answer these questions on what they have knowledge of. Also, peoples needs change as they go through life, so what is relevant to them now, is going to be different in the future		
25	At the end of the day this should be a hospital to help people in the local area!		
26	Great to have a new hospital - let's get on with building it		

Anything else you would like to say?

		Response Percent	Response Total
27	I was at the Citizen's Jury for one day and the enthusiasm of local residents was palpable. I think it's essential that this project presses on now to fulfil all the promise of that undertaking. There are still pockets of deprivation in the Forest where health needs remain unmet and the new hospital project needs to be ambitious in its ethos to meet those needs and reduce health inequalities.		
28	If you wish to reduce numbers of patients going to Gloucester Royal Emergency department, you must provide good 24 hour care at the new hospital. A lot of visits to Gloucester Royal are because the facility at Forest of Dean is not good enough		
29	I would like to put these opinions, why are you doing all of this again as we have already stated we DID NOT WANT a new hospital, you did not listen to the public vote you carried on regardless, you are paying for all of this with our taxpayers money, to send all these people out and about the forest to discuss it all again, all these forms and postage to be paid for, when we said no. I live in Lydney so I will have to travel to Cinderford for a visit or treatment when Lydney is perfectly capable or vice versa if I lived at Cinderford. Why and who do you think you are, telling us what you think we want, the Forest where I was born and still live, should stay as it is with us telling you what we want which we did but you lot chose to ignore		
30	Do not shut the remaining hospital as some people may be taking to them		
31	Keep 2 hospitals		
32	I believe a new hospital is a positive thing in the Forest and I think as long as needs are genuinely met without corners being cut to save money over actual person centred care.		
33	Maternity required to be returned using new hospital would be brilliant. The return of the proper forester essential		
34	Public transport is mentioned as something that has to be sorted before the hospital opens. At present there are some buses going to Lydney from Tutshill in a day, but there is nothing that connects this village with Cinderford and this will have an impact on outpatients getting to appointments		
35	The Dilke Hospital itself is a place held dear by generations of Foresters. Their families paid to build the Dilke via donations and fund raising, this hospital has and always will belong to the community. It should be returned to the community as a gesture of good will.		
36	I spoke briefly to the two people, I was at the hall for another meeting. I said the new hospital was of no use to us and Lydney would have been a more central site. The response was 'Not if you live in Newent'. If I lived in Newent Gloucester would be quicker to get to than Cinderford. Maybe they had more representation on the People's Jury.		
37	Don't develop a service based on 95% use from the start - there needs to be some slack in the system Consider staff recruitment and retention		
38	Unfortunately we do not trust you. you previously said the Dilke was not necessary - but it is still always full. You have to realise the almost total inadequacy of local care in the home and nursing homes and growing elderly population. We need a larger local community hospital with more beds not less. It would be good to understand where the 40 - 60% of non FOD people are in the Dilke. Until you have sufficient capacity elsewhere you must continue to provide for them and more!		
39	Good Luck!		
40	The new hospital must have sufficient beds for all Forest Patients and must include end of life beds.		
41	Firstly you conduct these surveys to get public opinion, when you don't get the answer you want, you ask again until you think you get the answer you want or proceed with what you want anyway. The NHS was built with tax- payer's monies and good will of charity fund raising and donations (like Dilke and Lydney for improvements and much needed equipment it's not there to be given away, diluted or privatised £5 million on a health centre - £11 million for a community hospital??		
42	I am very much in favour of a new hospital based centrally in Cinderford. Let's get the best and most comprehensive service affordable built ASAP		
43	The transport links in the forest leave a lot to be desired		

Anything else you would like to say?

		Response Percent	Response Total
44	You say there has been consultation but very limited info available to general public. Even when Cinderford decided on there was no information on actual site and still isn't. Cinderford has new health centre so everything in just one place, WHY surely Coleford is more central and Lydney more accessible in poor weather		
45	Re care at home, considerations should be given to parking for carers and nurses which is an increasing problem in the private car park at the back of apartments I live and sometimes causes heated confrontation		
46	Closing both hospitals will have a huge impact on the forest. Looking at the new bus timetable, patients who are reliable on public transport will need to travel to GRH as it is impossible to get to local hospitals now		
47	Leave Lydney hospital		
48	Read my letter to the press		
49	I would like to see the new hospital built close to the new doctors surgery currently being constructed at Valley road, Cinderford - On a visit to the doctors, if that GP feels you should have further investigations (Eg X ray, ECG, 24hr monitor box put on and taken off, Ultrasound examination etc.) then just a small walk across the way could see the patient getting those procedures carried out without the need to get transport to get to another location for those services to be carried out - Also a very nice area selling local products and funds going back into the hospital to support ongoing treatments and equipment		
50	I feel this would be an amazing opportunity to fulfil the high demand for the FOD. As a band 6 paediatric nurse, I would consider bank work or even a permanent position, if the right opportunity arose and the available clinic areas were made available		
51	Please reconsider the data for calculating the number of beds a minimum of 24 will not be enough		
52	Good Luck!		
53	Two lovely hospitals (not withstanding - some significant money spent to upgrade both) to be demolished and replaced with what? These 2 hospitals have been lovingly supported by the community for many years - who have poured their own money into them. It is one way to tear the heart out of the community. I am very upset 80 plus person		
54	I am 63 - am I likely to live long enough to see and make use of any improvements?		
55	Why o why is this hospital going to Cinderford, it is ridiculous		
56	My father 94 years old / now deceased was Welsh hence my birth name. He was a serving officer flying in the RAF		
57	I do not have sufficient knowledge to comment on other services. With financial restraints etc there are many other considerations I am very pleased to read local outpatients appointments is a priority		
58	I do not consider the calculation for the number if beds to be correct		
59	Surely a brand new hospital will cost a great deal of money. Would it not be better in the long run to improve the two great hospitals we have in the Forest? Lydney & Cinderford! I cared for my husband at home for 4 years until his death last year. I had to take him to Gloucester Royal for treatment, ie blood transfusions and other treatments. It was a traumatic experience for him and me. Needing transport when he couldn't walk. Being able to go locally would have saved both of us stress and resources. Sorry about the spelling !		
60	I am appalled that decisions made outside the Forest reduces the number of hospital beds and threatens to close our two local facilities without thought for all the money raised and voluntary work done by Foresters to maintain and augment them. Lydney hospital was a gift from the Bledisloe family and it should not be closed on the whim of bureaucrats.		
61	I think there should be ONE good hospital built preferably within the next 3 years. The pace of the proceeding for proposal of a new hospital is regrettably exceedingly laboriously slow. Just get on with it		
62	The new hospital should deliver as much of the services it can safely and be accessible to people from all around the Forest. It should not become bed blocked and keeping the Dilke open would help this. It should		

Anything else you would like to say?

		Response Percent	Response Total
	reduce the current waiting times for minor issues		
63	Any single hospital for the Forest of Dean should be central E.G Parkend Where will my 2 sheets end up? Will it be in the shredder?		
64	The more services we have at the new hospital the less people will have to travel so eliminating the congestion on the two main route into Gloucester / Cheltenham i.e. A40 / A48 This will also cut down on the cost of using the PTS ambulances. Older people find it very stressful having to travel long distances		
65	While the new hospital will be a major asset especially for those who live near to Cinderford, Please make sure that the current hospitals remain fully staffed etc. until the new one is commissioned. Some MIU facility should be available in the South Forest once Lydney hospital closes, through a new health centre		
66	Why can we not use the Dilke site and develop this area. reducing the need to spend money on obtaining a new site		
67	Really hope there is not a reduction in bed numbers from what we currently have. Saying that they are often occupied by residents from other areas of Gloucestershire does not tell the whole picture. How many referrals and requests for beds from GP are refused due to lack of capacity? How many forest patients are transferred to Stroud / Tewkesbury?		
68	I am well aware that the suggested number of beds available at the proposed new hospital is considerably less than that currently available at the existing two local hospitals. I fail to see how this will be sufficient in the light of the increasing numbers of housing and population in this area.		
69	I welcome the proposal for a new hospital and it will improve services in the area considerably. Please be forward thinking in your proposals for services so the hospital provides for the present and the future		
70	No.		
71	I totally agree that NHS needs to spend money on new facilities. Why not build 2 facilities in Lydney and Cinderford on the current sites		
72	It is a great shame that there is not enough money for 2 hospitals or is there now Boris is Prime Minister		
73	Exactly where would the hospital be built? Cinderford is the most inaccessible of places for all SW of the Forest. Any site in the NE of within Cinderford involves congested and narrow roads. A long route is the easiest for any site on the Gloucester Coleford road. Tidenham chase is not a good road. Is there any bus service from Tutshill to Cinderford? Those who are ill are least able to drive		
74	Need to allow people to make a copy of their submission before submitting send. Not possible as far as I can see		
75	It is extremely important that adequate bus and other transportation systems be available within the financial capabilities of those needing them. Reiterating, the bus services around this area are abysmal. With the recent changes made by Stagecoach West to their schedules it is practically impossible to make appointments at the Dilke without using taxis or private transportation.		
76	I would like to emphasise how important it would be to allow for a birthing unit in the new hospital. And to ensure that sufficient beds are provided to cover future needs.		
77	You must provide enough beds for future demand, more than 50 I would think.		
78	Yes. I believe the Citizens Jury was persuaded to vote on the Cinderford location following misleading information provided to them about Cinderford being a "Deprived area". This same argument was put forward to support other controversial local plans and was comprehensively shown by Professor Moseley to be a completely false and baseless reason as Cinderford does not meet any of the Social Deprivation criteria. I still believe therefore that the choice of Cinderford was incorrectly made and should be reconsidered, if there is only to be a single hospital. The location of Cinderford, away from the main A48 link mean it is difficult to reach from so many parts of the Forest of Dean and also that any urgent transfers from Cinderford to Gloucester or other main hospitals would be lengthy. I request that in view of the rapidly increasing housing and population in the FoD, especially around Lydney, that the whole premise of reducing Care to a single hospital and siting that in Cinderford is properly re-		

Anything else you would like to say?

		Response Percent	Response Total
	thought.		
79	<p>Hopefully the researchers are not using post codes as an indication of the number of possible patients as some post codes do not reflect those patients who pay their taxes to Gloucester.</p> <p>As a user of NHS in Gloucestershire I have been amazed at the ignorance of staff managing discharge of patients from specialist hospitals to the community of facilities available nearer to homes which stand on English soil but have been given the label of a Welsh postal code because the nearest post office is in Wales.</p>		
80	Despite what has been decided, I feel that various outpatient services (Cystoscopy, simple x-rays, podiatry etc) could be comfortably located in either Dilke or Lydney Hospitals where the atmosphere would be more 'low key'.		
81	A member of my family has a anxiety problem and some provision for mental health would be an advantage.		
82	I have recently been admitted to Gloucester Royal hospital via a blue light ambulance (emergency) it was apparent road congestion is a major issue. Traffic into Gloucester via all A roads is problematic on a daily basis. A local hospital providing relevant care would ease burdens for acute hospitals and patients alike		
83	If you continue to do what you say and the resources are in place, the outcomes should be beneficial to all		
84	<p>It is shocking that a small cottage hospital like Lydney should be providing beds for Gloucester city. Quite honestly if we are going to continue providing beds for Gloucester City plus the increasing population of Lydney and surrounding forest area, it is totally unrealistic to even think about reducing bed provision from 41 (combined Lydney and Dilke) to 24 - who ever thought that one up!</p> <p>According to your latest brochure no decision has been made re bed provision but 24 was mentioned in your original proposal</p>		
85	Expand maternity services		
86	<p>Plans should allow for future expansion of wards and out-patient services.</p> <p>Should also include a café and a quiet room</p> <p>Above all keep the friendliness that makes the Dilke and Lydney Hospitals so loved</p>		
87	<p>Consider patient miles in the provision of services.</p> <p>Consider Future population growth and were it will be so you can minimise patient miles.</p> <p>More visits are made to hospital for MIU and outpatients than for those occupying beds.</p> <p>but for those in beds a Community hospital and good surrounding is important</p>		
88	The idea of having the new hospital in Cinderford is ridiculous. It is not easier for people from this area to travel too		
89	Id the cost of public consultation justified by the level of response		
90	<p>Local nurses and hospital staff are presently very good and should be re-employed for the new hospital.</p> <p>Those making decisions should realise the Forest people have put lots of money into Forest Hospitals over the years and should continue to have it from that legacy</p>		
91	work with partners from other disciplines ref cultural commissioning Group model		
92	do not underestimate number of beds needed with increasingly elderly population in the future		
93	Have said it all!		
94	When building the hospital please be mindful of the benefits of the natural environment to rehabilitation and recovery		
95	I was fortunate enough to go to the ambulatory department in Gloucester on one occasion, where you were directed to various departments. This was excellent service - maybe something similar		
96	<p>Personally I still regret that it has been deemed necessary to close either Dilke or Lydney hospital. The cost of the new hospital is supposed to be much less than running two out of date older ones - I wonder....</p> <p>I shall not be around to see but hope predications are correct</p>		
97	This is an amazing opportunity to become at the forefront of medical services that will impact future generations. It means so much to have family and friends close during times of poor health. This has such a positive impact on an individual		

Anything else you would like to say?

		Response Percent	Response Total
98	We are the last in the county. Get it built, but do it right, and allow for numbers of population already planned to come in eg Coleford NDP includes 1229 new dwellings by 2026. Do not build too small, and make it accessible. Listen to local people especially those with health understanding who know the Forest		
		answered	98
		skipped	59