






Fit For The Future - What matters to you?

Responses from those who identify as LGBT+






Please tell us what you think about our preferred option to develop: A 'centre of excellence' for Acute Medicine (Acute Medical Take) at Gloucestershire Royal Hospital.

			Response Percent	Response Total
1	Strongly support		15.79%	3
2	Support		42.11%	8
3	Oppose		15.79%	3
4	Strongly oppose		21.05%	4
5	No opinion		5.26%	1
			answered	19
			skipped	0

Please tell us why you think this, e.g. the information you would like us to consider (9)

1	Gloucester hospital is renowned for putting the fear of God into people when they have to go there for care, removing options for Cheltenham - especially during a pandemic seems insensitive to say the very least. We live in Stroud but have previously chosen to drive to A&E in Cheltenham to avoid GRH. I think there should be a lot more work going into trust in our services and more specifically the paper pushers at CCG before trying to garner support for another master plan that will inevitably cost trillions, be done without consent and have frustrating outcomes for patients and staff.
2	Cheltenham needs an acute care ward. how can you have a functioning a and e, which the trust keeps on insisting it will have at Cheltenham with no where for the patient to go after initial treatment? putting sick people in ambulances to grh is ridiculous. making the public believe they will have an a and e when they will have a sub par service is deceitful
3	Cheltenham should remain an acute general hospital
4	There just isn't a big enough ED at Gloucester, not enough Resus vays and just too cramped
5	As long as capacity is adequate and doesnt impact upon other services
6	It does make some sense to centre areas of expertise. However certain things also need to be taken into consideration. Access for people getting to the locations. Danger of additional time for emergency cases having to go to GRH. What is the impact on the other hospitals such as Cirencester, Tewksbury, Stroud etc.
7	No clinicians I have spoken to think that this is a good idea - and I am dubious as to whether this is about patient care or whether it's to save money. Sadly I suspect the latter.
8	Increased chances of seeing the right specialist more quickly. Will provide more focussed training/learning opportunities for junior doctors and medical staff, with continuous supervision by senior doctors. This will contribute to attracting staff and improved retention rates.
9	Too far to GRH for large areas of the county. I live in Cirencester, it can take an hour in peak times to get to GRH.




Please tell us what you think about our preferred option to develop: A 'centre of excellence' for Emergency General Surgery at Gloucestershire Royal Hospital.

			Response Percent	Response Total
1	Strongly support		26.32%	5
2	Support		47.37%	9
3	Oppose		15.79%	3
4	Strongly oppose		5.26%	1
5	No opinion		5.26%	1
			answered	19
			skipped	0

Please tell us why you think this, e.g. the information you would like us to consider (5)

1	There is too little trust in the care provided by GRH, from poor food, lack of staff, nasty conditions and poor staff morale to convince me that a bunch of desk workers in Brockworth have the support of the grass root level staff. There needs to be far more public trust in CCG and GRH before big moves are planned.
2	Cheltenham should remain an acute general hospital
3	Because the majority of emergency admissions go to Gloucester so it is logical for them to have all emergency surgery. However, I think Cheltenham needs to have a 24 hr ED with a specialism in oncology, urology and colorectal.
4	Yes but the risks of additional transfer time for patients. Waiting times are already considerably higher. Can this be mitigated by keeping 'much less urgent cases away'? Strain on Ambulance Service. How does this all impact the other Gloucestershire Hospitals?
5	Quicker, more direct access for patients to the right specialist. A 'centre of excellence' will be an attractor for young doctors. Concentration of the right staff cover. Concentrated and improved learning opportunities for junior staff. However, resources, including beds, nursing staff and theatres, will need to be increased at GRH accordingly.

Please tell us what you think about our preferred option to develop: A 'centre of excellence' for Planned Lower GI (colorectal) general surgery at Cheltenham General Hospital (CGH) or Gloucestershire Royal Hospital (GRH).




			Response Percent	Response Total
1	Strongly support		52.63%	10
2	Support		31.58%	6
3	Oppose		0.00%	0
4	Strongly oppose		0.00%	0
5	No opinion		15.79%	3
			answered	19
			skipped	0

Please tell us why you think this, e.g. the information you would like us to consider (5)

Please tell us what you think about our preferred option to develop: A 'centre of excellence' for Planned Lower GI (colorectal) general surgery at Cheltenham General Hospital (CGH) or Gloucestershire Royal Hospital (GRH).

			Response Percent	Response Total
1	22/10/2020 16:03 PM	I would like Gloucester to be a better option for care, this should be improved so that its more viable than having to travel to cheltenham to visit people.		
2	17/11/2020 20:54 PM	Cheltenham needs to become a centre of excellence for colorectal surgery, urology and oncology, both planned and emergency		
3	03/12/2020 11:16 AM	As per previous comments		
4	13/12/2020 17:20 PM	Concentration of a specialised team and the necessary resources.		
5	18/12/2020 11:56 AM	The plan seems to be to downgrade Cheltenham GH despite the wide catchment area and substantially increased population in the rural parts of North Gloucestershire		




In supporting our preferred option to create a single site 'centre of excellence', where do you think a 'centre of excellence' for Planned Lower GI (colorectal) general surgery should be developed?

			Response Percent	Response Total
1	Cheltenham General Hospital (CGH)		57.89%	11
2	Gloucestershire Royal Hospital (GRH)		15.79%	3
3	No opinion		26.32%	5
			answered	19
			skipped	0

Please tell us why you think this, e.g. the information you would like us to consider: (5)

1	I would like Gloucester to be a better option for care, this should be improved so that its more viable than having to travel to cheltenham to visit people.
2	Cheltenham already deals with urology and it would make sense for ALL lower GI surgery, planned and emergency
3	Would seemingly make best sense to locate this at CGH to create a centre of excellence for pelvic resection; and to keep this surgery service entirely separated from the pressures of the Emergency General Surgery at GRH (as suggested in the consultation booklet)
4	Happy with move towards CGH as an elective site predominantly and more emergency focus at GRH, as oncology centre at CGH indicates more elective treatment. But not to strip all emergency services away
5	See above





Please tell us what you think about our preferred option to develop: A 'centre of excellence' for planned day case Upper and Lower GI (colorectal) surgery at Cheltenham General Hospital (CGH).

			Response Percent	Response Total
1	Strongly support		44.44%	8
2	Support		33.33%	6
3	Oppose		0.00%	0
4	Strongly oppose		0.00%	0
5	No opinion		22.22%	4
			answered	18
			skipped	1

Please tell us why you think this, e.g. the information you would like us to consider (5)

1	I would like Gloucester to be a better option for care, this should be improved so that its more viable than having to travel to cheltenham to visit people.
2	It needs to be clear that if you have a centre of excellence, it is in one place. GU/GI at Cheltenham - Totally! along with oncology. Everything else to GRH
3	Planned surgery in one location does make a lot of sense, as long as the wait times do not increase and also operations are not cancelled due to other factors.
4	Concentration of expertise and dedicated staff in one location will improve patient care and efficiency.
5	Links with earlier point




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

			Response Percent	Response Total
1	Strongly support		16.67%	3
2	Support		38.89%	7
3	Oppose		5.56%	1
4	Strongly oppose		0.00%	0
5	No opinion		38.89%	7
			answered	18
			skipped	1

Please tell us why you think this, e.g. the information you would like us to consider (2)

1	I suspect more money has gone into coming up with the terms / logos for hub and spoke than into IGIS. Both places should be equal and more money should be invested and the CCG shrunk to release the funds.
2	If EGS and Acute Medical Take are located at GRH, then it makes good sense to make GRH the hub for IGIS. It would also seem sensible for there to be a 'spoke' at CGH to work alongside oncology, urology and other specialisations there.





A 'centre of excellence' for Vascular Surgery at Gloucestershire Royal Hospital.

			Response Percent	Response Total
1	Strongly support		22.22%	4
2	Support		55.56%	10
3	Oppose		0.00%	0
4	Strongly oppose		0.00%	0
5	No opinion		22.22%	4
			answered	18
			skipped	1

Please tell us why you think this, e.g. the information you would like us to consider (3)

1	Keep Cheltenham as centre of excellence for everything GU/GI and oncology and all other surgery at GRH
2	As per previous observations
3	Patients and clinical teams will have continual access to other acute speciality services, and these can operate in a more efficient linked-up manner.






A permanent 'centre of excellence' for Gastroenterology inpatient services at Cheltenham General Hospital.

			Response Percent	Response Total
1	Strongly support		61.11%	11
2	Support		11.11%	2
3	Oppose		5.56%	1
4	Strongly oppose		0.00%	0
5	No opinion		22.22%	4
			answered	18
			skipped	1

Please tell us why you think this, e.g. the information you would like us to consider (2)

1	If you want to have a centre of excellence EVERYTHING to do with that area of medicine needs to be there, no half measures and aahh but this bit goes to Gloucester. You need to keep things simple and easy for Joe Public you understand as well as your HCP partners.
2	Improved conditions for medical staff, and therefore beneficial for patients.

Two permanent 'centres of excellence' for Trauma at Gloucestershire Royal Hospital and Orthopaedics at Cheltenham General Hospital.

			Response Percent	Response Total
1	Strongly support		36.84%	7
2	Support		31.58%	6
3	Oppose		5.26%	1
4	Strongly oppose		5.26%	1
5	No opinion		21.05%	4
			answered	19
			skipped	0

Please tell us why you think this, e.g. the information you would like us to consider (4)

1	absolutely - this should be a number 1 priority - better trauma and A&E care at both destinations - there is NO WAY that one centre will suffice and we know this undermines public trust in CCG (who honestly now must be loved about as much as covid 19 itself).
2	Trauma and orthopaedic need to go together. It would be VERY confusing to split them. You've GOT to start treating this as one hospital over 2 sites; not 2 different hospitals. EVRRYTHING trauma and orthopaedic at Gloucester. Coronary Care also needs to be centralised wherever PPCI is.
3	Transport for staff who currently work at one or other of the hospitals who have to travel by bike / walk / bus etc be supported having to then travel further?
4	It suggests a more efficient and effective division of labour, building upon the existing specialisations in both hospitals.

Please tell us about any impact, either positive or adverse, that you think any of our proposals could have on you and your family (please tell us which service your feedback relates to e.g. IGIS)?

			Response Percent	Response Total
1	Open-Ended Question		100.00%	8
1	extra travel time, costs and difficulty if services are required.			
2	risking the health and safety of those further out in the county.			
3	Please keep acute services at cgh			
4	You just need to have one place to go to for one SUBJECT e.g. Oncology, CVS, and GU/GI at Cheltenham and everything else at GRH. You've got to make it simple. And you need to make ED at Cheltenham 24/7 with doctors. Or you've got to double the size of ED at GRH. You've lost 2 x resus bays by closing CGH to ambulances, yet not increased capacity at GRH at all. It's ridiculous at Gloucester ED- and don't blame COVID. ED at Gloucester is not fit for purpose, being the only ED in the COUNTY!! JUST KEEP IT SIMPLE, so that everyone can understand it. You've been got to stop thinking like a person in the NHS and start thinking how the public views the organisation of the services offered. I don't believe you'll re-open ED at Cheltenham, you've been wanting to get rid of it for ages, but GRH ED is NOT fit for purpose with current demand - and demand is not going to decrease. You also need a centre of excellence for the Older Person. By 2040 , 25% of Glis CCG patients will be over the age of 65.			

Please tell us about any impact, either positive or adverse, that you think any of our proposals could have on you and your family (please tell us which service your feedback relates to e.g. IGIS)?

		Response Percent	Response Total
5	I think it would adversely affect my work		
6	Concentrating expertise in one of two hospitals will be beneficial for staff and patients; improve the capacity of hospitals to be both centres of excellence and centres of medical training; reduce waiting times and improve chances for patients of being seen by the right specialists more quickly, with the necessary follow-up care.		
7	Closure of CGH A&E could lead to delays in emergency treatment to those south of the county, with potential for negative outcomes for time critical conditions.		
8	Gloucester GH is twice the distance than Cheltenham GH is and there is no patient transport to Gloucester		
		answered	8
		skipped	11

If you think any of our proposals could have a negative impact on you and your family, how should we try to limit this (please tell us which service your feedback relates to e.g. IGIS)?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	8
1	this should not be undertaken this year, if a government integrated review has to be delayed I don't see how it can be ethical that Gloucestershire CCG even have the man power to consider this - let alone spend money on making it happen. Is this a project pushed to the forefront to benefit an individuals career?		
2	risking family health by providing sub par a and e service at Cheltenham		
3	Keep cgh an acute hospital		
4	You really need to have a ""Southmead"" in the Golden Valley area. And you need to consider better bus services to both sites for general public yo reduce car parking requirements and problems.		
5	I can imagine transport for some patients families that need support might need to be considered. Parking access - is there sufficient to support these changes? Bus services?		
6	It would negatively impact on me and my family if elective work was not done in Cheltenham as they would be a lack of beds in GRH		
7	Closing Cheltenham's A&E is a terrible mistake. For patients in the Cotswolds, Tewkesbury and surrounding areas - the time wasted going to GRH could literally mean life and death. I also do not believe that Gloucestershire Royal can cope with the numbers they would need to deal with at present. One A&E for a whole county is madness and is so transparently being considered to save money rather than lives.		
8	Recruit more staff to enable you to operate both hospitals as has been the case for the past 30years.		
		answered	8
		skipped	11

Do you have any alternative suggestions for how any of the services covered in the consultation could be organised (please tell us which service your feedback relates to e.g. IGIS)? When describing your suggestions where possible please refer to the assessment criteria, developed in collaboration with local people during the Fit for the Future Engagement (see pages 17/19 of the full consultation booklet).

		Response Percent	Response Total
1	Open-Ended Question	100.00%	2
	1	Cheltenham needs an amu.	
	2	.	
		answered	2
		skipped	17

Anything else you would like to say?

		Response Percent	Response Total
1	Open-Ended Question	100.00%	6
	1	This is the wrong time, please spend the funds on dramatically improving A&E / Trauma and on building public trust in our local health services.	
	2	stop using covid as an excuse to flatline emergency services at Cheltenham. treat staff with more respect, our opinions and skills as professionals are repeatedly ignored by trust management. stop shipping patients who are unwell between two sites, this is unsafe and immoral. the only ones being shipped about are those with lower capacity, confusion and complex needs. disgraceful. I support reinstating amu at Cheltenham to stop this nonsense.	
	3	I live in Cheltenham and find it easier to travel to work to CGH but am not opposed to travelling to GRH but the 99 bus service could help if the times of the buses fit the shifts of staff.	
	4	It is clear that the NHS cannot simply go on as before. How will these changes be monitored to see if they are successful? Who will monitor them and make any necessary adjustments if required, or indeed share best practice. In my lifetime I have seen many of the areas hospitals close or reduce their services, and I have not picked up on how all of this will impact the remaining hospitals in the area.	
	5	I don't think 'Centres of Excellence' should be considered at present, and yet again my suspicion is that if it looks good from the outside - ie when the CCG walk round with the scent of paint in their nostrils - it doesn't matter that staff and patients are unhappy with the way things are.	
	6	Quick and easy access is essential when you are ill. There is a much larger older population in North Cotswolds. Moreton in Marsh hospital is not included in this survey. So is a modern hospital intended to serve the North of the county yet whenever I or friends have visited it is empty. Why is this expensive new building not being used?	
		answered	6
		skipped	13




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

		Response Percent	Response Total
1	Open-Ended Question	100.00%	16
1	gl2		
2	GL5		
3	gl51		
4	gl3		
5	GL52		
6	GL51		
7	GL1		
8	GL2		
9	GL52		
10	GL52		
11	GL53		
12	gl50		
13	GL15		
14	gl51		
15	GL7		
16	GL54		
		answered	16
		skipped	3







Which age group are you:

		Response Percent	Response Total
1	Under 18	5.56%	1
2	18-25	0.00%	0
3	26-35	50.00%	9
4	36-45	0.00%	0
5	46-55	27.78%	5
6	56-65	11.11%	2
7	66-75	0.00%	0
8	Over 75	5.56%	1
9	Prefer not to say	0.00%	0
		answered	18
		skipped	1



Are you:

		Response Percent	Response Total
1	A health or social care professional		57.89% 11
2	A community partner		5.26% 1
3	A member of the public		36.84% 7
4	Prefer not to say		0.00% 0
		answered	19
		skipped	0




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

		Response Percent	Response Total
1	No		47.37% 9
2	Mental health problem		26.32% 5
3	Visual Impairment		0.00% 0
4	Learning difficulties		0.00% 0
5	Hearing impairment		5.26% 1
6	Long term condition		21.05% 4
7	Physical disability		5.26% 1
8	Prefer not to say		5.26% 1
		answered	19
		skipped	0





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

		Response Percent	Response Total
1	Yes		26.32% 5
2	No		73.68% 14
3	Prefer not to say		0.00% 0
		answered	19
		skipped	0




Which best describes your ethnicity?

			Response Percent	Response Total
1	White British		73.68%	14
2	White Other		15.79%	3
3	Asian or Asian British		0.00%	0
4	Black or Black British		0.00%	0
5	Chinese		0.00%	0
6	Mixed		0.00%	0
7	Prefer not to say		10.53%	2
8	Other (please specify):		0.00%	0
			answered	19
			skipped	0
Other (please specify): (0)				
No answers found.				



Which, if any, of the following best describes your religion or belief?

			Response Percent	Response Total
1	No religion		57.89%	11
2	Buddhist		0.00%	0
3	Christian (including Church of England, Catholic, Methodist and other denominations)		21.05%	4
4	Hindu		0.00%	0
5	Jewish		0.00%	0
6	Muslim		0.00%	0
7	Sikh		0.00%	0
8	Other		5.26%	1
9	Prefer not to say		15.79%	3
			answered	19
			skipped	0





Are you:

			Response Percent	Response Total
1	Male		42.11%	8
2	Female		52.63%	10
3	Transgender		5.26%	1
4	Prefer not to say		0.00%	0
			answered	19
			skipped	0



Do you identify with your gender as registered at birth?

			Response Percent	Response Total
1	Yes		94.74%	18
2	No		0.00%	0
3	Prefer not to say		5.26%	1
			answered	19
			skipped	0

Which of the following best describes how you think of yourself?

			Response Percent	Response Total
1	Heterosexual or straight		5.26%	1
2	Gay or lesbian		47.37%	9
3	Bisexual		42.11%	8
4	Other		5.26%	1
5	Prefer not to say		0.00%	0
			answered	19
			skipped	0

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

			Response Percent	Response Total
1	Yes		0.00%	0
2	No		78.95%	15
3	Not applicable		21.05%	4
4	Prefer not to say		0.00%	0
			answered	19
			skipped	0