

Ref: 01



THE RT HON MARK HARPER MP
Working for Gloucestershire West of the Severn

HOUSE OF COMMONS
LONDON SW1A 0AA



Ms Mary Hutton
Accountable Officer
Gloucestershire Clinical Commissioning Group
Sanger House
5220 Valiant Court
Gloucester Business Park
Brockworth
GL3 4FE

26 SEP 2017

LOG NUMBER

25th September 2017

Dear Mary

I am writing on behalf of my constituent [REDACTED]

[REDACTED] is a registered nurse and has written to me setting out his views regarding the consultation on Community Hospitals in the Forest of Dean. I have written back to him and set out my view and I have also encouraged him to respond to the consultation, if he hasn't already.

I have enclosed a copy of his letter as he raises a number of points that I thought you would be interested to read.

I have also sent a copy of [REDACTED] letter to Ms Katie Norton, Chief Executive, Gloucestershire Care Services NHS Trust, so that she is also aware.

I hope this is useful.

Yours sincerely

The Rt Hon Mark Harper MP

Enc

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Rt Hon Mark Harper
c/o House of Commons
Westminster
LONDON

Dear Sir

As you will have seen from the media a suggestion has been made to close the Dilke and Lydney community hospitals. My first reaction was one of shock and also of disbelief, but that was heart not head. On reflection, if a suitable replacement was built in the forest with either an equal or increased number of beds as well as certain facilities this is I feel the right way of going.

As a registered nurse who has lived in the forest for over 20 years I do feel that I have some insight of what is needed. I have listed these into 2 groups, 1 being essential the other being desirable.

1. Essential requirements.

40-50 bed inpatient facilities.

24-hour minor or GP led injuries unit.

Physiotherapy unit.

X-Ray unit.

Out Patient unit.

2. Desirable requirements.

Endoscopy unit, to do endoscopies, sigmoidoscopies etc.

Minor operating theatre, for day surgery.

Midwife run maternity unit.

If the essential requirements are met and the new hospital is relatively central for all the forest, I believe that though the opposition will still be strong and vociferous common sense will be able to

win the day. However, if these requirements are not met then I too would have to consider my options.

History shows us what can happen if a blinkered and short-sighted approach is taken. You only need to look at the example set when Standish hospital closed. The reduction of beds from 400 to none, this placed both Cheltenham and Gloucester hospitals in the position of trying to absorb these extra patients. The replacement community hospital also failed to materialize so also adding to the strain.

I can also point to my 18 years' experience both in St John Ambulance England and now in St John Cymru - Wales. When on ambulance duty, I have seen Paramedics, Technicians and Transport personnel parked up queuing to hand over patients. This is wasteful of time and resources as well as putting lives at risk. By increasing both the number of beds and treatment units at a more local level, some of these delays could be reduced. By having endoscopy and minor day surgery units locally releases more time and expertise in the larger hospitals for more serious or urgent cases.

I was for 14 years a combat medic in the Royal Army Medical Corps, and when posted to Beachley Barracks trialled a system designed to reduce the number of patients needing to be seen by the Medical Officer. This consisted of all patients being triaged by a combat medic or nurse, those who could be treated by ourselves were done so. Those deemed to have muscular skeletal problems were reviewed by our Physiotherapist, he then decided if the doctor needed to be involved or if he was able to deal with the condition himself. This system could also be incorporated into the new hospital.

There are a number of Paramedics who either by age or injury are unable to work on the frontline ambulance system. These could be attached to the minor injury unit and assist the staff with sorting out the patients into those to be treated in the unit, by their own GP or transfer to a larger hospital. If a physiotherapist was also attached they too could be used in reducing the numbers needing either a doctor or a more larger hospital.

This change could either be a golden opportunity both for the NHS in Gloucestershire or one of the largest missed opportunities in recent times. I therefore trust and hope that you can apply the correct pressure to the right people locally, regionally and nationally.

Yours sincerely

[Redacted signature]

NEWENT TOWN COUNCIL

AND BURIAL AUTHORITY



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Newent Community Centre
Ross Road
Newent
Glos, GL18 1BD

Tel: 01531 820638
Email: townclerk@newenttowncouncil.gov.uk
www.newenttowncouncil.org.uk

Freepost RRYK-KSGT-AGBR
Forest of Dean Consultation
5220 Valiant Court
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GL3 4FE

29th September 2017

Dear Sirs

Newent Town Council discussed the consultation document at a Full Council meeting on 25th September 2017.

Newent Town Council unanimously agreed that the Council is unable to support the proposal until assurance is received that a new facility will be built prior to the two hospitals being vacated.

Yours sincerely

Miss K Noble
Town Clerk

Ref: 03

RECEIVED
23 OCT 2017

**FOREST OF DEAN
HEALTH & SOCIAL CARE
COMMUNITY INTEREST COMPANY**

Althorpe House, High Street, Lydney, Gloucestershire GL15 5DD
Tel: 01594 847400; Fax: 01594 847401

18 October 2017

Ingrid Barker
Chair
Gloucestershire Care Services NHS Trust

B W Hobman
Chair
Forest of Dean Health & Social Care CIC

The Forest of Dean Health & Social Care CIC was created from an abortive attempt to close the existing hospitals when there was no definitive plan for replacement services.

We met to consider your document "Community Hospitals in the Forest of Dean". Your favoured option seems to be for a single unit, however there is insufficient clarity as to what will be provided in a new unit. We, therefore, feel we have no option but to support the continuation of 2 hospitals in the Forest of Dean.

We are concerned that the move to a single unit will be an opportunity to continue the reduction of services provided in the Forest of Dean.

We hear, but it is not mentioned in the documentation, that in addition to a single new hospital unit there will be substantially improved local health hubs in the areas not covered by the single unit. There is insufficient clarity in what these hubs will provide.

We also feel it is important to clearly define the area and the population that will be served by the new units as some of the Forest of Dean District Council area is already served by Tewkesbury, Gloucester and Cheltenham.

Finally, we would like an assurance that the current facilities and services in the Dilke and Lydney hospitals will be maintained until the new units are operational.

It is very important that we plan not based upon the past or the present, but on what the future population of the Forest of Dean will be and also the services that will be needed.



Ref: 04

Follow us on Twitter: [@GlosCCG](#) or [@ASAPGlosNHS](#)

Joined up care and communities

From: [REDACTED]

Sent: 30 October 2017 18:53

To: enquiries (NHS GLOUCESTERSHIRE CCG)

Subject: Lydney & District Hospital

FAO: Glos NHS Trust

Sir or Madam

Lydney & District Hospital Future Of

Sadly, I have been reading diverse media comments, mainly negative, ref proposal to close the hospital, which would not serve the bests of the local community.

In theory, despite the huge costs, building a new hospital may have some limited merit, even assuming it could be completed with an appropriate timescale, and within planned budget cost.

Taking into account the increasing population, in my opinion, closing the existing hospitals is extremely short-sighted, and to which **I OBJECT**.

'Would be' patients, are likely to be extremely inconvenienced, not to mention the expense of travelling + potential parking costs etc.

Lydney & District MIU Hospital - is ideally situated, is convenient, providing a range of services for the community.

In fact, quite a % of patients travel from Chepstow area for treatment, i e, rather than travel to Royal Gwent Hospital, Newport, and be subject to the frustration of excessive wait times.

Lydney MIU - realistically, the hospital's work as a Minor Injuries Unit, saves patients unnecessary travelling, and worry.

I live in Tutshill, Glos, approx 9 miles from Lydney and have twice been very happy with the care received in this MIU unit.

- (1) Many years ago, I fell down the stairs badly cut my right knee which was very efficiently stitched.
- (2) In April this year, following a car accident, I needed stitches at the base of my right thumb, again processed quickly and effectively at Lydney MIU, (I declined the Ambulance crew's wish to take me to Gloucester Hospital).

Yours faithfully

[REDACTED]

Lydney Medical Unit
Lydney, Gloucestershire
GL15 2JH
Tel: 01292 811111
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Ms Mary Hutton
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 5220 Valiant Court
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31 OCT 2017

LOG NUMBER

30th October 2017

Dear Mary

I am writing regarding the consultation on Community Hospitals in the Forest of Dean.

For your information, I have also written to Ms Katie Norton, Chief Executive of Gloucestershire Care Services NHS Trust (GCST) and I am sending a copy of this letter to Cllr Carole Allaway Martin, Chairman, Health and Care Overview and Scrutiny Committee, Gloucestershire County Council.

I have recently had useful meetings with the Friends of Lydney Hospital and the League of Friends of the Dilke Hospital.

During the meetings, I captured a number of points which I agreed I would share with you, to aid with the consultation and to ensure that the views of both Friends organisations are considered during the process. I have summarised the points for you below:

- It would be useful if some clarity could be provided regarding the services that a new hospital would be able to provide. It would also be helpful if, by extension, you could set out the services that currently cannot be delivered in the Forest of Dean, and how this would be improved if we were to have a new hospital.
- Would the CCG and GCST be able to show workings on how the figure of 24 beds has been calculated? I would appreciate a response which shows the data and information used to arrive at this number.
- It would be helpful if the CCG and GCST could share details on how many beds in the current hospitals are used by residents from outside of the Forest of Dean. Likewise it would be useful to understand how many Forest of Dean residents use beds in other community facilities in the county.
- Are the CCG and GCST sure that they have allowed enough time to consider the consultation and then move on to agreeing a preferred option and then a potential preferred location for a new hospital? There is some concern that the window between the consultation ending on 10th December to a preferred location being recommended in February 2018, appears to be tight.
- When considering the layout of the wards in any new hospital, would the CCG and GCST consider a mix of single rooms which could be used for palliative care as well as beds for people with specific needs such as dementia sufferers.



- Representatives of both Friends organisations indicated to me that if the decision is taken to build a new hospital in the Forest of Dean, their preference would be for a Citizens' jury to make the recommendation on where it should be located. Can you give some details on how this would be constituted – if it is to be representative presumably selection would be random (like a judicial jury) not self-selecting.
- It would be useful if the CCG and GCST engaged with the two Friends organisations regarding any plans for the future use of the existing sites, if the proposed new Hospital is built somewhere else.

I would be grateful if you would address the points I have raised and it would be helpful if you would be able to provide a response that I am able to share.

I hope this letter is useful and of interest, I look forward to your reply.

Yours sincerely

A handwritten signature in cursive script, appearing to read 'Mark Harper'.

The Rt Hon Mark Harper MP

Cc: Cllr Carole Allaway Martin

31/10/17

RECEIVED

02 NOV 2017

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Dear Sir or Madam,

I apologise for the length of this letter which is necessitated by the points I need to make.

The Forest of Dean has two fantastic community hospitals, The Dilke Memorial Hospital and Lydney Community Hospital.

Plans (which were categorically denied by Gloucestershire Health and Mark Harper MP two weeks before they were announced) are in place to close these hospitals and sell off the sites (as per the mayor report) and to build a smaller hospital with less than half the beds at an unspecified site, so far Lydney, Newent Coleford and the (wrongly) being newly developed Northon quarter have been named.

Over the past 30 years it has been clear that there has been no will on the part of the NHS to maintain these hospitals or equip them properly - clearly with the view to closure. The local GPs were actively discouraged from referring pregnant women to the Dilke to give birth so that the Maternity Unit would be underused and could then be closed, the same thing was done with the Theatre. The fractures clinic was closed despite our objections to all of these

decisions.

The NHS now says it has 11 million to 'play with' but is very obviously set on a new build. The so called consultation document (an expensive fool started to get the issues they want) was not widely publicised and was as far as anyone can find out only made available in GP Surgeries, Pharmacists and Libraries - why not Post Offices? or Supermarkets where the average person visits far more?

I have still been finding people who A. did not know of closure plans and B. had no idea where to obtain the document. I had to resort to collecting pamphlets from anywhere I could get them and handing them out to people - I've also had to assist people to fill them in as they found it impossible to express their views as they wished (too little space and loaded questions) and very hard to express them without appearing to support a new build.

We feel the 11 million that has suddenly become available - yet somehow was never there to fund our two hospitals should be spent extending and improving them. Not building a smaller unit which has no specifics and is no doubt going to cost far more (the new sixth form college is to cost 30 million and is far smaller than the existing college & will offer fewer classes) local MP Mark Harpe makes it crystal clear he has no interest in our views or in keeping our two hospitals. Ten years ago the

people of the forest made it clear we
want to keep our hospitals now we are
fighting to keep them open clearly nobody
is listening despite the governments ^{plans} that
any health service changes should be led
by clinicians and patients and not driven
from the top down - which is exactly
what is happening here. The forest needs
two hospitals the geography of the area
necessitates two hospitals and the Dulce
which is especially beloved by us was
built in the centre of the forest in order to
best serve its needs.

Ten years ago Mark Harper sat on the fence
and did nothing to save our hospitals now
he is actively pushing closure. Cariculators
are actually pushing closure as is Gloucester
Health Forum and every other power wielding
group - is this not driven from the top down?

We made our views clear ten years ago
yet these plans are once again covertly drawn
up and foisted upon us.

The Dulce was built by Forest Miners
with pennies and shillings from meagre wages
along with contributions from churches and
the Government of the day. It stands on open
forest estate - selling off that site opens
up a whole new issue via the sale of the
forest:

These plans are blatantly going against
our wishes and we are angry that such
disdain is being shown for our views.
Instead of asking us what we want

We are being told what we are to accept. Spurious argument are put forward such as most patients at The Dulke are from outside the area - quite simply The Dulke is not allowed to refuse those patients.

Every point or argument put forward is in such language that the truth is twisted and moulded to fit the closure plan. Where is the honesty and clarity, where the will to maintain and keep what we want to maintain and keep?

Why when these plans have been in existence for years was money spent to improve the Dulke minor injuries unit? A tactical play perhaps? Or just a fairly typical Health Service waste of money.

The 11 million spoken of is not going to build anything suitable - the two hospitals we have are almost always full so if 47 beds is insufficient then how is 20 going to serve? The population of the Forest is rising towards 100,000 how will 20 beds be of any use? We will be going to Gloucester Royal as we are forced to do now for surgery or for births. Removal of the maternity unit removed the prospect of free miners rights passing down the generations as a child must be born within the statutory forest to claim those. This will not obviously resonate with you but it is destroying part of our culture. The number of home births in the Forest is rising due to mums not wishing to give birth at G.R.H. - the journey there is half an

Ref: 07



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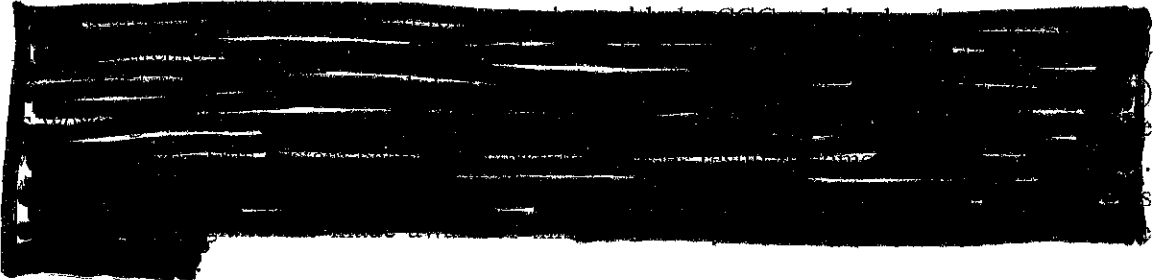

Ms Mary Hutton
Accountable Officer
Gloucestershire Clinical Commissioning Group
Sanger House
5220 Valiant Court
Gloucester Business Park
Brockworth
GL3 4FE

6th November 2017

Dear Mary

I recently met with senior staff from Gloucestershire Care Services NHS Trust at their Dean House base in Cinderford. I also spent time with a District Nurse observing her shift as she provided care in resident's homes.

During my meeting with members of the management team a couple of points came up that I thought would be helpful to feedback to you. I have detailed them below.

- 
- 

- In light of the ongoing consultation on Community Hospitals in the Forest of Dean I had a clear steer from the medical professionals I met that they believe there is a real need for a brand new hospital.

I hope this feedback is useful.

Yours sincerely

The Rt Hon Mark Harper MP

[REDACTED]

From: [REDACTED]
Sent: 08 November 2017 18:09
To: consultation (NHS GLOUCESTERSHIRE CCG)
Subject: [REDACTED] Questions re. consultation

[REDACTED]

I have now recieved questions for you from [REDACTED], one of our members present when you came to discuss the Forest hospitals:

1. The option of retaining both hospitals but developing one more fully than the other. Eg. The Dilke could be fully developed with Lydney Hosp. becoming a complimentary therapy centre. With £11m to spend a lot could be achieved for both sites.
2. What is the footprint of all the various areas of specialism now and what would the new hospital offer in each?
3. What is the annual spend on maintenance now and anticipated spend on maintenance for the new hospital?
4. What is the total budget now and what is it likely to be once the new hosp. is built?
5. How would the ambulance service be upgraded to cope with the extra travel?
6. What is the carbon footprint of the options – what are the sustainability plans?
7. Which doctor's surgeries would be beefed up to deliver extra services and in what way? What would the extra services be?
8. How does a reduction in bed numbers work with the expected increase in population?
9. Considering the number of houses to be built in the area is the identified population increase a big enough figure?
10. What is the projected gain if the two present sites were sold? And would that gain be ringfenced for use in the Forest?

Apologies for such short notice, we will be meeting on the evening of Thurs 16th Nov, would it be possible to have your replies by then?

Hope you had a lovely relaxing holiday :)

Best wishes,

[REDACTED]
for the Forest of Dean Green Party

[REDACTED]

From: [REDACTED]
Sent: 10 November 2017 10:16
To: consultation (NHS GLOUCESTERSHIRE CCG)
Subject: Bathurst Gifts to Lydney

Hello - I would please like to raise something for your attention:-

The local Bathurst family have donated various generous gifts to Lydney town, for example Bathurst Park, Bathurst Pool AND LAND FOR LYDNEY HOSPITAL??? All of these as far as some older Lydney residents remember, IN PERPETUITY???

If this IS the case (and I am not personally in a position to know for certain) it would surely affect the decision about the future of Lydney Hospital?

I would appreciate an answer to this question and thank you in anticipation.

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: 11 November 2017 07:04
To: consultation (NHS GLOUCESTERSHIRE CCG)
Subject: FURTHER INFORMATION: Bathurst Gifts to Lydney

I emailed you yesterday about this and have since acquired further relevant information, as follows.

I have spoken to a friend of mine who is an architect and has worked with the Bathurst family in the past. He informed me that there used to be a primary school in Lydney built on land which, like Lydney Hospital, was gifted to the town of Lydney by the Bathurst family. Some years ago the Education Department closed the school and tried to sell the land for housing development.

When the deeds were examined it was found that the terms were that IF THE LAND WAS NO LONGER TO BE USED FOR THE PURPOSE FOR WHICH IT WAS DONATED, IT REVERTED TO THE BATHURST FAMILY. He informed me that this is very likely to be the situation in the case of the land donated to Lydney for a local hospital.

I am sure this will be of interest to you and looking forward to hearing your views.

[REDACTED]

Ref: 11



THE RT HON MARK HARPER MP
Working for Gloucestershire West of the Severn
HOUSE OF COMMONS
LONDON SW1A 0AA



Ms Mary Hutton
Accountable Officer
Gloucestershire Clinical Commissioning Group
Sanger House
5220 Valiant Court
Gloucester Business Park
Brockworth
GL3 4FE

13th November 2017

Dear Mary

I am writing on behalf of my constituent [REDACTED]

[REDACTED] has written to me setting out his views regarding the consultation on Community Hospitals in the Forest of Dean. I have written back to him and set out my view and I have also encouraged him to respond to the consultation, if he hasn't already. I thought you would be interested to read his comments and I have copied his email below for your reference.

[REDACTED] writes:

"It seems that there are plans to close the Dilke and Lydney hospitals [total beds 47] and replace them [at the Five Acres site?] with a new hospital containing only 24 beds.

Such a plan is flawed on several levels:

The ageing population will need more beds, not fewer; The local age distribution is older and more sick than the rest of the county;

The occupancy of those scant beds will be 100% for most of the time; where do the overspill patients go?

The lack of a proposed maternity unit will ensure the maximum inconvenience for all local pregnancies, not to say the abolition of true Foresters; perhaps this is intended?

The skewing of any single hospital's location will affect the time taken to take non-emergency cases to be attended;

The staff currently employed are likely to be cut by an inappropriate amount and result in the considerable overwork of the remainder;

Those staff not re-employed at the new site are likely to be lost to the Forest health services and have to commute to obtain work, thereby contributing further to air pollution, global warming, traffic congestion and time wasted.

If any new hospital needs to be considered, the existing sites should be redeveloped in a staggered manner to retain some local facilities during the rebuilding, to end with each having improved services and more beds, not fewer."

I would be grateful if you would address the points that [REDACTED] has raised and provide me with a response that I am able to share.

Constituency Office: 01594 823482
mark.harper.mp@parliament.uk www.markharper.org
@Mark_J_Harper facebook.com/mark.harper.fod



I have also written to Ms Katie Norton, Chief Executive, Gloucestershire Care Services NHS Trust, so that she is aware of [REDACTED] concerns.

I look forward to hearing from you.

Yours sincerely

The Rt Hon Mark Harper MP

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: 14 November 2017 14:26
To: CONSULTATION, Glcccg (NHS GLOUCESTERSHIRE CCG)
Subject: Breast screening service for Forest of Dean

Hello.

I hope it is appropriate for me to contact you via this email. I am the Deputy superintendent at Gloucestershire Breast screening Service, based at Thirstaine Breast Centre in Cheltenham. We provide breast imaging , both screening and symptomatic for the whole of Gloucestershire. We have two mobile breast screening units and every 3 years we screen the Forest of Dean population at both Coleford (The Main place) and Lydney hospital . Unfortunately we are unable to access the Dilke Hospital. This takes approximately 10 months in total.

As cancer is one of the top three leading causes of death in the Forest, breast screening is obviously very important. Ideally we would endeavour to provide a service within thirty minutes of the majority of the Forest of Dean population. This would perhaps need to be part of your considerations on a new site. Suitable access and provision of essential services , such as electricity, IT and water/drainage would also need to be considered. I realise we are at a very early stage in the whole process but I didn't think it would hurt to raise these issues now. If you have any questions please feel free to contact me.

Regards

[REDACTED]
Deputy Superintendent Radiographer
Gloucestershire Breast Imaging Department
[REDACTED]

From: [REDACTED]

Sent: 15 November 2017 13:03

To: [REDACTED] (NHS GLOUCESTERSHIRE CCG)

Subject: Comments received for FoD consultation

Ref: 13

Hello [REDACTED]

I have been asked to forward the comment below to you by a member of the public. Please could this be included in the feedback for the FoD consultation:

Please keep the Dilke Community Hospital, as it's a valuable local resource. If there is a new community hospital to be built in the Forest of Dean though then it should be on the site of the old Dilke Hospital (please speak to the local forestry commission about purchasing extra land for this) and please retain the name "Dilke Memorial Hospital" as it is important to the local people.

Many thanks,

[REDACTED]

[REDACTED]

Gloucestershire Care Services NHS Trust
Edward Jenner Court
1010 Pioneer Avenue
Gloucester Business Park
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Gloucester
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DEAN FOREST VOICE

Forest of Dean Consultation
5220 Valiant Court
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18.11.2017

Dean Forest Voice (DFV) are a Group based in the Forest of Dean ((FoD) supporting the Heritage and Culture of the Area.

DFV have in excess of 1000 members and supporters.










This is the response of DFV to the consultation on the future of the Forest of Dean Hospital Facilities and Health Care.

1. The population of the FoD is rapidly expanding with more and more people choosing to settle here.
The amount of house building scheduled for the area reflects this.
We therefore consider it unwise to close the existing hospitals and reduce the number of beds by 50% at a time when we believe the existing facilities should be retained and expanded.
2. The Gloucestershire Royal Hospital - in line with other major hospitals - has a problem with the after care needed of patients recovering from major surgery but not yet fit enough to return home or unable to do so.
DFV believe that the local hospitals can play a bigger role in alleviating this problem.
3. Since it's formation 17 years ago DFV have campaigned for the return of Maternity Services to the Dilke Hospital. Much of the Heritage claimed by the Foresters is conditional on them being born in the FoD. (The historic Hundred of St. Briavels) This condition must be fulfilled to enable a Forester to register as a Free Miner.

It therefore remains a top priority for DFV to re-establish a maternity facility within the boundaries of the FoD.

We hope this submission will be of interest to you and given your consideration. However we believe that most of your reorganisational intentions have already been decided.

Yours faithfully



Community Hospitals in the Forest of Dean – GCCG ‘Consultation’

Health and Social Care is a societal issue and there will be no sustainable solutions forthcoming as long as the debate is restricted to money and services.

In common with many consultees, the Forest of Dean Green Party has concluded that the ‘consultation’ (no doubt despite the best intentions of the CCG) addresses the wrong conundrum.

Given that NHS services, in our view erroneously, are increasingly centralised, specialised, commodified, and subject to Fordian/industrial management assumptions, the key questions should be focused upon how we can provide resilient and sustainable local community arrangements which are a true partnership between citizens, communities, and the services and professionals we fund and:

- Are flexible in the face of the rigidities and implicit lack of capacity in the ‘specialist’ system
- Provide necessary services as close as possible to the point of need
- Promote resilience in grass roots communities
- Put people and families back in control and reverse the tendency for people to be passive and ‘incompetent’ consumers
- Assist professionals and services to be experts in supplementing, complementing, strengthening and sustaining the ‘core economy’ of interpersonal and economic relationships (rather than working mindlessly to make these essential assets redundant)
- Challenge the notion that real care can be outsourced
- Encourage politicians to attend to nurturing sustainable, self-reliant and interdependent communities instead of ‘brokering’ services
- Attend seriously to sustainability.

We believe that the fundamental purposes that should have been addressed concern health and social services in the round within the Forest of Dean. The design of locally provided in- and out-patient building based services only makes sense in this context but the consultative document instead reflects the siloed realities that plague the NHS, largely reflecting an accommodation of a range of professionals’ priorities.

In our view, any credible consultation starts by sharing all the key data upon which any recommended proposals are based including:

- a full description of the purposes of the exercise,
- full disclosure the funding available and its sources – including the extent to which capital resources associated with the current sites are implicated,
- the principles that frame decision-making
- In the context of an invitation to propose alternative solutions.

To understand the Forest of Dean it is necessary to appreciate that it is a scattering of disparate and poorly connected settlements. The loss of local employment, consumer lifestyles, and public policies that have not recognised the need to nurture communities have given rise to a loss of social cohesion, and a marked rise in social isolation and service dependency. Increasingly the professionals who serve our communities – from GP's to Community Nurses and Social Workers to Clerics - have found their work 'functionalised' and their multi-skilled and problem-solving roles controlled or abolished. As we see it, resilience is the key consideration when planning public services that serve Forest communities. A central problem resides in the assumption that health and care outcomes are essentially the consequence of specialist institutional and professional activities. This stimulates lots of demand and, in turn, rationing measures that only serve to make things worse. Sustainable ways forward are to be found if a less deterministic approach is pursued. This, we believe, begins by aspiring to invest to deliver as much as possible locally – in key settlements/GP practice areas.

The current consultation misses the point and only serves to polarise those who, for a spectrum of reasons, care enough to participate. Instead we would recommend a settlement/GP practice (by settlement) based coproduction exercise based upon explicit and widely publicised principles being that services that meet peoples' needs:

- Are local by default
- Help people to help themselves and each other
- Attend to purpose, not outcomes
- And manage value not cost.

The Forest of Dean Green Party invites Gloucester Care Commissioning Group to meet with us to explore this approach. We are surprised that, given the founding rationale for CCG's, the local/community approach to planning seems not to have taken hold. Health and Social Care is a societal issue and there will be no sustainable solutions forthcoming as long as the debate is restricted to money and services.

24th November 2017

Friends of Lydney Hospital

Registered Charity No. 277785



**Support
Lydney
Hospital**

C/o Watts of Lydney Group Limited
Althorpe House
High Street
Lydney
Glos
GL15 5DD

Gloucestershire Care Services NHS <small>NHS Trust</small> Executive Office 25 NOV 2017	
Ref no: 421	Fwd to: 13/20/22/SP

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AM/KW/FOLH

28 November 2017

Ingrid Barker, Chair of Gloucestershire Care Services
NHS Gloucestershire
Edward Jenner Court
1010 Pioneer Avenue
Gloucester Business Park
Brockworth
Gloucester
GL4 3AW

Dear Ingrid,

While I feel sure that individual members of the Friends Committee will have forwarded their completed consultation forms, we feel that it would be helpful if we also respond as a Group hence this letter. As a committee we have debated the issues at length as you would expect and there are of course differing views regarding the proposed option which the Trust favours. However we are of the clear opinion that it would be a serious mistake not to include a community hospital in the south of the Forest and the obvious place for this is here in Lydney. We have suitable sites that have been offered to us for a new hospital and Kevin Adams has seen these.

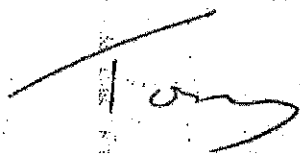
We understand the arguments for a single hospital and, in the main, we are supportive of this option. Should this be your decision for the second phase of the consultation which will focus primarily on location, we will of course be making appropriate representation along with the Lydney Town Council and other local interested parties to whichever body is selected to make the recommendation to your Board. We do not feel that this body should be clinically based but rather should represent the wider population of the Forest, either as a citizen's jury or some similar mechanism. However we believe that it is important to include expertise in the area of service capacity. We would be pleased to contribute to such a body if that is felt to be appropriate. In this context, we strongly recommend that prior to any location assessment, the demographic information so far provided be reassessed to better reflect the now probable growth in population over the next few years.

Trustees: Mr. B.H. James, Mr. J.R.E. Williams,
Viscount Bledisloe, Mrs. M.H. Thurston.

We agree with the commonly held view that this exercise would be significantly enhanced if more information could be published regarding the likely facilities which the new hospital will provide. While we understand that this cannot be given at the moment, we urge you to include greater clarity on this point when the next consultation document is issued in the New Year. There seems to be a genuine feeling that the implementation of the single hospital option is likely to reduce the available services in the Forest especially the number of in-patient beds. At present there is much scepticism in the community, which is shared by our committee, on the ability of a smaller single unit to adequately cater for patient needs especially in the light of increasing numbers of elderly people likely to require hospital care in the future. Unless more robust proposals can be provided regarding how this will be managed, we believe that there will probably be an adverse reaction among the wider Forest community to any intention to reduce the current two hospitals to a single unit wherever this is located.

We look forward to continuing to work with you as a key stakeholder over the coming months, and we hope that the current exercise delivers a clear mandate for your Board to consider.

Kind regards,



Tony Midgley
Chairman, Friends of Lydney and District Hospital

Trustees: Mr. B.H. James, Mr. J.R.E. Williams,
Viscount Bledisloe, Mrs. M.H. Thurston,

[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]

04 DEC 2017

Gloucestershire CCG

28/11/17

Dear [Redacted]

I hope all goes well.

[Redacted] contacted me and I enclose one E mail and my replies to him relating to the proposed developments of the Forest hospitals.

Kind regards

[Redacted]

Copied to Mark Harper MP.

[REDACTED]
[REDACTED]
27 Nov at 1:49 PM

Dear [REDACTED]

I am hearing different stories about what is being done/proposed for hospitals, and health in general practice - re buildings and staff of all health kinds. What are the problems?

Please can you enlighten me a bit? (Relevant newspapers are rarely seen in the backwoods of [REDACTED])

My very kind regards to you and the lovely [REDACTED]
[REDACTED]

Hi [REDACTED]

There is a consultation period ending soon. The proposal is to replace both Forest Hospitals with just one, with a halving of the beds. There is not enough money, and never will be. I suspect the real intention of the CCG is to close both hospitals

In spite of the efforts of the communities, that raised huge sums of money for equipment, this is unlikely to make much difference. Managers rarely listen.

I have not even bothered to comment after the disgusting way the GPs were treated in the past. I came here in 1976 because of Lydney Hospital and the increased scope it gave to my life as a GP. There was no pay except for a token amount called the Bed Fund. We provided a fantastic service including 24 hour A&E, and the hospital casualty departments became the base for a very effective out-of-hours GP co-op in The Forest, based on both Dilke and Lydney Hospitals. That was organised by [REDACTED]

I had managed to negotiate a fair payment to the doctors for their casualty work, but had no luck negotiating better payment for managing inpatients. Forest doctors met regularly for professional meetings and training. The meetings were often sponsored and included a buffet meal. They were always well attended.

Management interfered as usual, cutting off payment, and the casualty departments are now little more than nurse-led dressing stations. The GPs were squeezed out of casualty contracts, and payment was stopped. Much of the work has now as a direct result simply shifted to Gloucester Royal. It is simply a disaster.

The GP OOH service is, as you know, now not fit for purpose. The workload of looking after patients who were not local, in order simply to clear beds from GRH was considerable, and when I retired my partners decided to resign completely from the staff of Lydney Hospital. It is yet one more nail in the coffin of the NHS that I worked so hard to build up.

Kind regards,
[REDACTED]

Dear [REDACTED]

Yes you may quote the facts and do use my name by all means. I was a very long standing member of the staff of Lydney Hospital. I probably have more experience of Lydney Hospital than any other GP in The Forest.

This is simply a money saving farce in my opinion. I wonder how much the glossy booklet and the "consultation" exercise will have cost. I am, as you probably know, no great fan of the CCG. CCGs are steadily destroying the NHS in my opinion, and are all overspent. The Government is the real villain. I have opposed the CCGs at the GPC, on local radio, and in the local lay, and professional press.

Lydney hospital is in good condition. The buildings are sound. The wards are efficient and well liked by patients for the type of care required, and there are single rooms available. The X-Ray and physiotherapy are superb. There seems to be an adequate supply of nurses from the local community. I am not so sure that would be the case for a single Forest hospital away from Lydney. I also think the fantastic support from the Friends Of Lydney Hospital would be bound to suffer. Whilst the casualty is nothing like it was when medical staff were employed there, it is still the first port of call in the daytime for many minor injuries that would otherwise end up in GRH A&E. That is a long way away.

There is spare land below the car park and physiotherapy unit, that no doubt the CCG will have its eye on for residential building, in order to maximise the capital extraction from any closure. The hospital also owns a large stone detached house, "Stonebury", next door. It could readily be converted back to the "Ideal Home Exhibition" show home, that it originally was, and will be worth a large sum. It is currently used for administration, some clinics, and meetings.

We endured the loss of Lydbrook and Over Hospitals, with short sighted premature closure of much needed geriatric beds, and that has contributed to current severe pressures on the GRH.

I think this consultation is simply a farce, and the result will certainly already have been decided by the faceless managers, who should be the real target of cuts in our NHS.

Kind regards,
[REDACTED]

Show original message

Ref: 18



CINDERFORD TOWN COUNCIL



St. Annal's House, The Belle Vue Centre, Belle Vue Road,
Cinderford, Glos. GL14 2AB Tel: (01594) 822599
www.cinderfordtowncouncil.gov.uk Email: clerk@cinderfordtc.co.uk
Mrs.L.L. Thomas, Town Clerk

4th December 2017

Freepost RRYY-KSGT-AGBR,
Forest of Dean Consultation,
5220 Valiant Court,
Gloucester Business Park,
Brockworth, GL3 4FE.

Dear Sir/Madam,

Following the extensive consultation process, and after receiving a presentation on the options available, my Council has now debated the issue for the future provision of the Community Hospitals in the Forest of Dean.

Whilst it was appreciated that it was a very emotive issue, concern was raised regarding the ability to continue to provide improving medical services at the existing sites. If the outcome of the consultation is to provide one hospital, then Members agreed they would wish to see enhanced medical care for the Forest, with sufficient beds for what is an aging population and in a central position with access for all.

Parishioners are of course concerned with the suggested closure of The Dilke Hospital, and we would like to propose an alternative site for the new hospital at The Northern United site, which would be in keeping with the mining history of the Dilke, but would benefit from being situated on the A4136 with excellent access for everyone. As you can see from the enclosed plan, this site is central Forest with good access for the Towns and adjoining villages, including Mitcheldean, being the largest village with the biggest employment site in the District.

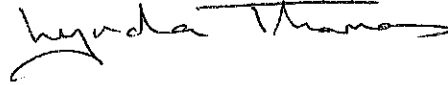
This site would have an access road from Cinderford, via the Northern Quarter, where the new College is currently being built, as well as access from the A4136, which is already on a main bus route.

I am sure you will already be aware of the Core Strategy adopted by the Forest of Dean District Council, which confirms the central position of Cinderford within the Forest boundaries and the strong policies for the development of the local economy. It is also acknowledged that Cinderford has a great opportunity for new development, with further housing and employment areas planned. The spatial strategy provides that Cinderford will be a focus for the 'central' forest with the development of the northern quarter and major change in the centre.

Cinderford, together with Ruspidge has a population of over 10,000. and serves a larger catchment area of about 18,000. including Drybrook, Littledean, Mitcheldean and Ruardean. With a new facility on the A4136 as suggested, this would also meet the needs of the immediately adjoining parishes falling within the Coleford area and those further south within the Forest.

If any proposed new site is donated to the NHS, which would mean the capital receipt would not have to be realised, would it be possible for the Dilke to be retained for social care with community investment.

Yours faithfully,

A handwritten signature in black ink, appearing to read "Lynda L. Thomas". The signature is written in a cursive style with a long horizontal stroke at the end.

Mrs Lynda L. Thomas
Town Clerk

Ref: 19.

FOREST GP SURGERIES

FOD Locality Administrator, Mitcheldean Surgery, Brook Street, Mitcheldean, Glos, GL17 0AU

E-Mail: admin@forestgpsurgeries.co.uk Tel: 01594 545340

PDW/dmhh

Forest of Dean Consultation
5220 Valiant Court
Gloucester Business Park
Brockworth
Gloucester GL3 4FE

4th December 2017

Dear Sir/Madam

I am writing as the Chair of the Forest of Dean Primary Care Group.

We have discussed the Community Hospital consultation at our last 2 meetings. As you are aware, we represent the 11 GP practices within the Forest of Dean. I write to advise that we support the consultation and wish a new Community Hospital to be built within the Forest of Dean. We are, however, concerned about the bed issue and wish this to be looked at again.

We look forward to supporting the next part of the consultation.

Yours faithfully



Dr P D Weiss

Chair – Forest of Dean Primary Care Group

Signed on behalf of the Forest of Dean GP Surgeries

Forest of Dean GP Surgeries

Blakeney Surgery, Brunston & Lydbrook Surgery, Coleford Family Doctors, Dockham Road Surgery, Drybrook Surgery,
Forest Health Care, Lydney Surgery, Mitcheldean Surgery, Newnham & Westbury Surgery, Severnbank Surgery
Yorkley & Bream Surgery

www.forestgpsurgeries.co.uk

**Dean Forest Hospice
Great Oaks**

The Gorse, Coleford, Glos. GL16 8QE

Telephone: 01594 811910

Fax: 01594 836307

clerical@great-oaks.org.uk

www.great-oaks.org.uk



5th December 2017

Dear Ms Norton,

On behalf of the Board of Directors, staff and volunteers at Great Oaks Hospice I would like to convey our thoughts re the plans for a new hospital in the Forest of Dean.

As an organisation we support the concept of one hospital to replace Lydney and the Dilke and in doing so would consider that Coleford should be a strong option. However, we do have concerns re the proposed reduction in beds.

If Coleford is chosen, we would be happy to suggest possible sites which might be worth your consideration.

Yours sincerely

pp C. Keable

Ceri Evans JP DL

Chairman

Ref: 21

Healthwatch Gloucestershire
Waterwells Business Park
Kestrel Court
Waterwells Drive
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Gloucester GL2 2AT

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info@healthwatchgloucestershire.co.uk
www.healthwatchgloucestershire.co.uk

6 December 2017

[REDACTED]
Associate Director, Engagement and Experience
NHS Gloucestershire Clinical Commissioning Group
Sanger House
Valiant Court
Brockworth
Gloucester
GL3 4FE

Dear **[REDACTED]**

Forest of Dean: Consultation

I am writing on behalf of Healthwatch Gloucestershire about the recent consultation on community hospital facilities in the Forest of Dean. Healthwatch Gloucestershire is the county's independent health and social care champion and we exist to ensure that people are at the heart of care. We have taken a keen interest in the consultation which was delivered by NHS Gloucestershire (the commissioner) and Gloucestershire Care Services NHS Trust (the provider). This has taken the form of attending a number of the presentations and 'drop-ins' as well as reviewing the information available to the public. Our observations of the consultation are reflected below and we hope that these will be useful in your analysis of the outcomes of the consultation.

1. Healthwatch Gloucestershire was impressed by the high level of preparation that had gone into the consultation which provided a good opportunity for residents of the Forest of Dean to participate and share their views. The consultation included a range of ways for people to have their say including attending public meetings, visiting an information bus, and drop ins - all delivered in local venues. There was also an online option to share views via a survey. We were impressed by the number of face-to-face opportunities for engagement with nearly 100 people present at the Lydney meeting and a high number of drop-ins. Every presentation we attended was handled professionally including when there was robust challenge

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a community interest company limited by guarantee and registered in England and Wales
with company number 08464602.*



healthwatch

Gloucestershire

and questioning by local people.

2. The consultation was supported with good quality information which explained the 'case for change', background, FAQs, and the options. We were impressed by the dedicated website which provided clear and very comprehensive information. The audio-visual content was useful for those who like to access information in this way as was the easy-read documentation.
3. The information available clearly set out the preferred option of the commissioners and the provider and invited local people to say whether or not they agreed with this option. We believe that taking such a clear position is helpful.
4. The number of beds available was a prime source of questioning at the public meetings we attended. Most people seemed assured by the explanation that a reduced number of beds would be sufficient to meet needs given the availability of other community health services. However, there was genuine concern about where those who currently use the additional beds (primarily from Gloucester) would go. Answers to the latter question were not completely clear or consistent, with one presentation suggesting that the number of beds in the county as a whole was not being reduced. Future consultations and information may well need to include some greater clarity and deal with with a wider population - primarily in the Gloucester/Cheltenham area, where there are no community hospitals.
5. Related to the above, we observed that people wondered whether sufficient account had been taken of future population increases in the Forest of Dean. It will be important to demonstrate, in any future consultation, that this issue has been carefully analysed.
6. Very strong views were expressed on the provision of maternity services, where they would be provided, and whether they would be accessible. Concerns were particularly strong in more remote areas of the Forest.
7. Transport links to a new community hospital (as well as to Gloucester and Cheltenham) seemed to be a clear area of concern during the discussions we observed. Given that many public transport links are poor in parts of the Forest the challenge will be to arrive at criteria and a recommendation for location which takes into full account the challenges presented by transport provision.
8. Related to the above, it will be important that car parking for a possible new hospital is carefully considered. We know that car parking charges and availability of spaces (including spaces for disabled car users) is often an issue for patients and visitors at hospital sites.
9. We noted that some people were not clear about the ownership of the Dilke and Lydney community hospitals and questioned whether they could be transferred to NHS Property Services. Furthermore, people wanted to know what would happen to any buildings which were 'surplus' to requirements in the future. Any future consultations will need to clearly address these issues.
10. The consultation included a proposal to establish a panel of citizens to consider the location of a possible new hospital. Clearly it will be important that the members of the panel can represent the diversity of the community in the Forest of Dean. Healthwatch Gloucestershire recommend that the members of the panel include

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with company number 08464602.




healthwatch

Gloucestershire

people who have lived in the Forest for a shorter period of time as well as long-time residents.

We hope that these observations and reflections are useful to you. We look forward to learning about the next steps so that Healthwatch Gloucestershire can decide on the role it can play to support and promote the involvement of local people in the decision making process.

Yours sincerely



ALAN THOMAS
Interim Chair
Healthwatch Gloucestershire



[REDACTED]

07/12/17

Forest of Dean Hospitals Consultation


Dear Sir/Madam

We find the consultative document on the community hospitals a totally inadequate basis for any meaningful discussion on this crucial aspect of Forest life. It provides few facts and figures and it is hardly surprising that a large number of local residents are sceptical about the NHS Trust's true intentions. Below are just some of the questions which are not answered by the document.

1. The option of retaining both hospitals but developing one more fully than the other. Eg. The Dilke could be fully developed with Lydney Hosp. becoming a complimentary therapy centre. With £11m to spend a lot could be achieved for both sites.
2. What is the footprint of all the various areas of specialism now and what would the new hospital offer in each?
3. What is the annual spend on maintenance now and anticipated spend on maintenance for the new hospital?
4. What is the total budget now and what is it likely to be once the new hosp. is built?
5. How would the ambulance service be upgraded to cope with the extra travel in the absence of any public transport.
6. What is the carbon footprint of the options – what are the sustainability plans?
7. Which doctor's surgeries would be beefed up to deliver extra services and in what way? What would the extra services be?
8. How does a reduction in bed numbers work with the expected increase in population? If the number of beds suggested - ie 24 - reflects the average number of Forest residents in need of beds at any one time, do you therefore propose excluding non-Forest residents in the future. If so this would indicate a lack of flexibility in the system which seems highly regrettable.
9. Considering the number of houses to be built in the area is the identified population increase a big enough figure? We are unconvinced by the figures you are using.
10. What is the projected financial gain if the two present sites were sold? And would that gain be ring-fenced for use in the Forest?

This list is far from exhaustive and until clear and honest answers are given to these questions and more, local people cannot be expected to make any properly informed responses. We hope and trust that this is just the beginning of a much more thorough consultation with a greatly extended time frame. It is very important to get this decision right.

Yours faithfully,

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12 DEC 2017

7/12/17

Mrs D. Lee
Chief Executive
NHS Foundation Trust

Dear Madam
Forest of Dean Hospitals

As you will see from my address I live in the City of Gloucester I am however a Forester by both and inclination.

I am appalled by the NHS proposals for the future of Lydney and Dilke hospitals. A new hospital at Coleford is not the answer to any problems in the Forest. The proposed hospital will be in the least accessible of the three Forest towns and the number of beds will only be half the number available at the moment.

Lydney Hospital has a very active friends group raising large sums of money for the hospital. They have recently paid for a state of the art new X ray unit so this to be wasted under your plans. If the current hospitals no longer exist will the friends be so active

I have a number of friends in the Forest and am constantly amazed at how quickly they

receive such procedures as X rays and physiotherapy compared with us in the city.

An elderly city friend recently had a hip replacement operation because he required intensive physiotherapy afterwards he was transferred to Sydney Hospital. He cannot speak highly enough about his treatment and the staff involved

Yours faithfully

[Redacted signature]

[Redacted name]

Coleford Town Council

No 1, The Town House, Lords Hill Walk,
Coleford
Glos GL16 8BD

Telephone : 01594 832103

Email: ctcoffice@colefordtowncouncil.gov.uk
www.colefordtowncouncil.gov.uk



FREEPOST RRYK-KSGT-AGBR

Forest of Dean Consultation
5220 Valiant Court
Gloucester business Park
Brockworth
GL3 4FE

07 December 2017

Dear Sir or Madam

Re: Community hospitals in the Forest of Dean.

I write on behalf of Coleford Town Council and the Coleford Neighbourhood Development Plan (NDP) which have jointly composed this detailed response to the above consultation. To ensure that our view fully reflects the community our discussion included members of the Forest of Dean District Council (FoDDC), Gloucestershire County Council, the Community Safety Partnership and the Forest Health Forum. The Town Council also conducted a consultation with the young people at Five Acres High School.

All members of the group, the Town Council and the NDP fully supports the provision of a new single community hospital and understands why the present provisions are not fit for purpose.

The group feel that you should note policy number CITPA3 Local Infrastructure for Health & Well Being.

The NDP has been working with the community for the past few years to create the plan up to 2026, so the importance of adequate health infrastructure for increased housing has been raised significantly. The need for expansion with a primary care facility is a first priority for Coleford, then there is the need for hospital level provision for the whole Forest. This NDP policy covers both these aspects appropriately and with flexibility, given the differing timescales of your consultation and ours. (Copy of the policy is enclosed)

We as a group however have some concerns about the premise on which you have based the size of the new provision. You have quoted that the population growth is only going to be 2689 new residents by 2025 for the whole district. However the FoDDC Allocation Plan would predict in Coleford alone a 30% rise on population by 2026. (details attached).



Ms Annie Lapington
Mr Chris Haine

Town Clerk
Administrative Assistant

Coleford Town Council Working for You

Coleford Town Council

No 1, The Town House, Lords Hill Walk,
Coleford
Glos GL16 8BD

Telephone : 01594 832103
Email: ctcoffice@colefordtowncouncil.gov.uk
www.colefordtowncouncil.gov.uk



We would ask that you look again at your figures based on the FoDDC Allocations Plan to make sure that the new hospital is large enough to service the community for the next 50 years.

When the group met with Caroline Smith it was reassured that the minimum of 24 beds provided would meet current needs, however our evidence suggest that very quickly the population growth would mean that the number of beds will be sadly lacking.

Further to our support to a new unit we have met with Kevin Adams, Adrian Rowley & Caroline Smith to discuss possible sites within Coleford parish and as such identified 8 parcels of land as indicated on the attached map. The group has been happy to work in partnership with you supplying information about these plots so they can be fully assessed. We are aware that 2 sites have warranted further feasibility studies.

Whilst Coleford may be the furthest market town from Gloucester, it is the most central location of all for the Forest towns. Coleford has frequent direct bus routes to both Cinderford and Lydney. This is not however the case between Lydney and Cinderford. Ease of accessibility is stated as being one of the prime criteria for siting the new hospital.

The existing community hospitals are held dear to Foresters hearts and disposal of the existing provision of the Dilke and Lydney hospitals must be handled with care and sensitivity.

Yours faithfully

Annie Lapington
Town Clerk

cc: Caroline Smith Glos Clinical Commissioning Group
cc: Mr Iain Baird Coleford NDP



Ms Annie Lapington
Mr Chris Haine

Town Clerk
Administrative Assistant

Coleford Town Council Working for You

Student voice consultation and meeting 1: Tuesday 7th November 2017 Information write up from the student meeting at Five Acres High School

Nick Penny and Paul Kay from Coleford Town Council are attending to gain feedback on the following from Five Acres students:

- Size of group attending- 23 students and two members of staff.
- 3 students had heard of the new hospital plans before the questions were given out.
- 1 member of staff had heard about the new hospital proposal before the questions were given by the Town Council

Questions to consider:

1. Do you agree with the proposal of a single new hospital for the Forest of Dean replacing both the Dilke and Lydney Hospitals?

- As long as it has enough beds for the community it is serving a new hospital would be great
- Not agree with closure of the old hospitals as they just need to be modernised and expanded (new technology) upgrade the existing facilities and doctors. Don't need new buildings

2. What services/facilities do you think should be included within the new hospital?

- Would there be a maternity unit/ward? A long way to Gloucester/Cheltenham-cost of petrol. To be a free miner you need to be born in the Forest-Homebirths could be the way forward.
- Endoscopy unit needed
- Fractures/broken bones
- Sexual health
- Chemotherapy unit
- Mental health and drug/alcohol support
- Orthodontist and dental unit would be useful as many students have to travel to Gloucester
- Would like permanent consultants in place- be able to see the same team not have to go through history each time.
- Would like a pharmacy within the site
- More staff needed in new hospital to cope with demand of one location – should not increase waiting times.
- Would all appointments be outpatient based
- Routine check-ups could take place in the local hospital- appointments in advance and easy to attend as well
- Would there be out of hour's provision?
- Would there be emergency and A and E? Would it be around the clock? What about ambulance provision

3. Do you have any ideas where a single new hospital should be located?

- Assumption of a single new hospital that is central to people in the Forest of Dean
- Cinderford is classed as the heart of the Forest. It is central to the Forest people
- Cinderford has got the new college so would it be better to have the college site for the new hospital.
- Traffic issues need to be considered/ easy access to public transport/Bus routes needed
- Ambulance base? Where is best to locate this so it is central?
- Parking spaces and not expensive to park
- Some students wanted Coleford to be the location as this was seen as reducing the load on Gloucester hospital
- Outskirts of Coleford as less busy than the central location.
- Development of the Dilke site into a new hospital

4. What are the important factors to consider when deciding on a location?

- Ease of access for people of the Forest
- Cost of parking
- Able to use public transport
- Health and Safety
- Central to previous hospitals

- Growing population of the Forest in line with new housing developments-needs to be a future proofed environment so we do not have to build another hospital in 20 years' time.
- Investment and upkeep of building, grounds and facilities-keep it state of the art.
- Questions raised by student during the debate

What will happen to the Dilke and Lydney hospital if they are closed down?

Who owns the land/buildings?

Was the Dilke a gift to the Forest? If so consultation should take place over what should happen to it if it is closed and not used as a hospital site.

What would happen to current staff at the new hospital?

Would all existing staff be used at the new hospital?

Could one hospital do the same job as our two cottage hospitals now? Would there be enough capacity of staff?

How would the new hospital be built and would the older hospitals be closed whilst the new hospital is being built?

What is the disruption likely to be for patients?

Would there be enough cheap parking or would costs be in line with Gloucester Royal? This is very expensive.

Ref: 25



2gether NHS Foundation Trust

Mr Colin Merker
Acting Chief Executive
2gether NHS Foundation Trust
Trust Headquarters
Rikenel, Montpellier
Gloucester
GL1 1LY

Tel: 01452 894167
Email: C.Merker@nhs.net

By email:

Ingrid Barker, Chair, Gloucestershire Care Services – Ingrid.Barker@glos-care.nhs.uk
Katie Norton, Chief Executive, Gloucestershire Care Services – Katie.Norton@glos-care.nhs.uk
Dr Andrew Seymour, Clinical Chair, Gloucestershire CCG – Andrew.Seymour1@nhs.net
Mary Hutton, Accountable Officer, Gloucestershire CCG – Mary.Hutton1@nhs.net

Friday 8 December 2017

Dear Ingrid, Katie, Andrew and Mary,

Re: Public Consultation, Community Hospitals in the Forest of Dean.

Thank you for the opportunity to respond to this important public consultation about the development of healthcare facilities and services for the people of the Forest of Dean.

We note the extensive engagement that has been undertaken to scope ideas that will secure best services for the Forest of Dean community into the future. We are pleased to have been fully involved in the review associated with the proposals to date.

We agree with your preferred option to invest in a new community hospital in the Forest of Dean, which would replace Dilke Memorial Hospital and Lydney and District Hospital. Developing a high quality care environment as proposed is of paramount importance to ensuring improved outcomes and safety of the patients receiving care, while providing the framework to assure that their experience is supported by robust clinical governance arrangements. Similar considerations are also important for the staff who are delivering care. A bespoke, new facility with a high quality physical environment would offer investment to support achieving the highest professional standards, validation of the dedication of Forest of Dean health care professionals and would also attract additional high quality clinicians/expertise into the locality.

We note the proposed criteria set out in Section 10, all of which appear important and reasonable to appraise as factors before a decision on a preferred location could be made. Your intention, should the development of a new community hospital go ahead, to co-design the facility with input and influence from the people living and working in the Forest of Dean is pivotal and we would fully endorse and support this course of action. In addition, we applaud the stated goal to reflect the unique heritage and character of the local community in any new facility.

It is clear that any change in the location of the current facilities will inconvenience some residents who live in close proximity to the current resources while for others it will improve ease of access to the new facilities. The impact on people will vary dependant on where they live in relation to any new location and so conversations will need to be held to engage the people from across the Forest of Dean, to form a working consensus on best location and to give assurances that any new facility will be accessible, safe, supportive and support the delivery of best care for all of the residents of the Forest of Dean. We note the choice around the proposed mechanisms for decision making you propose around determining the location for any new facility in the event that your preferred option is agreed. That consultation will hopefully identify a clear consensus for any new location; however, should agreement not be reached through that approach it would seem fair to develop a Citizen's Advisory Panel as well as taking views from a Clinical Advisory Panel.

A new community hospital of the sort proposed offers the opportunity to bring a wealth of new health and care opportunities for the Forest of Dean population. As a whole community of public services, we need to continue to pursue integrated pathways of care in line with our One Gloucestershire proposals being progressed through shared Sustainability and Transformation Partnership. The Forest of Dean would effectively be leading the way with such a development which would offer the opportunity to maximise the co-location of primary care and other health, care and wellbeing services.

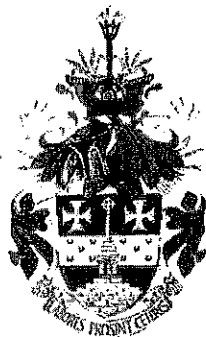
We are sure that in the proposals progressed to date that consideration has been given to those children, adults and older adults from the Forest of Dean who, in addition to experiencing a physical health condition, also experience mental illness and or learning disability. We would advocate that this continues to be of high consideration/inclusion if this development goes forward. Tackling the stigma associated with mental illness is key in our community. We see our involvement in supporting this development as a real opportunity to ensure that in partnership with yourselves, we are able to offer appropriate access to physical health care to all of the residents of the Forest of Dean in a timely manner ensuring quality, equality and safety. A new community hospital environment would support the delivery of new models of care which would support the "joining up" of primary care/GP services and community Physical and Mental Health services to better effect. We are fully supportive of your proposals as it is our view that this proposal would offer a significantly beneficial addition to the healthcare estate and range of services available to the people of the Forest of Dean.

Yours sincerely



Colin Merker
Acting Chief Executive

Chief Executive Officer: Mrs J Smailes



Executive Officer: Miss C Wheeler

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12 December 2017

Ms Mary Hutton
Accountable Officer
NHS Gloucestershire Clinical
Commissioning Group

Ms Katie Norton
Chief Executive
Gloucestershire Care Services
NHS Trust

Dear Ms Hutton and Ms Norton

Re: Community Hospitals in the Forest of Dean Consultation

Lydney Town Council support the Friends of Lydney Hospital and the Lydney, District and Severnside Stakeholder Group, and the consultation responses of both Groups.

Lydney Town Council share reservations regarding a lack of clarity regarding the decision-making process and particularly the prospect of "Citizen Juries" being engaged in the process. The other key issue arising from the public consultation is that 24 beds (though shown as a minimum number) is just not going to be sufficient to meet the needs of the District.

It is believed that should the preferred option, as expressed in the booklet, of one new community hospital to serve the District be successful, then that facility should be sited adjacent to Lydney.

The key benefits of a Lydney site are:-

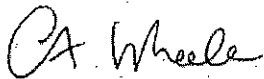
- The hospital would be adjacent to the major population centre in the District.
- "Patient Miles" would be minimised vs other possible locations.
- A suitable site to accommodate a facility with adequate parking and potential for expansion as required is available.
- The site has easy access to the A48, the major route in the District.
- The site is already designated "employment land" in the Forest of Dean District Council's Allocations Plan.
- The site sits within the A48 corridor where the major growth in population is predicted.
- The whole area to be covered is within 30 minutes by car.
- Public transport links are comparable or better than other possible locations.

Contd/.....

Ms M Hutton/Ms K Norton
12 December 2017
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Your consideration of the aforementioned points would be much appreciated.

Yours sincerely
for Lydney Town Council



f.f. Cllr Bob Berryman
Mayor

FOREST OF DEAN COMMUNITY HOSPITAL CONSULTATION

Blakeney Surgery (Drs. Scheuner, Raymond and Gibbs) previously submitted a statement when health services were being consulted. We have requested, but not seen, the report submitted by the now defunct Locality Commissioning Group. We would like to consider this report and submit further comments.

The document out for public consultation has several assumptions in it and decisions already made. It would be useful to have more information on the process so far and the input from local GP Leaders to help in the inevitable conversations with patients and colleagues. Blakeney Surgery will make a statement to the Local Practice Patient Group. We do not believe we should hide behind it being a "CCG Process" when anyone with any insight knows local GP's are the CCG although some GP's try to deny their responsibilities.

Our comments so far:

One Hospital

Placement of Hospital needs to be decided by a proven tool for public services taking into account transport, demographics etc.

Town placements make some sense but the centres of population are beyond the Town Council boundaries e.g. Ruspidge can be considered with Cinderford, Five Acres with Coleford.

Emphasis on present public transport is misguided. Routes can be changed in consultation with Local Councils during the design process.

25 beds is too few. The Forest provision of beds need to be part of a countrywide provision. Forest beds for Forest patients is an outdated concept which will fail due in the main to the inflexibility it produces. Review of intermediate care beds should be part of the process.

Co Location of Primary Care Services

This statement appears once only with no explanation yet it could be a major area of change and concern. We hope sight of the Locality GP report may enlighten us on this topic.

We hear both nationally and locally of the crisis in Primary Care. Recruitment of Doctors is virtually impossible apparently and changes in working practice too challenging for many GP's. Informally we hear that local practices wish to work together to provide better services for patients with the change in clinical team membership. We support this but think this topic should form part of the public consultation.

Small Practices, such as Blakeney Surgery (3,350 patients), must be under threat of closure. GMS income no longer supports this Primary Care business. We subsidise GMS Services with both NHS and non NHS work but the Forest centred rules of development money is probably the final act which threatens our business and hence service to patients. We support work to explore the benefits and risk of centralisation of Primary Care in town hubs, one of which would be attached to a

Hospital. We are aware this would be the end of Blakeney Surgery as it is now, not least because the population we service are spread over this rural area and will not associate with a single town base. We would like our holistic approach to clinical care to influence the wider provision of health care in the Forest. We do not agree with the medical model of care, especially GP centred care, which is prized by some other GP's in the locality. Nurse led village clinics (hub and spoke model) may well work.

Advantages of Larger Town Practices

We will let others talk about economy of scale, clinician workload, working time directives etc. There will be lots of comments as to why traditional general practice should continue so we will not spend time on this here. What is the advantage to the population which we service?

1. Specialist services would be in house. Modern regulations have forced the removal of minor surgery, sigmoidoscopy and contraception provision from many Practices.
2. Mental Health and Learning Disability services, with liaison nurses could be accessed in each town. This more centralised service should improve outcomes for these deprived groups which education of and payments to primary care have failed to achieve.
3. Transport services could be provided to a hub more economically than to diverse surgery locations.
4. Community consultants could offer services locally.
5. Day care could be offered in 3 Towns.
6. Minor Injury, minor illness and the perceived need for "urgent" appointments could be met in one place.
7. Fluctuations in demand are better managed with higher numbers of staff.
8. Medicine is becoming more specialised and more risk adverse. As GP's retire there will be less generalised physicians in the community. Locality GP hubs will reduce pressure on secondary care.
9. Risk adverse GPs will have a place to work supervised by those who are fully trained. We can develop an intermediate grade of clinician working under supervision.

c.c. Dr. Paul Weiss (Chair of Locality Group)
Penny Waters (FOD Locality Manager)
Helen Goodey (Primary Care Officer)

COMMUNITY HOSPITALS IN THE FOREST OF DEAN

Consultation response from Lydney, District & Severnside Stakeholder Group

The above group consist of members from the Friends of Lydney hospital, Lydney Town Council and Lydney District Councillors.

Members of the group have canvassed public opinion and attended consultation events; this document aims to capture the group's learnings and suggestion for the future of healthcare in the Forest of Dean.

The 2 Community Hospitals of Lydney and the Dilke have served the people of the Forest magnificently over many years.

There is clear consensus that Community Hospitals remain a vital component in meeting local healthcare needs.

The 2 existing Hospitals provide challenging environments in which to provide modern, efficient and effective high quality care. Other challenges include managing, recruiting and retaining staff across two sites.

The preferred GCS/CCG is for one Hospital to serve the whole District, replacing the two existing hospitals.

Key concerns of the public are:

- The number of beds in the new unit
- What services will be included
- Access to the unit
- The uninterrupted provision of services during the period of change

The preferred option of GCS and CCG, as stated above, is for a single Community Hospital in the Forest of Dean to replace the existing Lydney and Dilke hospitals (Budget £11m).

Our preference is for the New hospital, providing more than the minimum of 24 beds quoted in the booklet, to be sited on a freely available site at Lydney

Lydney is identified in the FoDDc Core Strategy (Confirmed by the Plan's Inspector) as the Town with the potential for the major developments, and having the best communications of the 3 towns, both within the District and beyond.

The current population of Lydney stands at 10,000, with full or outline permissions for a further 1,800 dwellings, resulting in a population increase of approximately 5,500 persons in the next 10 years, and a total population of 15,500. Further growth in the Southern Forest is expected to outstrip other areas, particularly in the Sedbury/Tutshill quarter.

A suitable site is made freely available on the outskirts of Lydney, already included as employment land in the FoDDC Allocations Plan. The site is more than adequate to accommodate the hospital, parking and the potential for further expansion that may be required during the lifespan of the facility.

Lydney with its acknowledged communication links (FoDDC C.S.) being the best of the 3 Forest Towns can service the whole of the area, with no community being more than 30minutes distant by car, and comparable or better public transport links.

The Lydney Neighbourhood Plan (Made in February 2016 and unique of the Forest Towns) on page 39 states:

Consultation with the community identified that a community healthcare facility is required. Funding and a suitable site would need to be found. Funding is available, as is a suitable site.

The key benefits of the Lydney site are:

The hospital would be adjacent to the major population centre in the District
"Patient Miles" would be minimised versus other possible locations
A site suitable to accommodate a facility with adequate parking and potential later expansion as required is available.
The site is already designated in the FoDDC Allocations Plan as "Employment Land"
The site sits within the A48 corridor where the major growth in population is predicted to take place, and is sited alongside the A48 with easy access on this main road.
The whole area to be served is within 30 minutes by car.
Public transport links are comparable or better than other possible locations, including the only rail station in the District - Of potential value to patients, visitors and staff.
Lydney does not suffer the some transport problems due to winter weather conditions experienced by other forest Towns.

We would ask GCS/CCG during the coming weeks:

To revisit/revise and reference their booklet data (prediction of population growth is severely understated for example)
We would appreciate the opportunity to discuss the issue of data, particularly in the area of population growth predictions.
To clarify the situation re the Newent area. Where is the Northern boundary and what population is therefore involved.
Provide more info re the decision making process, eg Citizen Juries. As a group we are not in favour of Citizen Juries. Any decision making body should include expertise in "Service Capacity", and have real accountability.
Advise whether our group would be able to formally present our business case for Lydney to whatever body makes the decisions.
To share the criteria which will inform the decision making, along with the hierarchy of those criteria.

Brian Pearman

First point contact for the Lydney, District & Severnside Stakeholder Group

[Redacted]
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