

Have your say on improving hospital services for people in Shropshire, Telford & Wrekin and mid Wales

NHS Shropshire and Telford & Wrekin Clinical Commissioning Groups (CCGs) are proposing to make some changes to the hospital services provided at the Royal Shrewsbury Hospital in Shrewsbury and the Princess Royal Hospital in Telford.

Your views are important to us. Please complete and return this survey to the FREEPOST address on the back page of this survey. If you prefer, you can fill out the online version of this survey on our website www.nhsfuturefit.org. This survey is also available in Welsh, as a Word document and in large print format. You can access these different formats at www.nhsfuturefit.org or by calling 0300 3000 903 or emailing nhsfuturefit@nhs.net. Please also contact us to request this survey in another language or format, or if you need help filling out this survey. If you feel you need more space to put forward your views in relation to any of the questions, please include a separate piece of paper.

Data Protection Statement: All information that you give in this survey will be processed on behalf of Shropshire and Telford & Wrekin CCGs by a company called Participate Ltd. This survey forms part of our consultation on improving our hospital services. The data will be used for that purpose only. All data will be held securely and the information you provide will be treated as confidential. We request that no additional personal data is provided in this survey.

Our proposed model of hospital care

Our proposal is for one hospital to become an Emergency Care site and the other hospital to become a Planned Care site. Both hospitals would have an Urgent Care Centre that is open 24 hours a day, seven days a week. Here you would receive care for illnesses and injuries that are not life or limb-threatening but require urgent attention. Our preferred option is for the Royal Shrewsbury Hospital to become the Emergency Care site and the Princess Royal Hospital to become the Planned Care site.

SECTION 1: Your views on our proposed model of hospital care

Q1. Please use the box below to describe any impact you think the proposed model would have on you and/ or your family.

The Council favours the focus the model places on specialist services on specialist sites and that this will encourage stability and retention of the skill bases needed.

SECTION 2: Your views on Option 1

Option 1: The Emergency Care site is the Royal Shrewsbury Hospital in Shrewsbury and the Planned Care site is the Princess Royal Hospital in Telford. Option 1 is the preferred option of NHS Shropshire and Telford & Wrekin CCGs.

Q2a. To what extent do you agree that Option 1 would meet your needs or the needs of people you care for, or those of the group or organisation you represent? Please tick / one box only.

Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	I don't know
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Q2b. Please explain the reasons for your answer to Q2a.

The Council is of the view that shortest distance is a vitally important factor in emergency, trauma and critical situations – its reduces travel time from incident to centre but also reduces ambulance ‘tie-down’ time – and therefore the Emergency Care site should be as near to Newtown as possible. The Council considers distance to planned care deals more with convenience/inconvenience which can be planned for in advance.

For the same reasons, the Council is of the view that Women & Children’s consultant-led inpatient services should be as near to Newtown as possible.

Option 1 provides meets both these requirements. Option 2 does not.

SECTION 3: Your views on Option 2

Option 2: The Emergency Care site is the Princess Royal Hospital in Telford and the Planned Care site is the Royal Shrewsbury Hospital in Shrewsbury. Option 2 is not the preferred option of NHS Shropshire and Telford & Wrekin CCGs

Q3a. To what extent do you agree that Option 2 would meet your needs or the needs of people you care for, or those of the group or organisation you represent? Please tick / one box only.

Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	I don't know
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input checked="" type="checkbox"/> 5	<input type="checkbox"/> 6

Q3b. Please explain the reasons for your answer to Q3a.

The Council is of the view that shortest distance is a vitally important factor in emergency, trauma and critical situations – its reduces travel time from incident to centre but also reduces ambulance ‘tie-down’ time – and therefore the Emergency Care site should be as near to Newtown as possible. The Council considers distance to planned care deals more with convenience/inconvenience which can be planned for in advance.

For the same reasons, the Council is of the view that Women & Children’s consultant-led inpatient services should be as near to Newtown as possible.

Option 2 does not meet either of these requirements. Option 1 does.

SECTION 4: Any other comments

Q4a. Can you think of any other factors that are important to you that we have not taken into account? If so, please explain them in more detail.

None.

Q4b. Please use the box below to give any other comments about the proposed changes to our hospital services.

The Council asks that the Clinical Commissioning Groups reach a conclusion and implement it as soon as possible.

SECTION 5: About you

Please fill in the following details about yourself. We are asking for this information to make sure we have gathered a diverse range of feedback.

Q5a. Please tell us whether you are responding as a member of the public or on behalf of an organisation (private or voluntary/charity). Please tick / one box only.

As a member of the public	On behalf of an organisation (private or voluntary/ charity)
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2

Q5b. If you are responding on behalf of an organisation, please give the name of your organisation.

Newtown and Llanllwchaiarn Town Council

Please note – if you are responding as an organisation and would also like to respond as an individual (or vice-versa) please complete a second survey. Please contact us to request any additional copies or complete the survey online at www.nhsfuturefit.org

Q5c. Please provide us with the first half of your postcode, e.g. TF7, SY16 or SY1. If you are responding as a member of the public, please give your home postcode. If you are representing an organisation, please give your office postcode. This information will help to make sure we have captured a wide range of views across Shropshire, Telford & Wrekin and mid Wales.

SY16	Prefer not to say	<input type="checkbox"/> 1
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SECTION 6: More information about you

The following questions are not compulsory, but by answering these you would help us to make sure we are capturing the views of as many different people as possible.

Q6.1. What is your gender? Please tick / one box only.

Male	Female	Intersex	Other	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q6.2. Gender reassignment: Have you gone through part of a process or do you intend to (including thoughts and actions) bring your physical sex appearance and/ or your gender role more line with your gender identity? (This could include changing your name, your appearance and the way you dress, taking hormones or having gender confirming surgery)

Yes	No	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

Q6.3. How old are you? Please tick / one box only.

16-26	27-37	38-47	48-58	59-69	70+	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

Q6.4. Which of the following best describes your ethnicity? Please tick / one box only.

White	Mixed/Multi Ethnic
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White British	<input type="checkbox"/> 1	White and Black Caribbean	<input type="checkbox"/> 14
Welsh	<input type="checkbox"/> 2	White and Black African	<input type="checkbox"/> 15
Irish	<input type="checkbox"/> 3	White and Asian	<input type="checkbox"/> 16
Other European (please state)	<input type="checkbox"/> 4	Arab	<input type="checkbox"/> 17
Other (please state)	<input type="checkbox"/> 5	Other (please state)	<input type="checkbox"/> 18

Asian or Asian British		Chinese or other ethnic groups	
Indian	<input type="checkbox"/> 6	Chinese	<input type="checkbox"/> 19
Pakistani	<input type="checkbox"/> 7	Filipino	<input type="checkbox"/> 20
Bangladeshi	<input type="checkbox"/> 8	Vietnamese	<input type="checkbox"/> 21
Other (please state)	<input type="checkbox"/> 9	Thai	<input type="checkbox"/> 22
		Other (please state)	<input type="checkbox"/> 23

Black		Gypsy and Traveller	
Caribbean	<input type="checkbox"/> 10	Irish	<input type="checkbox"/> 24
African	<input type="checkbox"/> 11	Romany	<input type="checkbox"/> 25
British	<input type="checkbox"/> 12	Other (please state)	<input type="checkbox"/> 26
Other (please state)	<input type="checkbox"/> 13		

Q6.5. What is your religion or belief? Please tick / one box only.

Hinduism	<input type="checkbox"/> 1	Islam	<input type="checkbox"/> 5
Christianity	<input type="checkbox"/> 2	Sikhism	<input type="checkbox"/> 6
Judaism	<input type="checkbox"/> 3	Other	<input type="checkbox"/> 7
Buddhism	<input type="checkbox"/> 4	Prefer not to say	<input type="checkbox"/> 8
No religion	<input type="checkbox"/> 9		

Q6.6. How would you define your sexual orientation? Please tick / one box only.

Heterosexual (straight)	Gay	Lesbian	Bisexual	Other	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Q6.7. Are you a parent of a child or children under 16? Please tick / one box only.

Yes	No	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

Q6.8. Do you consider yourself to have a disability? Please tick / one box only.

Yes	No	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

Q6.9. If you have answered yes to question 6.8 please state what the disability is.

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Q6.10. Are you a carer for anyone? Please tick / one box only. A carer is defined by the Carers Trust as 'anyone who cares, unpaid, for a friend or family member who due to illness, disability, a

mental health problem or an addition cannot cope without their support.'

Yes	No	Prefer not to say
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

When you have completed this survey, please fold it and put it in an envelope and address it to: FREEPOST NHS FF CONSULTATION. You will not need a stamp for this. All surveys must be received by 12am (midnight) on 4 September 2018. Thank you for your time. Your comments will be analysed by consultation specialists, Participate Ltd, who will then produce a report. This report will inform NHS Shropshire and Telford & Wrekin CCGs' decision-making process regarding the future of hospital services in Shropshire and Telford & Wrekin.

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