
Dilke and Lydney Briefing

August 2005

To: All Community Hospital staff

From: Chief Executive, Stephen Golledge

*Note to PCT Managers: Please communicate this information to your staff within **48 hours**. Please use staff meetings, forwarded email, noticeboards and any other methods available.*

PCT website: www.westglospct.org.uk

Dear Colleague,

This Q/A Team Briefing is designed to bring you up to date with the Cinderford and Lydney Options Appraisal schemes (two projects looking at the current and future needs for health services in these areas) ensuring that all staff have timely information on developments.

We are committed to open and transparent communication throughout this work and have produced this briefing in Q/A form to respond to your questions and queries.

Questions and Answers

What stage has the community healthcare review reached?

Following feedback from staff, stakeholders and the public (including the Stakeholder Event held in May), we have published a benefits criteria to help 'judge' future service options. This is set out below:

Key aspects of the benefits criteria:

Criteria	Supporting Information includes:
1. Having modern facilities which will provide the maximum privacy and dignity, a therapeutic environment and safety for patients, carers and staff.	<ul style="list-style-type: none">• There should be sufficient space for privacy in consultation/waiting areas/treatment areas at all stages in the patient's care• The facility (including the external environment) should be 'pleasant' and therapeutic• There would be an increased number of single bedded rooms.
2. Providing services which allow as many people as possible to be treated	<ul style="list-style-type: none">• It will enable an increased number of services to be provided locally

locally, where appropriate	<p>which are currently provided at Gloucestershire Royal Hospital</p> <ul style="list-style-type: none"> • Services should be physically accessible to all users and particularly those with mobility impairment
3. Having premises which are flexible enough to contract or expand to meet current and future service requirements and which can support new ways of working	<ul style="list-style-type: none"> • Any facility should be capable of meeting future service demand including transfer of services from Gloucestershire Royal Hospital • It will support the development of new and/or extended services
4. Creating an environment which enables health and social services staff to work together to provide better treatment and care for the patient	<ul style="list-style-type: none"> • There will be suitable provision made to encourage the appropriate shared use of facilities by health, social services and other staff e.g. training facilities, social/dining areas
5. Having buildings that meet environmental and energy efficiency requirements	<ul style="list-style-type: none"> • The buildings should meet all statutory environmental and energy efficiency requirements
6. Keeping the strong links with the community – a ‘local’ ownership	<ul style="list-style-type: none"> • The facility reflects the local heritage and history of the area • The facility provides easy access to the majority of core services used by the local population • The facility offers the opportunity for partnership working with a wide range of appropriate groups and voluntary bodies.
7. Ease of implementation (including planning restrictions and disruption to local services)	<ul style="list-style-type: none"> • The option should be achievable within a reasonable planning timescale • Any disruption to services should be manageable or acceptable.
8. Capable of supporting the on-going training and development of staff and enabling the recruitment and retention of the workforce	<ul style="list-style-type: none"> • Services should be provided out of modern premises and be regarded as Centres of Excellence by staff and service users • There should be appropriate facilities for the ongoing training and development of staff.

The current emphasis of the Cinderford and Lydney Options Appraisal is on exploring which community healthcare services should be provided in the Forest of Dean for the benefit of the whole population.

When the work on developing service options has been progressed further, the findings will be discussed at a further Community Healthcare Event for staff and stakeholders scheduled for October. Later in the year, we will hold a three month consultation when the full findings of the option appraisal work will be presented to staff, community groups and

the public. We will make sure that everyone, regardless of their view, can play their part in helping us to make the right decisions for the future.

The PCT has already published a short list of broad options for the development of community hospital services and health services provided by GPs and their teams in Cinderford and Lydney.

The broad options for Cinderford range from retaining Dilke Memorial Hospital as it is with minimal investment to meet minimum building standards to re-providing the hospital to improve patient access to primary care services provided by GPs, therapists and nursing teams (either on its current site or on another site in Cinderford).

There are no preferred options for the future of community healthcare services and for the North Forest, redevelopment of Dilke Memorial Hospital on its existing site remains one of the options.

Are we going to be consulted about services to be delivered from Dilke Memorial Hospital?

At this stage the work being undertaken is seeking to identify the range of services that could be provided safely from a community hospital site (we are using activity data to help us with this).

When service proposals are being developed in more depth it will be vital to engage fully with staff in defining the opportunities for future service development. We are currently exploring the best way to achieve this. Staff are also welcome to give their views at any time by contacting their Modern Matron.

Why do we have to change anything?

Patient surveys and feedback consistently request more services to be delivered locally in the Forest of Dean and we need to look carefully at how we can best achieve this.

Primary Care services in Cinderford are in need of substantial investment in order for them to meet the growing needs of the local population.

The Health Centre in the town is also in need of substantial investment and modernisation and we need to make sure that we do not plan services in isolation. For example, there are substantial benefits for patients in primary and community services working more seamlessly together in the delivery of care particularly for older people.

In addition, following an estates appraisal we know that current repair and replacement works at Dilke Memorial Hospital would cost in the region of £1.3 million to put right. We cannot ignore this regardless of which option is decided upon.

In terms of Lydney, there is a new housing development planned, which requires a review of capacity at Lydney and District Hospital and other local PCT services to make sure we can meet increased demand.

Is there a future for Community Hospitals in the Forest?

Community hospitals in the Cinderford and Lydney areas have a 'vibrant and healthy' future at the heart of their local communities and expansion and development of their services for the benefit of staff and patients is the top priority.

The continued existence of services provided by both Community Hospitals is recognised as crucial to meeting the health needs of the local population in the Forest of Dean.

Why can't the Dilke Memorial Hospital be extended using surrounding grounds?

This may be an option. As part of the review, the consultants will review the Forest of Dean District Council Local Plan and discuss options with relevant agencies to identify a range of solutions within the three broad options (see first question for broad options).

There have been 'rumours' that the 'PCT' is 'running down services' at the Dilke. Is this true?

An integral part of our vision is to increase the availability of healthcare services in the Forest, reducing the need to travel to Gloucester for treatments that it is safe and appropriate to provide more locally. It is clear from the feedback received to date that local people want to see this happen, although it is fair to say that there are differing views within the community on the best way to achieve this.

We have always maintained that Community Hospitals in Cinderford and Lydney should continue to provide and develop a range of appropriate services to support provision of local services for local people. This should include minor injury and illness services, X-Ray with telemedicine links to Gloucestershire Royal Hospital, a range of outpatient services, ultrasound, nurse/G.P. led inpatient beds, palliative care, blood transfusion services, physiotherapy, occupational therapy and speech and language therapy.

We also believe that each hospital has the potential to specialise in providing a range of additional healthcare services to meet the needs of the whole Forest Community. For example a higher number of surgical operations could be provided in Lydney and specialist rehabilitation services could be provided in Cinderford. This is good news for patients and good news for staff.

Over the last few months we have seen further positive developments in the development of healthcare services in Cinderford. Work has been undertaken in partnership with local clinicians to provide increased dermatology services, multi-disciplinary diabetes clinics and patient education sessions, and, opportunities for local blood transfusion/intravenous drug administration. In October, leg ulcer clinics together with a support group will be run from Dilke Memorial Hospital for the benefit of local patients.

Is it true that GP referrals are being reduced to the Dilke?

Our commitment to expand and develop community hospital services means that over the last few months we have been actively working to increase both outpatient and inpatient primary care (GP) referrals to Dilke Memorial Hospital and reduce the need for Forest patients to travel further a field for certain treatments. We will continue to support this approach.

What is happening to endoscopy service at the Dilke Memorial Hospital?

There are no plans to change the provision of endoscopy currently. There is a review of gastroenterology being undertaken which is seeking to increase primary care management for the local population. There is also national guidance pending from the Department of Health which may require us to change the way the endoscopy service is provided if we are to continue to offer a comprehensive service locally.

Will there be any staff redundancies as part of Community Healthcare review?

There are no plans for any redundancies. This review is about developing and expanding services not reducing them.

If I have any concerns or questions what should I do?

It's important that staff feel free to raise concerns or questions. Please contact Modern Matrons, Kathy Pitt or Maria Metherall in the first instance so that we can respond either in person in a future Q/A.

The Modern Matrons will continue to lead regular staff briefings over the coming months and regular Q/A briefings will be produced.

-END-