

### **Appendix 4: Acute Services Review survey report**

### **Contents:**

Content		
Executive summary		
Background and purpose		
Survey feedback		
Travel to and use of Lincoln, Pilgrim Boston and Grantham Hospitals		
Digital technology		
Breast services		
Stroke services		
Women's and Children's services		
Medical services at Grantham		
Trauma and Orthopaedic services		
General Surgery		
Urgent and Emergency Care services		
Haematology and Oncology services		
Equalities monitoring data		
You said, we did – what we've done with the feedback and next steps		
Appendix A: Survey including overview of proposed emerging options		



#### **Background and introduction**

During 2018 we engaged with our communities on hospital services to start developing options for how services need to change. We undertook a survey and number of public events to explore this.

All of the feedback we received was shared with clinicians and senior leaders to consider these views and experiences when thinking about the options for how we might deliver these services in the future. Any options that suggest significant change to hospital services will go through NHS England assurance processes and public consultation before service changes are made.

This previous engagement helped us to identify some emerging options upon which we invited further views using a variety of engagement activities as part of the Healthy Conversation 2019 campaign, such as open events and a survey. This report summarises the results of this survey as well as respondents' thoughts on travel and transport and technology to support these possible changes in services.

All of the detailed feedback received has been circulated to the Senior Responsible Officers for the system programmes to inform the development of Lincolnshire's Long Term Plan and also to shape their programmes and projects and emerging options prior to any public consultation.

#### Survey feedback:

During the course of the engagement we received 649 completed surveys with a varying number of respondents answering each question.

#### Respondent profile:

83% (537) members of the public 11% (73) member of NHS staff 5% (34) Organisation or other 5 did not answer this question

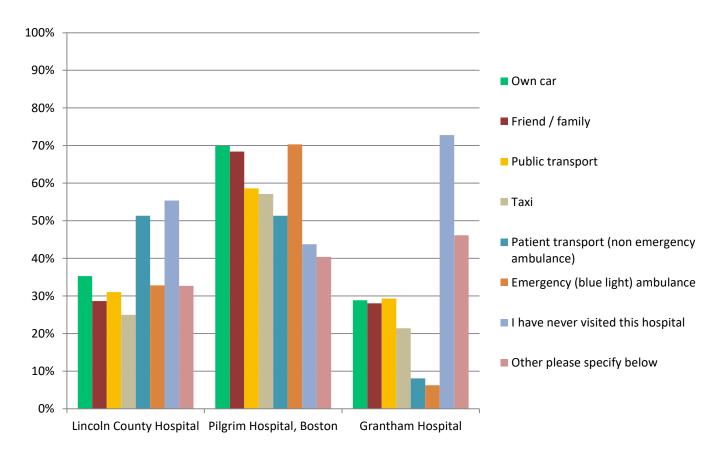


#### Travel to and use of Lincoln, Pilgrim Boston and Grantham Hospitals

Initial questions in the survey asked respondents how they travelled to hospitals, how often they attended and if they experienced any difficulties attending any of the sites.

These results demonstrate that a higher proportion of respondents to the survey visit Pilgrim Hospital, Boston than Lincoln and Grantham Hospitals and so subsequent answers received will also show a larger number of views relating to Pilgrim Hospital.

# Q3: If you have used any/all of the 3 main hospitals in Lincolnshire within the last 12 months what was the main way you travelled to each of these hospitals?



A large proportion of respondents visited each hospital using their own cars.

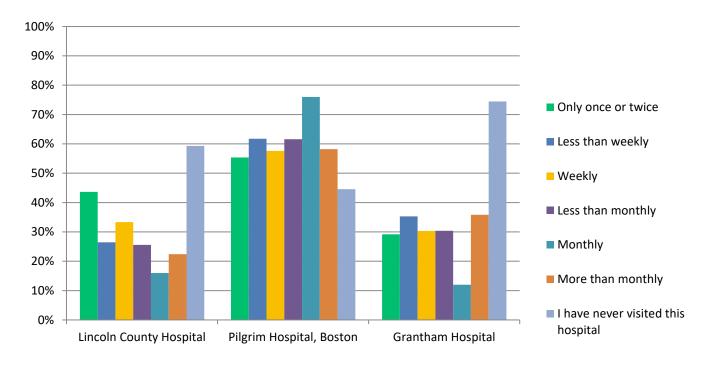
**Lincoln Hospital:** the highest number of those who have visited the hospital attended by patient transport. Those who suggested other methods of travel indicated that they either walked or attended a different hospital.

**Pilgrim Hospital Boston:** most respondents attended by emergency (blue light) ambulance. Those who suggested other methods of travel indicated that they walked, used voluntary transport or attended a different hospital.

**Grantham Hospital:** the majority of respondents who didn't use one of these travel methods indicated that they walked to the hospital.

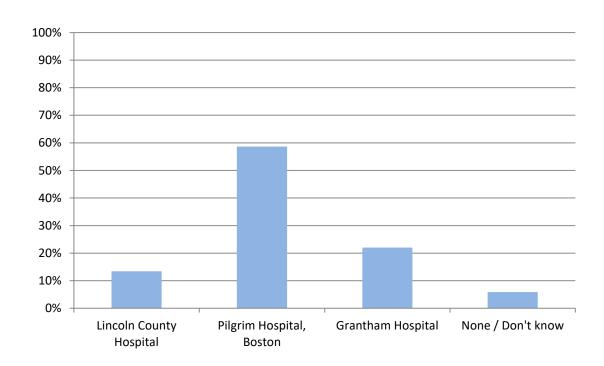


Q4: Over the last 12 months, approximately how often have you visited each of the 3 hospitals?



Most respondents indicated that they hadn't visited Lincoln and Grantham Hospitals.

#### Q5: Which is the main hospital site you have travelled to?





#### Q6: Why is this the main hospital you travel to?

	Lincoln Hospital	Pilgrim Hospital	Grantham Hospital	None / Don't Know
Responses	84 (13%)	367 (59%)	138 (22%)	37 (6%)
I am given appointments for this hospital	50%	25%	22%	8%
It is closest to where I live	27%	64%	66%	8%
It is easy to get to using public transport	1%	1%	1%	3%
My family / carer can take me	2%	2%	1%	0%
There is enough parking at the hospital	0%	0%	1%	0%
It is in an area where I work or shop	2%	2%	3%	0%
Other reason (please specify)	17%	5%	7%	41%
Answer left blank				41%

23 respondents did not answer this question. The main reasons for visiting each hospital are highlighted in green.

#### Other reasons:

**Lincoln Hospital:** Closest A&E open 24/7; only location for treatment required; advised to attend this hospital

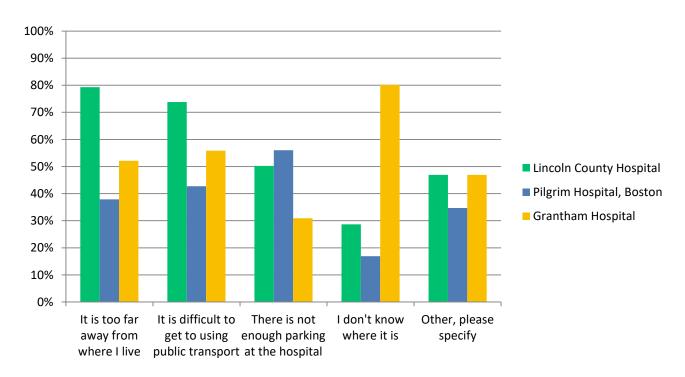
**Pilgrim Hospital, Boston:** Only location for clinic/treatment; closest for family to visit; better roads and familiar with hospital

Grantham Hospital: Requested to go here; easy to get to; quicker treatment in A&E

None/Don't know: Use other hospitals especially Stamford or Peterborough



# Q7: For each hospital please tell us if there is ONE main thing that makes it difficult to access services at each hospital



The main reason it is difficult to access services:

**Lincoln Hospital:** It is too far away from where patients live. Other reasons: too expensive to get there; long delays to get appointments; traffic congestion; would access another hospital.

**Pilgrim Hospital, Boston:** There is not enough parking at the hospital. Other reasons: cost of parking; reputation; too far to travel in an emergency

**Grantham Hospital:** Patients don't know where it is.

<u>Other reasons:</u> other hospitals are easier to access; reduced services; cost of parking



### Digital:

Q8: Virtual consultations could be phone or video call with a clinician rather than needing to travel for a face to face appointment. Please tell us to what extent you would like to be offered a virtual consultation instead of having to travel to an appointment?

I would definitely like to be offered a virtual consultation	14%	46%
I might like to be offered a virtual consultation	32%	positive
I don't think I would like to be offered a virtual consultation	23%	50%
I definitely would not like to be offered a virtual consultation	27%	negative
Don't know	4%	

### Q9: Please tell us the reasons for your answer to question 8

Positive	<ul> <li>Great for patients too poorly to drive</li> <li>Often difficult to arrange transport so this would be great</li> <li>Saves time and more environmentally friendly</li> <li>Much easier than having to travel and pay for fuel and parking</li> <li>More time efficient when hospital conversations sometimes only last minutes but travelling could take hours</li> <li>Reduces need for patient/family to take time off work</li> <li>Much better for patients with children or dependents</li> <li>Better use of clinician time and resulting in more appointments available</li> </ul>
Negative	<ul> <li>Lack of confidence in dealing with people via technology, far more comfortable with face-to-face meetings</li> <li>Not everybody has access to the internet or technology</li> <li>Physical examinations are far better</li> <li>Those with disabilities may have difficulties with technology</li> <li>Some important information could be missed by not seeing the patient</li> <li>It would feel strange and impersonal</li> <li>Concerns about discussing personal information on the internet/via computer</li> </ul>



Q10: Some digital solutions can be used at home to monitor your own health (for example, self-monitoring or remote monitoring technology such as blood sugar monitor, blood pressure monitor, activity tracker).

To what extent would you use these if that meant you could avoid an unnecessary appointment or stay in your home for longer rather than having to go into hospital?

I would definitely use technology to monitor my health at home	49%	86%
I might use technology to monitor my health at home	37%	positive
I don't think I would use technology to monitor my health at	6%	10%
home		negative
I definitely would not use technology to monitor my health at	4%	
home		
Don't know	4%	

#### Q11: Please tell us the reasons for your answer to question 10

Positive	<ul> <li>Frees up time for other patients</li> <li>Saves the NHS time and money</li> <li>Reduction in time away from work, less pressure on NHS resource, reduction in carbon footprint re travel</li> <li>Many patients already monitor their health at home such as blood pressure – just need plenty of support and information about when to seek help and when to continue alone at home</li> <li>The technology exists and produces the same results with less inconvenience to myself and frees up resources for other people who may have no other option but to physically attend</li> <li>With advancing age travel is becoming a problem</li> <li>We all need to take more responsibility for our own health. It is our responsibility to monitor day to day health</li> </ul>
Negative	<ul> <li>Would not feel reassured as much as seeing a doctor</li> <li>Not suitable for certain conditions</li> <li>I do not understand the technology and don't trust it. I dislike doing things on line</li> </ul>



# Q12: If you were offered support and training to use digital technology to what extent would this encourage you to use it?

I would definitely consider using it after support and training	50%	85%
I might consider using it after support and training	35%	positive
I don't think I would use it even after support and training	7%	11%
I definitely wouldn't use it even after support and training	4%	negative
Don't know	4%	

Q13: Family members or carers could have access to parts of your medical records with your permission. This would mean that they could check your upcoming appointments, see your prescribed medications or contact a medical provider on your behalf.

Please tell us if you would like to give permission for family members or carers to access your medical records

I would definitely like to give family or carers permission to	36%	71%
access my medical records		positive
I might like to give family or carers permission to access my	35%	
medical records		
I don't think I would like to give family or carers permission to	12%	26%
access my medical records		negative
I definitely would not like to give family or carers permission to	14%	
access my medical records		
Don't know	4%	
	I	1

#### Q14: Please tell us the reasons for your answer to question 13

Positive	<ul> <li>The more people involved in my care the better for me</li> </ul>
	<ul> <li>Useful for older people or those with additional needs who need</li> </ul>
	support with these things
	<ul> <li>Patients happy for family to know their medical details</li> </ul>
	<ul> <li>If it speeded up diagnosis and meant better treatment</li> </ul>
Negative	Privacy concerns
	<ul> <li>Totally inappropriate unless incapable of making own decisions</li> </ul>
	<ul> <li>Maybe as I get older but not at the moment</li> </ul>



# Q15: If you have any concerns about using digital technology such as having video/skype consultations, using self-monitoring technology or apps please tell us below

- > This is fine as long as patients are given a choice
- Privacy and cyber security are a concern
- > Patients might not understand how to do it
- > Patients might not have concerns but would like to be given suitable training how to use these technology
- Do not have internet access or technology to use it
- > Sometimes only face to face appointments are suitable

# Q16: If there is anything that would help you to use these technologies to take advantage of the benefits they bring, please tell us below

- Suitable training and support would be needed
- ➤ Each step at a time- patients can't even access medical records online yet. GP front line staff need to be fully trained in assisting/encouraging would-be NHS digital users
- > Full subtitles and not having to use a phone
- Guarantee security of information
- Possibly, a dedicated room in public buildings such as surgeries, libraries, council offices etc, where the public can drop in to use technology for telehealth consultations. This could be beneficial in areas where connectivity is poor
- Provide the technology for patients to use
- ➤ Better broadband, easy access to support 24hrs a day if there are problems using the technology
- Once they are proved to be secure patients might consider it



The following questions were based on the eight services included in the Acute Services Review. <u>Due to the nature of the questions asking respondents to identify concerns and problems they have about the emerging options, the responses are mainly negative.</u> This will enable us to consider what we can do to mitigate any of the problems people might face if services are changed.

#### **Breast services**

#### Q17: Please tell us if you would have any problems accessing these breast services at <u>Lincoln County Hospital</u> and if you have any suggestions of how we could overcome this

52% of 644 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility hospital is far away from home; too far to travel
- Transport unable to drive or rely on family/friends
- Cost hardship to patients or family

9% of respondents provided neutral answers to this question, 7% were positive and respondents felt they wouldn't have any problem with this option and 33% were unanswered.

Suggestions included:

- Mobile units at GP Practices
- Provide free, reliable transport for sick patients, for example scale up the charity car projects
- Send out details of travel and transport with appointments
- Keep outpatients appointments local

(Respondents unaware that this is already part of the emerging option)

# Q18: Please tell us if you would have any problems accessing these breast services at Grantham Hospital and if you have any suggestions of how we could overcome this

41% of 647 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility hospital is far away from home; too far to travel
- Transport unable to drive and lack of public transport
- Cost hardship to patients or family

6% of respondents provided neutral answers to this question, 15% were positive and respondents felt they wouldn't have any problem with this option and would be prepared to travel if it meant a quicker appointment and 38% were unanswered.

Suggestions included:

- Offer hospital transport
- Better parking and free for disabled patients
- > Skype would help for routine follow up appointments



# Q19: Please tell us if you have any other comments or suggestions about our emerging options for breast services

Other comments included:

- Concern about services being centred around Lincoln
- > Services should be more widely available in all hospitals across Lincolnshire
- > Could utilize other hospitals such as Grantham, Pilgrim Boston, Peterborough and Stamford
- Would need travel support to and from Lincoln Hospital
- > Centralising is sensible
- Received great care at Lincoln previously

#### Stroke services

#### Q20: Please tell us if you would have any problems accessing these stroke services at <u>Lincoln County Hospital</u> and if you have any suggestions of how we could overcome this

62% of 644 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility concern about the 'Golden Hour', long distance away for people at the coast, road infrastructure inadequate
- Transport no public transport from some areas, would have to rely on family/friends
- Cost hardship to patients or family

3% of respondents provided neutral answers to this question, 7% were positive and respondents felt they wouldn't have any problem getting to Lincoln and would appreciate swift treatment at a centre of excellence and 28% were unanswered.

Suggestions included:

- Retaining stroke services as Pilgrim Boston
- Consider the impact on friends and family
- Provide a fully funded transport system

# Q21: Please tell us if you would have any problems accessing these stroke services at Pilgrim Hospital, Boston and if you have any suggestions of how we could overcome this

28% of 643 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far to travel, excessive traffic congestion and long delays
- Transport no transport links from some areas, unable to drive and would have to rely on family/friends

3% of respondents provided neutral answers to this question, 28% were positive and respondents felt they wouldn't have any problem getting to Boston as this was closer to home and 40% were unanswered.

Suggestions included:

- Improved parking required and at reduced costs
- > Use Skype if possible



Provide stroke services in Grantham and other local hospitals

# Q22: Please tell us if you have any other comments or suggestions about our emerging options for stroke services

Other comments included:

- > Treatment in a timely manner is important but where this is located varies depending on where patients live in the county
- Provision of stroke services in other local hospitals
- Local rehabilitation

#### Women's and children's services

Q23: Please tell us if you would have any problems accessing <u>Lincoln County Hospital</u> for consultant led services for both consultant led and maternity services and if you have any suggestions of how we could overcome this

54% of 643 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far away from where some patients live, difficult to get to especially with young children or in emergencies
- Transport difficult in times of heavy traffic, inadequate public transport and can't get there for early appointments,
- Cost hardship to patients or family, can take a whole day for appointments with the additional travel and need to take unpaid leave, difficult to travel with other work and family commitments

7% of respondents provided neutral answers to this question, 4% were positive from respondents who lived closer to Lincoln and felt it would be easier to travel to and 35% were unanswered.

Suggestions included:

- Provide additional parking extra land needed
- > Keep maternity services at Pilgrim Boston and use both Lincoln and Pilgrim Hospitals
- > Improved transport links for patients

Q24: Please tell us if you would have any problems accessing <u>Pilgrim Hospital</u>, <u>Boston</u> for maternity-led services or both consultant-led and maternity services and if you have any suggestions of how we could overcome this

19% of 643 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far away from where some patients live, still a long way to get to using public transport from the coast
- Transport traffic congestion at certain times of the day; terrible public transport options, other hospitals are closer and easier to get to



9% of respondents provided neutral answers to this question, 20% were positive from respondents who lived closer to Boston and felt it would be easier to travel to and 52% were unanswered.

#### Suggestions included:

- More staff needed to deliver the fabulous care they are capable of
- Keep services as they are
- Deliver services in other local community hospitals

# Q25: Please tell us if you have any other comments or suggestions about our emerging options for women's and children's services

Other comments included:

- Concern about services becoming Lincoln centric
- Localise services to make them accessible for all
- Increase staffing levels
- Consider the impact of the wider family and dependents if women and children have to travel to a hospital further away from their homes.

#### **Medical services at Grantham Hospital**

# Q26: Please tell us if you would have any problems accessing acute medical beds at Grantham Hospital and if you have any suggestions of how we could overcome this

30% of 644 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far away from where some patients live,
- Transport poor public transport links and difficult to access if unable to drive
- Cost hardship to patients or family who cannot afford the travel costs

6% of respondents provided neutral answers to this question, 18% were positive from respondents who felt they would have no problems accessing Grantham Hospital and were keen for services to remain there and 46% were unanswered.

#### Suggestions included:

- Need to keep all medical treatment local and easy to access
- Train staff in-house and build on the apprenticeship scheme to share knowledge of experienced staff
- More beds and staff needed at Grantham Hospital.

# Q27: Please tell us if you have any other comments or suggestions about our emerging options for acute medical beds at Grantham Hospital

Other comments included:

- > The acute care beds might take some pressure from Pilgrim and Lincoln hospitals
- Use of other local community hospitals
- ➤ Keeping as many services as possible at Grantham is very important. If we only have 3 main hospitals in this county we need to keep as many local services available as possible.



The community healthcare support model is being used at Hospice in the Hospital at Grantham and has thrown up a variety of challenges which should be considered before any changes are made to the hospital itself.

#### **Trauma and Orthopaedics**

Q28: Please tell us if you would have any problems accessing trauma and orthopaedic services at <u>Grantham Hospital</u> and if you have any suggestions of how we could overcome this

36% of 648 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility Grantham Hospital is too far away from people living in South Lincolnshire and they would go to Peterborough, too far to travel in pain after an operation
- Transport poor public transport links and the railway is too far away from the hospital, no public transport available to get to the hospital early in preparation for operations, some journeys would take over 3 hours

5% of respondents provided neutral answers to this question, 17% were positive from respondents who felt it was convenient for those living locally and some had good experiences of orthopaedic care at Grantham and 42% were unanswered.

Suggestions included:

- Offer these services at multiple hospital sites
- Provision of transport for hospital services

Q29: Please tell us if you have any other comments or suggestions about our emerging option for trauma and orthopaedic services at Grantham Hospital

Other comments included:

- ➤ I would be happy to travel to Grantham knowing there was a reduced chance of the appointment being cancelled and a day off being wasted
- Centralisation cannot work without a complete change in transport and road infrastructure
- > Too far to travel from certain areas of the county

#### **General Surgery**

Q30: Please tell us if you would have any problems accessing general surgery services at Grantham Hospital and if you have any suggestions of how we could overcome this

35% of 642 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far to travel especially when on top of already feeling ill or after surgery
- Transport accessing for early start surgery would be impossible using public transport, difficult to use public transport straight after day surgery and if you don't have a car it would be impossible to get home



3% of respondents provided neutral answers to this question, 18% were positive from respondents who would have no problems accessing Grantham Hospital if they were local and others were happy to travel for planned care and 44% were unanswered.

#### Suggestions included:

- Put more resources at a local level need 3 centres of excellence
- Transport needed to the hospital from the train station
- Appointment times should reflect train / bus arrival times

# Q31: Please tell us if you have any other comments or suggestions about our emerging option for general surgery services at Grantham Hospital

Other comments included:

- Other community hospitals should also deliver these services
- A vast rural area like Lincolnshire need services in local hospitals rather than centres of excellence
- Retain breast surgery with general surgery
- Support for general surgery to be delivered at Grantham Hospital

#### **Urgent and Emergency Care services**

# Q32: Please tell us if you would have any problems accessing urgent and emergency care services at <u>Grantham Hospital</u> and if you have any suggestions of how we could overcome this

35% of 644 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far away for some especially in an emergency and treatment may be outside of the 'Golden Hour', many would go to their nearest hospital
- Transport without a car access is very difficult from other areas in the county and the poor and inadequate roads are dangerous to drive on in an emergency.

8% of respondents provided neutral answers to this question, 13% were positive from respondents who would have no problems accessing Grantham Hospital if they were local and recognise the need to relieve emergency services at the other hospitals and 45% were unanswered.

#### Suggestions included:

- Upgrade other local community hospitals to provide urgent and emergency care
- Urgent and emergency care services required 24 hours a day 7 days a week
- Offer walk in services 24/7 with full resuscitation and imaging

# Q33: Please tell us if you have any other comments or suggestions about our emerging option for urgent and emergency care services at Grantham Hospital

Other comments included:

- Development of other community hospitals to provide urgent and emergency care and urgent treatment centres, especially for Stamford and Spalding
- 24/7 access to urgent and emergency care in Grantham
- ➤ Improve the NHS 111 service



More education required on self-care

#### **Haematology and Oncology services**

# Q34: Please tell us if you would have any problems accessing inpatient haematology and oncology services at <u>Lincoln Hospital</u> and if you have any suggestions of how we could overcome this

47% of 643 respondents to this question provided negative examples of how they could have problems accessing services and of those, the reasons given included:

- Distance and accessibility too far away for many people, 3-4 hour round trips are unacceptable when having treatment for cancer and poorly, parking is inadequate
- Transport little public transport and not suitable for such poorly patients and friends and family unable to visit
- Cost too expensive to travel so far even if you have a car, if you don't and can't use public transport due to being so poorly then taxis are even more expensive, friends and family will be unable to visit due to cost

3% of respondents provided neutral answers to this question, 9% were positive who felt able to access Lincoln Hospital as long as outpatients are offered at Grantham and mobile units still available and 41% were unanswered.

#### Suggestions included:

- Set up telephone conversations for follow ups and reviews
- Supply transport for patients
- Increase the use of voluntary car schemes

# Q35: Please tell us if you have any other comments or suggestions about our emerging option for haematology and oncology services at Lincoln Hospital

Other comments included:

- Consider accessibility options for service users in the south, north and east of the county, especially those who are unable to drive
- Use more local hospitals
- There should be equally good services at all sites
- Centralisation cannot work without a complete change in transport and road infrastructure



### **Equalities monitoring**

Under the provisions of the Equality Act 2010, all NHS organisations are required to demonstrate that their processes are fair, and that they are not discriminating or disadvantaging anyone because of their age, disability, gender reassignment status, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex or sexual orientation.

Age group	Response	es
Under 18	0%	1
18- 25	3%	18
25-30	6%	38
31 - 35	10%	60
36 - 40	9%	56
41-45	7%	42
46-50	10%	64
51-55	8%	52
56-60	9%	55
61-65	11%	69
66-70	14%	87
71 +	12%	78
Rather not say	1%	8
	Answered	628
	Skipped	21

Do you consider yourself to have a disability?			
Responses			
Yes	24% 151		
No	71%	445	
Rather not say	5%	29	
	Answered	625	
	Skipped	24	

If yes do you have a:		
	Responses	
Physical Impairment	42%	66
Sensory Impairment	7%	11
Learning Disability	1%	1
Mental Health Condition (Long		
Term)	10%	16
Other Health Condition (Long		
Term)	41%	65
	Answere	
	d	159
	Skipped	490

Gender	Responses	
Male	20% 127	
Female	76% 476	
Rather not		
say	3%	20
	Answered 62	
	Skipped	

Do you now, or have you ever considered yourself to be transgender?			
	Responses		
Yes	0% 1		
No	96%	557	
Rather not say	4% 21		
	Answered	579	
	Skipped	70	

Religion or beliefs	Responses	
Atheism	11%	67
Agnosticism	3%	18
Buddhism	1%	3
Christianity	54%	323
Hinduism	0%	1
Humanism	1%	4
Islam	0%	1
Jainism	0%	0
Judaism	0%	2
Sikhism	0%	1
Any Other Religion/Belief	2%	13
No Religion or Belief	18%	110
Rather not say	9%	53
	Answered	596
	Skipped	53



	T	
Ethnicity	Responses	
Bangladeshi	0%	0
Indian	0%	3
Pakistani	0%	0
Any Other Asian		
Background	0%	0
African	0%	1
Caribbean	0%	0
Any Other Black		
Background	0%	0
White and Asian	1%	4
White and Black		
African	0%	0
White and Black	00/	
Caribbean	0%	0
Any Other Mixed	40/	_
Background	1%	5
White British	89%	546
White Irish	0%	3
Any Other White		
Background	2%	11
Chinese	0%	0
Gypsies & Travellers	0%	1
Any Other Ethnic		
Group	0%	1
Rather not say	6%	39
	Answere	
	d	614
	Skipped	35

Sexual orientation	Responses	
Bisexual	2%	14
Gay Man	0%	0
Gay Woman	0%	1
Heterosexual	87%	501
Lesbian	0%	2
Other	1%	4
Rather not say	9%	53
	Answered	575
	Skipped	74

Pregnancy and maternity - are you an expectant mother?			
	Responses		
Yes	3% 1		
No	94% 5		
Rather not say	3% 1		
	Answered	582	
	Skipped	67	

Pregnancy and maternity - have you utilised local maternity services in the last 18 months			
Responses			
Yes	11% 64		
No	86% 488		
Rather not say	3% 17		
	Answered 569		
	Skipped 80		

Carer- are you currently providing support and care to a partner, child, relative, friend or neighbour who cannot manage without your help or/ and support?					
		Responses			
Yes	34%	34% 199			
No	61%	61% 357			
Rather not say	5%	5% 29			
	Answered	Answered 585			
	Skipped	Skipped 64			

### You said, we did



All of the detailed feedback received has been circulated to the Senior Responsible Officers for the system programmes to inform the development of Lincolnshire's Long Term Plan and also to shape their programmes and projects.

This feedback has also informed the continued development of the emerging options for changes to hospital services which will go through NHS England assurance processes and public consultation before service changes are made.

#### **Appendix 1: survey**

### Lincolnshire Acute Services Review Engagement 2019

During 2018 we engaged with our communities on hospital services to start developing options for how services need to change. We undertook a survey and number of public events to explore this.

All of the useful feedback we received has been shared with clinicians and senior leaders to consider these views and experiences when thinking about the options for how we might deliver these services in the future. Any options that suggest significant change to hospital services will go through NHS England assurance processes and public consultation before service changes are made.

This previous engagement has helped us to identify some **emerging options** which we would now like your views on before they are finalised for the formal public consultation. We would welcome feedback on these and in particular your thoughts on travel and transport and technology to support these possible changes in services.

Please visit our website for more information about these services, explanations of why we need to change and the benefits of these emerging options: https://www.lincolnshire.nhs.uk and get involved in a #HealthyConversation.

We would like your views on all of the questions, but if you don't want to answer some or feel they are not relevant, please just skip them and move onto the next question.

Please return this survey to: Central STP Office Room 2 Wyvern House Kesteven Street Lincoln LN5 7LH

#### 1. Please tell us the first 5 digits of your postcode



2. Are you:  ☐ Member of the public ☐ Member of NHS staff ☐ GP ☐ Organisation or other, please tell us below:					
3. If you have used any/all of the 3 main hospitals in Lincolnshire within the last 12 months what was the main way you travelled to each of these hospitals? (one tick per column)					
	Lincoln County Hospital	Pilgrim Hospital, Boston	Grantham Hospital		
Own car					
Friend / family					
Public transport					
Taxi					
Patient transport (non- emergency ambulance)					
Emergency (blue light) ambulance					
I have never visited this hospital					
Other, please specify below					

4. Over the last 12 months, approximately how often have you visited each of the 3 hospitals? (one tick per column)



	Lincoln County Hospital	Pilgrim Hospital, Boston	Grantham Hospital	
Only once or twice				
Less than weekly				
Weekly				
Less than monthly				
Monthly				
More than monthly				
I have never visited this hospital				
We recognise that in an emergency you will go to your nearest, most appropriate hospital. Please consider the following questions for outpatient or planned appointments.				
5. Which is the main hospital site you have travelled to? (please tick one box):  □ Lincoln County Hospital □ None / don't know				
☐ Pilgrim Hospital, Bostor	n □ Grantham	Hospital		
☐ I am given appointment☐ It is closest to where I li☐ It is easy to get to using☐ My family / carer can ta☐ There is enough parking☐ It is in an area where I was a single in the control of the contro	Why is this the main hospital you travel to?  am given appointments for this hospital is closest to where I live is easy to get to using public transport ly family / carer can take me here is enough parking at the hospital is in an area where I work or shop other reason (please specify)			

7. For each hospital please tell us if there is ONE main thing that makes it difficult to access services at each hospital (one tick per column)



	Lincoln County Hospital	Pilgrim Hospital, Boston	Grantham Hospital	
It is too far away from where I live				
It is difficult to get to using public transport				
There is not enough parking at the hospital				
I don't know where it is				
Other, please specify below				
Improvements in infor Lincolnshire for both stravel long distances for monitoring technology unnecessarily.  8. Virtual consultations travel for a face to face.	staff and patients. In or appointments - w and video/skype co	a rural county like ve need to look at lonsultations so pat	E Lincolnshire, so how technology of tients do not have	me patients have to can help, such as self- e to travel
Please tell us to what having to travel to a	•	l like to be offere	d a virtual cons	ultation instead of
<ul> <li>□ I would definitely lik</li> <li>□ I might like to be of</li> <li>□ I don't think I would</li> <li>□ I definitely would no</li> <li>□ Don't know</li> </ul>	fered a virtual consu	ultation virtual consultatio		
9. Please tell us the	reasons for your a	nswer to questio	n 8	



10. Some digital solutions can be used at home to monitor your own health (for example, self-monitoring or remote monitoring technology such as blood sugar monitor, blood pressure monitor, activity tracker).

To what extent would you use these if that meant you could avoid an unnecessary appointment or stay in your home for longer rather than having to go into hospital?
<ul> <li>□ I would definitely use technology to monitor my health at home</li> <li>□ I might use technology to monitor my health at home</li> <li>□ I don't think I would use technology to monitor my health at home</li> <li>□ I definitely would not use technology to monitor my health at home</li> <li>□ Don't know</li> <li>11. Please tell us the reasons for your answer to question 10</li> </ul>
<b>,</b>
12. If you were offered support and training to use digital technology to what extent would this encourage you to use it?
<ul> <li>□ I would definitely consider using it after support and training</li> <li>□ I might consider using it after support and training</li> <li>□ I don't think I would use it even after support and training</li> <li>□ I definitely wouldn't use it even after support and training</li> <li>□ Don't know</li> </ul>
13. Family members or carers could have access to parts of your medical records with your permission. This would mean that they could check your upcoming appointments, see your prescribed medications or contact a medical provider on your behalf.
Please tell us if you would like to give permission for family members or carers to access your medical records
<ul> <li>□ I would definitely like to give family or carers permission to access my medical records</li> <li>□ I might like to give family or carers permission to access my medical records</li> <li>□ I don't think I would like to give family or carers permission to access my medical records</li> <li>□ I definitely would not like to give family or carers permission to access my medical records</li> <li>□ Don't know</li> </ul>
14. Please tell us the reasons for your answer to question 13
15. If you have any concerns about using digital technology such as having video/skype consultations, using self-monitoring technology or apps please tell us below



16. If there is anything that would help you to use these technologies to take advantage of the benefits they bring, please tell us below
Breast services
Breast services refer to a range of screening, diagnosis and treatment of breast problems, including cancer. These services are currently delivered across Lincoln County, Pilgrim and Grantham hospitals with a small number of patients seen in Louth Hospital. There is also a mobile breast screening mammography service that travels across the county.
We think that a centre of excellence approach would work well in Lincolnshire as has already proven so in rural Cornwall – visit our website to see a case study. We think this will help us address the quality of care issues and shortage of specialist staff.
In practice, this emerging option would mean that all follow-up outpatient appointments and routine breast mammography screening services would continue to be available across the county as they are now. These appointments are where most patients receive their care. First outpatient appointments and all surgery would be provided at the centre of excellence. This would enable specialist staff to fully cover rotas, see more patients and retain and develop their skills. Together, this means patients will be seen more quickly and receive a better standard of care.
Our emerging options indicate that this centre of excellence could be at Lincoln Hospital or Grantham Hospital. The NHS's current preferred emerging option is Lincoln Hospital for this centre of excellence as it requires the least amount of capital funding. If located at Grantham, any complex breast surgery would be done at Lincoln.
17. Please tell us if you would have any problems accessing these breast services at Lincoln County Hospital and if you have any suggestions of how we could overcome this
18. Please tell us if you would have any problems accessing these breast services at <a href="Grantham Hospital">Grantham Hospital</a> and if you have any suggestions of how we could overcome this
19. Please tell us if you have any other comments or suggestions about our emerging options for breast services



#### Stroke services

Stroke services refer to a range of services for the diagnosis of stroke, acute treatment, rehabilitation and follow-up after discharge from hospital. Currently these services are delivered at Lincoln and Pilgrim Hospitals. Diagnostic services start in our emergency departments and then patients have treatment on the acute stroke units in these two hospitals. There is also a stroke rehabilitation service in the community that cares for people after they have been discharged from hospital.

Our first emerging option, similar to that for breast services, is to take a centre of excellence approach, providing acute stroke care from the Lincoln Hospital site. This is the <a href="NHS's current preferred emerging option">NHS's current preferred emerging option</a> because it will provide the best model to meet national care standards for patients, and to recruit and retain staff.

The second emerging option is to retain the current service at Lincoln and Pilgrim Hospitals but with an out of hours combined on-call rota being based at Lincoln.

In both emerging options, our intention would be to enhance rehabilitation in the community across Lincolnshire to reduce the length of stay in hospital from 14 days to 7 days in line with national best practice.

20. Please tell us if you would have any problems accessing these stroke services at Lincoln County Hospital and if you have any suggestions of how we could overcome this
21. Please tell us if you would have any problems accessing these stroke services at <a href="Pilgrim Hospital">Pilgrim Hospital</a> , Boston and if you have any suggestions of how we could overcome this
22. Please tell us if you have any other comments or suggestions about our emerging options for stroke services



#### Women's and children's services

Women's and children's services refer to a wide range of services across acute and community settings including obstetrics (maternity care), neonatal (care of premature or sick babies), paediatric (care of children) and gynaecology (care for women and girls, especially related to the reproductive system).

Currently all these hospital services are delivered in both Lincoln and Pilgrim Hospitals. We have a neonatology intensive care unit at Lincoln Hospital and a special care baby unit at Pilgrim Hospital. Babies born pre 29-weeks and children under five who require surgery are all treated out of county. Women in Lincolnshire have a choice of giving birth at home or in a consultant-led obstetrics unit at these two hospitals. Midwife services are available in the community and at home.

There are two emerging options.

#### The first emerging option is to have the following services at the two hospital sites;

#### At Pilgrim Hospital

- to continue with a consultant led obstetric service with the addition of a co-located midwifeled unit
- to continue with a specialist care baby unit caring for babies born from 32 weeks (the interim position is that it currently cares for babies born from 34 weeks. Prior to August 2018 it cared for babies from 30 weeks)
- to have a short stay paediatric assessment ward for children needing up to 23 hours of care
- to have low acuity paediatric in-patient beds overnight
- to have paediatric day case surgery.

#### At Lincoln Hospital

- to continue with a consultant led obstetric service with the addition of a co-located midwifeled unit
- to have a neonatal unit caring for babies born from 27 weeks
- to have a short stay paediatric assessment ward
- to have paediatric in-patient beds
- to have paediatric day case and planned surgery.

We would wish to keep the gynaecology services the same as now on both Lincoln and Pilgrim Hospital sites with our clinicians working as one team across these two sites. **This is currently the NHS's preferred emerging option.** 

The second emerging option is to have consultant obstetric, neonatal and paediatric services at Lincoln Hospital and a midwife-led unit and short stay paediatric assessment ward at Pilgrim Hospital. Both hospitals will have midwifery-led units.



23. Please tell us if you would have any problems accessing <u>Lincoln County Hospital</u> for consultant led services or both consultant led and maternity services and if you have any suggestions of how we could overcome this	
24. Please tell us if you would have any problems accessing <u>Pilgrim Hospital</u> , <u>Boston</u> for maternity-led services or both consultant-led and maternity services and if you have any suggestions of how we could overcome this	
25. Please tell us if you have any other comments or suggestions about our emerging options for women's and children's services	

### **Medical services at Grantham Hospital**

The medical services at Grantham Hospital support urgent and acute patients in the A&E Department, on the in-patient wards and in the out-patients department. There is currently a range of medical conditions which Grantham Hospital does not provide services for, meaning that the most acutely ill patients with life threatening illness and injuries go to a more specialist site, first time to receive treatment. Specialist doctors from Lincoln Hospital also remotely support Grantham Hospital staff and patients (using online technology) when required.

There are two emerging options.

The first emerging option is to maintain inpatient medical services at Grantham Hospital and adopt a new model whereby they are joined up with local primary and community services and managed as part of the local enhanced neighbourhood team. This new model would be led by Community Health Services (not ULHT) with hospital doctors and the hospital services

being part of an integrated service with GP services, community health and other local services. This is the NHS's preferred emerging option.

The second emerging option is to have no medical inpatient services at Grantham Hospital. Diagnostics and outpatients would continue.



26. Please tell us if you would have any problems accessing acute medical beds at Grantham Hospital and if you have any suggestions of how we could overcome this
27. Please tell us if you have any other comments or suggestions about our emerging options for acute medical beds at Grantham Hospital
Trauma and Orthopaedics
These services diagnose and treat a wide range of conditions of the musculoskeletal system. This includes bones and joints and their associated structures that enable movement - ligaments, tendons, muscles and nerves. Currently, both urgent and planned care is delivered in Lincoln, Pilgrim and Grantham Hospitals, with additional activity in our local community hospitals. These services are out-patients, minor procedures and operations.
National clinical best practice evidence is that separating urgent work from planned work prevents operations being cancelled. Planned care sites have better outcomes for patients, lower rates of readmission, reduced lengths of stay and reduced risk of infections and injuries.
We have been testing this way of working since August 2018 at Grantham Hospital and this pilot is due to conclude in April 2019. This pilot has virtually eliminated cancelled operations. The evaluation will help decide whether the best practice model of care works in Lincolnshire, including the extent to which non-complex trauma could continue at the Grantham Hospital site. Outpatient services will remain at all sites.
Our emerging option is to make Grantham Hospital a 'centre of excellence' for planned and day case orthopaedic surgery.
Lincoln and Pilgrim Hospitals would provide some day case surgery and planned care for those patients with complex needs. Outpatient services would remain at Lincoln, Pilgrim and Grantham Hospital as now.
28. Please tell us if you would have any problems accessing trauma and orthopaedic services at <u>Grantham Hospital</u> and if you have any suggestions of how we could overcome this



29. Please tell us if you have any other comments or suggestions about our emerging option for trauma and orthopaedic services at Grantham Hospital
General Surgery
These services focus mainly on the abdominal organs; stomach, gall bladder, small bowel, colon, rectum and anus. Benign skin conditions and hernias are also included within general surgery. This surgery is currently carried out at Lincoln, Pilgrim and Grantham Hospitals, with more complex cases seen at Lincoln and Pilgrim Hospitals only.  Our emerging option is to consolidate most elective care and make Grantham Hospital a 'centre of excellence' for elective short stay and day case General Surgery. Lincoln and Pilgrim Hospitals will provide some day case/elective care for patients needing complex surgery, those with complex needs. Outpatients will remain at all three hospitals.
30. Please tell us if you would have any problems accessing general surgery services at Grantham Hospital and if you have any suggestions of how we could overcome this
31. Please tell us if you have any other comments or suggestions about our emerging option for general surgery services at Grantham Hospital

### **Urgent and Emergency Care services**

Emergency care is when you have a serious or life threatening accident or illness and you would usually have to be treated in a major hospital. Urgent care relates to less serious health problems requiring attention which can be treated by services such as NHS111, pharmacies, GP practices, GP Extended Access Hubs, and Urgent Treatment Centres. The vast majority of urgent care needs are met by our GPs and community health services.

Emergency care is provided in A&E departments and we currently have three A&E departments at Lincoln, Pilgrim and Grantham Hospitals. For the last five years, Grantham's A&E has had restrictions upon the conditions that can be treated at this site, for example, the ambulance service does not take patients with suspected stroke or certain types of heart attacks to Grantham. Since August 2016, Grantham's A&E has had restricted opening hours.

Our emerging option is to maintain A&E services at both Lincoln and Pilgrim Hospitals and to add an Urgent Treatment Centre at both sites. We would introduce a new Urgent Treatment Centre at Grantham Hospital to provide 24 hour, 7 day a week access to urgent care services locally. This means that the vast majority of local patients who need care quickly



will be supported in Grantham as they are now. To ensure the local population receive the right urgent and emergency care, overnight, access to this Urgent Treatment Centre will be supported by NHS111, to ensure patients are sent to the right place, first time.

NHS111 will serve as the entry point to the Urgent Treatment Centre during the overnight period.

Grantham's UTC would still be able to receive patients by ambulance. Refinements to the current access criteria will ensure that critically injured and ill patients will be cared for at their nearest A&E; treated safely and quickly by staff who have the right training and experience to give the best outcome.

This emerging option would also see the 24/7 Grantham Hospital Urgent Treatment Centre provided by Community Health Services rather than ULHT, with hospital clinicians providing specialist advice where this is required for patients. We would also like to develop Urgent Treatment Centre services at Louth, Skegness and Stamford Hospitals and explore options for Spalding and Gainsborough.

32. Please tell us if you would have any problems accessing urgent and $\epsilon$	emergency care
services at Grantham Hospital and if you have any suggestions of how w	e could overcome
this	

33. Please tell us if you have any other comments or suggestions about our	<sup>r</sup> emerging
option for urgent and emergency care services at Grantham Hospital	

### **Haematology and Oncology services**

Haematology services diagnose and treat blood disorders for conditions such as haemophilia and leukaemia and provide treatments including blood transfusion services. Oncology deals with the treatment of cancer. These services are delivered in outpatient clinics and in-patient beds. We currently provide these services across Lincoln, Pilgrim and Grantham Hospitals (haematology out-patients only at Grantham), with the majority of care delivered at Lincoln Hospital.

Our emerging option is to have all haematology and oncology inpatient services at Lincoln Hospital.

All other services stay the same. This means that haematology and oncology outpatients and day cases will continue to be provided from all three hospital sites, creating no additional travel for these most frequent appointments. Chemotherapy and radiotherapy will be provided at Lincoln Hospital as now. Chemotherapy day cases will continue to be provided locally at Pilgrim and Grantham Hospitals.



34. Please tell us if you would have any problems accessing inpatient haematology and oncology services at <u>Lincoln Hospital</u> and if you have any suggestions of how we could overcome this					
		comments or suggestion ervices at Lincoln Hospi		nerging	
Equalities Monit	orina				
Under the provisions that their processes because of their age pregnancy or matern	s of the Equality Act 2 s are fair, and that t e, disability, gender re nity, race, religion or be	2010, all NHS organisation they are not discriminating eassignment status, marrial elief, sex or sexual orientate serve, by completing the	ng or disadvant age or civil parti tion. Please help	aging anyone nership status, o us to monitor	
	e kept strictly confiden entifiable through your	tial in line with the Data Pr answers.	otection Act 199	98 and you will	
Age					
		O 31 – 35 O 36 - 40 G - 70 O 71 and above	O 41 – 45	O 46 – 50	
Do you consider yo	ourself to have a disa	ability or long term health	n condition?		
O Yes O No					
If yes, please tell us	s below:				
O Physical impairme O Mental health con O Long standing illn O Other (please spe	dition O Learning dess O Prefer not	isability / difficulty			
How do you descri	be your ethnic origin	1?			
O White British O White other O Black African O Asian Indian O Asian Chinese O Prefer not to say O Other (please spe	O White Irish O Black British O Black other O Asian Pakistani O Asian other	O White European O Black Caribbean O Asian British O Asian Bangladeshi O Mixed background			



Gender
O Male O Female O Prefer not to say
Do you now, or have you ever considered yourself to be transgender?
O Yes O No O Prefer not to say
What is your religion or belief?
O Atheism O Agnosticism O Buddhism O Christianity O Hinduism O Humanism O Islam O Jainism O Judaism O Sikhism O No Religion or Belief O Rather not say O Other (please specify
Please indicate the option which best describes your sexual orientation
O Lesbian O Gay O Bisexual O Heterosexual O Prefer not to say
Pregnancy and maternity - are you an expectant mother?
O Yes O No O Prefer not to say
Pregnancy and maternity - have you utilised local maternity services in the last 18 months?
O Yes O No O Prefer not to say
Carer- are you currently providing support and care to a partner, child, relative, friend or neighbour who cannot manage without your help or/ and support?
O Yes O No O Prefer not to say

Thank you for completing this survey, your views are important to us.



