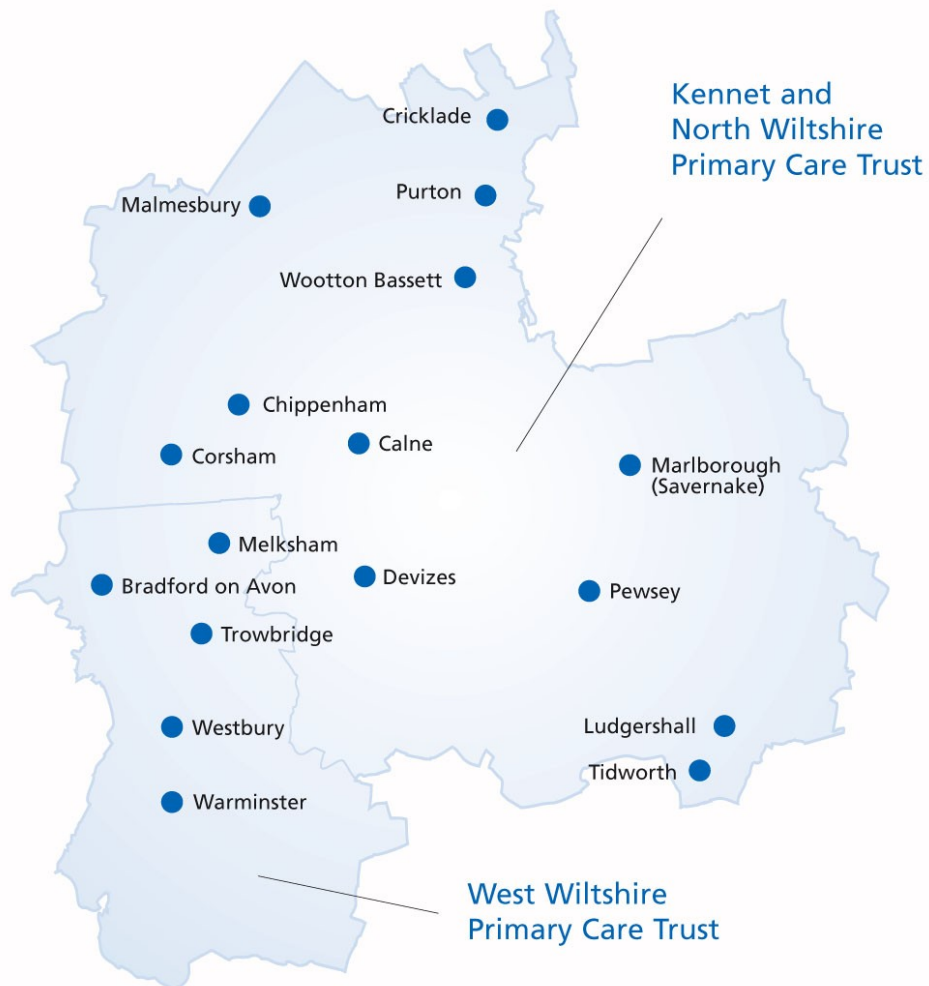


An independent report of what local people said during the consultation on Pathways for Change

'Taking the next step: modern and affordable healthcare for all'

October 2006



An independent analysis of consultation feedback prepared by Red Bridge Solutions for Kennet and North Wiltshire, and West Wiltshire Primary Care Trusts

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Prepared by:
Red Bridge Solutions Limited
Russell House
47 St Martins Road
Knowle
Bristol
BS4 2NH
enquiries@redbridgesolutions.co.uk
www.redbridgesolutions.co.uk

Prepared for:
Kennet and North Wiltshire PCT
and West Wiltshire PCT
Southgate House
Pans Lane
Devizes
Wiltshire
SN10 5EQ

1. Outline of consultation process

Kennet and North Wiltshire PCT and West Wiltshire PCT '*Pathways for Change*' public consultation ran for 13 weeks from April 7 to July 7 2006.

The proposals for change consulted upon were shaped by a period of engagement with stakeholders that ran from May to November of 2005. Four Assemblies were held in May, July, September and November 2005 for stakeholders to contribute to developing options for the future, with 300 different partners and stakeholder groups involved. An average of 120 representatives of these groups has attended each of the four Assemblies, supporting a greater understanding of the mutual issues involved.

The Assemblies

Assembly one established the visions and principles on which future services should be based. At the second Assembly participants worked with medical, health and social care professionals to give their opinions on 'the best possible options to improve health services.' The third Assembly heard PCT presentations around shaping the future pattern of services. Participants worked in groups to identify important questions, identify opportunities and challenges. At the fourth Assembly delegates heard presentations from those who had been on visits to look at best practice in other areas, and from local communities, and listened to how new care models might work at the neighbourhood and local level.

The consultation process

The consultation period started with a launch event in Devizes on 7 April 2006 where a copy of the consultation document was handed out. It was also published on the PCTs' consultation web site and intranet, and was widely distributed to the local population, including all District Councils, all Assembly members and Patient and Public Involvement Forums. Copies were sent directly to 700 organisations and individuals who had been involved or expressed interest in *Pathways for Change*, and widely posted on request. A further 14,000 copies were distributed to all Kennet and North Wiltshire and West Wiltshire PCT sites, to GP practices, pharmacies, opticians, dental surgeries, libraries, town halls, voluntary groups and via public meetings.

A total of 22 public meetings have been held, attended by more than 2,800 people. Four additional meetings were arranged to allow more people to attend and express their views. On average well over a third of the people attending the first tranche of 18 public meetings are also employees of the PCTs, (excluding those present in an official capacity).

Staff consultation

The first of round of consultation meetings for staff was organised on a geographical basis with all staff being invited. 15 meetings were attended by a total of 367 staff. Further lunchtime meetings were organised for staff with a specific emphasis on the concept of Neighbourhood Teams with a total of 219 people attending.

Stakeholder consultation

The Wiltshire and Swindon Users Network, Voluntary Action Kennet, CVS North Wiltshire, CVS West Wiltshire, Carers Support North Wiltshire, Carers Support West Wiltshire, Carers Support Kennet, The Children's Fund and Wiltshire Racial Equality Council all consulted with their service users and carer members on behalf of the PCT. Their reports feature in this independent analysis of what people said – and will also be included in the overall report to the PCTs Board that will make decisions.

Meetings also took place with a range of other organisations where the PCTs presented the options for consultation. This included meetings with the Patient and Public Involvement Forums, District Councils, the Local Strategic Partnership, Community Area Partnerships, local NHS organisations and other interested bodies.

The PCT has also engaged with the wide range of local Government partners including Wiltshire County Council, West Wiltshire District Council, North Wiltshire District Council, Kennet District Council, and the Town Councils of Bradford on Avon, Calne, Chippenham, Corsham, Cricklade, Devizes, Malmesbury, Marlborough, Melksham, Trowbridge, Warminster, Westbury and Wootton Bassett.

The findings

The findings by Red Bridge Solutions aims to describe what people said during the thirteen-week public consultation phase.

Red Bridge Solutions can confirm that it has been able to assess all evidence, and write this report, without interference by the PCTs.

This report represents the culmination of nearly four months work undertaken by Kennet and North Wiltshire PCT and West Wiltshire PCT for the '*Pathways for Change*' consultation.

During this phase views and opinions have been sought through a range of methods, the majority of which were qualitative. Feedback is rich and diverse and reflects a range of opinions – from individual experience to reports commenting upon the options suggested. All evidence has been forwarded to us for independent analysis.

Red Bridge Solutions believe that this consultation process has been wide-ranging and successful in obtaining the views of a range of stakeholders within the PCTs area of operation.

Red Bridge Solutions would like to pass on thanks from the PCT to everyone that has contributed to the consultation process to date – without local involvement there would be no meaningful debate.

With your input the decisions that the PCTs must make about the future of local health care will be informed by the opinions of all who use local services, those who work in them, and those who work in partnership with the NHS.

Red Bridge Solutions

2. Executive summary

This section provides the overall results arising from all feedback. The numbering below reflects its section number in the report for you to quickly go to the full results. We refer you to the contents page for a full listing.

Method	Participants
4.1 Questionnaires	790
Consultation meetings	
4.2 22 Public Meetings	2,888
View Forms (from public meetings)	274
4.3 21 staff consultation meetings	367
8 Neighbourhood Team meetings	219
Other responses	
4.4 150 formal group responses	150 *
Emails, Letters and Telephone calls	
4.5 Letters	517
4.5 Emails	173
4.5 Telephone calls	15
4.6 6 Petitions	380
4.7 6 Consultation meetings held by other groups	<i>Unknown</i>
Total participants	5,773

* This number represents the number of formal groups submitting feedback. It is not known how many individuals the submission represents.

4.1 Questionnaires

790 people completed an anonymous questionnaire. Top-line results were:

Q1 37% Strongly disagreed, 27% neither agreed nor disagreed, 21% Agreed, 11% Disagreed, 5% Strongly Agreed with the question *Our decision will be based on a list of criteria established through the Assembly process. Do you think these are in the interests of patients?*

Q2. 67% Strongly disagreed when asked *'Do you feel that Option One offers the best way forward?'*

Q3. 38% Strongly disagreed, 23% neither agreed nor disagreed, 15% Agreed, 13% Disagreed, 11% Strongly Agreed when asked *'Do you feel that Option Two offers the best way forward?'*

Q4. 37% Strongly disagreed, 25% neither agreed nor disagreed, 16% Disagreed, 12% Agreed, 9% Strongly Agreed when asked ‘Do you feel that Option Three offers the best way forward?’

Q5. When asked the question ‘Do you think that there should be a Primary Care Centre in Westbury or Warminster?’, 55% didn’t answer, 24% chose Warminster, 22% chose Westbury.

4.2 Public consultation meetings

The main themes raised at the public meetings were:

- a. Access and Travel (16.68%)
- b. Finance (11.80%)
- c. Closure of Savernake Hospital (7.32%)
- d. Closure of Westbury Hospital (6.31%)
- e. Closure of all Hospitals (4.07%)
- f. Consultation (3.87%)
- g. Minor Injury Units (3.76%)
- h. Rejection of all three proposed options (3.26%)

(Themes are only included where 3% or more mentioned the same topic. See section for detailed feedback.)

4.3 Meetings with staff

The main themes raised by staff were:

- a. Neighbourhood Teams (8.12%)
- b. Workforce Issues (7.56%)
- c. Consultation (6.44%)
- d. Access (5.88%)
- e. Finance (5.60%)
- f. Transition / Timetable (5.32%)
- g. Joint Working (3.92%)
- h. Beds (3.92%)

(Themes are only included where 3% or more mentioned the same topic. See section for detailed feedback.)

4.4 Formal Responses

Analysis shows the top three themes by stakeholder. A variety of issues were raised. (See section for detailed feedback.) Copies of formal submitted documents are available from the PCT.

Stakeholder	Number	%
4.4.1 Local Councils	55	36.67%
4.4.2 Voluntary / Community Group	52	34.67%
4.4.3 GPs	20	13.33%
4.4.4 NHS Organisations	13	8.67%
4.4.5 Patient and Public Involvement Forums (PPIF)	6	4.00%
4.4.6 Members of Parliament	4	2.66%
Total	150	100.00%

4.5 Letters, emails and phone calls

The main themes raised were:

- a. Access and Transport (14.15%)
- b. Savernake Hospital (12.96%)
- c. Finance (7.94%)
- d. Reject all options (7.87%)
- e. Minor Injury Units (7.80%)
- f. All Hospitals (6.20%)
- g. Beds (4.67%)

(Themes are only included where 4% or more mentioned the same topic. See section for detailed feedback.)

4.6 Petitions

Date	Source	Signatures
04/05/06 received	Gazette and Herald SAVE OUR HOSPITAL (to save Chippenham Hospital)	28
25/04/06	Burbage Good Companions Club (objecting to the closure of Savernake Hospital)	60
25/05/06	Archie Kidd (Thermal) Limited (objecting to possible closure of Devizes Hospital)	11
13/06/06	Devizes and District Heritage Society (opposing the closure of Devizes Hospital)	205
05/07/06	Local resident of Trowbridge (objecting to the closure of community hospitals.)	28
05/07/06	Christian Action for the Trowbridge Area (supporting their 'Statement on Proposals for West Wiltshire healthcare provision.')	48

4.7 Consultation meetings held by other groups

Analysis shows the top three themes by stakeholder. Feedback was prolific and wide-ranging from the following groups.

(See section for detailed feedback.)

May 2006	Bufferzone / Wiltshire Children's Fund
29/06/2006	Devizes Town Council
27/07/2006	Bratton Parish Meeting (joint meeting with the parishes of Bratton, Edington, Coulston and Erlestone)
06/07/2006	Patient and Public Involvement Forums
28/06/2006	Wiltshire Health Overview and Scrutiny Committee and Taskgroup

3. Methodology

This independent report aims to describe what people said in the consultation on the future of community health services in Kennet, North and West Wiltshire.

This section describes **how** the feedback was assessed and analysed whilst section four explains **what** people said. The analysis was undertaken by an independent body in order to inform decision-making on the proposals for change.

Wherever possible feedback has been gathered and categorised by stakeholder and local postcode. Where appropriate this supports an analysis that can demonstrate who the key opinion formers are, and any variations in feedback linked to geography.

Where quotes are extracted they are representative of the themes identified and the balance of responses received.

Feedback by stakeholder uses the following categories:

- Councillors/Local Authorities
- Doctor(s)
- Members of Parliament (MPs)
- NHS Organisations (formal responses from parts of the NHS)
- Patients
- Patient and Public Involvement Forums (PPIFS)
- Petitions
- Public
- NHS PCT Staff
- Voluntary/Community Groups/Volunteers

See Appendix 9 for a complete list of stakeholders involved in consultation.

3.1 Questionnaires

A questionnaire was widely marketed presenting the opportunity to offer feedback anonymously. The questionnaire was structured and asked a range of questions linked to the proposals for change. Questionnaires were available online or on paper and included as a tear-out from the consultation document.

Questionnaires were returned by stakeholders via the internet or by post to Kennet and North Wiltshire, and West Wiltshire Primary Care Trusts. All returned questionnaires were inputted onto an electronic system for analysis.

Those completing questionnaires were also asked to state which category of stakeholder they identified with, and disclose the first three letters of their postcode.

The questionnaire had five questions. Four of these offered a menu of options (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree). This allowed a degree of measurement of opinion when presenting

the results. Graphs and tables are to two decimal spaces (with a +/- .02% error), whilst body text rounds the percentages for ease of reading. Space for comments was offered alongside all questions.

The questionnaire is attached as Appendix 3. People were referred to a list of criteria to allow informed choice when answering question one. The PCT decision-making criteria is attached as Appendix 2. Where quotes are extracted they are representative of the themes identified and the balance of responses received.

3.2 Public consultation meetings

Local people were invited to attend 22 public meetings that ran in a range of locations in Wiltshire organised by Kennet and North Wiltshire, and West Wiltshire Primary Care Trusts. The meetings ran alongside the public consultation meetings on proposals to change mental health services within the same area. Generally it is assumed that the majority of people attending a public meeting were mainly locally based. See Appendix 5 for the schedule of public consultation meetings.

Each meeting had dedicated time for the PCT consultation, (*'Taking the next step: modern and affordable healthcare for all'*), with the mental health consultation, (*'Mainstreaming Mental Health – creating effective and sustainable mental health services for Kennet, North and West Wiltshire'*), continuing after allowing a short break for those who wished to leave. At the PCT consultation meetings a presentation took place followed by an open unstructured question and answer session.

Two types of feedback were gathered from these meetings.

- Each of the 22 meetings were recorded and then transcribed. Transcriptions have been analysed to identify common themes emerging from feedback. Themes are analysed in greater detail where a large amount of people mentioned the same topic. 364 individual issues were raised from people speaking at the meetings.
- *'Making Your Views Known'* Form (see Appendix 3). This was an open ended, anonymous form distributed to those attending public consultation meetings, providing an opportunity to record anything they identified as relevant in writing. This allowed comment across a wide range of issues – many of which are anecdotal or linked to an individual's personal circumstance. This enriched the feedback and provided in-depth information beyond that initially requested for the decision-making process. 274 of these forms have been completed and returned.

Key themes were identified from the meetings and view forms together, and reported. Themes are only included where 3% or more mentioned the same topic. The data was examined to see if the location of the meetings showed any patterns in feedback received. This is reported under the results section.

3.3 Staff consultation meetings

A series of 21 staff meetings were undertaken, attended by a total of 586 staff.

Fifteen staff meetings were held with 367 staff attending; eight staff meetings were held specifically to discuss Neighbourhood Teams. 219 staff attended these.

These meetings provided management with an opportunity to explain the options for change to staff groups, and for staff members attending to ask questions across a whole range of issues. Discussion generally extended beyond the options for change with staff asking a wide range of questions, quite often of a specialist nature.

The minutes of the staff meetings were typed up and analysed in order to identify common themes arising from feedback. Themes are only included where 3% or more mentioned the same topic. Individual issues have been recorded in the notes of each meeting. See Appendix 6 for the schedule of staff meetings.

3.4 Formal Responses

150 formal written responses were received from organisation and groups. These ranged from one-sided letters to large in-depth reports (some with appendices). See Appendix 7 for a full list of those submitting a formal response.

Due to the large amount of feedback offered by many of these contributions, of necessity only a limited selection of extracts from the themes are presented throughout. Letters from individual members of the public are assessed in 4.5 (letters, emails and telephone calls). The formal responses were analysed by stakeholder group to identify the kinds of stakeholders who had responded.

3.5 Letters, emails and telephone calls

Individual views were sought from all stakeholders. Whilst opinions are recorded in email and phone calls, the type of stakeholder and postcode has not been recorded. Consequently this feedback is analysed together and key themes are identified. Themes are only included where 4% or more mentioned the same topic. See Appendix 7.

3.6 Petitions

Six petitions were received from a variety of sources.

3.7 Consultation meetings held by local groups

The PCT asked some groups to consult their members on the proposals for change. Other groups invited the PCT to attend a meeting to present their proposal. Feedback has been analysed in order to identify common themes arising. In addition a snapshot of feedback from each of the groups is provided with quotes. Local group responses were analysed by stakeholder to identify the kinds of issues that have arisen.

4. The Findings

This section is broken down into:

- 4.1 Questionnaire results
- 4.2 Public consultation meetings
- 4.3 Staff consultation meetings
- 4.4 Formal Responses
- 4.5 Letters, petitions, emails and telephone call
- 4.6 Petitions
- 4.7 Consultation meetings held by local groups

The results of this feedback are presented in this report as bar charts with selected quotes to enhance the results.

4.1 Questionnaire results

790 people completed the anonymous questionnaire. A detailed analysis of the feedback has been undertaken to provide bar charts of all opinions expressed.

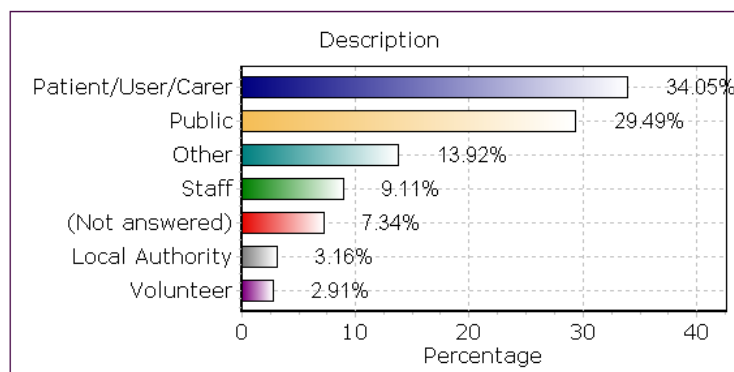
Those completing questionnaires

The vast majority of people that completed questionnaires were either Patients/Users/Carers (34%) or the Public (30%).

Description

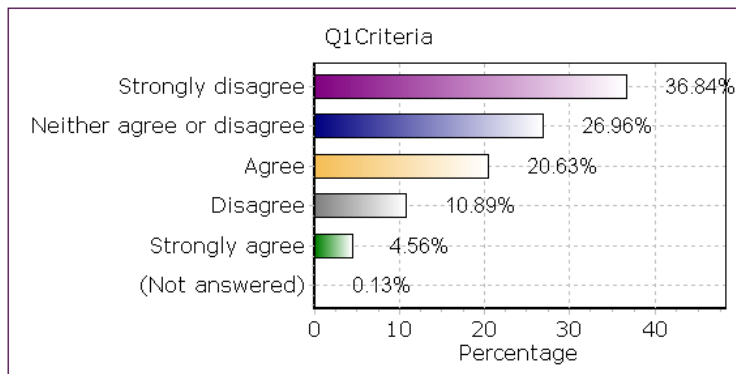
Which of the following best describes you?	Number	Percentage
Patient/User/Carer	269	34.05%
Public	233	29.49%
Other	110	13.92%
Staff	72	9.11%
Not answered	58	7.34%
Local Authority	25	3.16%
Volunteer	23	2.91%
Total	790	99.98%

(+/- .02% due to rounding up/down)



People were asked to answer the following questions. See Appendix 3 for the questionnaire, and Appendix 4 for the decision-making criteria outlined in the consultation document referred to in question one.

Q1 *Our decision will be based on a list of criteria established through the Assembly process. Do you think these are in the interests of patients?*



Do you think these criteria are in the interest of patients?	Number	Percentage
Strongly disagree	292	36.96%
Neither agree or disagree	213	26.96%
Agree	163	20.63%
Disagree	86	10.89%
Strongly agree	36	4.56%
Not answered	0	0.00%
Total	790	100.00%

(+/- .02% due to rounding up/down)

37% Strongly disagreed, 27% neither agreed nor disagreed, 21% Agreed, 11% Disagreed, 5% Strongly Agreed.

Those who strongly agreed or agreed said

'Criteria has been fairly developed with the patient's best interests.'

'The council' [Westbury] 'strongly agree providing they are managed correctly so that everything is focused on the interests of the patients and not on finance.'

'Change is long overdue, and I support the proposals almost entirely.'

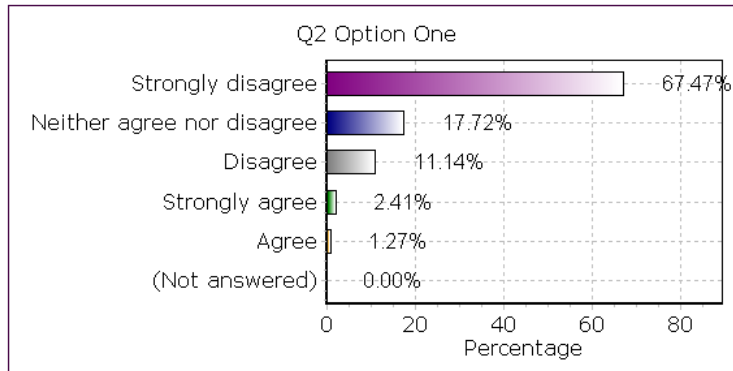
Those who strongly disagreed or disagreed said

'I really believe that you think what you are proposing is the best solution to the problem. However the short term interests of patients have not been given sufficient consideration.'

'A contradiction and conflict of criteria is apparent. The 'contribution to financial position' through the proposed closure of hospitals will lead to a decrease in the accessibility and equity.'

'It would be a huge act of faith by the community to accept change on the basis of justifications they do not trust, and the promise of services they do not understand.'

Q2 Do you feel that Option One offers the best way forward?



Do you think that Option One offers the best way forward?	Number	Percentage
Strongly disagree	533	67.47%
Neither agree or disagree	140	17.72%
Disagree	88	11.14%
Strongly agree	19	2.41%
Agree	10	1.27%
Not answered	0	0%
Total	790	100.01%

(+/- .02% due to rounding up/down)

67% Strongly disagreed, 18% neither agreed nor disagreed, 11% Disagreed, 2% Strongly Agreed, 1% Agreed.

When asked why, those who strongly agreed or agreed said

'Seems to me to make the most savings now and therefore enable the most investment later on.'

'Option one will provide a better level of service for the majority of people across the PCTs.'

'I think Option one is clearly the most beneficial financially.'

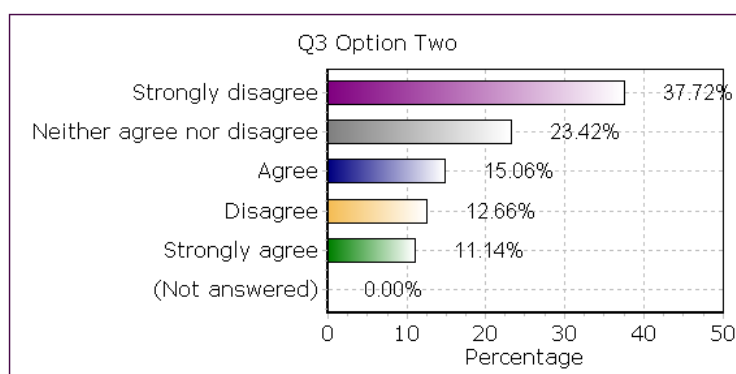
When asked why, those who strongly disagreed or disagreed said

'There are insufficient beds in the independent sector already and no funds to pay for beds from social services.'

'The only local hospital will be closed.'

'Seems a financial decision only as local services from a local hospital will be lost.'

Q3 Do you feel that Option Two offers the best way forward?



Do you feel that Option Two offers the best way forward?	Number	Percentage
Strongly disagree	298	37.72%
Neither agree or disagree	185	23.42%
Agree	119	15.06%
Disagree	100	12.66%
Strongly agree	88	11.14%
Not answered	0	0.00%
Total	790	100.00%

(+/- .02% due to rounding up/down)

38% Strongly disagreed, 23% neither agreed nor disagreed, 15% Agreed, 13% Disagreed, 11% Strongly Agreed.

Those who strongly agreed or agreed said

'Apart from the contribution to the financial position, it seems to offer the greatest benefit to patients across the whole area.'

'Option two considers the longer term, although it requires the greatest initial outlay it would enable Wiltshire to develop an up-to-date service that could lead to respected centres of clinical excellence being developed as well as serving the community well.'

'I am convinced that this option... would serve the populations of the many small towns in mid-Wiltshire.'

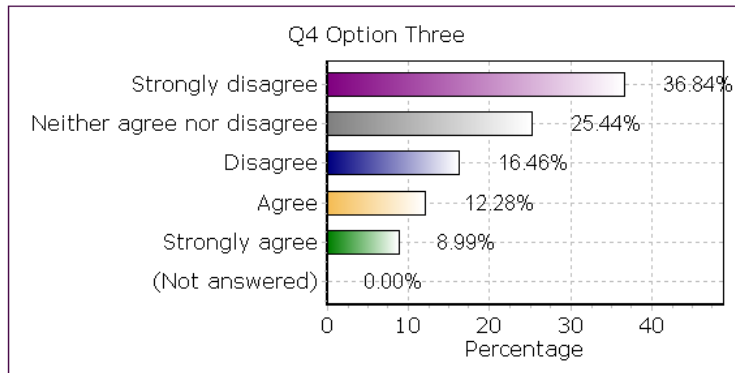
Those who strongly disagreed or disagreed said

'...from a geographical point of view, this option favours the north and centre of the area.'

'Community services will not be enough and will have to be shared by too large a population.'

'Insufficient beds for expanding & aging population.'

Q4 Do you feel that Option Three offers the best way forward?



Do you feel that Option Three offers the best way forward?	Number	Percentage
Strongly disagree	291	36.84%
Neither agree or disagree	201	25.44%
Disagree	130	16.46%
Agree	97	12.28%
Strongly agree	71	8.99%
Not answered	0	0%
Total	790	100.01%

(+/- .02% due to rounding up/down)

37% Strongly disagreed, 25% neither agreed nor disagreed, 16% Disagreed, 12% Agreed, 9% Strongly Agreed.

When asked why, those who strongly agreed or agreed said

'Most in patient beds at the place where it's needed.'

'Seems the most fair delivery of services over a wide area.'

'... Moderate net saving. Fewer closures.'

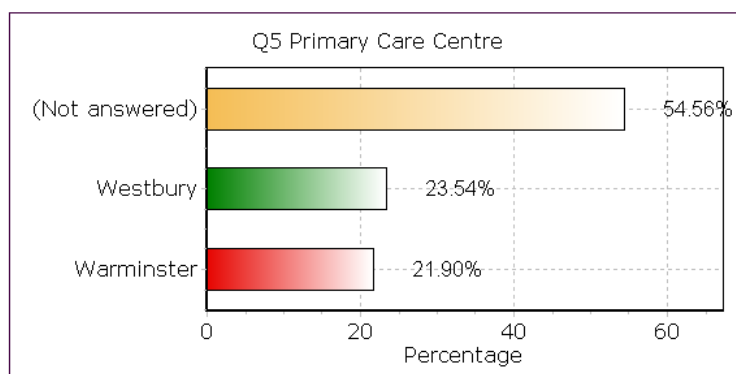
When asked why, those who strongly disagreed or disagreed said

'... it does not meet the need for beds for the elderly or compensate for reduction in beds elsewhere.'

'Limited increase in services in the community and limited facilities generally for the community.'

'All the new facilities are concentrated in the north and east of the area.'

Q5 Do you think that there should be a Primary Care Centre in Westbury or Warminster?



Do you think that there should be a Primary Care Centre in Westbury or Warminster?	Number	Percentage
Not answered	431	54.56%
Westbury	186	23.54%
Warminster	173	21.90%
Total	790	100.00%

(+/- .02% due to rounding up/down)

55% didn't answer, 24% chose Westbury, 22% chose Warminster.

Those who chose Westbury said

'Westbury – it is a growing town with new developments being added yearly to it.... an extra 500 houses in the next two years.'

'Westbury has newer buildings, therefore maintenance will presumably be less costly. There is more space for expansion, and vastly better car-parking space.'

'Westbury hospital has good potential for up grading and redevelopment. It is a large site with good access by train & bus.'

Those who chose Warminster said

'Warminster would give those in the south of the area better access to local treatment - Westbury is close to Trowbridge.'

'Warminster is a bigger town with more need for medical care.'

'Warminster is geographically more isolated, with numerous villages depending on Warminster services. Largest population for this area.'

4.2 Public consultation meetings

2,888 people attended 22 public meetings and raised a number of views and issues reflected in meeting transcriptions. In addition 274 'Make Your Views Known' forms were submitted from the public consultation meetings.

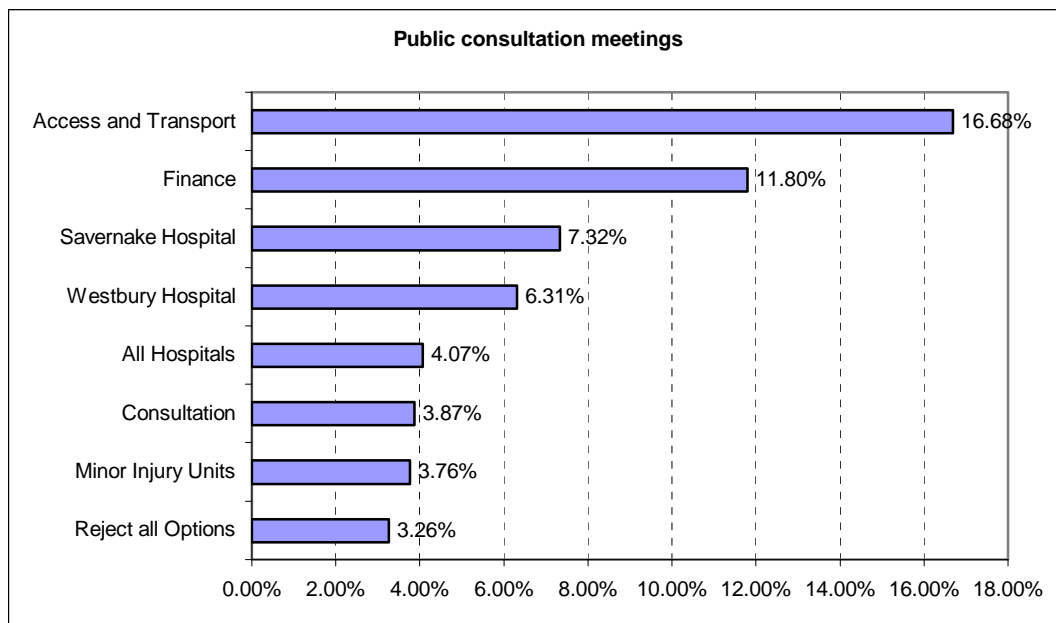
Very few members who spoke at these meetings identified themselves in terms of 'stakeholders', so analysis by stakeholder is not possible.

Comments are very wide-ranging and diverse with relatively little focus on the key consultation questions. The themes emerging from public meetings focus on concerns and fears about the proposals for change. The results presented here represent both questions asked at the public meetings as well as the completed 'Make Your Views Known' forms. Themes are only included where 3% or more mentioned the same topic.

The most common themes raised at the public meetings were:

- a. Access and Travel (16.68%)
- b. Finance (11.80%)
- c. Closure of Savernake Hospital (7.32%)
- d. Closure of Westbury Hospital (6.31%)
- e. Closure of all Hospitals (4.07%)
- f. Consultation (3.87%)
- g. Minor Injury Units (3.76%)
- h. Rejection of all three proposed options (3.26%)

The detailed results from consultation meetings are:



(Note: figures above don't total 100% as they exclude those that did not rank as themes).

Detailed analysis of the themes identified follows:

a. Access and Travel (16.68%)

(Including public transport, parking and congestion). There was a wide range of comments expressing concern about access to local services. These are often related to the difficulties people have in travelling including access to information about travel, inadequate public transport routes, the cost of any increased travel as well as parking facilities and congestion.

This is the largest concern expressed by the public at meetings with 26.32% of people attending expressing concerns.

People said ...

'I need more information about travel options.'

'If planned numbers of hospitals do get the scrap will there be adequate parking? And who will fund the extra cost of travel and parking?'

'In East Wiltshire patient journeys will increase by two thirds.'

b. Finance (11.80%)

Finance and budget concerns were consistently raised and was the second biggest concern raised at public meetings. Comments often related to the PCT deficit and how it arose, the costs of services, the savings made within the three options and view that proposals are financially driven.

People said ...

'To provide more care in the home will only work if more money is spent so ultimately will not save any money or reduce debts.'

'Why was such a large debt allowed to accumulate - whatever option is chosen what guarantees have we that finances will be managed more efficiently.'

'As finance is an issue I don't understand how it can be more efficient to have nurses and support staff travelling around to treat patients with no specialist equipment when they could be looked after in a fully equipped ward.'

c. Closure of Savernake Hospital (7.32%)

Comments on Savernake hospital were mainly in support of the hospital services and staff, and arguing against closure.

People said ...

'Suggestion to close a newly built hospital is unthinkable. Ways should be found to utilise space at Savernake for greater benefit of those living in Marlborough and area around.'

'Savernake is desperately needed... the area needs Savernake Hospital - use it to full capacity.'

'Closing Savernake Hospital after its £10m rebuild is appalling abuse of taxpayers money.'

d. Closure of Westbury Hospital (6.31%)

Comments on Westbury hospital were mainly in support of the hospital services and staff, and arguing against closure.

People said ...

'The stroke unit at Westbury was a wonderful service, and luckily because of that my mother survived.'

'Most of the people in this room actually funded Westbury Hospital... its their building and your actually taking it away and not offering anything in return for those services.'

'What is wrong with Westbury Hospital? ...we have had good treatment and everything from there.'

e. Closure of all Hospitals (4.07%)

A theme of comments has emerged that opposes the closure of all hospitals within the proposals for change.

People said ...

'If all community hospitals close how will people that need hospitalisation be catered for when RUH is closing beds.'

'All towns in Wiltshire are growing and we need our community hospitals more now than ever.'

'Why are hospitals being closed before alternative healthcare has been provided.'

f. Consultation (3.87%)

Comments on the consultation process were reported throughout the public meetings. They covered a range of issues from advertising of meetings, peoples experience of the consultation, the decision-making process, who was consulted, how and what was said.

People said ...

'Is this a consultation period, or an opportunity to sell the three options? Because looking at the options, I do not think that is what the people of Bradford on Avon want.'

'... this is called a consultation process, and, yet, you've already shut down some of the hospitals, and made a statement that the others are going to be closed, regardless of any consultation.'

'A discussion is urgently required and this document is considered and reasonable.'

g. Minor Injury Units (3.76%)

Comments on minor injury units were wide ranging and were sometimes linked to comments on a local hospital.

People said ...

'Every community should have easy access to a Minor Injury Unit.'

'Savernake Hospital should include a Minor Injury Unit and Primary Care Centre.'

'No detail given at all of how stronger minor injury and urgent care services will be provided.'

h. Rejection of all three proposed options (3.26%)

A further theme of comments emerged that specifically rejected the three options for change proposed by the PCT.

People said ...

'Find it impossible to choose any of the options suggested.'

'None of the three options is completely acceptable.'

'None of the suggested options are an answer - there is little to choose between them.'

These were the main themes of feedback that came up at public meetings. 16.48% (162) members of the public raised a wide range of issues which couldn't be grouped into themes. Within this issues raised included calls for additional Primary Care Centres, shortages of staff, the use of volunteers, dentistry provision in Wiltshire, palliative care, children's services, health visiting and screening services.

Public consultation meetings - response by region

Since postcodes were provided in this feedback, an analysis of any regional variations can be undertaken to see how people are raising issues.

	Access and Transport	Finance	Savernake Hospital	Westbury Hospital	All Hospitals	Consultation Issues	Minor Injury Units	Reject all Options
Bradford on Avon	13%	9%	4%	0%	2%	6%	2%	2%
Calne	9%	17%	0%	0%	4%	0%	0%	0%
Chippenham	3%	15%	0%	0%	7%	7%	0%	11%
Corsham and Box	16%	27%	0%	0%	0%	4%	0%	0%
Cricklade	17%	0%	0%	0%	0%	0%	0%	0%
Devizes	13%	14%	0%	0%	0%	3%	3%	5%
Ludgershall	27%	12%	0%	0%	0%	3%	3%	0%
Malmesbury	11%	25%	29%	0%	4%	7%	7%	0%
Marlborough	16%	13%	32%	0%	2%	2%	14%	4%
Melksham	9%	17%	0%	0%	4%	2%	2%	0%
Pewsey	19%	10%	22%	0%	0%	3%	10%	2%
Purton	0%	0%	0%	0%	0%	20%	0%	0%
Tidworth	32%	4%	0%	0%	0%	4%	0%	4%
Trowbridge	14%	16%	0%	0%	6%	6%	2%	2%
Warminster	23%	10%	0%	2%	2%	6%	0%	5%
Westbury	23%	6%	0%	30%	11%	4%	0%	2%
Wootton Bassett	23%	9%	5%	0%	0%	0%	0%	0%
Not Known/Other	13%	4%	29%	0%	0%	0%	21%	13%
Overall results	16.68%	11.80%	7.32%	6.31%	4.07%	3.87%	3.76%	3.26%
Average	15%	12%	7%	2%	2%	4%	4%	3%

(Note: Overall results above don't total 100% as they exclude those that did not rank as themes).

Items worth noting above include those that are above or below the average score for the theme. For example, most people expressing opinions about Westbury Hospital came from the Westbury area (30%), against an average of 2%.

4.3 Staff consultation meetings

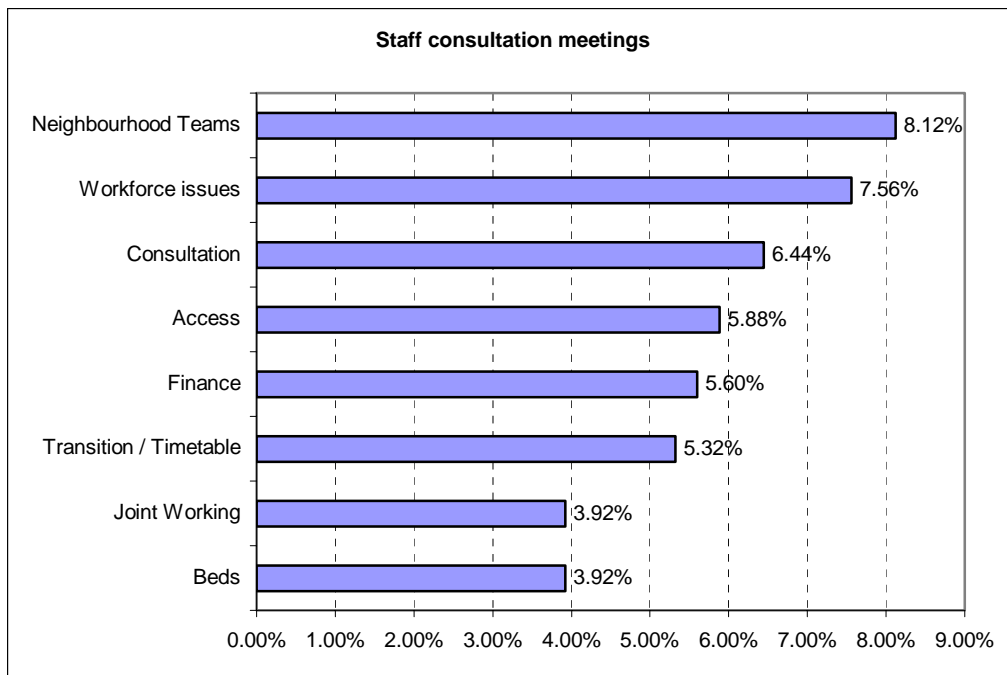
A series of 21 staff meetings were undertaken, attended by 367 staff. In addition, 219 people attended eight staff meetings specifically for Neighbourhood Team discussions. In total 29 staff meetings took place with a total of 586 staff. These have been separately analysed. Themes are only included where 3% or more mentioned the same topic.

See Appendix 5 for a list of staff consultation meetings.

4.3.1 Staff Meetings

Staff asked a wide range of questions, quite often of a specialist nature. Analysis showed that the main themes raised by staff are:

- a. Neighbourhood Teams (8.12%)
- b. Workforce Issues (7.56%)
- c. Consultation (6.44%)
- d. Access (5.88%)
- e. Finance (5.60%)
- f. Transition / Timetable (5.32%)
- g. Joint Working (3.92%)
- h. Beds (3.92%)



(Note: figures above don't total 100% as they exclude those that did not rank as themes).

a. Neighbourhood Teams (8.12%)

Staff comments were often focused on the detail of the neighbourhood teams and how it would work for them in practice.

Staff said ...

'Will there be consultation about the detail of neighbourhood teams?'

'Are you letting women go out at 3am on their own?'

'Will there be a compulsory shift system?'

b. Workforce Issues (7.56%)

This is a wide-ranging topic, covering redundancy, job interviews, new jobs, redeployment, jobs at risk and flexible working issues.

Staff said ...

'What will happen to staff in the interim period of the closure of one and the opening of the new?'

'It is easy enough to change peoples contracts but can you force people to change?'

'With redeployment and retraining of staff is there any more money going into the training.'

c. Consultation (6.44%)

Staff asked for range of information on details of the consultation exercise.

Staff said ...

'If our comments are outside of the three options will they have any affect?'

'Are you asking for feedback from everyone in the community or just staff?'

'Its nice that to feel we are being asked to comment on the options?'

d. Access (5.88%)

This is a wide-ranging topic, covering access to local services and transport issues.

Staff said ...

'The new generation community hospital in option one is Chippenham – this is a long way from patients from the South to travel'

'Have environmental issues been considered – how does this fit with transport plans?'

'If you live in Ludgershall where shall we access a Minor Injury Unit?'

e. Finance (5.60%)

Staff asked a range of questions on financial matters.

Staff said ...

'We are supposed to live within our means so how can we build new premises and new equipment?'

'Money is a worry – at the moment to get a bed for someone at home is very difficult.'

'If finances weren't an issue would we still be going through the current situation?'

f. Transition / Timetable (5.32%)

Staff had a number of questions on the transition to new service models and the timetable for change once decisions are made.

Staff said ...

'How long will all this take?'

'What are the timescales for neighbourhood teams?'

'What timescale is being suggested between the closure of old facilities, or the ones that never work, and the opening of new ones?'

g. Joint Working (3.92%)

Staff made a number of comments linked to working jointly with other organisations.

Staff said ...

'Are you working with the Local Authority around transport as most things involve people travelling.'

'Are the Trusts going to work with the Ambulance Trusts in triaging calls?'

'We put effort into getting Health and Social Care to work together, then split them up again. Now we are looking at working together again!'

h. Beds (3.92%)

Staff expressed a range of views about the beds available in the proposal for change.

Staff said ...

'I do not believe a 20 bedded hospital would give enough cover for physiotherapy. Option two would give better coverage.'

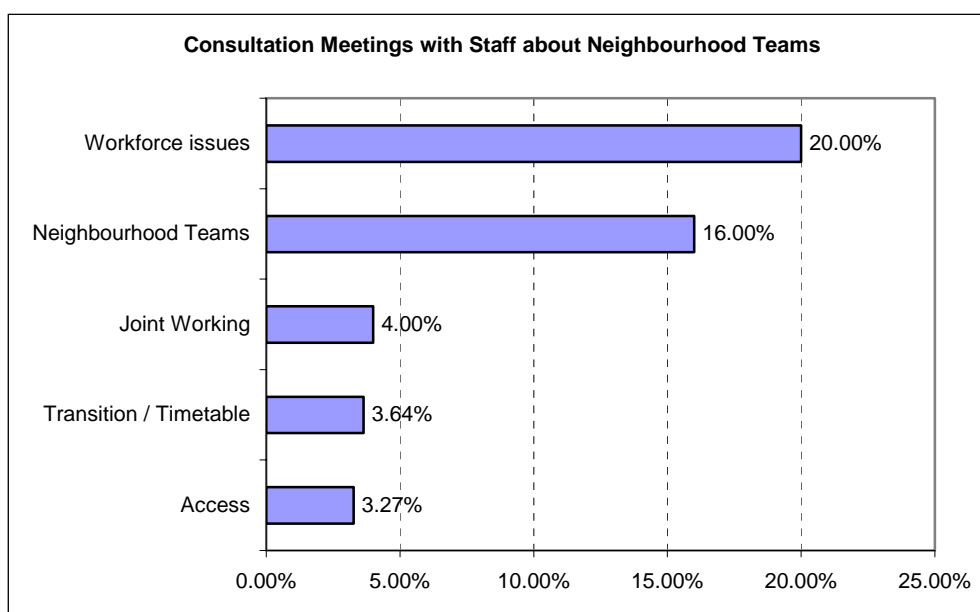
'If 47% of patients could be treated at home, how else will you fill these beds?'

'Are the inpatient beds going to be nurse led in the new generation hospitals?'

4.3.2 Consultation meetings with staff about Neighbourhood Teams

Staff asked a wide range of questions, quite often of a specialist nature. Analysis showed that the main themes raised by staff are:

- a. Workforce Issues (20.00%)
- b. Neighbourhood Teams (16.00%)
- c. Joint Working (4.00%)
- d. Transition / Timetable (3.64%)
- e. Consultation (6.44%)
- f. Access (3.27%)



(Note: figures above don't total 100% as they exclude those that did not rank as themes).

a. Workforce Issues (20.00%)

This is a wide-ranging topic that includes new roles and different ways of working, grading issues, jobs at risk and redeployment, skill shortages, training and retraining opportunities, flexible working and shift systems.

Staff said ...

'I am looking at lone working at moment, day and night. Staff have to have training for working in the community.'

'The existing community neighbourhood staff. They have a flexible shift system, will they have a choice in the new system?'

'The number of people who are at risk, will they fit with the numbers of the jobs that will be available? You could work out numbers in each option!'

b. Neighbourhood Teams (16.00%)

Staff in the neighbourhood teams asked a range of detailed questions that often focused on the implications of the changes for them.

Staff said...

'We would like clear definitions of which practice populations are supported by which Neighbourhood Teams. Where are the teams going to be based?'

'Doctors at the moment get a driver; I can see a huge overspend. Why should nurses go out on their own?'

'Where do you see social services with Neighbourhood Teams?'

c. Joint Working (4.00%)

Comments covered the range of joint working issues that they experience.

Staff said ...

'I am concerned about the division? What is social care? And what is health care?'

'We have to enable people to move on through the system [and] share things across to colleagues... We cannot manage everybody all the time.'

'Our work is structured around ... Mental Health ... we need to have someone attached to your team to have contact.'

d. Transition / Timetable (3.64%)

Staff in neighbourhood teams asked questions about the timescale or change and expressed concerns about how the transition might affect them.

Staff said ...

'When the decisions are made by the Board what is the time limit on this? We have not been told the order things are going to happen.'

'Are staff going to be moved sideways in the summer? We need to know what is going on.'

'What is the timescale of the decisions? When do you envisage this to start?'

e. Consultation (6.44%)

A number of opinions were expressed about the consultation process now and in the future.

Staff said ...

'Will you be having a meeting with all of us as it progresses?'

'It is really important that this is communicated to all the staff, you will get the best out of your staff if you keep and get them fully involved.'

'All our colleagues are feeling isolated from the process at the moment.'

f. Access (3.27%)

Staff in neighbourhood teams raised a number of issues related to access to service, travel and transport.

Staff said ...

'Rurality. This is very important – It is a real problem. Could someone come out and see how much we travel and the effect it may have on the amount of patients we will see.'

'Transport seems to be a problem. How is it going to be organised and solved?'

'The distance from one patient to another is approximately three minutes in a hospital. With this new system it could be up to 30 mins from one patient to another. How many patients are you envisaging they are going to see? There needs to be a central organisation.'

4.4 Formal responses

This section covers formal written responses from stakeholders. This includes responses from organisations specifically commissioned or requested by the PCT to undertake specific consultation, including The Wiltshire and Swindon Users Network, Voluntary Action Kennet, CVS North Wiltshire, CVS West Wiltshire, Carers Support North Wiltshire, Carers Support West Wiltshire, Carers Support Kennet, *Bufferzone*/The Children's Fund and Wiltshire Racial Equality Council.

Stakeholder	Number	%
4.4.1 Local Councils	55	36.67%
4.4.2 Voluntary / Community Group	52	34.67%
4.4.3 GPs	20	13.33%
4.4.4 NHS Organisations	13	8.67%
4.4.5 Patient and Public Involvement Forums (PPIF)	6	4.00%
4.4.6 Members of Parliament	4	2.66%
Total	150	100.00%

Stakeholder analysis

The top three themes by stakeholder are:

Voluntary / Community Group	Number	%
Access and Transport	21	14.19%
Reject all Options	12	8.11%
Minor Injury Units	10	6.76%

Local Councils	Number	%
Access and Transport	21	16.15%
Carers Issues	21	16.15%
Chippenham Hospital	11	8.46%

Members of Parliament	No	%
Consultation Issues	3	16.67%
Beds	2	11.11%
Reject all Options	2	11.11%

GPs	No	%
Beds	5	11.36%
Finance	4	9.09%
Access and Transport	3	6.82%

NHS Organisations	No	%
Access and Transport	3	10.34%
Minor Injury Units	3	10.34%
Beds	2	6.90%

Patient and Public Involvement Forums (PPIF)	No	%
Reject all Options	3	17.65%
Consultation Issues	3	17.65%
Access and Transport	2	11.76%

(Note: figures above don't total 100% as they exclude those that did not rank as themes).

A snapshot of each of these responses is provided. Full details of submissions are available from the PCT.

4.4.1 Local Councils

Responses were received from a number of County and District councils (55). Many offered detailed comments. Full copies of responses are available from the PCT.

A sample of the content includes:

<p>Kennet District Council - <i>'Understands the needs to save costs. All three options place most of facilities in the West of the area and leaves the East side with far greater distances to travel. Any new build community hospital should be considered on the East side of Devizes not near Melksham. Clarification required on 'hospital closures' as this does not mean a town will lose all services - many people do not understand this.'</i></p> <p>Wiltshire County Council - <i>'recognizes the need to improve health care in Wiltshire and to provide better value for money but the council is unable to support any of the three options as they stand [and had] concern whether number of inpatient beds will be sufficient. Question whether current proposals pay sufficient regard to population densities and projected changes. Doubt whether proposals provide equitable services. More work needed on transport. Proposals pay insufficient regard to the importance of local access to services in a rural county. Do not regard proposals for maternity services as adequate and urge the PCTs to consider additional birthing facilities. Council notes that the proposals would have a significant impact on own services and budgets - additional costs to council could exceed £1m. Must be adequate joint planning.'</i></p> <p>Kennet District Council - <i>'acknowledges and deplores the severe financial crisis facing the PCT and the inevitable impact this will have on service provision for the district, particularly in rural communities. However the document as presented with its three options does little to address the financial position of both PCT and provides no commitment to the provision of new services prior to removal or reshaping of existing ones. For example option one would leave Kennet without inpatient bed provision and options two and three would greatly reduce the numbers available to residents. Detailed comments and concerns relating to proposals. KDC would like the MIU at Savernake and Devizes retained with extended hours. KDC supports the existing model of midwife led maternity care and does not wish to see any diminution of this service.'</i></p>

4.4.2 Voluntary / Community Groups

52 groups expressed a view. Many also attended public meetings. Feedback is wide ranging.

Some examples of views are:

Chippenham and District Homemakers - *'No option meets long term need. More consultation needed with health specialists who are doing the job - GPs, consultants, nurses. Burden put on carers will be too much - respite and crisis hospital care is needed.'*

Townswomen's Guild - *'Object strongly to proposed closure of Trowbridge Hospital, Charterhouse and the Halve Clinic. If the PCT has no resources how are the centres to be funded. Concern about elderly travelling around Wiltshire and Somerset (RUH) for specialist medical treatment. Closure of Trowbridge will not relieve congestion at RUH - it will become worse.'*

Age Concern, Devizes - *'PCTs face enormous financial pressures as evidenced by Age Concern Wiltshire's cut in funding which has already had serious consequences to service provided. Provision of more services closer to and in peoples homes is desirable but should not be at the expense of loss of quality of support or inequality of access.'*

4.4.3 GPs

Nineteen GPs expressed a formal view. Many others also attended public meetings.

Some examples of views expressed are:

Bradford on Avon Health Centre - *'We are concerned about the lack of clarity concerning access to nursing home beds, rehabilitation beds and respite care in the proposed plans. The interface between NHS and Social Service responsibilities is unclear. Patients run the risk of falling in a gap between the two services and becoming supported by neither.'*

All Saints Medical practice - *'We are aware of the savings that the PCT desperately need to make and although Option 2 may not give the most immediate savings, we feel it is the option with most benefit for the future.'*

The Avenue Surgery - *'Warminster is the most remote of the small towns of West Wiltshire affected by 'Pathways for Change', it is the furthest from Bath...' 'The town of Warminster is more than 20 miles from the nearest DGH...' 'Public transport in the Warminster area is very poor... thus, before the journey to Chippenham, Bath or Salisbury has begun, many of the people of this area are already disadvantaged.'*

4.4.4 NHS Organisations

Thirteen NHS organisations formally responded. The majority of submissions are broadly in agreement with the PCTs approach.

Some examples of views are:

Child Health Department - *'Implementation of any option that means current clinic slots are no longer available on current days/times would have major impact on delivery of service.'*

Avon and Wiltshire Mental Health Partnership Trust - *'...we would not necessarily feel drawn to one site or another for the creation of a new generation hospital/s... with regards to the community proposals, we are supportive of the general direction of travel and are already discussing the development of a mental health practitioner role within the neighbourhood teams.'*

4.4.5 Patient and Public Involvement Forums (PIIF)

Six Patient and Public Involvement Forums formally responded.

Some examples of views are:

West Wiltshire PPI Forum - *'Consultation document not easily understandable by many. [Expressed] concerns re: transport, timescale, carers. Overall model of healthcare is untried and untested.'*

Kennet and North Wiltshire PPI Forum - *'Concern about poor provision of healthcare in SE Kennet, particularly after hours service, access to hospitals, GP practices, dental provision and transport.'*

Great Western Hospital PPI Forum - *'forum opposes the closure of the Minor Injuries Unit at Savernake Hospital and the downgrading of any local health services in Kennet & North Wilts and consequently does not support any of the three options offered in the Pathways for Change consultation.'*

4.4.6 Members of Parliament

Four formal responses from Members of Parliament were received, three from Dr Andrew Murrison MP and one from Michael Ancram MP.

Some examples of views are:

Dr Andrew Murrison MP - *'Questions the financial premises and assertions on which the PCT's options are based, notes that each option would propel healthcare northwards away from [my] constituents and towards more favoured parts of the county. None of the PCTs options are remotely acceptable.'*

Dr Andrew Murrison MP - *'...why Westbury not considered as possible site for new generation community hospital or PCC, why no beds in West Wiltshire under all three options; criteria needed to access 24 hour nursing service, and long term, transport.'*

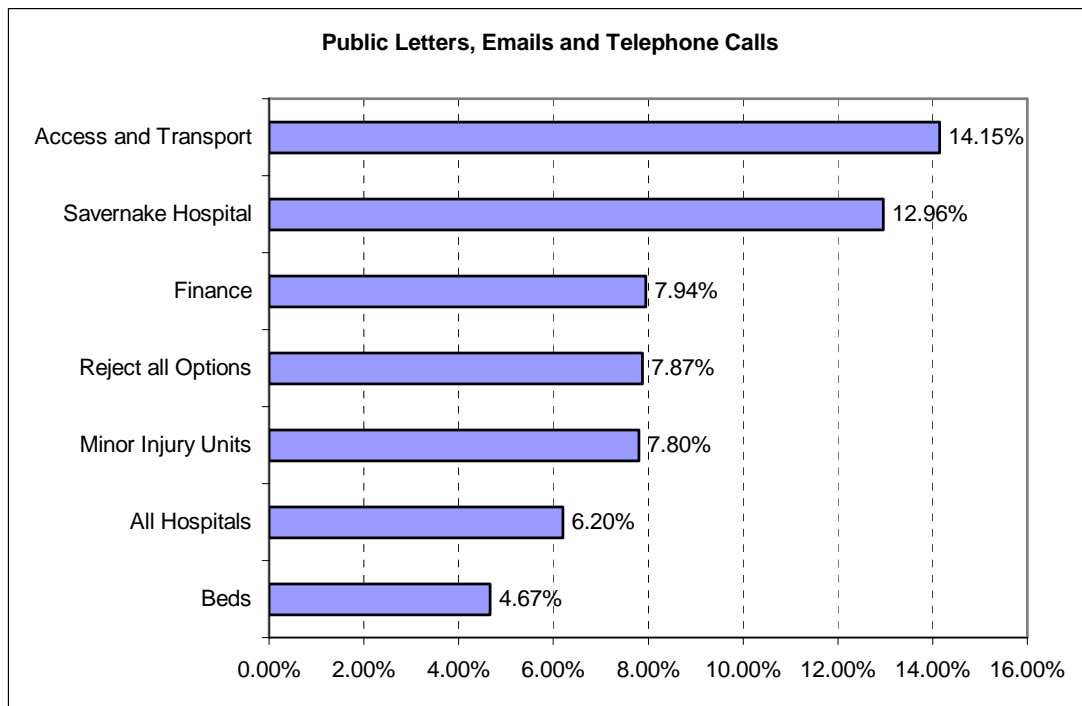
4.5 Letters, emails and telephone calls

This section covers key themes emerging from emails, letters and telephone calls. A small number of other issues came up, but are not reflected as themes in the analysis (as they fell below 4% of comments). These included issues including Consultation, Chippenham Hospital, Trowbridge Hospital, Elderly Care, Warminster Hospital, Maternity, Carers Issues, Neighbourhood Teams, Transition / Timetable, Chose Option 2, Devizes Hospital, Joint Working, Westbury Hospital, Melksham Hospital, Chose Option 3, BOA Hospital, Day Care Surgery Units, Chose Option 1, New Primary Care Centres, New Generation Community Hospitals.

Type	Number	%
Letter	517	73.33%
Email	173	24.54%
Telephone	15	2.13%
Total	705	100.00%

Analysis showed that the main themes raised are:

- a. Access and Transport (14.15%)
- b. Savernake Hospital (12.96%)
- c. Finance (7.94%)
- d. Reject all options (7.87%)
- e. Minor Injury Units (7.80%)
- f. All Hospitals (6.20%)
- g. Beds (4.67%)



(Note: figures above don't total 100% as they exclude those that did not rank as themes).

a. Access and Transport (14.15%)

A sample of the content includes:

'Public transport from BoA to Chippenham is non-existent. Will Neighbourhood Teams be effective in terms of care provided and cost effective. Questions re relationship with social services and also finance.'

'Savernake Hospital provides an essential out of hours service for local residents. To have had to drive to Chippenham or Swindon for the same treatment would have been a quite horrible ordeal.'

'No direct transport access to Chippenham from West Wilts, difficult for the elderly patients. Trowbridge relieves RUH.'

b. Savernake Hospital (12.96%)

A sample of the content includes:

'Madness to close down Savernake Hospital. Eastern area of Wiltshire is neglected in terms of Minor Injury Units.'

'Objection to closure of Savernake Hospital particularly Minor Injury Units and travel to Chippenham or GWH.'

'Concerned at plans to close Savernake Hospital - level of service to the community would suffer enormously.'

c. Finance (7.94%)

A sample of the content includes:

'Horrified to hear how much the deficit is. Does not think that the proposed changes will result in any form of cost saving or will improve the level of care in the Corsham area. I wonder if you have costed all the costs associated with the closure of perfectly adequate hospital facilities.'

'...believes that these proposals are financially driven, but nevertheless, they could deliver improved local health care by transferring services to the Community and to new facilities if supported by adequate resources...'

'Heard the funding you receive is less per capita than other parts of the country. In more sparsely areas cost of getting patient to the service or vice versa must be accounted for when looking at running costs.'

d. Reject all Options (7.87%)

A sample of the content includes:

'Reject all three plans put forward. Concern at plans to close Trowbridge and other community hospitals in west Wiltshire.'

'All three proposals place too high a reliance on voluntary organisations.'

'Strongly against all three options as believe the proposals will result in a poorer service to the people of West Wiltshire.'

e. Minor Injury Units (7.80%)

A sample of the content includes:

'Eastern area of Wiltshire is neglected in terms of Minor Injury Units.'

'Proposals for Minor Injury Units in Chippenham and Trowbridge means there are two on route to RUH [leaving] a huge gap in [the] Kennet area.'

'See a need for a continued 24hr Minor Injury Units facility in Devizes which is a central location in the county. Logic surely demands that that the MIU need is best provided where transport links are poorest - at the centre of the county.'

f. All Hospitals (6.20%)

(This theme concerns the closure of all hospitals across the region.)

A sample of the content includes:

'Severe misgivings about the loss of all three hospitals in the south of the district and suitability of patients home as place of treatment.'

'With an increasing population in West Wiltshire it seems ludicrous that anyone would want to even contemplate hospital closures.'

'Strongly disapprove of so many closures of several Wiltshire hospitals as this is very short sighted of our Government.'

g. Beds (4.67%)

A sample of the content includes:

'The government have said that they will improve the level of service but removing hospital beds is not an improvement.'

'Where are beds and services to be allocated? It is no use having 50 beds tucked away in Chippenham or Melksham which are even more difficult for us to reach from Warminster.'

'Writing to express concern about the option of purchasing beds in the private sector.'

4.6 Petitions

A number of petitions were submitted.

1) Burbage Good Companions Club – 25/04/06

Submitted a petition signed by 60 people objecting to the closure of Savernake Hospital.

2) Archie Kidd (Thermal) Limited – 25/05/06

Submitted a petition signed by 11 people objecting to the closure of Devizes Hospital.

3) Gazette and Herald SAVE OUR HOSPITAL – received 04/05/06

Submitted a petition signed by 28 people to save Chippenham Hospital. (Sent via the Department of Health).

4) Local resident of Trowbridge – 05/07/06

Submitted a petition signed by 28 neighbours objecting to the closure of community hospitals.

5) Christian Action for the Trowbridge Area – 05/07/06

Submitted a series of local petitions signed by a total of 48 people supporting their 'Statement on Proposals for West Wiltshire healthcare provision.'
Amongst other things, the statement outlines principles stating:

*'1. As far as is practically possible healthcare should be provided locally to where people live. We recognise that it is not possible to have all facilities 'right on the doorstep but wish to see facilities brought as close to people as is practicable.
2. Healthcare facilities must be accessible by public transport, as well as other forms of transport.'
We have studied the PCTs' options against the above principles, as well as considering other detailed issues. Of the three options, we believe that option two comes closest to meeting the needs of our communities.'*

6) Devizes and District Heritage Society – 13/06/06

Petition of 205 signatures sent to the Rt. Hon. Michael Ancram. QC Member of Parliament, opposing the closure of Devizes Hospital.

4.7 Consultation meetings held by other groups

This section covers key themes emerging from six specific meetings held by local groups that invited the PCT to attend. In many instances PCT staff attended these meetings. It also covers meetings where the PCT commissioned a group to consult with a specific target group.

The tables below show any differences between stakeholders and the number of time issues arose. Caution is advised when comparing results of the provided tables.

Bufferzone / Wiltshire Children's Fund	Number	%
Access and Transport	1	12.50%
Beds	1	12.50%
All Hospitals	1	12.50%

Bufferzone represented young people and is an example of one of the groups commissioned by the PCT for specific feedback. (See section 4.4 for the others).

Devizes Town Council	Number	%
Finance	4	14.29%
Access and Transport	3	10.71%
Beds	3	10.71%

Bratton Parish Meeting *	Number	%
Access and Transport	4	25.00%
Beds	3	18.75%
Finance	3	18.75%

** Joint meeting with the parishes of Bratton, Edington, Coulston and Erlestoke.*

Patient and Public Involvement Forums	Number	%
Access and Transport	2	22.22%
Consultation issues	2	22.22%
Transition / Timetable	2	22.22%

Wiltshire Health Overview and Scrutiny Committee and Taskgroup	Number	%
Access and Transport	2	20.00%
Joint Working	2	20.00%
Maternity	2	20.00%

(Note: figures above don't total 100% as they exclude those that did not rank as themes).

A snapshot of each of these responses is provided.

4.7.1 Bufferzone / Wiltshire Children's Fund

A sample of the content includes:

'Takes a long time to get to a casualty place.'

'[we need] a wider variety of different beds in Chippenham rather than only 20 beds for strokes.'

'Don't change the big hospitals but make the small ones bigger.'

4.7.2 Devizes Town Council

A sample of the content includes:

'... driven by balancing books.'

'Melksham closer to Trowbridge and Westbury ... doesn't seem to be acknowledging Chippenham ... Devizes serves more far-flung areas'

'Loss of beds with closure'

4.7.3 Bratton Parish Meeting (joint meeting with the parishes of Bratton, Edington, Coulston and Erlestone)

A sample of the content includes:

'How can you do this because what you are proposing will be too far away?'

'This is a huge issue about beds in this area for our people. I do respect hard work you have done for the consultation.'

'A lot of savings have been taken to deal with these changes. Can you reassure us about this?'

4.7.4 Patient and Public Involvement Forums

A sample of the content includes:

'We must reach a shared level of understanding GWH, RUH and Salisbury are all DGH core acute services. There is no district General Hospital between Salisbury and Swindon - shouldn't there be.'

'The new PCTS, in October ... will inherit decisions made but decisions will be scrutinised by new Strategic Health Authority to ensure they're right.'

'Are you going to put Primary Care Centres in place before closing?'

4.7.5 Wiltshire Health Overview and Scrutiny Committee and Taskgroup

A sample of the content includes:

'There was a full debate about the Taskgroup's response to the consultation, with members raising further concerns about integrated mental and physical care beds, how information about where/how to access different types of care will be made available to the public, maternity services, the relationship between health and social care, transport, voluntary services and carers.'

'There was further general debate which covered the issue of NICE guidance for certain disciplines (e.g. maternity), the need for a clear timetable outlining where and when changes will happen, rural proofing exercises published by the Countryside Agency, levels of finance require to deliver the options and the need for further information to explain where Primary Care Centres will be placed.'

'Other birthing facilities such as birthing rooms in Primary Care Centres and New Generation Community Hospitals, and to take a flexible approach to allow expansion and development of a range of maternity services in each locality in the future.'

'A crucial part of equity is access to services, and the Taskgroup is concerned that there is little in the document that explains how the communities that have previously been the "have-nots", in other words those without a community hospital, will experience improvements in their services in the future.'

'The Taskgroup feels it is crucial that the PCTs actively seeks the views of carers, particularly as the suggestion of more treatment delivered at home has direct implications for carers.'

'While respite care is, in the main, considered to be a Social Services function, there needs to be a joint strategic approach taken by the PCTs and DACS here to ensure that the County Council, which is experiencing its own financial pressures, has capacity to offer more respite care should that become necessary.'

Appendix 1 – Summary of consultation options

The three options at a glance

Option One	Option Two	Option Three
<ul style="list-style-type: none"> New <i>Primary Care Centres</i> being considered at this time: Devizes Trowbridge Warminster or Westbury Malmesbury (already agreed) 	<ul style="list-style-type: none"> New <i>Primary Care Centres</i> being considered at this time: Devizes Trowbridge Warminster or Westbury Malmesbury (already agreed) 	<ul style="list-style-type: none"> New <i>Primary Care Centres</i> being considered at this time: Devizes Trowbridge Warminster or Westbury Malmesbury (already agreed)
<ul style="list-style-type: none"> New <i>Neighbourhood Teams</i> to cover all community areas (providing 24 hour access) 	<ul style="list-style-type: none"> New <i>Neighbourhood Teams</i> to cover all community areas (providing 24 hour access) 	<ul style="list-style-type: none"> New <i>Neighbourhood Teams</i> to cover all community areas (providing 24 hour access)
<ul style="list-style-type: none"> One <i>New Generation Community Hospital</i> at: Chippenham (20 stroke beds) Use of extra beds from the voluntary and independent sector 	<ul style="list-style-type: none"> Three <i>New Generation Community Hospitals</i> at: Chippenham (20 stroke beds) Melksham area (50 inpatient beds) Savernake (24 inpatient beds) 	<ul style="list-style-type: none"> Three <i>New Generation Community Hospitals</i> (with fewer services such as day surgery) at: Chippenham (50 inpatient beds including 20 stroke beds) Melksham (20 inpatient beds) Savernake (24 inpatient beds)
<ul style="list-style-type: none"> Two 24 hr minor injury units at: Chippenham (New Generation Community Hospital) Trowbridge (Trowbridge <i>Primary Care Centre</i>) 	<ul style="list-style-type: none"> Two 24 hr minor injury units at: Chippenham (New Generation Community Hospital) Trowbridge (Trowbridge <i>Primary Care Centre</i>) 	<ul style="list-style-type: none"> Two 24 hr minor injury units at: Chippenham (New Generation Community Hospital) Trowbridge (Trowbridge <i>Primary Care Centre</i>)
<ul style="list-style-type: none"> A maternity unit at: Chippenham (14 beds) 	<ul style="list-style-type: none"> A maternity unit at: Chippenham (14 beds) 	<ul style="list-style-type: none"> A maternity unit at: Chippenham (14 beds)
<ul style="list-style-type: none"> Bradford on Avon closed 	<ul style="list-style-type: none"> Bradford on Avon closed 	<ul style="list-style-type: none"> Bradford on Avon closed
<ul style="list-style-type: none"> Devizes Hospital closes 	<ul style="list-style-type: none"> Devizes Hospital closes 	<ul style="list-style-type: none"> Devizes Hospital closes
<ul style="list-style-type: none"> Devizes Health Clinic closes 	<ul style="list-style-type: none"> Devizes Health Clinic closes 	<ul style="list-style-type: none"> Devizes Health Clinic closes
<ul style="list-style-type: none"> Melksham Hospital closes 	<ul style="list-style-type: none"> Melksham Hospital closes; new West Wiltshire Hospital built 	<ul style="list-style-type: none"> Melksham Hospital remains open
<ul style="list-style-type: none"> Savernake Hospital closes 	<ul style="list-style-type: none"> Savernake Hospital remains open 	<ul style="list-style-type: none"> Savernake Hospital remains open
<ul style="list-style-type: none"> Trowbridge Health Clinic closes 	<ul style="list-style-type: none"> Trowbridge Health clinic closes 	<ul style="list-style-type: none"> Trowbridge Health clinic closes
<ul style="list-style-type: none"> Trowbridge Hospital closes; site may be used for <i>Primary Care Centre</i> 	<ul style="list-style-type: none"> Trowbridge Hospital closes; site may be used for <i>Primary Care Centre</i> 	<ul style="list-style-type: none"> Trowbridge Hospital closes; site may be used for <i>Primary Care Centre</i>
<ul style="list-style-type: none"> Warminster Hospital closes 	<ul style="list-style-type: none"> Warminster Hospital closes 	<ul style="list-style-type: none"> Warminster Hospital closes
<ul style="list-style-type: none"> Westbury Hospital closes 	<ul style="list-style-type: none"> Westbury Hospital closes 	<ul style="list-style-type: none"> Westbury Hospital closes

Where hospitals and clinics are closing, the Primary Care Trust are happy to consider community initiatives and/or plans for re-use of the site. Where sites are no longer needed as a result of our plans, the Primary Care Trusts will consider selling these for redevelopment and making best use of those funds raised to support our plans for the future.

Appendix 2 – PCT decision-making criteria

The table outlines the criteria against which the PCT will judge the three options for change. The criteria are extracted from the consultation document '*Taking the next step: modern and affordable healthcare for all*' published in April 2006

Criteria	Definition
Quality of care	Services will be clinically safe, effective and efficient. Services should reflect best practice.
Patient experience	How patients are cared for – from diagnosis and treatment to rehabilitation and discharge – is improved. Services are delivered by local co-ordinated healthcare teams, in close liaison with primary care, specialist services and social care.
Accessibility / Equity	Services provided are accessible and available to residents of Kennet and North and West Wiltshire. Services take into account individual needs of patients (such as disability and ethnicity).
Use of resources	Efficient and effective use of all our resources.
Contribution to financial position	Services are affordable in terms of financial balance. The cost of services and developments should contribute to financial recovery plans.
Workforce development	Staff have an improved working environment and are supported with appropriate and accessible clinical leadership, with opportunities for education and training and professional development and research.
Optimising buildings and equipment	Buildings and equipment support a modern, safe clean environment for patient care. The buildings and estate are optimised to support how we provide care and services.
Strategic vision / Future development	Services fit with the strategic objectives. Services are able to meet national policy and Standards For Better Health. Services and facilities should be readily adaptable to a range of clinical uses and the delivery of alternative ways of caring for patients.

Appendix 4 – ‘Making Your Views Known’ Form (used in public consultation meetings)



Making your views known

The consultation lasts from 7th April 2006 until 5.00pm on 7th July 2006

You can make your views on the proposals by

- writing to the address below
- completing the form on the last page of the Consultation Document and sending it to:
*Pathways for Change, Valentines, Epsom Road, White Horse Business Park
Trowbridge, Wiltshire BA14 0XG*
- Fax to : 01225 754648
- Phone: 01225 759886
- E-mail: pathwaysforchange@wiltshire.nhs.uk
- Completing the feedback form on the web
www.wiltshire.nhs.uk/pathwaysforchange

COMMENTS or CONCERNS YOU WISH TO BRING TO THE ATTENTION OF THE BOARD

Please continue overleaf if your require.

Appendix 5 – Schedule of public consultation meetings

	Area	Date	Venue	Number attending
1	Westbury	02-May-06	Matravers School, Springfield Road, Westbury, BA13 3QH	202
2	Devizes	03-May-06	Assembly Room, Devizes Town Hall, St John's Street, Devizes, SN10 1BN	167
3	Bradford on Avon	04-May-06	St Margaret's Hall, Bradford on Avon, BA15 1DE	106
4	Marlborough ¹	08-May-06	Assembly Rooms, Marlborough Town Hall, 5 High Street, Marlborough, SN8 1AA	245
5	Warminster	09-May-06	Assembly Rooms, Sambourne Road, Warminster, BA12 8LB	278
6	Malmesbury	10-May-06	Kings Church, Abbey Row, Malmesbury, SN16 0AG	28
7	Melksham	11-May-06	Assembly Hall, Market Place, Melksham, SN12 6ES	188
8	Trowbridge	15-May-06	Clarendon College, Frome Road, Trowbridge, BA14 0DJ	355
9	Chippenham	16-May-06	Neeld Hall, Chippenham Town Hall, High Street, Chippenham, SN15 3ER	216
10	Ludgershall	17-May-06	Scout Hut, Chapel Lane, Ludgershall, SP11 9QW	22
11	Wootton Bassett	18-May-06	Wootton Bassett Civic Centre, Station Road, Wootton Bassett, SN4 7DZ	10
12	Pewsey	22-May-06	Bouverie Hall, Off North Street, Pewsey, SN9 5ES	199

Appendix 5 – Schedule of public consultation meetings (Continued)

	Area	Date	Venue	Number attending
13	Corsham	24-May-06	Corsham Town Hall, High Street, Corsham, SN13 0EZ	38
14	Cricklade	30-May-06	High Street, Cricklade, SN6 6AP	5
15	Tidworth	31-May-06	Tidworth College, Ordnance Road, Tidworth, SP9 7QD	19
16	Purton	05-Jun-06	Purton Village Hall, Purton, SN5 4AJ	10
17	Box	06-Jun-06	Selwyn Hall, Vallens Terrace, Box, SN13 8NT	23
18	Calne	07-Jun-06	Calne Town Hall, Bank House, The Strand, Calne, SN11 0EN	32
19	Warminster *	20-Jun-06	Assembly Rooms, Sambourne Road, Warminster, BA12 8LB	232
20	Westbury *	22-Jun-06	Matravers School, Springfield Road, Westbury, BA13 3QH	136
21	Marlborough *	26-Jun-06	Marlborough College, Marlborough, SN8 1PA	281
22	Devizes *	28-Jun-06	Corn Exchange, Market Place, Devizes, SN10 1HS	96
			Total attending meeting	2,888

* These were second public meetings

¹ Incomplete recording of meeting due to partial transcription

Appendix 6 – Schedule of staff consultation meetings

General Meetings

	Date	Venue
1	26-Apr-06	Westbury, Maurice Jones Room
2	26-Apr-06	Savernake Hospital
3	27-Apr-06	Warminster, Main Hall Wylie Unit
4	28-Apr-06	Melksham Hospital
5	03-May-06	Devizes Hospital
6	04-May-06	Chippenham, Physiotherapy Gym
7	05-May-06	RUH, Princess Anne Wing
8	08-May-06	Malmesbury, Day Room
9	10-May-06	Trowbridge, Hospital
10	11-May-06	Wootton Bassett, Clinic Room
11	12-May-06	Southgate House, Conference Room
12	17-May-06	Calne - Meeting Room Family Health Centre
13	18-May-06	Broadway House, Meeting Room
14	19-May-06	Corsham, Health Centre
15	25-May-06	Tidworth, Families Clinic
		Total attendance was 367 staff

Staff meetings relating to Neighbourhood Teams

	Date	Venue	Number
1	13-Jun-06	Devizes, Resource Room	15
2	14-Jun-06	Melksham, Training Room	30
3	15-Jun-06	Trowbridge, Training Room	44
4	20-Jun-06	Warminster, Wylie Unit	33
5	21-Jun-06	Corsham Health Centre	25
6	22-Jun-06	Malmesbury, Day Room	18
7	23-Jun-06	Chippenham, Training Room	25
8	29-Jun-06	Savernake, Physio Gym	29
		Total attendance of staff	219

Appendix 7 – Schedule of formal written responses received

Stakeholder	Type
Bradford on Avon Health Centre	GP
Bradford Road Medical Centre	GP
Courtyard Surgery	GP
Eastleigh Surgery	GP
Gable House Surgery	GP
Giffords Practice	GP
Hathaway Surgery	GP
North Wilts Practice Based Consortium	GP
Porch Surgery	GP
Rowden Medical Partnership	GP
Rowden Surgery	GP
St Margaret's, Sty Damian's, Spa Medical Centre and Giffords Practice	GP
Southbroom Surgery	GP
St Margarets Surgery	GP
The Avenue Surgery	GP
Wiltshire Medical Services	GP
Bradford on Avon Town Council	Local Authority
Bratton Parish Council	Local Authority
Bromham and Rowde Ward, Kennet District Council - Cllr. Phillip Brown	Local Authority
Broughton Gifford Parish Council	Local Authority
Burbage Parish Council	Local Authority
Calne Town Council	Local Authority
Chippenham Town Council	Local Authority
Chirton Parish Council	Local Authority
Cllr Christine Mudge, Parish Councillor, Ogborne St George	Local Authority
Cllr Desna Allen, NWDC	Local Authority
Cllr Kathleen C White	Local Authority
Cllr Judy Rooke, Town, District and County Councillor	Local Authority
Cllr Malcolm Hewson	Local Authority
Cllr Mrs Jennifer K Combe	Local Authority
Cllr Mark Connolly, County Councillor	Local Authority
Cllr Nina Phillips, District and Town Councillor, Chippenham	Local Authority
Cllr S Oakes, Chippenham Town Council	Local Authority
Clyffe Pypard Parish Council	Local Authority
Corsham Town Council	Local Authority
Devizes Town Council	Local Authority
Dilton Marsh Parish Council	Local Authority
Easterton Parish Council	Local Authority
Edington Parish Council	Local Authority
Erlestoke Parish Council	Local Authority
Fyfield and West Overton Parish Council	Local Authority

Stakeholder	Type
Great Bedwyn Parish Council	Local Authority
Heywood Parish Council	Local Authority
Hilperton Parish Council	Local Authority
Keevil Parish Council	Local Authority
Kennet District Council	Local Authority
Little Bedwyn Parish Council	Local Authority
Marlborough Town Council	Local Authority
Melksham Town Council	Local Authority
Melksham Without Parish Council	Local Authority
Minety Parish Council	Local Authority
North Bradley Parish Council	Local Authority
North Wiltshire District Council	Local Authority
North Wraxall Parish Council	Local Authority
Preshute Parish Council	Local Authority
Ramsbury and Axford Parish Council	Local Authority
Roundway Parish Council	Local Authority
Savernake Parish Council	Local Authority
Staverton Parish Council	Local Authority
Trowbridge Town Council	Local Authority
Urchfont Parish Council	Local Authority
West Wiltshire District Council	Local Authority
West Wiltshire Local Strategic Partnership	Local Authority
Westbury Town Council	Local Authority
Wiltshire County Council	Local Authority
Yatton Keynell Parish Council	Local Authority
Dr Andrew Murrison MP	Member of Parliament
Michael Ancram MP	Member of Parliament
Bath NHS House, Child Health Department	NHS Organisation
Gloucestershire Hospitals NHS Foundation Trust	NHS Organisation
Outpatient Dept, Warminster Hospital	NHS Organisation
Mendip PCT	NHS Organisation
Royal College of Nursing,	NHS Organisation
Royal United Hospital Bath NHS Trust	NHS Organisation
RUH Bath, Older People's Unit	NHS Organisation
Salisbury District Hospital	NHS Organisation
Salisbury District Hospital, Odstock Centre	NHS Organisation
Savernake Hospital, Day Hospital	NHS Organisation
Savernake Hospital	NHS Organisation
South Gloucestershire PCT	NHS Organisation
South Wiltshire PCT	NHS Organisation
Speech and Language Therapy and Hearing Therapy Service, Trowbridge	NHS Organisation
Swindon and Marlborough NHS Trust	NHS Organisation
Trowbridge Maternity Unit	NHS Organisation
Widbrook Medical Practice Patients Participation Group	Patient Forum

Stakeholder	Type
Eastleigh Patient's Forum	Patient Forum
Great Western Hospital PPI Forum	Patient and Public Involvement Forums (PPIF)
Kennet and North Wiltshire PPI Forum	Patient and Public Involvement Forums (PPIF)
West Wiltshire PPI Forum	Patient and Public Involvement Forums (PPIF)
Age Concern, Devizes	Voluntary / Community Group
Bradford on Avon Health Project Group	Voluntary / Community Group
Breatheasy	Voluntary / Community Group
Burbage Good Companions Club	Voluntary / Community Group
Calne Community Care Planning Group	Voluntary / Community Group
Carers Support North Wiltshire	Voluntary / Community Group
Chippenham and District Homemakers	Voluntary / Community Group
Chippenham and District NCT	Voluntary / Community Group
Christian Action for the Trowbridge Area	Voluntary / Community Group
Churches Together in Warminster	Voluntary / Community Group
Community First	Voluntary / Community Group
Community First - The Link Project	Voluntary / Community Group
CVS North Wiltshire	Voluntary / Community Group
DASH2	Voluntary / Community Group
Deverill Valley and Crockerton Women Institute	Voluntary / Community Group
Devizes and District Link Committee	Voluntary / Community Group
Devizes and District Heritage Society	Voluntary / Community Group
Devizes and District Hospital League of Friends	Voluntary / Community Group
Devizes and District PHAB	Voluntary / Community Group
Devizes Community Area Planning Partnership Health and Social Care Group	Voluntary / Community Group
Devizes Health and Social Care Forum	Voluntary / Community Group
Dorothy House Hospice Care	Voluntary / Community Group
Friends of Chippenham Hospital	Voluntary / Community Group
Friends of Trowbridge Hospital & Community	Voluntary / Community Group
Friends of Warminster Hospital	Voluntary / Community Group
Kennet Carers Association	Voluntary / Community Group
League of Friends, Melksham Hospital	Voluntary / Community Group
League of Friends, Savernake Hospital	Voluntary / Community Group
League of Friends, Westbury & District Hospital	Voluntary / Community Group
Members Forum for Marlborough Community Area	Voluntary / Community Group
Multiple Sclerosis Society, Warminster and District Branch	Voluntary / Community Group
North Wilts Holiday Club	Voluntary / Community Group
Pewsey Community Area Health and Social Care Forum	Voluntary / Community Group
Pewsey Health and Social Care Forum	Voluntary / Community Group
Probus Club of Chippenham	Voluntary / Community Group
Ramsbury Women's Institute	Voluntary / Community Group

Stakeholder	Type
The Rotary Club of Chippenham	Voluntary / Community Group
Tidworth Community Area Partnership	Voluntary / Community Group
Townswomen's Guild – Trowbridge Central	Voluntary / Community Group
Townswomen's Guild – Warminster	Voluntary / Community Group
Trowbridge Community Area Future	Voluntary / Community Group
Trowbridge Guild of Community Service	Voluntary / Community Group
Trust for Devizes	Voluntary / Community Group
Voluntary Action Kennet	Voluntary / Community Group
Warminster and Villages Community Partnership	Voluntary / Community Group
Westbury and District Probus Club	Voluntary / Community Group
Westbury Hospital Campaign Group	Voluntary / Community Group
Wiltshire Churches Together	Voluntary / Community Group
Wiltshire Racial Equality Council	Voluntary / Community Group

Appendix 8 – Petitions received

Date	Source
25-April-06	Burbage Good Companions Club
04-May-06 received	Gazette and Herald SAVE OUR HOSPITAL
25-May-06	Archie Kidd (Thermal) Limited
13-June-06	Devizes and District Heritage Society
05-July-06	Christian Action for the Trowbridge Area
05-July-06	Local resident of Trowbridge

Appendix 9 – Stakeholders involved in the consultation

Staff in the Primary Care Trusts

Independent Primary Care Contractors

Dentists
GPs
Ophthalmologists
Pharmacists

Strategic Health Authority

Avon, Gloucestershire and Wiltshire Strategic Health Authority (to 1st July 2006). NHS South West Strategic Health Authority (from 1st July 2006)

Neighbouring Primary Care Trusts

Bath and North East Somerset PCT
Bristol North PCT
Bristol South & West PCT
Cotswold & Vale PCT
Mendip PCT
Mid Hampshire PCT
Newbury PCT
South Gloucester PCT
South Somerset PCT
South Wiltshire PCT
Swindon PCT

Acute Trusts/Foundation Trusts

Gloucestershire Hospitals NHS Foundation Trust
North Bristol NHS Trust
Royal United Hospital for Rheumatic Diseases NHS Trust
Royal United Hospital NHS Trust
Salisbury Healthcare NHS Trust
Swindon & Marlborough NHS Trust
United Bristol Healthcare NHS Trust
Western Health Area NHS Trust
Winchester & Eastleigh Healthcare NHS Trust

Ambulance Trusts

Great Western Ambulance Trust

Mental Health Trusts

Avon & Wiltshire Mental Health Partnership NHS Trust
Gloucestershire Partnership NHS Trust

Main Voluntary Organisations

Age Concern Wiltshire
Alzheimer's Society
Alzheimer's Support West Wilts
Arthritis Care

CAB Kennet
CAB North Wiltshire
CAB West Wiltshire
Carers' Support North Wiltshire
Carers' Support West Wilts
Children's Fund (Dr Barnados)
CVS North Wilts
Independent Living Association
Kennet Carers
Link
Mencap
Rural Needs Initiative
Stroke Association
Swindon & Wiltshire Drugs & Alcohol Service
Voluntary Action Kennet
Voluntary Action West Wilts
Wiltshire & Swindon PHAB
Wiltshire & Swindon Users Network
Wiltshire Racial Equality Council

Community Groups

Devizes Hospital Project Board
Malmesbury Hospital Redevelopment Project Group

Local Strategic Partnerships

Kennet Local Strategic Partnership
North Wiltshire Local Strategic Partnership
West Wiltshire Local Strategic Partnership

Community Partnerships

Bradford on Avon Community Partnership
Bradford on Avon Development Partnership
Chippenham Community Area Partnership
Corsham Community Area Partnership
Devizes Community Area Partnership
Malmesbury Community Area Partnership
Marlborough Community Area Strategic Partnership
Melksham Community Area Partnership
Melksham First
Pewsey Community Area Partnership
The Calne Community Area Partnership
Tidworth Community Area Partnership
Trowbridge Community Area Group
Trowbridge Future
Trowbridge Town Council
Warminster & Villages
Westbury Area Action Group
Wootton Bassett/Cricklade/Purton Community Area Partnership

Town Councils

Bradford on Avon
Calne
Chippenham
Corsham
Cricklade
Devizes
Malmesbury
Marlborough
Melksham
Tidworth
Trowbridge
Warminster
Westbury
Wootton Bassett

League of Friends

Bradford on Avon Hospital
Calne Health Centre
Chippenham Hospital
Devizes Hospital
Malmesbury Hospital
Melksham Hospital and Community
Savernake Hospital
Trowbridge Hospital and Community
Warminster Hospital
Westbury Hospital

Overview & Scrutiny Committee

Wiltshire Health Scrutiny Committee

Members of Parliament

Devizes County Constituency
North Wiltshire County Constituency
Westbury County Constituency

Nursing Homes

Order of St John Care Trust - Wiltshire County Officer
The Registered Nursing Home Association
Wiltshire Registered Care Homes Association

Housing Associations

Hannover Housing Association
Jephson Housing Association
Knightstone Housing Association
Sarsen Housing Association
West Wiltshire Housing Society
Westlea Housing Association

Wiltshire County Council

District Councils

Kennet District Council
North Wiltshire District Council
West Wiltshire District Council

Maternity Reference Group

Patient Advice and Liaison Service Readers Panel

Patient and Public Involvement (PPI)

Kennet and North Wiltshire PPI Forum
West Wiltshire PPI Forum

Appendix 10 – Consultation meetings held by other groups

May 2006	Bufferzone / Wiltshire Children's Fund
28-June-06	Wiltshire Health Overview and Scrutiny Committee and Taskgroup
29-June-06	Devizes Town Council
06-July-06	Patient and Public Involvement Forums
27-July-06	Bratton Parish Meeting (joint meeting with the parishes of Bratton, Edington, Coulston and Erlestoke)