

Mums and Toddlers, Grove Street Methodist Church, Retford

All responses, comments and quotes are given in red type.

1. What age are you?					
0-15	16-24	25-34 1	35-44 2	45-54 2	
55-64	65-74	75-84	85+	Prefer not to say	
2. What is your sex / gender?					
Male	Female 5		Non-Binary	Prefer not to say	
3. Have you gone through any part of a process, to bring your physical sex appearance, and/or your gender role, more in line with your gender identity?					
Yes		No 5		Prefer not to say	
3a. Have you had thoughts about going through a process to bring your physical sex appearance, and/or your gender role, more in line with your gender identity?					
Yes		No 5		Prefer not to say	
4. Which of the following options best describes your sexual orientation?					
Heterosexual/ Straight 5	Gay	Lesbian	Bisexual	Other	Prefer not to say
5. What is your ethnic group? Please circle.					
White White British 5 White Irish Other White	Mixed White and Black Caribbean White and Black African White and Asian Other Mixed	Asian or Asian British Indian Pakistani Bangladeshi Other Asian	Black or Black British Caribbean African Other Black	Chinese or Other Ethnic Group Chinese Other Ethnic Group	
6. What is your religion?					



No religion 3	Atheist	Buddhist	Christian/ Including Roman Catholic	Hindu
Jewish	Muslim	Sikh	Other (<i>please specify</i>)	Prefer not to say 2
7. Do you consider yourself to have a physical disability?				
Yes		No 5	Prefer not to say	
7a. If 'Yes' to question 7, does your disability affect your ability to access services? If so, please tell us briefly how				
Yes (<i>please describe</i>)				No
8. Do you, or do you consider yourself to have a mental health condition?				
Yes		No 5	Prefer not to say	
8a. If 'Yes' to question 8, does your disability affect your ability to access services? If so, please tell us briefly how				
Yes (<i>please describe</i>)				No
9. Are you currently pregnant, or expecting a baby?				
Yes		No 5	Prefer not to say	
10. Please specify the number of children that you have, in the following age ranges				
0-3 1	4-10 1	11-16 1	17-21	Over 21 2
				Prefer not to say
11. What is your marital status?				
Single 3	Co-habiting 1	Married 1	Divorced / separated	Widowed
				Prefer not to say
12. Do you have caring responsibilities?				
Yes		No 5		



13. Are you serving military personnel or a military veteran?		
Yes – serving military	Yes - veteran	No 5

Responses to question prompts

Carrying on with the development of closer working relationships across all of our hospitals

- The report recommended that the hospitals develop a new way to work together as networks
- This approach supports hospitals to ensure patients get equal access to services and patient care (so where there might currently be differences in, for example, the number of follow-up appointments people might have after the same operation, just because they live in a different town, there would be a change so that everyone in South Yorkshire and Bassetlaw would have the same service. This may be different for Derbyshire patients).
- ❖ Working closely together would benefit care as you want the best care for your child.
- ❖ I agree with what they're saying as long as they all work to best practice not what is the minimum so at present if one hospital gives 8 follow ups and another only gives 5 then they should all give 8 so it doesn't turn into a cost saving exercise.
- ❖ I've only ever been to Bassetlaw hospital so not sure what other hospital offer so can't see how it would affect me but in the future I guess it would.
- ❖ I do agree that care should be standardised so that you can't opt out of certain things and that there needs to be minimum standards for all.
- ❖ Everyone needs to be treated the same no matter what area they are from.
- ❖ It should be the same for everyone as at the moment it's a postcode lottery as some trusts have more money than others.

Doncaster and Bassetlaw Hospital and Sheffield Children's working together more closely

- The report recommended that Doncaster and Bassetlaw hospital and Sheffield Children's should explore a more in-depth partnership. For example where one hospital is particularly good at something –such as the experience Sheffield Children's has in caring for children – they would help their partner to learn and benefit from their experience.
- Doncaster and Bassetlaw hospital and Sheffield Children's will look at how working together might make it easier to fill their job vacancies and develop how they train their staff.
- ❖ If the most current and up to date care is coming from Sheffield then surely it will benefit our doctors and nurses in Bassetlaw and Doncaster to be trained to deliver what Sheffield would expect



then it's got to benefit everybody. I don't think staff would be happy to rotate between hospitals but that provides best care then so be it.

- ❖ It would be ok as long as the children's services stayed open at Bassetlaw and not shipped out to Sheffield/Doncaster as this is not practical for most families. You need to have the services open in Bassetlaw then pull the experts in from Sheffield when needed.

Hospitals take forwards their own changes locally because the report has found that a South Yorkshire & Bassetlaw solution isn't always the best option

- The report explains that each Trust is also taking forward its own changes
- Examples include Rotherham building its community services for children's services or Barnsley improving its buildings so that the assessment unit for children is next to the emergency department.
- ❖ In Doncaster I believe Maternity is on the 7th floor! It would be better if it was located on the lowest floor as I think that would work better, but obviously that would cost great amounts.
- ❖ I think having children's services next to A&E departments is a good thing but I don't know how practical this would be in all hospitals.
- ❖ Rotherham and Barnsley have done what works for them so we need to do what works for us Bassetlaw – re-open the children's services. So I agree each one needs to take forward its own changes.

Bassetlaw partners take forward work to consider local solutions.

- The report states that there are no immediate, known safety issues at any sites, but that a risk of safety issues on the Bassetlaw site has previously been avoided by removing overnight stays and moving temporarily to a model where they just have an assessment unit for children. The work of the Review suggested that staffing issues remain, and that the same risk would arise again at Bassetlaw if Bassetlaw were to return to an overnight inpatient children's unit.
- The report supports Bassetlaw CCG and Doncaster and Bassetlaw Teaching Hospital in continuing to test potential partnership working with Sheffield Children's Trust as a way to strengthen services, but suggests that it is not likely that this would be sufficient to support a reopening of overnight inpatient children's services. The report invites Bassetlaw CCG, working with the Trust, to work together to consider local options.
- ❖ I understand that it's the staffing issues why Bassetlaw children's services has moved to Doncaster/Sheffield so why don't they invest in doctors who have got training like in Sheffield and send them to Bassetlaw? Because if they're all supposed to be the same standard why can't they put them in Bassetlaw? It must be about money as they say its staff, they could get staff but they obviously don't think it's worth it. They could actually make Bassetlaw services bigger as it's rural so I don't agree with what they're doing.
- ❖ It's clear to me that we are a large community that needs are our own overnight children's services in our local hospital it's wrong that children are shipped out to Doncaster in an emergency where parents can't get there when there are transport issues for families, it's a cost saving exercise, a



fancy way of saving money. They trying to say it's for our benefit but clearly it's not, as benefit to us would be to have our own Bassetlaw hospital open 24hrs. It needs more investment from the NHS we've always had enough money before to keep it open, it's mis-management etc and a tory government that don't really care about normal people.

- ❖ There needs to be the services here as otherwise it means travelling with sick children, waiting for hours for transport and stuff. The bigger cities have all the facilities and we as a smaller town we don't have what we should have especially when it comes to children.
- ❖ The overnight facilities should be bought back to save children and families being moved out here, there and everywhere in a stressful situation but I also understand with staffing and safety issues why it had to be done.
- ❖ I'm sure there's plenty of agency staff who could work here to keep things open.
- ❖ When children are transported to Doncaster I believe they are provided with a taxi sometimes but that's not the point when you've got a tired, sick child, distressed mother and then that's another half an hour on the journey, and then this affects the wider families too. Doncaster is not an easy hospital to get to on public transport.

Additional general comments:

- ❖ *It worries me that these things are cost saving exercises rather than an improvement to services*
- ❖ *I was in Bassetlaw when my little girl was 3 weeks old with gastroenteritis and I'd just had a caesarean section and she'd literally been sick on everything I had and if I'd been transferred it would have been awful as my husband was at home with our other daughter so it would have been really difficult.*
- ❖ *Services have always been here but it's just cut, cut, cut all the time with the NHS*
- ❖ *We live in Retford and had to go all the way to Doncaster with our son for 4 days as there weren't the services at Worksop for us. I know it's only half an hour but it made it really difficult for family.*
- ❖ *Luckily when my grandson was in then myself and my daughter can drive but for those who can't drive it must be really daunting and would be a lot of pressure for some people so it is a shame they close part of it. Why can't they just get the staff from other trusts instead of moving the patients?*
- ❖ *Why can't all trusts have the same budget to give the same care across the board. Not just children's but everthing?*

