



# **Results of the public consultation on the permanent location of specialist dementia hospital care in Wiltshire**

An  
independent voice  
for the  
people of Wiltshire

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Note: When we talk about carers in this report we are referring to unpaid carers who could be family members or friends of the person with dementia.

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# Section 1: Background Information

## What is this report about?

This report will tell you what local people said when they were asked about where specialist dementia hospital care should be permanently located in Wiltshire. Healthwatch Wiltshire independently facilitated the public consultation between 1 December 2014 and 10 March 2015.

This report has been put together to inform the decision which NHS Wiltshire Clinical Commissioning Group must make. Whilst some background information is provided, the main part of the report reflects what people told us.

## What is Healthwatch Wiltshire?

Healthwatch Wiltshire is an independent local organisation which has an important statutory duty to speak up for local people on health and social care. You can find out more about Healthwatch Wiltshire on our website: [www.healthwatchwiltshire.co.uk](http://www.healthwatchwiltshire.co.uk).

## What was the consultation about?

NHS Wiltshire CCG needed to consult the Wiltshire population on the future permanent location of specialist dementia hospital care in Wiltshire. They were supported, in partnership, by Wiltshire Council. NHS Wiltshire commission the service from Avon and Wiltshire Mental Health Partnership (AWP). Three possible locations were identified by these organisations:

- **Charter House, Trowbridge**
- **Avebury Ward, Green Lane, Devizes**
- **Amblescroft South, Fountain Way, Salisbury**

*"People with dementia need to be put in the forefront - it would make me a lot happier because I know what it's like, patience and awareness are needed"*

Person living with dementia from Chippenham

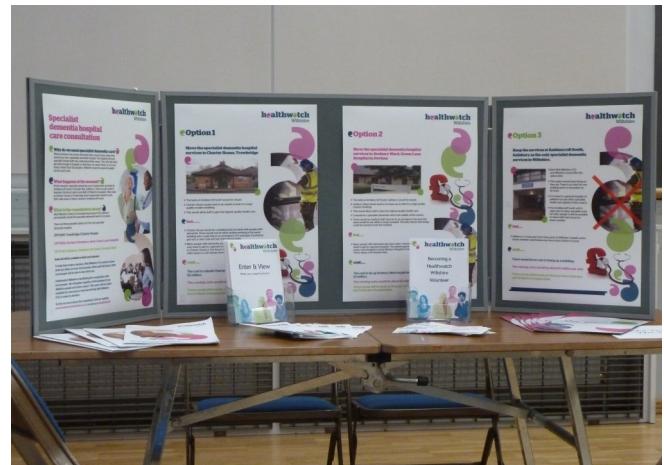
## Why is hospital care needed?

When someone has severe dementia there may be times when they need to use specialist services in a hospital setting.

The hospital will have specially trained staff who understand their needs. The aim is that patients will be treated so that they get well enough in hospital and they return home or to a care home. Fewer than 120 people in Wiltshire need this special hospital service each year to meet their acute medical needs. NHS Wiltshire CCG say that specialist dementia care should be viewed in the same way as other specialist care that exists, such as specialist heart or cancer care. Hospital stays for specialist dementia care are currently for an average of up to 84 days (12 weeks). This is for assessment, treatment, and stabilisation. The aim is that stays should be for an average of 42 days (6 weeks).

## What is the wider vision?

During 2014 a Wiltshire Dementia Strategy for 2014-2021 was put together. This sets out the wider vision and plans for supporting people to live well with dementia in Wiltshire. Increasingly the focus is on providing care for people at home, or closer to home, as far as is possible and appropriate. However, when hospital care is needed then this should only be for a short period to help patients get well enough to return to their local community and their usual home. The consultation on specialist hospital care is part of the dementia care pathway and is an important part of the Dementia Strategy. The Wiltshire Dementia Strategy can be found here: [http://www.healthwatchwiltshire.co.uk/sites/default/files/final\\_wiltshire-dementia-strategy\\_0.pdf](http://www.healthwatchwiltshire.co.uk/sites/default/files/final_wiltshire-dementia-strategy_0.pdf)



## Where was the hospital Care?

Before February 2013 some hospital care was provided in Charter House in Trowbridge. AWP decided to temporarily stop admitting patients to Charter House because it said it found it difficult to give high quality care because of the low occupancy, environmental issues, and the standalone nature of the site. Hospital care was temporarily moved, in early 2013, to Amblescroft South, Fountain Way in Salisbury.

*"When you are in hospital with dementia it is very hard having nobody close to talk to. You feel ostracised if you are a long way from home"* Person living with dementia from Salisbury

*"I think the majority of people diagnosed don't need a specialist hospital, most things your doctor would deal with. This hospital has to be a last resort."* Person living with dementia from Salisbury

NHS Wiltshire CCG also commission, as required, specialist hospital care for dementia in St Martin's Hospital in Bath and at the Victoria Centre in Swindon. These are commissioned to offer choice (i.e. to be located near to carers or families) or if Amblescroft South is full. These additional beds were available when Charter House was open, as they are now.

**“It’s good that they are asking people - in the end it will all come down to money”**

**Carer from Chippenham area**

## Why these options?

Working on behalf of NHS Wiltshire CCG, AWP appointed independent contractors to work with both clinical and non-clinical AWP staff to review and provide options for hospital care. This resulted in the three options which are part of this consultation. This piece of work included working out what it would cost to refurbish and run Charter House and Avebury Ward in Devizes.

## What are the advantages and disadvantages of these options?

The clinical and estate advantages and disadvantages are set out in detail in the main consultation document which can be found here [http://www.wiltshireccg.nhs.uk/wp-content/uploads/2014/12/Dementia\\_PDF\\_low\\_res1.pdf](http://www.wiltshireccg.nhs.uk/wp-content/uploads/2014/12/Dementia_PDF_low_res1.pdf).

NHS Wiltshire CCG, AWP, and Wiltshire Council have said that there are more advantages to permanently locating the Wiltshire specialist dementia hospital care in Salisbury at Fountain Way Hospital (Amblescroft South). If this happened, then it would mean the permanent closure of Charter House in Trowbridge.

## Why consult?

NHS Wiltshire CCG, AWP, and Wiltshire Council wanted to make sure that local people had the chance to find out about the options and to have their say. That's why Healthwatch Wiltshire was asked to independently facilitate the consultation. NHS Wiltshire CCG has paid Healthwatch Wiltshire for this work. It is important to note that Healthwatch Wiltshire does not have a view on which option is best. Instead, its role has been to provide information to local people about the options and ask them what they think. Healthwatch Wiltshire has maintained full editorial and publishing rights on this report.

## Will what local people say make a difference?



NHS Wiltshire CCG, AWP, and Wiltshire Council have demonstrated that they are serious about consulting with local people about this decision. They have provided information, engaged Healthwatch Wiltshire to facilitate the consultation, and said in public that they will take account of what local people say when the decision is taken. Whilst the focus of the consultation has been to find out what people think about the options for the permanent future location of specialist dementia hospital care, people have shared their views on other related issues. Healthwatch Wiltshire committed to local people that it would capture this additional information and include it in this report.

*“Quality is the most important thing without question”*

Person living with dementia from Salisbury.

## Section 2: What did we do?

The consultation ran from 1 December 2014 to 10 March 2015.

During this period there was a lot of activity to support the consultation. Detailed information about the activity can be found at the back of this report.

A range of information, for local people, about the options was prepared and made available. This included a document, prepared by NHS Wiltshire CCG, which provided detailed information about the options including clinical and estate advantages and disadvantages. An easy read document was also produced. Healthwatch Wiltshire produced display boards, leaflets, maps, and posters to support the consultation.

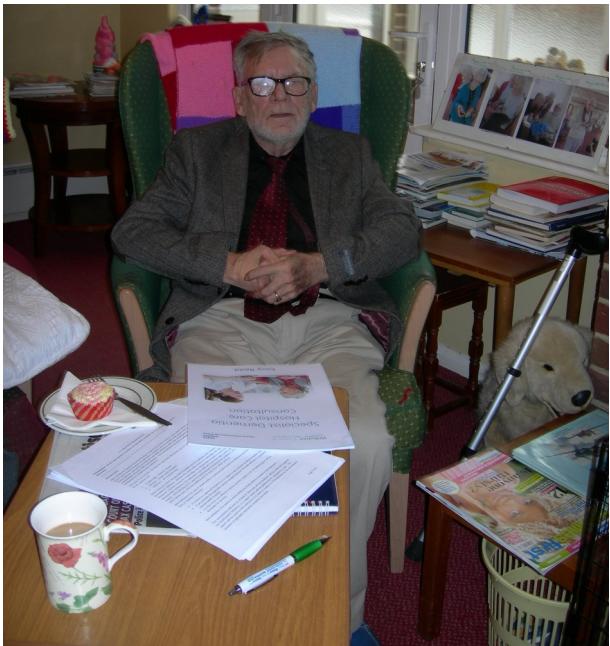
The consultation was promoted in several ways including through social media. We used press releases to get the message out through local media as well as paying for an advert in the Wiltshire Times. There was information available on websites including a dedicated page on Healthwatch Wiltshire's website which attracted 476 page views (with 362 of these unique). The consultation was promoted in newsletters including Healthwatch Wiltshire's Winter Newsletter which was sent to 284 subscribers. We made local charities aware of the consultation and invited them to help promote it.

A survey was prepared and this was available online and in hard copy with a freepost envelope. There were 209 responses to the survey. The survey, with results, is attached at the back of this report. People were invited, at the end of the survey, to answer two ‘free-text’ questions. ‘If the beds for specialist dementia hospital care are

put in a place that is far away from where you live then is there anything we need to think about?’ 171 people made a response to this question. Finally, ‘do you have any other comments?’ 85 people made a response to this question

‘Free text’ comments from the survey have not been separately included in this report. Instead we have analysed them and picked out the key themes and these are included in this report along with some of the other results.

We talked to the general public as well as people living with dementia, carers, and family members. We also spoke to staff who are supporting people living with dementia. A visit to Amblescroft in Salisbury was very useful as we had the chance to speak to a small number of people using the specialist dementia hospital service.



*“The meeting I attended in Salisbury on 20<sup>th</sup> January was informative and helpful”*

Comment on an Easy Read submitted questionnaire

We wanted to make sure that people with learning disabilities had the chance to contribute to the consultation.

An easy read document about the options, along with an easy read survey, was made available.

10 people completed the survey. We were invited to a meeting by Wiltshire People First to talk to its members about the consultation. There were 20 people with learning disabilities at this meeting. Their comments have been incorporated into this report.

Healthwatch Wiltshire offered people the opportunity for an individual interview - either 'face to face' or on the telephone. 27 people took up this option.

We held 3 public meetings in Trowbridge, Salisbury, and Devizes. The Trowbridge meeting was very poorly attended although those that did attend made some very important contributions. We also presented at the Trowbridge Area Board meeting in January on the proposals and received feedback. There were plenty of other opportunities for people to contribute to the consultation if they were unable to attend, or chose not to attend, a public meeting.

Healthwatch Wiltshire attended 22 other meetings and events in local communities including memory cafés, day centres, and older people's forums. A couple of community based groups and a local charity discussed the consultation and sent their feedback direct to Healthwatch Wiltshire. At all of the meetings and events we arranged or attended we invited people to complete the survey. We also invited discussion and recorded what people told us.

*"I was convinced Devizes would have been the best location, but listening to the presentations here today I now see that Salisbury is right"*

Member of the public at Devizes public meeting



*"I think it's a good idea to have the unit in one place with specialist and dedicated staff."*

Professional from Chippenham

**“For dementia patients and their families the location aspect of this consultation is a critical issue. Given the factors revealed in various supporting papers, together with the mission statement, it is clear that in terms of cost, infrastructure and staffing, the NHS can only afford one location. Currently, the facility at Fountain Way is the logical and affordable solution.”**

Comment on a submitted questionnaire

## Section 3: What did people say?

Healthwatch Wiltshire has analysed all the responses to the consultation whether these were made through the survey or through meetings. Whilst there were different views about the options the key messages can be summarised as follows:

### The key messages

- People said that the quality of care should be the first priority rather than location. In particular, people living with dementia felt strongly about this. There was broad agreement about the benefits of having a specialist service in one location if this would help ensure high quality.
- There was understanding of the financial benefits of the Amblescroft option. Generally people understood, and agreed, that the NHS needs to make the best use of the resources available given wider budget constraints.
- Generally people said that they would like the hospital service to be close to where they live. There was regret that this may not be possible given the other considerations. In particular there was concern about how carers and family members would be able to visit if the location was far away from home.
- People told us that they are concerned about the adequacy and availability of services available to care for people with severe dementia at home or in a care home. This included concern about the help available for their families and other carers.
- Many people feel that they do not have enough information about the services which are available to support people with dementia at home or in their local community.

*“At the end of the day should it all come down to cost? - It's supposed to be for the people of Wiltshire so let's cover the whole of Wiltshire”*

Carer from Pewsey area

## Which option did people prefer?

The majority of people said that they would support the option of permanently locating hospital care at Amblescroft in Salisbury.

71.3% of people who responded to the survey chose this option.

Even if respondents from Salisbury were discounted from the survey results (on the basis that they would be likely to choose Amblescroft) the preferred option was still Amblescroft (45% compared to 37% for Devizes and 17% for Trowbridge). In the discussions we had with people most said that, ideally, they would prefer the specialist dementia hospital care to be located closest to where they live. However, recognising that this would not be possible for everyone, many people accepted that the Amblescroft option made the most sense.

## What did people feel about specialist hospital care being in one place?

The majority of people felt that hospital care for dementia should be in one place in Wiltshire as this would help assure a specialist service and also provide the best value. 71% of the survey responses either strongly agreed or agreed with the statement all the beds should be in one place so that specialist care can be provided.

People felt strongly that quality of care was the most important factor to consider when deciding on a location for the hospital care and that this would be maximised by concentrating the resources in one location. There was a general acceptance that this is the way the NHS is going, and has to go, in order to deliver very specialist acute services. However, there was some regret that this would mean that there would not be a local service for most people in Wiltshire. The importance of having experienced and well trained staff to support people with severe dementia was recognised. Most people felt that this would most easily be achieved with specialist staff based in one location.



***"It is important that people get support before things get really bad, this needs a proactive approach"***

Carer from Westbury

***"Quality of care is the most important thing for this unit"***

Carer at a Memory Café in Chippenham

However some people said that they felt specialist care should be provided from more than one location in Wiltshire with 30% of the survey respondents either strongly agreeing or agreeing with this. The main reason given was the view that people should be cared for in their local area and that this would enable them to have more visits from family and friends.

People were aware that, whichever location was chosen, there would still be beds available in St Martins, Bath and the Victoria Centre, Swindon. Most people living in the Chippenham area said they would want to use the beds available in Bath, if Salisbury was chosen. Most people living in Marlborough and Royal Wootton Bassett said that they would prefer to use the beds in Swindon, irrespective of the location that is chosen in Wiltshire as this would be easier for them to travel to. There was concern over how the beds in Bath and Swindon would be accessed and whether people would be offered a choice. Many people felt that there may not be an adequate numbers of beds available in Swindon and Bath for the number of people who would prefer these locations.

**"Option 3 ticks all the right boxes; it is not isolated and all other services are to hand. Possible visiting may pose more of a problem but Salisbury offers the best bus service and the bottom line is 'what is best for the patient'"**

**Comment on an Easy Read submitted questionnaire**



People from the Trowbridge area expressed concern over the future of Charter House if the beds were located in Salisbury. They wanted to be assured that it would be used to benefit local people in some way. People from Marlborough area felt that Savernack Hospital was an under-used resource for people from that area. Some people in Westbury were disappointed that the building that used to be a community hospital was not put forward as an option.

A question was raised about whether the

number of beds being commissioned was enough. We were told that historically there were 24 beds when the service was at Charter House in Trowbridge and 10 in Amblescroft, Salisbury. The number currently provided, in Wiltshire, is 20 (with the option of additional beds in Bath and Swindon should they be required). Commissioners at NHS Wiltshire CCG have advised us that they believe that 20 beds for acute specialist dementia hospital care are sufficient to meet demand given that wherever possible people will be cared for at home or closer to home.

People with learning disabilities told us that it was important to them that the location had good public transport links. Some people said that if they were visiting a relative receiving specialist dementia hospital care they may be able to use public transport but would need a supporter to go with them.

**“If I have to be in hospital I want to know my family can visit me.”**

**Person living with Dementia from Westbury**

## **What did people think about the recommendation that the beds should be close to a general hospital?**

One of the advantages of choosing the Amblescroft option is that it is close to Salisbury District Hospital. The District Hospital is 3.6 miles away from Amblescroft with an estimated minimum drive of 9 minutes (without traffic). NHS Wiltshire CCG say that this is a clinical advantage as it would provide for easy access for patients with either long term or emergency physical health needs. We asked people what they thought about this.

Most people felt that specialist dementia hospital care should be located close a general hospital. 72% of the survey respondents either strongly agreed or agreed with the statement that it is essential for patient safety for the beds to be close to a general hospital.

Many carers and people living with dementia said that they thought it was likely that people using the specialist hospital could have other health needs (possibly not related to their dementia). They thought that having medical staff and a general hospital close by would make it easier to get treatment. It was also noted that, if people with dementia needed to be transferred to a general hospital, the shorter that journey could be, the better.

Some people noted that, if Salisbury was chosen, there may be increased demand on Salisbury District Hospital to treat people with dementia as this is where they would be transferred to, if needed. It was felt that it was important to ensure there was adequate resources and expertise at Salisbury District Hospital if this was the case.

A minority of people felt that it didn't matter whether the specialist hospital beds were close to a general hospital with 27% of the survey respondents either strongly agreeing or agreeing with this statement. These people generally believed that the need for someone to be transferred would be fairly infrequent and that, when needed, an ambulance transfer would be satisfactory.

## **What did people think about what needs to be done to support patients and carers if they have to travel for specialist hospital care?**

Given that only one option will be chosen, people understood that there was a possibility that the permanent location of specialist dementia hospital care may be far away from where they live. We wanted to understand what people thought about this. Mostly people talked to us about transport. There was a high level of concern about how relatives, particularly carers, would be able to maintain regular contact with the person using the inpatient hospital care service if it was a long way from where they lived. People living with dementia told us that they would want to have regular visits from their family and friends if they had to be in this specialist hospital.

**‘Getting to Salisbury is a major undertaking’**

**Carer from Royal Wootton Bassett**

Professionals, carers, and people living with dementia told us that it is an important factor in the wellbeing of the people with dementia, who are in hospital, to have regular contact with their family and friends. This could be difficult to achieve if the location of hospital care is far away from home and there are transport difficulties.

**"When the NHS is organising things it should take account of the fact that Wiltshire is a large rural area"**

**Carer from Marlborough area**

It was suggested that close liaison with families, by hospital staff, would help to reassure carers who could not visit as often as they might like to, as well as benefit people living with dementia. This should include phone updates. Several carers said that their experience of speaking to hospital staff was not always positive, they did not feel their information was passed on and updates on how the person was getting on were not meaningful (this was not specific to specialist hospital care for people with dementia and instead was in reference to general hospital admissions). It was pointed out that most carers are likely to be elderly themselves. They may also be less able to drive and may find using public transport more difficult to use due to their own health issues.

Many people pointed out that Wiltshire is a rural county and is not well served by public transport which can make travelling long distances problematic. Community transport schemes were felt to be a good option for helping people with transport. However there was concern that these are already overstretched and have had their funding reduced. It was noted that there may be difficulty in finding volunteers to cover these journeys for visits as the trip could take the best part of a day from some areas. It was suggested that community transport schemes may need more resources to cope with any increased demand.

People told us that they were concerned about the costs associated with travelling long distances to visit people in hospital. This included fuel costs if driving, contributions to community transport schemes, taxi fares, charges for public transport (particularly for journeys starting before 9.30 when bus passes for older people will not be valid after 1 April 2015).



Generally it was felt that the impact would be greater if the Salisbury option was chosen as it is located on the edge of Wiltshire, whereas Trowbridge and Devizes are more central.

**"Travel is a genuine issue and people are affected ...travel must be addressed genuinely and deeply"**

**Member of the public at Devizes public**

**“It is essential that families and elderly spouses be assisted to visit the patients if travelling is necessary”**

**Comment on submitted questionnaire**

**People gave suggestions for what could be done to support family, friends and carers to visit:**

- Assistance with transport including refunding mileage costs, providing free parking, a dedicated bus service, improved community transport.
- It was suggested that open and unrestricted visiting hours would be helpful. Some people living with dementia told us that they valued being able to have visitors during meal times.
- People felt that having somewhere where visitors could make tea/coffee or heat up a meal at the hospital would be of real value to carers who had travelled long distances.
- Several carers also said that having somewhere to stay overnight would be helpful.
- Good quality information about transport options.

**“Public transport is poor in the county – it would be helpful if carers were given help with transport.”**

**Carer from Westbury**

**"If specialist dementia care is short term, then there is a need for more specialist residential care homes locally where people could then move on to."**

Carer from Chippenham, Wiltshire

## What did people think about the care which is needed for people to live at home, or closer to home?

High numbers of people agreed with the overall vision that people should be cared for at home (or in a care home in their local community) as far as possible. **97.5% of people who responded to the survey felt that there should be residential care available close to home for patients to be discharged to after a stay in hospital.** **88.9% felt that people should only be cared for in a specialist hospital bed if it is absolutely necessary.**

Whilst people very strongly agreed about the need to have care available in local communities, we also found that people lacked information about what might be available and what they may be entitled to. For example, **33.8% of people (who responded to the survey) didn't have enough information to comment on whether there is good care available to support people with severe dementia to live at home.** Also, significant numbers of people lacked confidence in the adequacy and availability of community based support because of experiences they (or people they knew) had had. **55.7% of people did not think that there was good care available to support people to stay at home.**

**There was concern that without good quality and easily available community based services, people living with dementia would not be able to be discharged from the specialist hospital.** This would put pressure on the availability of beds for other people who may need them. This may result in them needing to access specialist beds even further away. It might also mean unnecessarily long stays for some people with dementia, away from their local communities. However, we were also advised (by professionals) that it was better for someone to stay in hospital for longer so that a package of support could be put in place for their return home rather than for them to be discharged to a residential care home on a temporary basis pending their return home. This is because too much change can be very upsetting for people with dementia.

People had mixed experiences of specialist residential care for people with dementia. It was felt that many care homes were not able to care for people with severe dementia. Access to residential respite care, suitable for people with dementia, was highlighted as being difficult particularly by people living North Wiltshire. Issues were raised about domiciliary care for people with dementia, particularly lack of continuity of staff, variable visiting times, and a feeling that some staff were not trained in dementia.

Some good experiences of support services were reported, particularly day centres and 'sitting service' where staff had specialist training.

People thought that more awareness generally in society would support people living with dementia in the community and it was recognised that there is some good work being done on this. It was felt that more specialist dementia training was needed for staff working in residential and domiciliary services.

**"Home Care Workers aren't necessarily trained in dementia"**

Person with memory Loss from Tisbury area

## What else did people tell us?

People talked to us about a very wide range of issues related to the decision about the permanent future location of specialist dementia hospital care which we have attempted to reflect in this report.

**"Please make provision for better respite provision so that carers can have a rest in their own homes regularly and for more than an hour or two a week."**

**Comment on submitted questionnaire**

One of the advantages of the Amblescroft option, in Salisbury, is that it represents the best value for money. Generally people agreed that it was important that financial considerations were taken into account when making the decision. AWP say that there are funds which have been set aside and saved from not running two sites since 2013. About £440,000 could be released and reinvested elsewhere if Amblescroft in Salisbury is the chosen option. Local people told us that they wanted to know what the funding would be spent on and felt that it should be 'ring-fenced' for dementia services. People said that some of the money should be spent to address the transport issues which were raised. Also, that the money should be spent on improved dementia care in communities.

We found that there was some confusion about whether the beds in the hospital service, and based in Wiltshire, will be 'reserved' for Wiltshire people. AWP covers a very big geographical area including North Somerset, Bristol, South Gloucestershire, Bath and North East Somerset, and Swindon. We were told that as far as possible the beds in Wiltshire will be for Wiltshire people so as to avoid people having to be cared for even further away from home (for example, in Bristol or North Somerset).

People said that they welcomed the opportunity to find out about the options and to have their say.

## Section 4: Equalities

An equality analysis was undertaken during the review and development of specialist dementia hospital care. It is reviewed at regular intervals, with the consultation on the dementia strategy in 2014 also providing opportunities for equalities issues to be raised for action. The current analysis has identified the main equality issues that will require further attention as:

- **People with early onset dementia (aged under 65 years old)**
- **People with learning disabilities and dementia**
- **People with dementia from black and minority ethnic communities**
- **People with dementia who live alone without family support**
- **People with rarer forms of dementia**
- **People with dementia and other health conditions / disabilities**
- **People who live in rural areas**
- **People who lack transport and for whom travel is costly and complex.**

## Section 5 : What next?

NHS Wiltshire CCG will make the decision at its Governing Body meeting on 24 March 2015. You will be able to find the papers, when they are published, by following this link: <http://www.wiltshireccg.nhs.uk/our-governing-body/governing-body-meetings-in-public>

During the consultation Healthwatch Wiltshire collected people's views on many issues related to the decision about the options. We will make sure that these issues are monitored and looked at separately. In particular we will:

- **Find out more about the support which is available for people to be cared for in their home or local community**
- **Look at the availability of good quality information about dementia and services**
- **Monitor issues to do with transport**
- **Monitor any issues to do with specialist dementia hospital care in the future by talking to people, and their carers, who use the service**

**"I would like to be near my family when I leave"**

**Patient on Amblescroft South**

The Wiltshire Council Health Select Committee (on which Healthwatch Wiltshire is represented as a stakeholder) can examine the quality of all health and care services provided for the people of Wiltshire. It recently received a report from a group set up to look carefully at dementia services. The Committee has indicated it will continue to review developments in this important service area.

Healthwatch Wiltshire is working with a number of local charities to monitor and support the Wiltshire Dementia Strategy. These charities are Age UK Wiltshire, Age UK Salisbury and District, Carers Support Wiltshire, SWAN Advocacy, Alzheimer's Support, and Alzheimer's Society. Together we are making sure that local people's views and experiences of dementia services are being listened to.



## Finally, Thank You!

Healthwatch Wiltshire would like to thank everyone who took the time to contribute their views to this consultation including local community groups and charities who gave us the chance to meet their service users. One in fourteen people over 65 have dementia at any one time and that's why 'dementia is everyone's business'. Whilst the consultation on the permanent location of specialist dementia care is based is now closed, Healthwatch Wiltshire is always interested in finding out about your experiences and views on health and social care services. Please get in touch with us.



**Every person counts,  
every person's experience  
counts**

# Appendix

## Who we spoke to or contacted

People living with dementia	82
Carers	124
Professionals and volunteers	110
Members of the Public	215
Interested individuals at Healthwatch Wiltshire workshops	129
1:1 interviews	26
People with a learning disabilities	20
Completed questionnaires	209
Completed easy read questionnaires	10
Wiltshire Help to Live at Home Care Agencies contacted and informed	
Salisbury, RUH, and GWH Hospitals contacted and informed	
Wiltshire Council Customer Coordinators contacted and informed	
Wiltshire MP's contacted and informed	
Wiltshire GP surgeries contacted and informed	
Information disseminated throughout virtual Patient Participation Groups	

## Meetings and events in community areas to talk to people about the consultation.

Date	Meeting/Group	Area
08/01/2015	Alzheimer's Society Memory Café	Chippenham
08/01/2015	Alzheimer's Support Memory Café	Westbury
14/01/2015	Alzheimer's Society Team Meeting	Chippenham
14/01/2015	Age UK Salisbury District South Wiltshire Older Peoples Forum	Salisbury
19/01/2015	Alzheimer's Support Memory Café	Melksham
20/01/2015	3 M's Memory Cafe	Royal Wootton Bassett
21/01/2015	Laverstock Peer Support Group	Laverstock
21/01/2015	Laverstock memory support Group	Laverstock
27/01/2015	Jubilee Centre	Marlborough
03/02/2015	Pewsey Vale Dementia Awareness Group	Pewsey
04/02/2015	Tisbury Memory Loss group	Tisbury
05/02/2015	Salisbury District Hospital Dementia Steering Group	Salisbury
09/02/2015	Alzheimer's Society Memory Café	Amesbury
11/02/2015	Pewsey Dementia Art Group	Pewsey
17/02/2015	Caring about Dementia group	Royal Wootton Bassett
18/02/2015	Carers Group – Carers Support	Trowbridge
24/02/2014	Wiltshire People First Speaking Up Group	Semington
26/02/2015	Harnham Dementia Cafe	Salisbury
03/03/2015	Wiltshire Community Health Forum	Warminster
03/03/2015	Bradford on Avon Seniors Forum	Bradford on Avon

# Appendix

## Places where we carried out ‘one to one’ interviews with people

Date	Venue	Area
27/01/2015	Jubilee Centre (5)	Marlborough
09/02/2015	Home visit (2)	Chippenham
12/02/2015	Home telephone call (1)	Devizes
19/02/2015	Calling people at home (2)	Tisbury area
25/02/2015	Lorna Doone Day Centre (2)	Royal Wootton Bassett
04/03/2015	Hungerford House Day Centre (5)	Corsham
04/03/2015	Amblescroft South, Fountain Way (5)	Salisbury
05/03/2015	Forresters Day Centre (4)	Salisbury
05/03/2015	Calling people at home (1)	Malmesbury area

## Public Meetings

Date	Location	Numbers attended
08/12/2014	Trowbridge	6
13/01/2015	Devizes	25
20/01/2015	Salisbury	35

## Promotion of the consultation

Produced A5 leaflets about the consultation for distribution at consultations, members of the public and to voluntary sector partners
Production of a set of 4 ‘easy read’ posters (laminated) for use on display boards.
Production of a set of 4 ‘easy read’ poster/leaflets for distribution to voluntary sector and members of the public
Production of two pull-up ‘dementia’ banners for use at consultations and Meetings
Advertised in Healthwatch Wiltshire Winter Newsletter (284 subscribers)
Two promotions to Healthwatch Wiltshire Associates via Mailchimp newsletter (284 subscribers includes local MPs)
Twitter promotions x 9
Dedicated Healthwatch Wiltshire webpage (476 unique visitors by 11 March 2015)
Displays and questionnaires at Healthwatch Wiltshire’s Dementia Monitoring workshops in Malmesbury, Devizes, Westbury and Salisbury
Agenda Items at Area Board Meetings at Trowbridge, Calne, Pewsey, Malmesbury, Corsham, Chippenham, Tidworth, Royal Wootton Bassett and Cricklade, Devizes, Marlborough, South Wilts, South Wilts West, Westbury, and Melksham

## Why not get involved?

**Visit our website:** [www.healthwatchwiltshire.co.uk](http://www.healthwatchwiltshire.co.uk)

**Follow us on Twitter:** @HWWilts

**Email us:** [info@healthwatchwiltshire.co.uk](mailto:info@healthwatchwiltshire.co.uk)

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