

Forest of Dean Citizens' Jury Report

A report of a citizens' jury to recommend whether a new community hospital for the Forest of Dean should be in or near Cinderford, Coleford or Lydney



and



August 2018

Table of Contents

Contents

Table of Contents	1
Introduction.....	2
Why the citizens’ jury was carried out	2
Jury design.....	3
Jury recruitment.....	3
Jury Questions.....	5
The jury process and outcomes	7
The jury process	7
Introduction to the Juror Report.....	7
The Jurors’ Report	7
End-of-jury questionnaires results	19
Appendix 1: further information about the jury	20
The Citizens’ Jury Method	20
Witnesses	20
The oversight panel.....	20
Citizens’ jury commissioners and project team	21
Appendix 2: Citizens’ Jury Schedule	22
Appendix 3: Bibliography	23

Introduction

On 30 July 2018, 18 people gathered at Forest Hills Golf Club in Coleford and began a four-and-a-half day “[citizens’ jury](#)”. The task for these citizens was to tackle a set of [jury questions](#) set for them by NHS Gloucestershire Clinical Commissioning Group (GCCG) and Gloucestershire Care Services NHS Trust (GCS). The central question was whether a new community hospital for the Forest of Dean should be in or near Cinderford, Coleford or Lydney. “In or near” was defined as being within two miles by road of the town centre.

Over the four-and-a-half days, the citizens heard from and asked questions of [witnesses](#), and worked in groups on the jury questions. They reached conclusions together, and were polled on their individual views. They identified individual and collective reasons for their answers.

At the heart of this document, is [the report of the process from the jurors themselves](#), in the jurors’ own words, with their reasoning and recommendations. However, this document also explains [why](#) the jury was carried out, how it was [designed](#), how the jurors were [recruited](#), and the results of the [end-of-jury questionnaire](#).

Further information about the jury can be found at: www.citizensjuries.org

Why the citizens’ jury was carried out

Following a public consultation, the Board of Gloucestershire Care Services NHS Trust (GCS) and the Governing Body of Gloucestershire Clinical Commissioning Group (GCCG) decided that:

- The Dilke Memorial Hospital in Cinderford, and Lydney and District Hospital in Lydney should be replaced by a new community hospital;
- Local people should be involved in choosing the location for the new hospital;
- A panel of local citizens and healthcare professionals should be recruited and should consider the evidence and recommend where the new community hospital should be built to best serve people living within the Forest of Dean District (the local authority boundary);
- That the panel should consider three options for the location of the new hospital:
 - In or near Cinderford
 - In or near Coleford
 - In or near Lydney;
- That the panel would be run as a citizens’ jury designed and delivered by Citizens Juries CIC;
- The GCS Board and GCCG Governing Body would individually consider carefully the jury’s recommendation and reasoning and make a decision on the location of the new hospital.

Before the jury, Gloucestershire Care Services NHS Trust identified at least two suitable build sites “in or near” each of the three towns. Every potential site fell within two miles by road of the centre of that town. The jury was asked to recommend a location (i.e. the town) only; a site for building the hospital would be selected after the GCS Board and GCCG Governing Body had decided on a town.

Jury design

The citizens' jury was planned, designed and refined over a period of five months.

There are many aspects to the jury design including:

- Articulating the [jury questions](#);
- Specifying the target jury demographics and [recruitment](#) approach;
- Identifying the information required by the jury to enable them to address the jury questions;
- Developing the [expert witness brief](#) and selecting individuals to act as [witnesses](#) and provide the jury with relevant information;
- Developing the brief and selecting individuals to act as members of the [oversight panel](#);
- Designing the [programme of jury activities](#) across the four-and-a-half days; and
- Designing and developing the other materials the jury would use, including the [questionnaire](#) completed at the end of the jury.

The design documentation is available at: www.citizensjuries.org.

Bias, both conscious and unconscious, is an important criticism of citizens' juries.[1] It is important that the design of the jury, and the evidence that the jury hears is fair and balanced. However, it is very difficult to know what constitutes "impartial information" or balanced argument, and almost every design choice, even down to a bullet point on a presenter's slide, could be challenged on grounds that it might manipulate the citizens' jury towards one outcome or another.

Bias can be monitored and minimised but not eliminated. To monitor and minimise bias on this project, an [oversight panel](#) was appointed to review the jury design and materials, and report potential bias. The [panel members were fully satisfied](#) that the jury was successfully designed to minimise bias. The [end-of-jury questionnaires](#) also asked the jurors about bias.

Other design controls used to monitor and minimise bias include:

- The [jury commissioners](#) were very involved in setting the jury questions but did not design or deliver the jury process and outputs;
- The representatives making the case for each of the three towns worked to a common brief, and were given the same amount of time to speak to the jury and answer their questions;
- The jury worked with independent facilitators throughout the process and constructed their own [jurors' report with their findings](#);
- Jury members completed an [end-of-jury questionnaire](#) which included several questions about potential bias;
- Transparency: the materials used by the jury were published each day of the jury at www.Fodhealth.nhs.uk, and this report, the jury specification, and outputs from the jury are all published at www.citizensjuries.org.

Jury recruitment

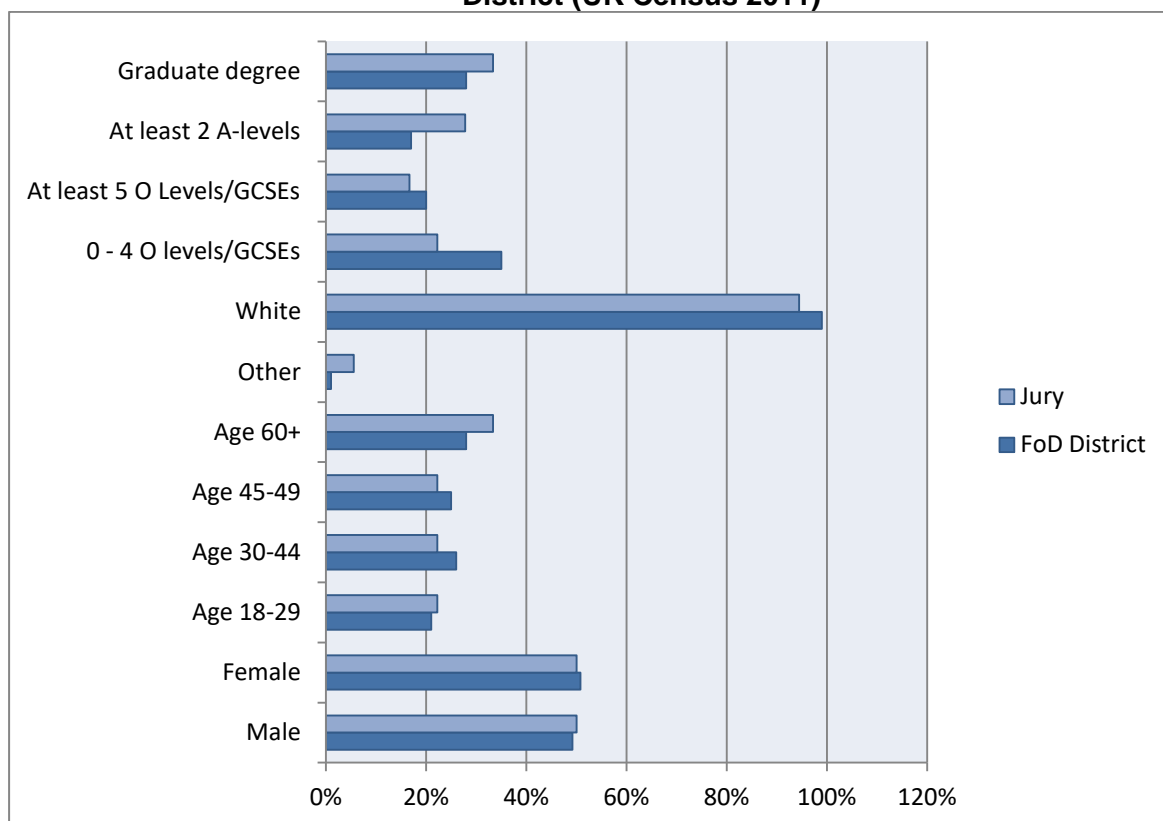
In total, 218 people from the Forest of Dean District applied to be a jury member. Most did this by completing an on-line survey. Shortlisted candidates had a telephone interview so that any ineligible candidates (e.g. healthcare professionals) could be identified and

excluded. Applicants were taken through a script which included the agreement they would be asked to sign. For example, jurors had to agree to enter the process with an open mind and “weigh the evidence fairly to recommend a location for a new community hospital that best serves the people living in the Forest of Dean District”. Three people decided to withdraw but no applicants were rejected after being interviewed by Citizens Juries c.i.c.

18 people from across the Forest of Dean District were recruited (postcodes of all the selected jurors were checked against a file of Forest of Dean District postcodes). A stratified sample was selected, disregarding name and other identifying details. The Citizens Juries c.i.c. method for jury selection was published on the [Citizens Juries c.i.c. website](#) before jurors were chosen.

The sample chosen was controlled for gender, age range, ethnicity and educational attainment (see chart below). The percentage mix of these control categories matched closely the demographics of people in Forest of Dean District (as recorded in the UK Census 2011). Figure 1 below shows the demographics of the 18 people who began and completed the four-and-a-half-day process (reading down the chart: educational attainment, ethnicity, age range and gender respectively). Note that the chart is very slightly changed from that published at Citizens Juries CIC website and by the Forest of Dean and Wye Valley Review in mid-July. The change is because one selected juror (a woman, aged 18-29) did not attend on the first day and so was replaced by one of the four reserves (who had similar demographic characteristics) who attended day one.

Figure 1: Demographic make-up of jury against average for Forest of Dean District (UK Census 2011)

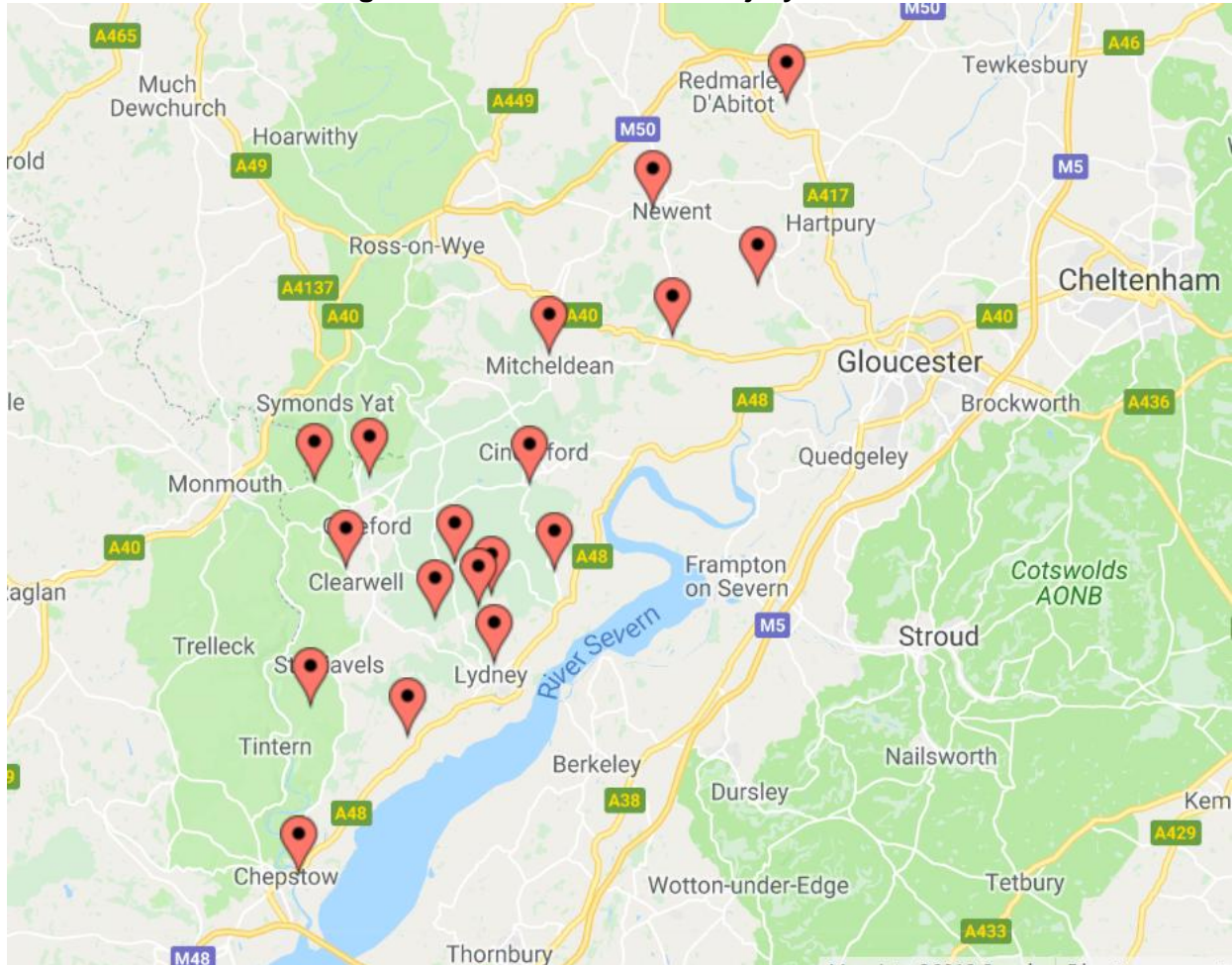


Applicants also answered a question about employment status. 10 jurors were employed or self-employed, 4 retired, 1 unemployed, and 3 self-classified as having an “other” employment status.

A characteristic of particular relevance to this citizens’ jury was the jurors’ postcode of

residence. The aim was to recruit people from across the Forest of Dean District, balancing geographical spread and population density with slight over-representation of people living in the central area between the three towns (who might be expected to not hold a prior preference on hospital location). A good spread of postcodes was achieved, as shown below.

Figure 2: Postcodes of the 18 jury members



Of the 18 jurors, nine had responded to an advertisement on the Indeed jobs website, four after reading an editorial in a local newspaper or news website, three from word of mouth, and two from seeing the public engagement booklet on the choice of hospital location.

Jury Questions

The jury were set a number of questions to answer (see below). These were agreed with Gloucestershire Care Services NHS Trust and NHS Gloucestershire Clinical Commissioning Group in advance of the jury.

1. Where should the new community hospital be built? Rank the following three towns in order of preference:
 - a. Cinderford
 - b. Coleford
 - c. Lydney
 - d. No preference

2. In reaching this recommendation, what were the most important considerations for the jury? [200 words max]
3. How strong is this preference? Which one of the following options best describes your view:
 - a. I have a strong preference for my first choice
 - b. I have a strong preference for my first or second choice
 - c. I do not have a strong preference for which town - the best site should be chosen
 - d. I do not have a strong preference
 - e. Other (please specify)

Q3 is optional, depending on result of voting on Q1 (see below).

4. If the decision is made to build the new hospital in the location recommended by the jury, does the jury recommend any actions are taken by the NHS (for example, to improve access to services)?
5. Once the location is chosen, suitable sites will be evaluated within 2 miles by road of the centre of the chosen town. Site selection criteria were identified in the recent public consultation.

When selecting a site, the following will be mandatory criteria:

- i. It is available and affordable
- ii. It is able to accommodate a building/buildings and parking provision which meet current and future service requirements.
- iii. It is accessible by car or public transport.
- iv. It will be able to secure appropriate planning permission.

When selecting a site, the following have been identified as desirable criteria:

- i. It enables completion of works by 2021/2022.
- ii. It offers the potential for pleasant surroundings, green space, views etc.
- iii. It is a site that offers a design and development which provides best value for money for the public purse.

Rank all the desirable criteria in order of importance.

6. Please give reasons for your answers to Q5 [100 words max]

Note that Q1 will be subject to a vote by individual members of the citizens jury, with first and second preferences specified, and the recommended location will be chosen using the "supplementary vote"¹ method. If second preferences are used because no candidate town achieves 50% of first preferences, the jury will be asked to answer Q3.

Note that the statements of reasons in Q2, Q4 and Q6 will be collective statements of the jury as a whole.

¹ This method is used, for example, to select the London Mayor: <http://www.parliament.uk/about/how/elections-and-voting/voting-systems/>

The jury process and outcomes

The jury process

The four-and-a-half day jury:

- Was facilitated by Kyle Bozentko, Executive Director of the Jefferson Center, and his colleague Sarah Atwood;
- Included evidence from a total of 21 [witnesses](#);
- Engaged jurors in group exercises and deliberation;
- Was open to, and watched by, public observers and participants used microphones which incorporated a hearing loop;
- Ended with an [end-of-jury questionnaire](#) at the end of day five.

The [Jurors' Report](#) and [citizens' jury schedule](#) describe what happened during the four-and-a-half days.

Introduction to the Juror Report

On day five of the jury proceedings, every member of the jury voted on the [jury questions](#) using either a paper form or an online survey. Kyle Bozentko then constructed the Juror Report from their votes and from the reasoning they had developed over the previous days (mostly from group work). The jurors were led page-by-page through the Juror Report, which was displayed on a large projector screen, to gain the jurors' acceptance that it fairly represented their views. The report is written in the words of the jury members. It was published at www.citizensjuries.org on 6 August, and is reproduced in full below.

The Jurors' Report does not include the jurors' answers to jury question 3 above on strength of preference. Their answers are summarised below:

How strong is your preference for the location(s) you chose?	No. of Respondents
a) I have a strong preference for my first choice	10
b) I have a strong preference for my first or second choice	5
c) I do not have a strong preference for which town - the best site should be chosen	0
d) I do not have a strong preference	1
e) Other (please specify)	2

Note that the jury's answer to jury question 2, on the most important considerations for the jury, is given in section 9 of their report below.

The Jurors' Report

Forest of Dean Citizens' Jury: Jurors' Report

Preface

About this report

This is a report from the 18 members of the citizens' jury who met over four and a half days, from 13.00 30 July to 17.00 3 August, to hear evidence from a wide variety of witnesses, to deliberate together, and to reach a recommendation for the location of a new community hospital for the Forest of Dean. It was constructed using the words of the 18 jury members, from observations and statements they prepared together. A draft version was reviewed by jury members as part of the jury process on 3 August.

A full citizens' jury report which will include further information (e.g. jury recruitment) will be published in the papers for the 30 August meeting of Gloucestershire Clinical Commissioning Group and Gloucestershire Care Services NHS Trust to decide on the new hospital location.

Statement to our Neighbours

We were asked to complete a difficult task, with the understanding that some people are disappointed at the closure of two community hospitals.

The jury was a far-reaching in-depth exercise, where we experienced a wide-range of information allowing us to make an educated decision and one we can be confident has been evaluated. It was a rare and beautiful opportunity to work with an impressively diverse, fair representation of people from across the Forest of Dean. We have enjoyed every minute contributing to our joint thoughts and feelings for the best hospital location.

Everybody worked hard to ensure that the jury considered the Forest as a whole, what as many people as possible were able to access the new hospital. We recognised the limitations, specifically to the large geographical area this hospital is expected to cover. While intense, the jury was an absorbing process which everyone completely committed to. The jury process asked us to test our fair-mindedness and encouraged us to look at the decision of a future hospital location from a wide range of angles.

We received and reviewed myriad evidence pertaining to hospital location - both generally and as it related to the proposed locations. We received information in respect to demographics, equality, population growth, and transport to name a few. Witnesses, who were not to advocate for any particular location, remained un-biased, forcing us to deliberate about how their presentations would inform our choice of hospital location. We assessed and re-assessed the options for each location repeatedly with great dedication.

It is important for everyone to know that the jury was carried out in un-biased way. We were treated well and protected from outside influence and public observers treated us with respect.

The citizen's jury is a worthwhile exercise irrespective of what is done with our recommendation by NHS bodies and enabled us to create a fair representation of our views. The process was enlightening and gave us an interest in getting more involved in local interest issues in future.

We appreciated the opportunity to raise our opinions and have them considered by others in the Forest. Furthermore, it's been a friendly environment where we have met loads of new

people and characters. People from all ages and locations have come together to envision our shared future. Furthermore, we enjoyed the food, location, and view and appreciated that the onlookers who were observing the jury did so respectfully. We want to thank the organisers and facilitators (Citizens' Juries c.i.c. and Jefferson Center) for treating us with respect and assisting us in making a difficult decision.

We have a great amount of pride for the Forest of Dean and managed to learn even more about the Forest, its people, resources, and towns which is reflected in our very hard work over 4 and a half days. We hope you use this information as you consider your own position about this important issue.

Our recommendations

1) We recommend Cinderford for the hospital location by a majority vote of 8 out of 18 jurors, compared to Coleford (5 votes) and Lydney (5 votes).² Coleford had more second preference votes than Lydney.

2) Our most important reasons for choosing Cinderford were, in order of importance:

- Area of highest deprivation in terms of health and disability and unhealthy behaviours, therefore statistically more likely to need and use Cinderford Hospital. Over 35% more illness, over 15% unhealthy behaviours
- Cinderford is central to the whole of the Forest
- More central location for staff who live throughout the FOD
- It is the geographic centre and can provide a Forest environment
- Cinderford has two A roads as primary routes to Gloucester in case of road closures
- Large percentage of people over 65 and over 85.

3) If the decision is made to build the new hospital in the location recommended by the jury, we recommend the following supplemental actions are undertaken by the NHS to best serve the Forest of Dean District:

1. Improving transport accessibility options for communities throughout the region and ensuring accessibility for drop-offs, transfers, and other transport needs
2. Considering how to incorporate on-site amenities (such as a cafe or a chemist) to maximise the benefits of the new hospital
3. Ensuring that a full range of necessary and suitable services are provided and that the new hospital is adequately staffed
4. Planning for future use and needs of the entire Forest of Dean in the design and size of the building.

4) Desirable Site Criteria

Here is our ranking of the desirable site criteria we were asked about - in order of importance with 10, 4, and 4 first preference votes respectively:

1. It is a site that offers a design and development which provides best value for money for the public purse

² The Supplementary Vote system was used. As Cinderford did not have more than half the first preference votes, and there was a tie for second, two scenarios were tested. Firstly, Lydney was eliminated and second preferences for those who voted Lydney were assigned to Cinderford and Coleford (resulting in 9 votes to 8 respectively). Then Coleford was eliminated and second preferences for those who voted Coleford were assigned to Cinderford and Lydney (resulting in 11 votes to 6 respectively).

2. It offers the potential for pleasant surroundings, green space, views, etc.
3. It enables completion of works by 2021/2022

Criteria 2 above was the second preference of the jury overall, and the jury's reasoning might be best summed up by the juror who said:

“Although I believe that natural spaces and greenery are also important, I think that spending is important, as the least amount of resources spent on building the hospital will mean more resources are kept once the hospital is built and can go into nursing cost etc.”.

Jury Process and Findings

1) Context

Candace Plouffe of Gloucestershire Care Services NHS Trust was asked to present contextual information for the jury and their work:

- a) Where we are (e.g. decision made for one hospital, etc.)
- b) Where we are going (what the new hospital will provide)
- c) How we will get there (role of jury, how decision will be made, site selection, etc.)

Candace Plouffe's slides are available online in the [citizens' jury materials \(30 July\)](#) published on the www.FoDhealth.nhs.uk website.

2) Presentations from town representatives (in the order they presented)

a) Lydney

- Five witnesses from Lydney (Angela Davies, Tony Midgley and John Thurston of Friends of Lydney Hospital, Brian Pearman of Lydney Town Council, and Stefan Scheuner, GP) presented the case for Lydney being the location of the new hospital.
- Jury Product
Lydney is well-suited because of:
 - Friends of Lydney Hospital
 - The desire to offer future services e.g. endoscopy – Lydney has potential to grow and attract staff due to infrastructure
 - Friends could raise money for new units
 - It has the support of medical professionals and is an established hospital location
 - Lydney is the location best able to give support to those in need (very old and very young) in particular.

b) Coleford

- Two witnesses from Coleford (Marilyn Cox and Nick Penny of Coleford Town Council) presented the case for Coleford being the location of the new hospital.
- Jury Product
Coleford is well-suited because of:
 - The green environment with natural beauty
 - New site and keen to prove they can do it
 - Good public transport links
 - Benefit from hospice location research
 - Positive impact on deprivation of area.

c) Cinderford

- Chris Witham of Cinderford Town Council presented the case for Cinderford being the location of the new hospital.
- Jury Product
Cinderford is well-suited because:
 - More central location for staff who live throughout the Forest of Dean
 - Due to the location, it can serve the forest and further into Gloucestershire
 - It is the area of highest deprivation in terms of health and disability and unhealthy behaviours, therefore more likely to need and use a Cinderford hospital
 - Good infrastructure for patients and staff – giving good access.

The slides from the three towns are available online in the [citizens' jury materials \(31 July\)](#).

3) Understanding Who Patients Are

a) Rebecca MacLean of Gloucestershire County Council

- The presenter was asked to speak about the population profile of the Forest of Dean District including age, location and health characteristics and needs
- Juror observations and important information related to patients and population of the Forest of Dean:
 - With a current population of 85,000, FOD is growing, especially in South, Coleford and Lydney areas with population density weighted towards the southern end of the Forest
 - A big population of people over 65 and this trend looks as if it will rise in the future; although there is no current predomination of over 65 of 85s in any of the 3 possible locations – spread fairly evenly throughout FOD
 - High deprivation will result in higher number of services being needed
 - Deprivation from health and disability is in central and southern areas
 - Cinderford has a large percentage of people over 65 and over 85
 - Highest proportion of 0-4 are within Lydney and Sedbury/Tutshill who access care much more than older people.

b) Julie Goodenough: Gloucestershire Care Services NHS Trust

- The presenter was asked to speak about the profile of current community hospital users (e.g. % over 65) and how this varies according to the service (e.g. inpatients, minor illness and injury)
- Juror observations and important information related to community hospital services in the Forest of Dean:
 - 96% of residents (only 13 excluded) requiring admission to a community hospital were admitted to the Dilke or Lydney
 - Very few Forest residents are admitted to community hospitals outside of the Forest
 - Current permanent staff retained and goal is that services offered will continue to be offered in a future hospital although it will remain flexible to meet future needs of the population
 - Streamlined services i.e. one x-Ray Unit fully staffed versus 2 X-ray units rarely staffed
 - 80% of admissions to community hospitals are from aftercare of acute hospitals making transport links even more important 80% of beds are taken for aftercare of acute patients

- Radiographer still not employed by FOD: staffing issues may still occur
- Reduction in beds will suffice (it is said) due to new approaches such as sufficient aftercare to reduce bed-stay and other options
- Donated assets belong to NHS
- Higher proportion of urgent cases are in younger age categories – likely to continue to increase given housing development
- The age demographic of the Dilke seems older age groups whilst Lydney is younger.

The slides from these two witnesses are available online in the [citizens' jury materials \(31 July\)](#).

4) Travel Times

a) Malcolm Oswald, Citizens' Juries CIC:

- The witness was asked to speak about car travel times and public transport travel times
- 8 reference places spread across the Forest of Dean had been chosen and maps commissioned to show, for each of the three potential locations (Cinderford, Coleford, Lydney):
 - The shaded area that could be reached from the location in 30 minutes by road
 - The shaded area that could be reach the location by public transport in 90 minutes by 08.30 prior to a 09.00 hospital appointment
 - The shaded area that could be reached from the location in 90 minutes from 10.30 following the 09.00 hospital appointment
 - The shaded area that could be reach the location by public transport in 90 minutes by 13.30 prior to a 14.00 hospital appointment
 - The shaded area that could be reached from the location in 90 minutes from 13.30 following the 14.00 hospital appointment
- A set of statements were presented to show, for each of the 8 reference places and each of the three locations:
 - Which journeys could be made in 30 minutes by car
 - Which journeys could be made in 90 minutes by public transport
- Jurors reached conclusions about which of the 8 reference places were well served by each of the three locations
 - a) Cinderford
 - Cinderford is well suited to serve the southern region by car because Lydney could reach the hospital in 30 minutes
 - Cinderford is well suited to serve the Northern region because Newent and in Mitcheldean could reach the hospital in 30 minutes by car based on this information
 - Cinderford is well suited to serve the central region by car because Cinderford, Parkend and Coleford can be reached in 30 minutes
 - Cinderford is well suited to serve the southern region by public transport because 3 out of 4 journeys from Lydney to the hospital can be achieved in 90 minutes
 - Cinderford is well suited to serve the central region by public transport because Coleford and Cinderford can be reached in 90 minutes

- Cinderford is well suited to serve the Northern region by public transport because 3 out of 4 journeys from Micheldean to the hospital can be achieved in 90 minutes

Not well-suited

- Cinderford is not well suited to serve the Northern region by car because Redmarley could not reach this hospital in 30 minutes based on this information
- Cinderford is not well suited to serve the southern region by car because Sedbury cannot reach the hospital in 30 minutes
- Cinderford is not well suited to serve the southern region by public transport because only 1 out of 4 journeys from Sedbury to the hospital could be achieved in 90 minutes
- Cinderford is not well suited to serve the Northern region by public transport because neither Newent nor Redmarley can reach the hospital in 90 minutes

b) Coleford

- Coleford is well suited to serve the Northern region by car because Cinderford, Parkend and Coleford can be reached in 30 minutes
- Coleford is well suited to serve the southern region by car because both Lydney and Sedbury could reach the hospital in 30 minutes providing normal traffic
- Coleford is well suited to serve the southern region by public transport because Lydney can reach the hospital in 90 minutes
- Coleford is well suited to serve the central region by public transport because Coleford, Parkend and Cinderford can reach the hospital in 90 minutes
- Coleford is well suited to serve the Northern region by car because Mitcheldean could reach it in 30 minutes by car

Not well-suited

- Coleford is not well suited to serve the Northern region by car because Redmarley and Newent could not reach this hospital in 30 minutes by car
- Coleford is not well suited to serve the Northern region by public transport because people from Newent and Redmarley cannot reach this hospital in 90 minutes
- Coleford is not well suited to serve the Northern region by public transport because Mitcheldean could reach it in 90 minutes 1 out of 4 journeys
- Coleford is not well suited to serve the southern region by public transport because only 1 out of 4 journeys from Sedbury could reach the hospital in 90 minutes

c) Lydney

- Lydney is well suited to serve the Northern region by car because Mitcheldean can reach this hospital in 30 minutes
- Lydney is well suited to serve the central region by car because Cinderford, Parkend and Coleford can be reached in 30 minutes by car
- Lydney is well suited to serve the southern region by car because both Lydney and Sedbury can reach the hospital in 30 minutes
- Lydney is well suited to serve the central region by public transport because Coleford, Parkend and Cinderford can reach the hospital in 90 minutes

- Lydney is well suited to serve the southern region by public transport because people from Lydney can reach the hospital within 90 minutes
- Lydney is well suited to serve the southern region by public transport because Sedbury can do 3 out of 4 journeys to the hospital within 90 minutes

Not well-suited

- Lydney is not well suited to serve the Northern region by car because Redmarley and Newent could not reach the hospital in 30 minutes
- Lydney is not well suited to serve the Northern region by public transport because Newent and Redmarley people cannot reach the hospital in 90 minutes and people from Mitcheldean can reach this hospital in only 1 in 4 journeys in 90 minutes.

c) Anne-Marie Daniels, Forest Routes

- i) The presenter was asked to speak about community transport and non-emergency ambulance services
- ii) Juror observations and important information related to community transport and non-emergency ambulance services in the Forest of Dean:
 - 78,000 passengers a year transported by community transport proves it is an essential service that we cannot afford to lose, covering rural areas which would otherwise be cut-off and an aim of providing low-cost services
 - Hospital location will not impact the services provided, however they are already at capacity and have no further scope in system. High transportation costs are a major problem which for FOD residents and not going to improve in the nearest future, with a recent increase in patients
 - Community transport provision can change rapidly due to the dependence on volunteers (i.e. drivers and helpers) especially in light of the EU Regulations coming in to force.
 - There is a possibility of losing the volunteer transport services in future due to policy changes (such as through EU changes) and lack of volunteers.
 - Arriva transport does not work as needed always.

d) Jury discussion about why travel times matter with panel contributors: Stephanie Bonser (SW Ambulance Services Trust), Lorraine Millwater (Lydney Dial a Ride), and Paul Weiss (GP). The panel were invited to comment on reasons identified by the jury on why travel times matter.

The slides from Malcolm Oswald and Anna-Marie Daniels are available online in the [citizens' jury materials \(1 August\)](#). No slides were used for the panel discussion on why travel times matter.

5) How will the choice of town affect local communities (e.g. planning, economic regeneration, traffic etc.)?

- a) Nigel Gibbons, Forest of Dean District Council and Neil Troughton, Gloucestershire County Council
- b) Nigel Gibbons was asked to speak about:
 - whether the District Council has a preference for one location
 - the planning priorities for each town that the jury should take into account

- how the population of the three towns is expected to change over the next 10 years
 - how important economic re-generation will be for each town if selected
 - how important an impact on the environment (e.g. pollution) in the town if selected
 - any other impacts that the District Council would want the jury to take into account.
- c) Neil Troughton was asked to speak about traffic.
- d) Juror observations and important information related to how choice of town will affect local communities.
- Cinderford is well-suited because:
 - The infrastructure and accessibility required to deliver services is already in place, along with it being a central area with two major roads to transfer to/from acute care
 - Cinderford is the geographic centre and can provide a forest environment
 - Regeneration and infrastructure are ready and available due to development of the northern quarter
 - Cinderford is not well-suited because:
 - Cinderford population is projected to be overtaken in future forecasts
 - Main roads into and out of Cinderford are not easily accessible and would not improve with expansion
 - Levels of congestion on the transport network with e.g. parking on both sides of the road
 - Roads in and out are inaccessible during bad weather
 - Coleford is well-suited because:
 - Coleford has good network and existing bus routes
 - Coleford needs and would benefit from regeneration
 - Centralisation of services.
 - Coleford is not well-suited because:
 - Coleford is constrained by landscape
 - The hospital could be a negative impact on population, traffic, pollution in the villages on the outskirts of the Coleford area
 - There is less planned development in Coleford than Cinderford in Lydney
 - Lydney is well-suited because:
 - Lydney has infrastructure in place to accommodate additional traffic flow: has rail line and bypass
 - Lydney would be prime for regeneration and has plenty of brownfield sites
 - Lydney already have well-developed plan for population increase
 - transport facilities are good for transferring acute patients to other areas
 - Lydney is not well-suited because:
 - Lydney already has congestion as you enter town from the North
 - Lydney is not central to Forest of Dean District.

The slides from Nigel Gibbons and Neil Troughton are available online in the [citizens' jury materials \(1 August\)](#).

6) How the choice of town affects the NHS

- a) Dr. Paul Weiss (GP) speaking on behalf of the NHS
- b) Paul Weiss was asked to speak about:

- Whether the NHS had a preferred location, and which, if any, of the three towns offers the greatest opportunities for cross-site working, co-location with existing services
 - Whether the NHS would take any particular additional actions if one or other of the towns were chosen anything else (e.g. consider building a new health centre somewhere else).
- c) Juror observations and important information related to impact on NHS and Healthcare Service Delivery:
- It is important for everyone to know which GPs and how many serve their area
 - Services will not change so considerations include staff merging and presence of various services/specialties
 - Cinderford is well suited because:
 - A GP service and dialysis unit will be or are already in Cinderford
 - Specialised services are already at Dilke, along with new developments such as a dialysis unit
 - Coleford is well-suited for co-location with existing services, but not well-suited because it would be disruptive to relocate NHS services and staff
 - Lydney is well-suited because:
 - Lydney is easily accessible
 - Lydney has a nice new health centre.

The slides from Paul Weiss are available online in the [citizens' jury materials \(2 August\)](#).

7) Results of Public Engagement

- a) Caroline Smith of Gloucestershire Clinical Commissioning Group & Katie Parker, Gloucestershire Care Services NHS Trust
- b) The two witnesses were asked to speak about results of the recent public engagement on the location of the new hospital with the public and staff
- c) Juror observations and important information related to results of recent public engagement:
- Public
- The data from the survey is limited due to the demographic of the respondents
 - Thought it was a fair consultation about people's reasoning and concerns (not a referendum which was outside NHS remit)
 - Public respondents:
 - Want the hospital in a central location and easily accessible
 - Would prefer new hospital close to their own area or home
 - Want future population growth to be taken into consideration
- Health professionals
- There was a high response from staff at both locations focussing on sustainable services not necessarily a single location
 - Health professional respondents:
 - Are mostly concerned with accessibility and central location
 - Whilst not having a favourite location, they identified free parking as a bonus and want the hospital to be accessible to existing and future population growth.

The slides from Caroline Smith and Katie Parker are available online in the [citizens' jury materials \(2 August\)](#).

8) Distinctions Between Towns in Regard to the Equality Act

- a) Hari Sewell, HS Consultants
- b) The presenter was asked to explain the requirements that public bodies should have regard to under the Equality Act when making decisions, and the results of the equality impact assessment carried out on the implications of the choice of hospital location.
- c) Juror observations and important information related to choice of town and equalities:
 - The choice of location needs to be fair to everyone and suitable for everyone if disabled
 - There is no impact on the 9 protected characteristics in respect of the three locations, taking account of the responses to the engagement
 - It is important for people to know the percentages and characteristics shown by each of the towns for age and gender and that there are no differences in characteristics
 - The statistics on the public engagement are skewed because there wasn't a wide enough cross-section of the population answering the questionnaire.

The slides from Hari Sewell are available online in the [citizens' jury materials \(2 August\)](#).

9) What the jury considered the most important factors to take into account in making their decision

The jury reviewed and discussed the criteria for choosing a location provided by the NHS following the public consultation.³ They also were provided with information from witnesses about other factors that could be taken into account in their recommendation. On the last day, jury members were given up to three votes each to use to rank the factors they considered to be most important in their choice of location (with number showing strength of juror support):

- Travel times and accessibility (14 votes)
- Community support (12 votes)
- Who are patients (12 votes)
 - Population now & future
 - Areas of deprivation
- District boundaries and inclusion (6 votes)
- Planning, development, regeneration (4 votes)
- Current & future NHS services (2 votes)
- Existing services, care partners & co-location (1 vote).

10) "Case" for each town (drawn from reasoning and ranking of importance by jurors)

- a) Case for Cinderford, the recommended town Cinderford (with level of support from jurors)
 - Area of highest deprivation in terms of health and disability and unhealthy behaviours, therefore statistically more likely to need and use Cinderford Hospital. Over 35% more illness, over 15% unhealthy behaviours (8 votes)
 - Cinderford is central to the whole of the Forest (6 votes)
 - More central location for staff who live throughout the FOD (6 votes)
 - It is the geographic centre and can provide a Forest environment (5 votes)

³ Available at: <http://www.fodhealth.nhs.uk/wp-content/uploads/2018/05/FoD-Health-Location-Site-Criteria.pdf>

- Cinderford has two A roads as primary routes to Gloucester in case of road closures (4 votes)
- Large percentage of people over 65 and over 85 (4 votes)
- Specialised services are already at Dilke, along with new developments such as the dialysis unit (3 votes)
- Cinderford has the highest area of deprivation (3 votes)
- Age demographic: Dilke seems older age groups, Lydney younger (3 votes)
- The regeneration and infrastructure are ready and available due to the development of the Northern Quarter (3 votes)
- Because of the location, it can serve the Forest and further into Gloucestershire (2 votes)
- Cinderford is well suited to serve the Southern Region by car because Lydney could reach the hospital in 30 minutes (2 votes)
- The infrastructure and accessibility required to deliver services is already in place, along with central area and two major roads for transfer to/from acute care (2 votes)
- Northern Quarter investment in college and roads should improve road network and bus services (2 votes)
- You can be born in a car park and still be a Forester (1 vote).

b) Case for Coleford

- Coleford has good network and existing bus routes (14 votes)
- Green environment with natural beauty (10 votes)
- New site and keen to prove they can do it (7 votes)
- Good public transport links (6 votes)
- Co-location with existing services (5 votes)
- Centralisation of services (4 votes)
- Coleford needs and would benefit from regeneration (3 votes)
- Benefits from hospice location research (1 vote)
- Coleford is well suited to serve the southern region by car because both Lydney and Sedbury could reach the hospital in 30 minutes providing normal traffic (1 vote)
- Coleford is well suited to serve the southern region by public transport because Lydney can reach the hospital in 90 minutes (1 vote).

c) Case for Lydney

- Friends of Lydney Hospital (15 votes)
- Lydney already have well-developed plan for population increase (13 votes)
- Transport facilities are good for transferring acute patients to other areas (8)
- Lydney has infrastructure in place to accommodate additional traffic flow: has rail line and bypass (3)
- Desire to offer future services e.g. endoscopy – Lydney has potential to grow and attract staff due to infrastructure (4 votes)
- Has good infrastructure for patients and staff – giving good access (3 votes)
- Friends could raise money for new units (2 votes)
- Lydney would be prime for regeneration and has plenty of brownfield sites
- Lydney is easily accessible (1)
- Has support of medical professionals and is an established hospital location (1 votes).

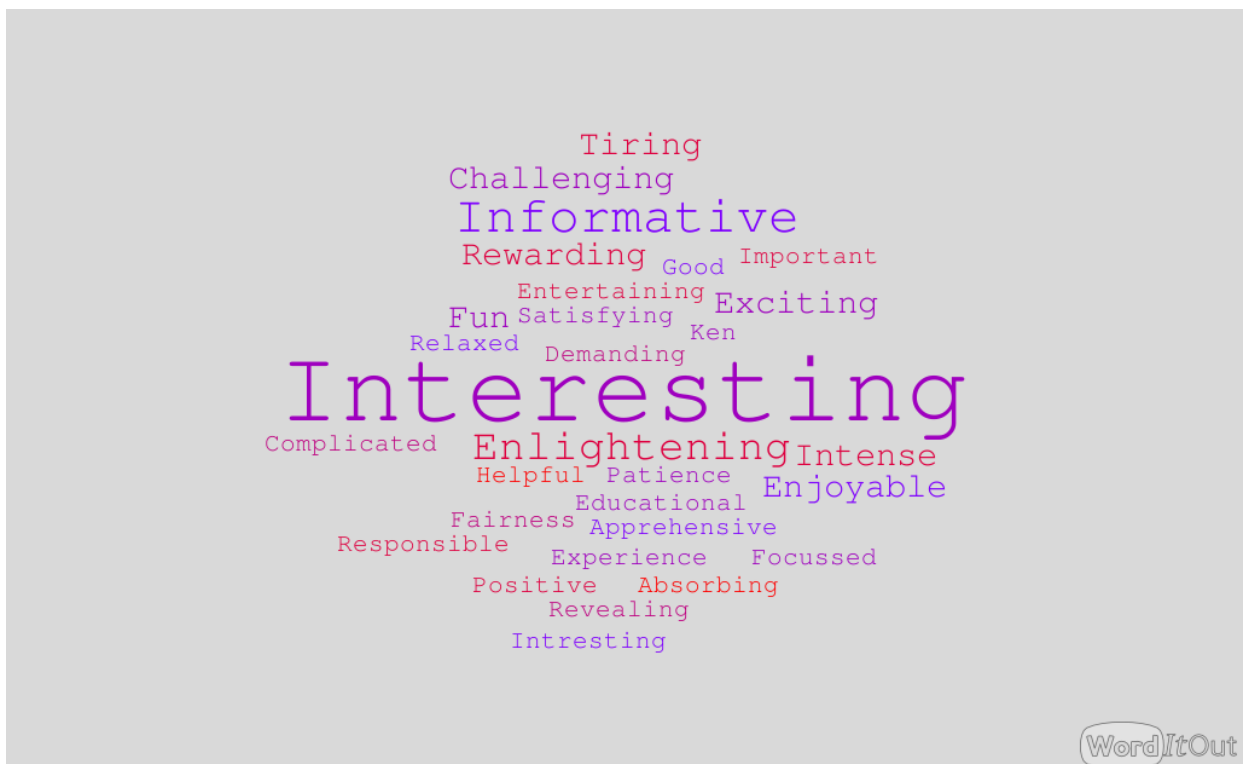
End-of-jury questionnaires results

Members of the jury completed the end-of-jury questionnaire at the end of day 5. The questionnaire design and results are available at: www.citizensjuries.org. However, the main results were:

- 15 out of 18 jurors found the jury process “very interesting” (the other three people said it was “mostly interesting”)
- 17 out of 17 jurors said that they never felt that the two facilitators tried to influence them towards particular conclusions (one person skipped this question)
- 13 out of 17 people said that people other than the facilitators and the town representatives never tried to influence them towards particular conclusions (with two people saying "perhaps occasionally" and two people saying "sometimes");
- 16 out of 17 people said that nobody ever tried to influence them outside of the jury room (with one person saying “perhaps occasionally”)
- 16 out of 17 people said they felt that they “were provided with a fair balance of information about the location of the new hospital” (with one person saying “no, I thought there was some other form of bias or some important information was missing”)
- 10 people “strongly agreed”, and 6 people “mostly agreed” with the statement “This citizens' jury has been a good and fair way to choose the location of the new community hospital”

Jury members were also asked to give three words to sum up their experience on the jury. The “word cloud” below shows the result (words with a larger font were said by more people).

Figure 3: Word cloud



Appendix 1: further information about the jury

The Citizens' Jury Method

Like much public policy, choosing the location of a new hospital is a complex area with a lot of evidence and reasons to consider. Surveys and focus groups provide useful information about what the public thinks, but they are not mechanisms to inform people. A citizens' jury can tell policymakers what members of the public think once they become more informed about a policy problem and have had an opportunity to discuss it with others. In a citizens' jury, a broadly representative sample of citizens is selected to come together for a period of days, hear expert evidence, deliberate together, and reach conclusions about questions they have been set.

They are a form of "deliberative democracy", based on the idea that individuals from different backgrounds and with no special prior knowledge or expertise can come together and tackle a public policy question. A citizens' jury is a particularly relevant method for informing public bodies making value judgements. Some organisations have used citizens' juries to *make* policy decisions, though in general they are advisory. Members of juries are not elected and cannot be made accountable for decisions. Public bodies can therefore legitimately deviate from a jury's recommendations, justifying why they differ. Melbourne City Council appointed a citizens' jury to determine how to allocate its A\$5 billion budget, and the council is implementing virtually all of the jury's recommendations.[2] The [Citizens' Council in Ireland](#) is larger than a citizens' jury with 99 citizens. The council was appointed by the Irish government and are considering many important questions. Its first topic was whether to change the Irish Constitution on abortion, and its advice to change the Irish Constitution was fed back to a parliamentary committee leading to the May 2018 national referendum.

Witnesses

All witnesses received a copy of an [expert witness briefing document](#) to guide them in what they should say to the jury. Nine impartial witnesses were chosen to provide relevant information to the members of the jury to enable them to answer the jury questions. In addition, three people took part in a panel session about why travel times matter, and three representatives from community transport organisations came on 1 August to help answer questions after the presentation on community transport. Most presentations lasted about 15-20 minutes plus time for questions.

Each of the three towns were also invited to present the case for their town to be the location of the new hospital; there were five representatives from Lydney, two representatives from Coleford and one from Cinderford. Each witness answered questions posed by the jurors. Towns were given a 30 minute presentation slot on 31 July, and a 5 minute slot for closing remarks on 2 August, plus time to answer juror questions.

The slides used by all presenters were reviewed for bias in advance by Malcolm Oswald and by the oversight panel (see below). Changes were then made to the slides to address issues identified.

The oversight panel

The oversight panel was appointed to help monitor and minimise bias. The panel reviewed the citizens' jury questions and design, and much of the detailed jury documentation, including the end-of-jury questionnaire and the slides from the presentations by the witnesses, resulting in some changes to these materials before the jury. The oversight panel

members, chosen for their interest in the topic and lack of conflict of interest in any particular jury outcome, were:

- Jem Sweet, [Gloucestershire VCS Alliance](#)
- Julia Butler-Hunt, [Healthwatch Gloucestershire](#);
- Alan Grant, [Forest of Dean District Council](#).

The brief for the oversight panel is available at: www.citizensjuries.org. Each member of the panel completed a questionnaire about bias, which are published at the same site. The three panel members were “completely satisfied” that the jury was designed to minimise bias.

Citizens’ jury commissioners and project team

The citizens’ jury was commissioned by Gloucestershire Care Services NHS Trust and NHS Gloucestershire Clinical Commissioning Group. The lead commissioners from these two bodies - Des Gorman, Katie Parker, Becky Parish and Caroline Smith – worked closely with Malcolm Oswald to plan the event.

The project manager of the citizens’ jury was Dr. Malcolm Oswald, Director of Citizens Juries CIC and an Honorary Research Fellow in Law at The University of Manchester. Chris Barnes and Amanda Stevens from Citizens Juries CIC recruited and supported the jurors, and the jury process. The jury facilitators were Kyle Bozentko, Executive Director of the [Jefferson Center](#) in the USA and his colleague Sarah Atwood. Kyle, Sarah and Malcolm, with support from Jefferson Center colleague Larry Pennings, worked together to design the jury.

Appendix 2: Citizens' Jury Schedule

Day	Subject	Speaker
30/7 PM	Welcome, introduction and simulation exercise	
	Context: community hospitals in the Forest of Dean and jury role	Candace Plouffe, Gloucestershire Care Services NHS Trust
	How the jury will make a decision	
31/7 AM	The case for Lydney	John Thurston, Friends of Lydney Hospital; Brian Pearman, Lydney Town Council; and others
	The case for Coleford	Nick Penny and Marilyn Cox, Coleford Town Council
	The case for Cinderford	Chris Witham, Cinderford Town Council
31/7 PM	Population data: who are the patients?	Becky MacLean, Gloucestershire County Council
	Forest of Dean Community Hospital Services: Now and Future	Julie Goodenough, GCS NHS Trust
01/8 AM	Travel analysis: <ul style="list-style-type: none"> - driving and public transport to and from the three towns - other hospitals providing similar services to the new hospital 	Malcolm Oswald, Citizens Juries CIC
	Travel analysis: community transport and other non-emergency transport services in the Forest of Dean	Anna-Marie Daniels, Forest Routes
01/08 PM	Travel analysis: why travel times matter	Panel: Lorraine Millwater, Lydney Dial-a-Ride; Paul Weiss, GP; Stephanie Bonser, SW Ambulance Services Trust
	How will the choice of town affect local communities (e.g. planning, economic regeneration, traffic etc.)?	Nigel Gibbons, Forest of Dean District Council; Neil Troughton, Gloucestershire County Council
	How does the choice of town affect the NHS?	Paul Weiss, GP
02/08 AM	What were the results of the recent public engagement (of public and staff) on the choice of location?	Katie Parker, GCS NHS Trust; Caroline Smith, NHS Gloucestershire CCG
02/08 PM	Does the Equality Act have an impact on the choice of town?	Hari Sewell, HS Consultancy
	Brief closing remarks from the three towns (Cinderford, then Coleford, then Lydney)	Representatives from the three towns
	Assessing the three locations	
03/08 AM	Recommending a location for the hospital	
03/08 PM	Ranking criteria for choosing a site	

Appendix 3: Bibliography

1. Armour, A., *The citizens' jury model of public participation: a critical evaluation*, in *Fairness and competence in citizen participation*. 1995, Springer. p. 175-187.
2. Reece, N. *Experiment pays off: Melbourne People's Panel produces quality policy*. 2015 [cited 15 Feb 2015]; Available from: <http://www.theage.com.au/comment/experiment-pays-off-melbourne-peoples-panel-produces-robust-policy-20150628-ghzoz4.html>.