NHS
Greater Manchester

Specialist Cardiac Surgery Consultation - Get involved

Instructions

- Write as **clearly** as you can— these forms might be scanned
- Write your answers in the same language as this form

Section A: Specialist Cardiac Surgery Consultation Survey

This survey is one of the ways you can get involved in the NHS Greater Manchester consultation on the future of specialist cardiac surgery.

Our consultation document sets out what work has been carried out so far, including:

- Why we think these services need to change
- How we developed the proposals
- What the options would mean in practice
- The differences and similarities between the options.

To be able to fully answer the survey questions, it is suggested that you read the background information on our project page.

You can download the survey in easy read, large print (font 16) and also request a paper copy be sent to you either via email or post. We'll even include a freepost envelope so you can return it to you free of change.

This survey has been created by NHS Greater Manchester. For our privacy notice, please visit: the NHS Greater Manchester integrated care website.

The questions are also available to answer online via the QR code.

If you need any help to complete or return the survey, please contact our team on 07786 673762 where you can leave a

voicemail for us, or you can send a WhatsApp message (including voice notes) or text message on the same number. Alternatively, you can email us at gmhscp.engagement@nhs.net

Section B

1. **How do you want to share your feedback with us?** (optional)
   We welcome people to share their feedback on specialist cardiac surgery in different ways. You can either answer the questions in the survey or upload a file on the online platform. We accept letters, evidence, pictures, voice notes, BSL videos or any way you feel best helps you share your feedback with us.

Section C

2. **How would you best describe yourself?** (optional)
   **Only choose one option.*

- ○ I have had specialist cardiac surgery
- ○ I am waiting for specialist cardiac surgery
- ○ I am a family member/carer of someone who is awaiting or has received specialist cardiac surgery
- ○ I am a member of staff working with patients who access vascular services
- ○ I work in a cardiac surgery team
- ○ I am an interested member of the public
- ○ I represent an organisation
- ○ Other

If 'Other', please specify

Section D: Our preferred option

The preferred option is: a single cardiac surgery centre based at Wythenshawe Hospital. This means:

- All elective, non-elective and emergency cardiac surgery is delivered from one site at Wythenshawe
- Associated specialist services such as Transcatheter Aortic Valve Implantation and Electrophysiology (TAVI and EP) are co-located with surgery
- Other hospitals, including MRI, continue to provide non-surgical cardiology services as part of a networked model.

This option is already operating in practice.

Section E

3. **To what extent do you agree or disagree that this is the right option?** (optional) Please choose one
   **Only choose one option.*

   ○ Completely agree
   ○ Agree
   ○ Neither agree nor disagree
   ○ Disagree
   ○ Completely disagree
   ○ I don't know

4. **Please tell us why you think that?** (optional)

Section F

5. **Are there any other options which you think we should consider?** (optional) Please share with us in detail any ideas or suggestions you want us to consider.

Section G

6. **Are there any reasons why the proposed changes might affect you in any way more than others?** (optional)

   For example, this could be because of a disability, caring responsibilities, for financial reasons or any other reasons.

   Please share as much information as you like

Section H: Your travel

We want to try and reach those individuals from groups and communities who might be disproportionately impacted by these changes, identified in the equality impact assessment.

A travel impact assessment identifies a significant impact for those patients travelling from some parts of Greater Manchester, where journey times are likely to be longer.

This will specifically impact those travelling to Wythenshawe by public transport.

7. How would you get to the hospital for your appointment? (optional)

This question focuses on what your journey would look like if you were going to Wythenshawe

**Choose as many as you like*

- ○ Bicycle
- ○ Car/van or motorcycle (driven by yourself)
- ○ Car/van or motorcycle (driven by family/friend/carer
- ○ Taxi
- ○ Patient transport
- ○ Public transport (bus/tram/train)
- ○ Walk

○ Other

If 'Other', please specify

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8. **On a scale of 1-5 how much would moving all vascular surgery to Wythenshawe impact your travel?** (optional)

Tell us the level of impact you think this will have on your journey. This may include things like:

- Journey times
- Parking
- Amount of public transport you need to get
- How you travel
- Who supports you

Pick a number

○ *1 (No impact)*
○ *2 (Low impact)*
○ *3 (Medium Impact)*
○ *4 (High Impact and*
○ *5 (I dont know) only*

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9. **Please tell us why you think that?** (optional)

10. **Is there anything you think we should consider for those who may be impacted?** (optional)

    You've told us about the level of impact and what that looks like, this is space for you to tell us anything you think we can do to help

Section I

11. Do you have any other thoughts or comments you would like to share with us? (optional)

Section J

12. Please upload your file here. (optional)

If you'd like to share any files, voicenotes, BSL videos or evidence, please do so via our online engagement platform or by emailing is: gmhscp.engagement@nhs.net

You can also use the online version of this form.

Section K: About you

Our "About you" page has 12 equality monitoring questions.

We need your help to monitor our engagement and who is answering our surveys.

We want to make sure our diverse communities across Greater Manchester get involved.

Information shared is anonymous and we do not link the information you share with anything that could identify you. Please scroll past any questions that you do not want to answer or feel you cannot answer.

These questions are optional and if you do not want to answer them you can click next which will take you to the end of the survey.

13.Where do you live? (optional)

**Choose as many as you like*

- ○ Bolton
- ○ Bury
- ○ Manchester
- ○ Oldham
- ○ Rochdale
- ○ Salford
- ○ Stockport
- ○ Tameside
- ○ Trafford
- ○ Wigan
- ○ East Cheshire (including: Alsager, Audlem, Congleton, Crewe, Holmes Chapel, Knutsford, Macclesfield, Middlewich, Nantwich, Poynton and Wilmslow)
- ○ Other: Somewhere else (please tell us where)

If 'Other', please specify

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14. What is your age? (optional)

**Only choose one option.*

- ○ 18 - 24
- ○ 25 - 34
- ○ 35 - 44
- ○ 45 - 54
- ○ 55 - 64
- ○ 65 - 74
- ○ 75 - 84
- ○ 85+
- ○ Prefer not to say
- ○ Other

If 'Other', please specify

15.What is your ethnicity group? (optional)

Please select from the list or self describe your ethnicity by clicking Other ethnic group (please share)

**Only choose one option.*

- ○ Asian or Asian British – Bangladeshi
- ○ Asian or Asian British – Chinese
- ○ Asian or Asian British – Indian
- ○ Asian or Asian British - Pakistani
- ○ Asian or Asian British - Any other Asian background
- ○ Black or Black British – African
- ○ Black or Black British – Caribbean
- ○ Black or Black British - Any other Black background
- ○ Mixed - White – Asian
- ○ Mixed - White and Black African
- ○ Mixed - White and Black Caribbean
- ○ Mixed - Any other mixed background
- ○ White (e.g. English, Welsh, Scottish, Northern Irish, British)
- ○ White - Eastern European
- ○ White - Gypsy, Roma or Irish Traveller
- ○ White – Irish
- ○ White - Any other White background
- ○ Other ethnic group – Arab
- ○ Prefer not to say
- ○ Other ethnic group (please share)

If 'Other ethnic group (please share)', please specify

16.How do you identify your gender? (optional)

17. Is your current gender identity the same as the gender you were described at birth?
(optional)

**Only choose one option.*

- ○ Yes
- ○ No
- ○ Don't Know
- ○ Prefer not to say

18. What is you relationship status? (optional)

**Only choose one option.*

- ○ Co-habiting - Living with partner
- ○ Married / Civil Partnership
- ○ Single
- ○ Widow / Widower
- ○ Prefer not to say
- ○ Other

If 'Other', please specify

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19. What is you religion? (optional)

**Only choose one option.*

- ○ Athiest / None
- ○ Baha`i
- ○ Buddhist
- ○ Christian

- ○ Hindu
- ○ Jain
- ○ Jewish
- ○ Muslim
- ○ Pagan
- ○ Sikh
- ○ Zoroastrian
- ○ Prefer not to say
- ○ Other religion (please share)

If 'Other religion (please share)', please specify

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20. Which of the following options best describes how you think of yourself? (optional)

**Only choose one option.*

- ○ Asexual
- ○ Bisexual
- ○ Gay Man
- ○ Heterosexual / Straight
- ○ Lesbian / Gay Woman
- ○ Pansexual
- ○ Prefer not to say
- ○ Other

If 'Other', please specify

_____

21. Do you consider yourself to have a disability? (optional)

(A disability is a condition that affects an individual's ability to carry out normal day-to day activities. It can be a mental health or physical condition, visible or hidden, it can last 12 months or longer and be recurring. this includes long term conditions.)

**Only choose one option.*

- ○ Yes
- ○ No
- ○ Prefer not to say

22. If you answered "Yes" to having a disability can you tell us more about your disability?

(optional)

If you answered "no" or "prefer not to say" please scroll down to the next question.

Disability can include learning, Mental ill health, mobility, sensory needs as well as other disabilities, please self describe.

23. What is your employment status? (optional)

**Only choose one option.*

- ○ Employed / Self Employed
- ○ Unemployed
- ○ A student
- ○ Apprenticeship scheme or training
- ○ Long term sick or disabled
- ○ Homemaker looking after the family
- ○ In receipt of benefits
- ○ Voluntary work
- ○ Retired
- ○ Prefer not to say
- ○ Other

If 'Other', please specify

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24. Are you or have you ever been a member of HM Armed Forces? (Regular or Reservist)

(optional)

**Only choose one option.*

- ○ Yes, I am a current serving member of the Armed Forces
- ○ Yes, I am an Armed Forces Veteran (someone who has previously served in HM Armed Forces - regular or reservist)
- ○ No
- ○ Prefer not to say

25. Are you a carer? (optional)

**Only choose one option.*

- ○ Yes
- ○ No
- ○ Prefer not to say

What happens next

Once the consultation ends, the team will review all the information people have shared.

This will be used to help inform the decision on the future of Specialist Cardiac Surgery services.

The report and outcome of the work will be published on our project un der the new phase "what you told us".

To be kept up to date, click the **follow** button on the top right of the project page. You will need to sign in with an email to do this.