York and Scarborough Teaching Hospitals
NHS Foundation Trust

Extraordinary Meeting of the Board of Directors – Public

Wednesday 19th August 2026
Time: 2:15pm – 2:45pm
Venue: Boardroom, 2nd Floor Admin Block, York Hospital

York and Scarborough Teaching Hospitals
NHS Foundation Trust

Board of Directors Public Agenda

Item	Subject	Lead	Report/ Verbal	Page No	Time
1.	**Welcome and Introductions**	Chair	Verbal	-	2:15
2.	**Apologies for Absence** To receive any apologies for absence.	Chair	Verbal	-	
3.	**Declarations of Interest** To receive any changes to the register of Directors' interests or consider any conflicts of interest arising from the agenda.	Chair	Verbal	-	
4.	**Future of the Bridlington Care Unit (BCU)** To consider the report.	Medical Director	Report	3	2:20
5.	**Questions from the public received in advance of the meeting**	Chair	Verbal	-	-
6.	**Time and Date of next meeting** The next meeting held in public will be on 30 September 2026 at 9.30am at Scarborough Hospital.				
7.	**Exclusion of the Press and Public** 'That representatives of the press, and other members of the public, be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest', Section 1(2), Public Bodies (Admission to Meetings) Act 1960.				
8.	**Close**				2:45

York and Scarborough Teaching Hospitals
NHS Foundation Trust

Item 4

Report to:	Board of Directors
Date of Meeting:	19 August 2026
Subject:	Future of Bridlington Care Unit (BCU)
Director Sponsors:	Karen Stone, Medical Director
Author:	Haaris Mian, Associate Chief Operating Officer – Medicine Care Group

Status of the Report (please click on the appropriate box)

Approve ☒ Discuss ☒ Assurance ☒ Information ☒ Regulatory Requirement ☐

Trust Objectives

☒ To provide timely, responsive, safe, accessible effective care at all times.
☒ To create a great place to work, learn and thrive.
☒ To work together with partners to improve the health and wellbeing of the communities we serve.
☐ Through research, innovation and transformation to challenge the ways of today to develop a better tomorrow.
☒ To use resources to deliver healthcare today without compromising the health of future generations.
☒ To be well led with effective governance and sound finance.

Board Assurance Framework

☒ Effective Clinical Pathways
☒ Trust Culture
☒ Partnerships
☒ Transformative Services
☐ Sustainability Green Plan
☒ Financial Balance
☒ Effective Governance

Implications for Equality, Diversity and Inclusion (EDI) *(please document in report)*

☐ Yes

☐ No

☒ Not Applicable

Executive Summary:

This paper presents the outcome of the review of Bridlington Care Unit (BCU), the structured engagement and assurance process undertaken following consideration by the East Riding Health, Care and Wellbeing Overview and Scrutiny Sub-Committee (OSC), and recommendations regarding the future model of care for patients who have historically accessed support through the unit.

Bridlington Care Unit was established during the COVID-19 pandemic as a temporary step-down facility to support patient flow from acute hospitals and provide additional capacity for patients who were medically optimised but unable to return home due to ongoing rehabilitation, recovery or social care needs. The unit played an important role during a period of exceptional pressure across the health and care system and provided a safe and effective means of supporting discharge from acute hospital settings.

Since BCU was established, national policy, clinical evidence and local health and care services have evolved significantly. Increasing emphasis has been placed on prevention, proactive care, neighbourhood health, Home First principles, discharge-to-assess models, community rehabilitation and integrated health and social care services. Across the NHS, the direction of travel has been towards supporting people in the least restrictive setting appropriate to their needs, promoting independence and reducing unnecessary reliance on hospital-based care. This is important because there is strong evidence that outcomes for patients are better when receiving home-based care rather than staying longer than necessary in an in-patient hospital bed.

At the same time, the commissioning arrangements which originally supported BCU have changed, with funding ceasing for the unit at the end of March 2026, requiring the Trust and wider health and care system to consider the most appropriate long-term model of care for this patient cohort. The review has therefore considered not only the sustainability of the current service model, but whether continuing to provide hospital-based step-down care remains the best way of meeting the needs of patients who no longer require acute hospital treatment.

In May 2026, following consideration of proposals relating to the future of BCU, the OSC recommended a delay to implementation, further assurance regarding community readiness and a programme of engagement involving patients, residents, staff, partners and stakeholders. The Trust Board subsequently agreed a three-month pause to allow this work to be undertaken jointly with Humber and North Yorkshire Integrated Care Board (HNYICB) and wider system partners.

The engagement process demonstrated strong support for local healthcare services, highlighted the importance of ensuring vulnerable patients continue to receive appropriate support, and reinforced the need for clarity regarding how future care would be delivered should BCU cease operating. Feedback consistently emphasised the importance of maintaining high-quality local healthcare provision whilst ensuring that patients continue to receive safe, effective and person-centred care.

The Humber and North Yorkshire Integrated Care Board has provided assurance that a broader system model is being developed to support the patient cohort historically served by BCU. This includes continued investment in proactive care and prevention, neighbourhood health programmes, comprehensive geriatric assessment, frailty pathways, Same Day Emergency Care, improved discharge planning and strengthened integration between acute, community and social care services. The collective aim of these developments is to reduce avoidable hospitalisation, support recovery closer to home and maximise patient independence.
Having considered the recommendations of the OSC, the evidence supporting contemporary models of rehabilitation and recovery, findings form the engagement and the assurance provided by system partners, the recommended option is to permanently close Bridlington Care Unit and replace the current inpatient step-down model with community, rehabilitation, discharge-to-assess and Home First pathways.

This recommendation is based on the conclusion that patients who are medically optimised and no longer require acute hospital treatment should, wherever possible, be supported through integrated community-based services that promote recovery, independence and care closer to home. The recommendation should therefore be viewed not as the removal of support for this patient group, but as the transition from a historical hospital-based model of care to a modern, integrated and community-focused model that is better aligned to contemporary evidence, national policy and the future direction of health and care services.

Separate work will continue through the development of the Trust's Clinical Strategy and wider service planning processes to consider future opportunities for the ongoing development of Bridlington Hospital and healthcare services for the population of Bridlington and the surrounding area. This paper does not seek decisions regarding future service developments on the Bridlington Hospital site; rather, it seeks a decision regarding the future model of care for the patient cohort currently supported through BCU.

Recommendation:

The Board is asked to:

1. **Note** the outcome of the engagement programme undertaken following the recommendations of the East Riding Health, Care and Wellbeing Overview and Scrutiny Sub-Committee (OSC).
2. **Note** the feedback received from patients, local residents, staff, stakeholders and partner organisations during the engagement process.
3. **Note** the assurance provided by Humber and North Yorkshire Integrated Care Board regarding the continued development of community, neighbourhood health, rehabilitation and Home First pathways to support the patient cohort currently accessing Bridlington Care Unit services.
4. **Agree** that the current Bridlington Care Unit model no longer represents the most appropriate long-term model of care for patients who no longer require acute hospital treatment and are medically optimised for discharge.
5. **Approve the permanent closure of Bridlington Care Unit** and the cessation of the current inpatient step-down service model.
6. **Approve** the transition of patients who would previously have accessed Bridlington Care Unit to community, rehabilitation, discharge-to-assess and Home First pathways, delivered in partnership with health and care system partners.
7. **Approve** the development and implementation of a detailed transition plan, including:
    - Workforce engagement and consultation arrangements;
    - Patient transition and pathway implementation plans;
    - Community capacity and readiness assurance;
    - Performance, quality and patient outcome monitoring arrangements; and

- Reporting arrangements to the Trust Board and East Riding OSC.

8. **Note** that separate work will continue through the Trust Clinical Strategy and service planning processes to consider future service development opportunities for Bridlington Hospital, informed by the feedback received through the wider engagement process.

Report History (Where the paper has previously been reported to date, if applicable)		
Meeting/Engagement	**Date**	**Outcome/Recommendation**

1. Introduction and Background

Bridlington Care Unit (BCU) was established during the COVID-19 pandemic as a temporary step-down facility designed to support patient flow from Scarborough Hospital and provide additional capacity for patients who were medically optimised but unable to return home due to ongoing recovery, rehabilitation or social care needs. The service played an important role during a period of exceptional demand and enabled the health and care system to safely manage increased numbers of patients requiring ongoing support following acute hospital treatment.

The unit was commissioned at a time when additional bed-based capacity was required across the system. Since its establishment, however, national policy, clinical evidence and local service models have evolved significantly. Across the NHS there has been an increasing emphasis on prevention, proactive care, reducing avoidable hospital admission, supporting recovery closer to home and promoting patient independence through Home First and Discharge to Assess approaches.

Patients historically admitted to BCU have, by definition, completed the acute phase of their treatment and no longer required specialist hospital care. The purpose of the unit has therefore been to provide support for patients whose needs are better described as rehabilitation, reablement, recovery and onward care planning rather than acute medical treatment.

The question facing the Trust and wider system is therefore not whether BCU has historically provided value, but whether continuing to operate a hospital-based step-down unit remains the most appropriate way of meeting the needs of this patient population in the future.

2. Case for Change

2.1 Changes in Models of Care

Health and care services have increasingly moved towards supporting people in the least restrictive setting capable of meeting their needs. Evidence consistently demonstrates that, where clinically appropriate, patients recover more effectively when supported within their own homes, communities and familiar environments, rather than remaining within institutional settings for prolonged periods.

National policy increasingly supports:

- Home First principles.
- Discharge to Assess.
- Community rehabilitation.
- Neighbourhood Health models.
- Integrated health and social care delivery.
- Prevention of avoidable admissions and dependency.

The health and care system is therefore increasingly focused on ensuring that hospital beds are reserved for patients requiring hospital care and that recovery, rehabilitation and assessment occur in the most appropriate setting.

2.2 Improving Outcomes for Patients

The population currently supported through BCU consists predominantly of patients who no longer require acute hospital intervention. Whilst BCU has provided safe care, continued reliance upon a hospital environment can contribute to loss of independence, physical deconditioning and delays in recovery for some patients.

The preferred future approach seeks to maximise independence, promote recovery closer to home and reduce unnecessary dependency upon hospital-based services wherever safe and clinically appropriate. This reflects both national policy and local system ambitions to improve outcomes through integrated community care.

2.3 Development of Community and System Capacity

Since BCU was established, additional developments have taken place across the health and care system.

These include:

- Expansion of Neighbourhood Health initiatives.
- Enhanced frailty pathways.
- Same Day Emergency Care (SDEC) services.
- Earlier discharge planning arrangements.
- Closer integration between acute, community and social care services.
- Ongoing programmes to strengthen community and social care support.

Whilst challenges remain, these developments provide opportunities to support patients differently than was possible when BCU was originally established.

2.4 Commissioning and Sustainability

The original commissioning arrangements supporting the service have changed and funding for the continuation of BCU has not been maintained. This has required the Trust and system partners to consider how best to meet the needs of this patient cohort going forward.

The review has therefore considered not only affordability and sustainability, but more importantly whether continuing the current model represents the most effective use of available resources to achieve the best outcomes for patients.

3. Overview and Scrutiny Committee Review

On 11 May 2026 the East Riding Health, Care and Wellbeing Overview and Scrutiny Sub-Committee considered the proposed closure of BCU. Following extensive discussion, the Committee made three recommendations for the Trust and the ICB:

1. Delay implementation of the proposed closure until the readiness of alternative services had been demonstrated.

2. Undertake a structured public engagement exercise to provide clarity to residents that the proposal related solely to the closure of Bridlington Care Unit and not to wider services at Bridlington Hospital, and to communicate the longer-term strategic vision for the hospital site.
3. Develop a monitoring framework in order to capture the operational impact of the change.

4. Trust and System Response to Overview and Scrutiny Committee Recommendations

Following consideration of the recommendations made by the East Riding Health, Care and Wellbeing Overview and Scrutiny Sub-Committee (OSC) in May 2026, the Trust Board agreed to pause implementation of the proposed closure of Bridlington Care Unit and to undertake a programme of further work in partnership with Humber and North Yorkshire Integrated Care Board (HNYICB) and wider system partners. The purpose of this pause period was to address the issues raised by OSC and ensure that any future recommendation was informed by engagement, evidence and system assurance.

Response to Recommendation 1: Assurance Regarding Community Readiness

A key concern raised by OSC and through wider feedback from the public and other stakeholders related to whether community and system services would be able to safely support patients who would previously have accessed BCU should the service cease operating. In response, the Trust and HNYICB have undertaken further work to understand the future model of care for this patient cohort and the wider system arrangements that would support implementation.

The Integrated Care Board has provided assurance regarding the continued development of neighbourhood health services, proactive care and prevention, comprehensive geriatric assessment, frailty pathways, Same Day Emergency Care, improved discharge planning processes and strengthened integration between acute, community and social care services. Together, these developments are intended to reduce avoidable hospitalisation, support recovery closer to home and maximise patient independence. The Board is asked to consider this assurance as part of its decision-making process.

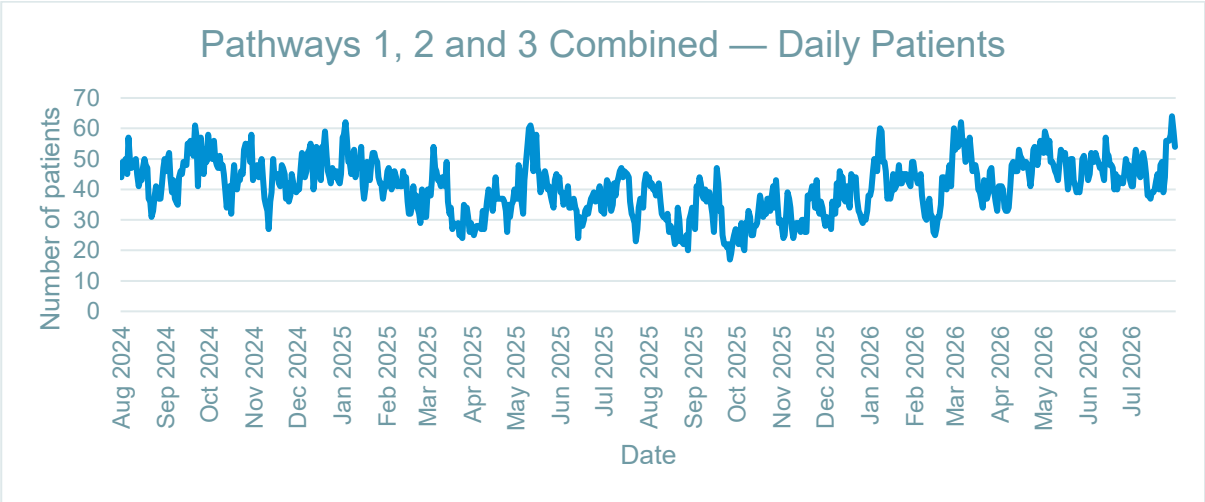
Response to Recommendation 2: Structured Engagement Programme

In line with OSC recommendations, a comprehensive programme of engagement was undertaken involving patients, residents, elected members, staff, stakeholders and partner organisations. The engagement process sought views on the proposed changes, concerns regarding future care arrangements and broader priorities for healthcare services within Bridlington.

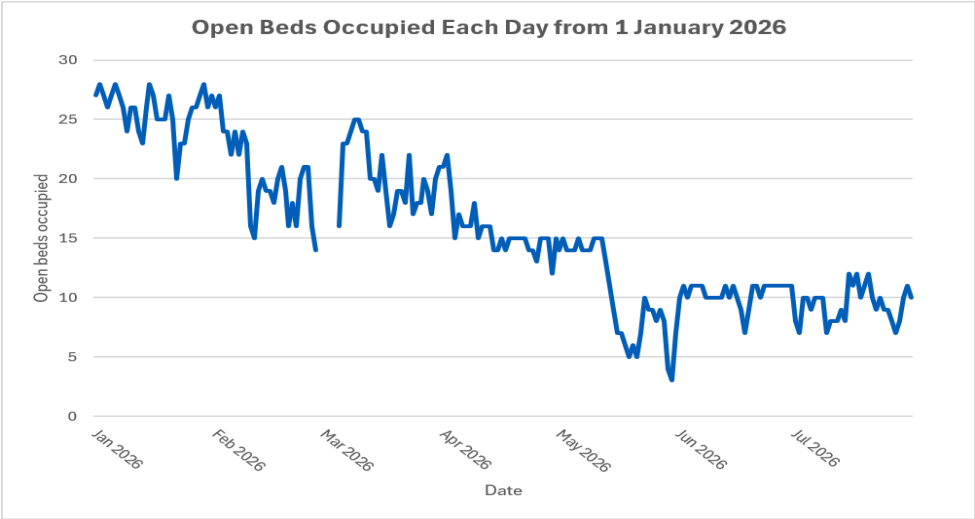
This work has provided valuable insight into the views of local communities and stakeholders and has directly informed the development of the options appraisal and recommendations presented within this paper. The findings of the engagement exercise are summarised within Sections 5 and 6.

Response to Recommendation 3: develop a monitoring framework to capture the operational impact of the change

As part of the assurance work requested by OSC, the Trust has reviewed the impact of the reduction in BCU bed capacity on discharge pathways from Scarborough Hospital. The data shows that the number of patients on Pathways 1, 2 and 3 has not increased during the period of reduced BCU capacity. This provides additional assurance that the reduction in BCU beds has not resulted in a measurable increase in patients awaiting onward care through these discharge pathways at Scarborough Hospital.



There continue to be challenges in identifying sufficient numbers of clinically appropriate patients for transfer to Bridlington Care Unit (BCU). The unit takes admissions for any patient meeting the criteria who is ready to leave the acute site, this means patients are not exclusively form the Bridlington area. Although the bed base was reduced to a maximum of 15 beds in May 2026, actual utilisation has remained significantly below this level, with the unit operating at an average occupancy of approximately 10 patients per day since May. Importantly, this reduction in BCU capacity has not been associated with any sustained increase in Pathway 1, 2 or 3 patients at Scarborough Hospital beyond expected seasonal variation, providing further assurance that reduced BCU capacity has not resulted in additional discharge pathway pressures across the acute site.



OSC also requested greater clarity regarding the future of healthcare services in Bridlington and reassurance that consideration of BCU should sit within a wider context of local healthcare provision.

Through the engagement process, Bridlington residents and other stakeholders were given the opportunity to discuss broader healthcare priorities and future opportunities for Bridlington Hospital. Feedback demonstrated strong support for maintaining and strengthening local healthcare services, particularly diagnostics, outpatient services and planned care. The engagement findings will continue to inform the Trust's wider Clinical Strategy and future service planning processes.

Whilst this paper acknowledges the importance of the wider future of Bridlington Hospital, its purpose is not to determine future service developments on the site. Rather, it seeks a decision regarding the future model of care for the patient cohort currently supported through Bridlington Care Unit. Separate work will continue through the Trust's Clinical Strategy and associated planning processes to consider future development opportunities for healthcare services in Bridlington.

Conclusion

The Trust believes that the work undertaken during the pause period has responded appropriately to the recommendations made by OSC, providing additional assurance regarding community readiness, undertaking a comprehensive programme of engagement and contributing to a broader discussion regarding the future of healthcare services in Bridlington. This paper therefore presents the outcome of that work and seeks a decision regarding the future configuration of care for the cohort historically supported through Bridlington Care Unit.

5. Engagement Process

During the pause, a structured programme of engagement was undertaken involving residents, patients, local elected members, health and care partners, staff and community stakeholders. This was supported by a multi-agency working group.
The purpose of the engagement was to:

- Reassure residents as to the future of Bridlington Hospital and provide clarity to residents that the previous closure proposal related solely to the Bridlington Care Unit and not to wider services at Bridlington Hospital, or the hospital as a whole.
- Provide opportunities for patients, staff, local residents and stakeholders to be involved in the planning of the provision of relevant services and in the development of the proposals for changes to the way services may be provided.
- Communicate the longer-term strategic vision for the Bridlington Hospital site.
- Showcase the positive health and social care work happening in Bridlington.

The engagement was designed to enable feedback to be gathered on the Trust’s emerging clinical strategy, alongside broader health and care services provided for the Bridlington population and, specifically, the BCU. The feedback has been considered as part of the development of the proposals for changes to the Bridlington Care Unit. It will also be used to inform future developments in Bridlington.

Feedback was gathered from multiple sources during the engagement period. These include:

- Survey (available in hard copy and online)
- Engagement events in Bridlington
- Written feedback, letters and submissions

- Existing patient experience data

6. What We Heard

The engagement has provided a clear and consistent account of the issues that matter most to Bridlington residents, patients, staff and stakeholders, with strong local support for Bridlington Hospital and a clear desire to see the site better used and developed.

The feedback demonstrated the strength of feeling about the proposed closure of the Bridlington Care Unit. Survey responses show high awareness of the proposal and strong opposition to closure, while also showing that most respondents understood that the proposal related to the BCU and not to Bridlington Hospital as a whole. This suggests the engagement has helped provide clarity on the scope of the proposal, while also underlining the need for further communication and engagement about the future role of the hospital site.

Although opposition to the BCU proposal is significant, the findings suggest that many people support the principle of helping people return home as soon as it is safe to do so. Their concerns are focused less on the principle of care at home, and more on whether community services, social care packages, rehabilitation, communication with families and discharge arrangements are sufficiently robust to make this safe and reliable in practice.

Some misunderstanding remains regarding the role of the BCU and the clinical decision-making that sits behind discharge planning. In particular, further communication is needed to make clear that the BCU is for people who have already been assessed by hospital clinical teams as medically ready to leave acute hospital care, and that any future model must include clear safeguards so people are supported in the right setting, with the right care, at the right time.

Across all engagement channels, the most consistent concerns related to access, transport, communication, confidence in community capacity, the coordination of care across organisational boundaries, and the need for a clearer long-term vision for Bridlington Hospital. These issues go beyond the BCU proposal and should inform the Trust's developing clinical strategy and wider system planning for Bridlington.

The engagement has also highlighted a need to rebuild trust. Residents want greater transparency about decisions, clearer evidence about the options considered, and an ongoing relationship with the Trust and system partners rather than engagement only at the point of potential service change.

The full engagement report is available in appendix A.

7. Future Model of Care for the BCU Patient Cohort

Feedback received throughout the engagement process clearly demonstrated strong support for local healthcare services in Bridlington and a clear desire to ensure that vulnerable patients continue to receive appropriate support. A recurring concern was that closure of Bridlington Care Unit (BCU) could result in patients being left without suitable alternatives or experiencing poorer access to care. Therefore there needs to be assurance that the needs of this patient cohort will continue to be met safely and appropriately.

The proposed future model is not based on withdrawal of care or support. It is based on providing care differently, through a more integrated, community-focused and Home First approach. Under this model, patients who would previously have been considered for admission to BCU would instead be supported through a combination of discharge planning, community rehabilitation, community nursing, social care, frailty pathways, neighbourhood health approaches and other integrated community-based interventions appropriate to individual need, working in partnership with the providers on community services and adult social care in the Bridlington locality, as the trust is not the provider of these services.

The model recognises that patients who are medically optimised and no longer require acute hospital treatment should, wherever clinically appropriate, be supported to recover in their own home or usual place of residence. This approach is intended to promote independence, reduce avoidable dependency on bed-based care and support recovery in the least restrictive setting capable of meeting patient need. The future model therefore represents a shift away from a hospital-based step-down approach towards a more integrated, person-centred model of care delivered closer to home.

7.1 ICB Assurance and System Development

Humber and North Yorkshire Integrated Care Board (HNYICB) has confirmed its commitment to supporting the population to maintain health and wellbeing wherever possible. This includes a Home First approach, where the health and care system seeks to maintain people in their normal place of residence, reduce the need for hospitalisation and promote independence.

For the patient population historically supported through BCU, HNYICB has described a system model delivered across several levels. The first level is proactive care and prevention, with opportunities to intervene earlier to improve outcomes, reduce episodes of health crisis and reduce avoidable hospital attendance. Primary care and NHS-funded community services are working to improve access to comprehensive geriatric assessment and improve management of long-term conditions through the expanding programme of Neighbourhood Health.

The second level is improved integration between hospital services, community services and primary care, particularly at the front door of the hospital. HNYICB has highlighted that comprehensive access to Frailty Same Day Emergency Care linked to community care has been seen to reduce the need for hospital admission and reduce long-term dependency.

The third level relates to opportunities across the whole health and care system to improve discharge planning and transfer of care, particularly for patients with complex needs. This includes earlier hospital discharge planning, earlier engagement with wider system partners and a stronger role for community and social care in proactively supporting patients to move through the hospital system.

All of the initiatives described above build on existing service provided in the community for people in Bridlington. The majority of patients leaving hospital do so without stepping down into other bedded units, such as BCU. The NHS commissioned community services, run by City Healthcare Partnership (CHCP), are available through the East Riding of Yorkshire. They provide a range of services such as District Nursing and community therapies (physiotherapy and occupational therapy). This includes community Palliative Care, linked to the support provided from St. Catherine’s Hospice. Where needed to

accommodate some step-down patients into a bedded facility, community services have access to the use of local care homes and other community facilities.

The key elements of the system response therefore include:

- **Neighbourhood Health:** expanding proactive, place-based support for patients with frailty and long-term conditions.
- **Comprehensive Geriatric Assessment:** improving access to holistic assessment for older people and people with complex needs.
- **Frailty Same Day Emergency Care:** strengthening front-door frailty pathways linked to community care to reduce avoidable admissions and long-term dependency.
- **Earlier discharge planning:** ensuring hospital discharge planning starts earlier and involves community and social care partners at the appropriate stage.
- **Community pull model:** enabling community and social care services to work proactively to support patients through the hospital system and reduce length of stay.
- **Social care improvement programme:** supporting more effective use of community resources through additional investment in NHS community care services and the county-wide social care improvement programme initiated following the 2025 Care Quality Commission social care inspection in East Riding.

This assurance is important because it demonstrates that the proposed closure of BCU is not being considered in isolation. Rather, it forms part of a wider system direction of travel towards prevention, proactive care, community support, improved discharge planning and reduced reliance on hospital-based care for patients who no longer require acute hospital treatment.

7.2 Implications for the BCU Patient Cohort

This will be supported by ongoing monitoring of discharge pathway demand, including Pathways 1, 2 and 3 at Scarborough Hospital, to ensure any operational impact is identified and escalated promptly. The future pathway for patients who would previously have accessed BCU will therefore be based on assessment of individual need and use of the most appropriate community, rehabilitation, social care or discharge-to-assess pathway available. This includes support to avoid admission where possible, earlier identification of discharge needs, and proactive involvement of community and social care partners to support safe transfer from hospital when acute care is no longer required.

This does not remove the need for robust implementation planning. If the Board approves the recommended option, the Trust and system partners will need to confirm monitoring arrangements and assurance mechanisms to ensure patients continue to receive safe, timely and appropriate care.

7.3 Relationship with the Wider Future of Bridlington Hospital

The engagement process also identified strong support for the continued development of healthcare services in Bridlington, including interest in diagnostics, planned care, outpatients and other appropriate local services. Those issues remain important and will continue to inform the Trust's Clinical Strategy and future service planning processes.

However, this paper does not seek decisions regarding the future use of the Bridlington Hospital estate or the detailed future configuration of wider services on the site. The decision required through this paper is specifically whether BCU should continue to operate as an inpatient step-down unit, or whether the patient cohort historically supported through BCU should instead be supported through community, rehabilitation, discharge-to-assess and Home First pathways.

8. Options Appraisal

The review considered the options available following completion of the pause period, engagement programme and further system discussions.

The focus of the appraisal was not the future use of the Bridlington Hospital estate, but rather the future model of care for patients who currently access BCU.

Option 1: Continue Operating Bridlington Care Unit

Description

This option would continue the current Bridlington Care Unit (BCU) model and maintain bed-based step-down provision for patients who are medically optimised but remain unable to leave hospital.

Continuation of the service would require resolution of the commissioning and funding arrangements that supported the unit historically and agreement regarding the long-term sustainability of the model. The option would also require consideration of the future bed base, workforce requirements and operating model following the period of pause and service transition activity already undertaken.

Benefits

- Maintains a familiar service model for patients, carers and staff.
- Avoids immediate service change.
- Retains inpatient step-down provision within Bridlington.
- Responds to concerns from some stakeholders who favour retaining a bed-based model locally.

Risks and Limitations

- Continues reliance upon a hospital environment for patients who no longer require acute hospital care.
- Offers limited alignment with Home First, Discharge to Assess and neighbourhood health approaches.
- Does not fully reflect the direction of travel across health and social care services.
- Does not maximise opportunities to support independence and recovery within community settings.
- Requires a sustainable commissioning and funding solution to support ongoing delivery of the service.

Workforce and Financial Implications

Continuation of BCU would require further detailed workforce planning and review of current staffing arrangements. Since the original implementation plans were paused, workforce changes and redeployments have taken place and consideration would need to be given to whether previously redeployed staff would be required to return to the service, alongside any impact this may have on receiving services.

Re-establishment of the full BCU model would require further workforce planning, review of staffing arrangements following recent redeployment activity, and identification of a sustainable funding mechanism to support ongoing service provision.

The continuation of a dedicated bed-based step-down facility may also have implications for the deployment of staffing, financial resources and operational capacity across the wider organisation.

Assessment

Whilst operationally straightforward in principle, this option largely maintains the status quo and does not address the strategic, clinical and system-wide rationale underpinning the review. It also requires resolution of workforce, commissioning and sustainability challenges associated with continuation of the service.

This option is not recommended.

Option 2: Closure of Bridlington Care Unit and Transition to Community and Home First Pathways (Preferred Option)

Description

Under this option, Bridlington Care Unit would permanently cease operating as an inpatient step-down facility and the current model of care would be replaced by a redesigned pathway delivered through community, rehabilitation, social care, discharge-to-assess and Home First services.

Patients who would historically have been admitted to BCU would instead access support through a combination of community-based interventions designed to maximise independence, promote recovery and avoid unnecessary reliance upon hospital-based care. This approach would use the current community rehabilitation pathways, frailty services, and developed further through neighbourhood health developments, integrated discharge arrangements and wider system improvements.

Rationale

The recommendation is based on the conclusion that whilst BCU has provided a valuable service, a hospital-based step-down unit is no longer considered the most appropriate long-term model of care for this patient cohort.

Patients supported through BCU are medically optimised and no longer require specialist acute hospital treatment. The evidence reviewed throughout this process suggests that recovery, rehabilitation and assessment can often be delivered more effectively through

community-based approaches that promote independence and enable individuals to remain within their own homes and communities wherever clinically appropriate.
The recommended option therefore represents both:

- Closure of the current BCU service; and
- Introduction of a redesigned model of care intended to better meet the needs of the patient cohort.

Transitional Arrangements

Implementation of this option would be undertaken through a structured transition programme developed jointly with health and care partners.
This would include:

- Agreement of an implementation date following Board approval.
- Cessation of new admissions to BCU following the agreed implementation date.
- Individual review of all patients remaining within the service to ensure appropriate onward care arrangements are in place.
- Use of alternative community, rehabilitation, discharge-to-assess and Home First pathways based on assessed patient need.
- Phased closure of beds as patients transition to alternative pathways.
- Workforce engagement, consultation and redeployment processes in line with organisational policies and procedures.
- Ongoing monitoring of patient outcomes, community capacity and system performance throughout implementation.

Assessment

This option provides the strongest alignment with:

- Home First principles.
- National discharge policy.
- Community rehabilitation.
- Neighbourhood health development.
- Integrated care models.
- Prevention and proactive care approaches.
- Long-term system sustainability.

This is the preferred option and is supported by the assurance provided by Humber and North Yorkshire Integrated Care Board regarding the continued development of neighbourhood health, frailty, rehabilitation, discharge and social care pathways that will support this patient cohort in the future.

Assessment Criteria	Weighting	Option 1: Continue Operating Bridlington Care Unit	Option 2: Close Bridlington Care Unit and Transition to Community & Home First Pathways (Preferred Option)
Patient Outcomes	High	Maintains the current inpatient model for medically optimised patients. However, patients remain in a hospital environment despite no longer requiring acute hospital treatment, with potential risks of deconditioning, dependency and delayed recovery.	Supports recovery in the least restrictive setting appropriate to need. Promotes independence, rehabilitation, recovery closer to home and reduced reliance on institutional care.
Alignment with National Policy	High	Limited alignment with Home First, Discharge to Assess and neighbourhood health approaches.	Strong alignment with national policy supporting Home First, community rehabilitation, integrated care and prevention of avoidable institutional care.
Clinical Sustainability	High	Continues a model whereby an acute hospital provider delivers ongoing non-acute step-down care.	Aligns with contemporary rehabilitation, recovery and discharge models, with care delivered through integrated community pathways.
Operational Sustainability	High	Maintains the existing service model but continues reliance on a dedicated inpatient step-down unit.	Supports delivery through a broader range of community, rehabilitation and discharge pathways and reduces reliance on a standalone inpatient model.
Workforce Sustainability	Medium	Requires continuation of a dedicated workforce model for the unit and resolution of workforce arrangements following the pause period.	Supports transition of workforce into substantive services and aligns staffing to broader health and care system provision.
Financial Sustainability	High	Requires continuation of an unfunded service model following changes in commissioning arrangements and ongoing financial support to maintain the service.	Supports transition away from the current commissioned model and reduces reliance on maintaining a dedicated bed-based service. The detailed financial implications will be set out separately within the paper.
Deliverability	High	Continuation of the existing model is operationally straightforward but requires resolution of longer-term	Deliverable through a phased implementation approach supported by community pathways, workforce plans

Assessment Criteria	Weighting	Option 1: Continue Operating Bridlington Care Unit	Option 2: Close Bridlington Care Unit and Transition to Community & Home First Pathways (Preferred Option)
		commissioning, workforce and sustainability issues.	and system partner engagement.
System Integration	High	Limited opportunity to further integrate care across acute, community and social care services.	Strong alignment with integrated care principles, neighbourhood health development, community rehabilitation and social care partnerships.
Stakeholder Acceptability	Medium	May be viewed positively by stakeholders who favour retaining inpatient services locally.	Requires careful communication and implementation but reflects the wider transformation of care towards community and Home First models. Feedback from engagement has highlighted the importance of ensuring clear alternatives are in place.
Long-Term Strategic Fit	High	Retains a model established to address specific pandemic and recovery-related pressures.	Reflects the long-term direction of travel for health and social care services, focusing on prevention, independence and care closer to home.

9. Recommended Way Forward

Having considered the feedback received through engagement, the recommendations of the East Riding Overview and Scrutiny Committee, discussions with system partners and the evidence supporting modern models of rehabilitation and recovery, the recommended way forward is:

Recommendation

To permanently close Bridlington Care Unit and replace the current inpatient step-down model with community, rehabilitation and Home First pathways for the patient cohort currently supported through the unit.
The recommendation is therefore both a decision to permanently close Bridlington Care Unit and a decision to discharge patients who are medically fit to leave the acute hospital into community-based models of care for the cohort currently served by the unit.

This recommendation recognises that:

- BCU has successfully supported patients and the wider system since its establishment.
- The needs of the cohort have evolved.

- The wider health and care system has evolved.
- Hospital-based step-down care is no longer considered the preferred long-term model for this patient group.
- Feedback through the engagement suggest that many people support the principle of helping people return home as soon as it is safe to do so.
- Patients should be supported to recover in the least restrictive setting capable of meeting their needs.
- Community and neighbourhood-based services provide a more sustainable and clinically appropriate future model of care.

Implementation Principles

Should the Board approve this recommendation, implementation would be undertaken jointly with health and care partners and would include:

- Confirmation of community pathway arrangements.
- Workforce engagement and consultation.
- Individual patient-centred transition planning.
- Monitoring of patient outcomes.
- Monitoring of system flow and operational performance.
- Ongoing reporting to the East Riding Overview and Scrutiny Committee regarding implementation and outcomes.

Conclusion

The recommendation is therefore not to discontinue support for this patient group, but to discontinue a care model that was established for a different set of circumstances and replace it with a model that better reflects contemporary evidence, national policy and the future direction of integrated health and care services.

10. Risks and Mitigations

Risk	Mitigation
Public concern regarding loss of local services	Clear commitment to investment in Bridlington Hospital and ongoing engagement
Community service readiness	Joint planning and assurance with system partners
Workforce impact	Redeployment planning and workforce engagement
Operational impact on patient flow	Ongoing monitoring and escalation arrangements
Reputational risk	Transparent decision making and publication of engagement findings
Confidence in future arrangements	Delivery of visible improvements and continued communication

The Board is asked to:

- **Note** the outcome of the engagement programme undertaken following the recommendations of the East Riding Health, Care and Wellbeing Overview and Scrutiny Sub-Committee (OSC).
- **Note** the feedback received from patients, local residents, staff, stakeholders and partner organisations during the engagement process.
- **Note** the assurance provided by Humber and North Yorkshire Integrated Care Board regarding the continued development of community, neighbourhood health, rehabilitation and Home First pathways to support the patient cohort currently accessing Bridlington Care Unit services.
- **Agree** that the current Bridlington Care Unit model no longer represents the most appropriate long-term model of care for patients who no longer require acute hospital treatment and are medically optimised for discharge.
- **Approve the permanent closure of Bridlington Care Unit** and the cessation of the current inpatient step-down service model.
- **Approve** the transition of patients who would previously have accessed Bridlington Care Unit to community, rehabilitation, discharge-to-assess and Home First pathways, delivered in partnership with health and care system partners.
- **Approve** the development and implementation of a detailed transition plan, including:
    - Workforce engagement and consultation arrangements;
    - Patient transition and pathway implementation plans;
    - Community capacity and readiness assurance;
    - Performance, quality and patient outcome monitoring arrangements; and
    - Reporting arrangements to the Trust Board and East Riding OSC.
- **Note** that separate work will continue through the Trust Clinical Strategy and service planning processes to consider future service development opportunities for Bridlington Hospital, informed by the feedback received through the wider engagement process

York and Scarborough Teaching Hospitals
NHS Foundation Trust

Report title:	Bridlington Engagement Report
Date of Report:	14 August 2026 (V1)
Author:	Lucy Brown, Director of Communications

1. Background

The Bridlington Care Unit at Bridlington Hospital was established in 2021 as part of the system's response to the COVID-19 pandemic, providing step-down capacity for patients who were medically fit for discharge but unable to return home due to delays in care arrangements. The model was designed as a temporary intervention to support flow within the acute hospital system, particularly at Scarborough Hospital.

In May 2026 the trust began a consultation with staff on the BCU with a view to closing the Unit. Although neither the Trust or the Humber and North Yorkshire Integrated Care Board (ICB) regard the closure as a substantial variation in service, there is still an expectation that engagement takes place with key stakeholders including East Riding Council's Health, Care and Wellbeing Overview and Scrutiny Sub-Committee, the local MP, and other interested parties.

Despite best intentions of colleagues, the correct sequence of events for this engagement was not followed as colleagues were advised of the change before stakeholders had been briefed, resulting in them learning of the plans before being formally notified and before discussions could take place.

On 11 May 2026 the East Riding of Yorkshire Health and Wellbeing Scrutiny Sub-committee (OSC) convened an extraordinary meeting following concerns raised about the ICB and the Trust's plans to close the BCU.

At the meeting the OSC made three recommendations, one of which was that the Trust and ICB undertake a structured public engagement exercise to provide clarity to residents that the proposal related solely to the Bridlington Care Unit and not to wider services at Bridlington Hospital, and to communicate the longer-term strategic vision for the hospital site, including expansion of elective, diagnostic and outpatient services.

York and Scarborough Teaching Hospitals NHS Foundation Trust's Board of Directors discussed the OSC's recommendations and wider feedback from stakeholders and the Bridlington community at its private meeting on 27 May 2026. The Board accepted the recommendations and agreed a three month pause to the closure plans, with the engagement to be planned and completed during this time.

This report describes the engagement work undertaken and key findings, along with recommendations and next steps.

Feedback related to the BCU will be considered in the development of plans for the future of the Unit.

2. Engagement objectives

The purpose of the engagement is to:

- Inform residents as to the future of Bridlington Hospital and provide clarity to residents that the previous closure proposal related solely to the Bridlington Care Unit and not to wider services at Bridlington Hospital.
- Provide opportunities for patients, staff, local residents and stakeholders to be involved in the planning of the provision of relevant services and in the development of the proposals for changes to the way services may be provided.
- Communicate the longer-term strategic vision for the Bridlington Hospital site.
- Showcase the positive health and social care work happening in Bridlington.

The engagement was designed to enable feedback to be gathered on the Trust's emerging clinical strategy, alongside broader health and care services provided for the Bridlington population and, specifically, the BCU. This feedback will be considered and will help to inform the proposals for changes to the Bridlington Care Unit, as well as other developments in Bridlington.

Feedback was gathered from multiple sources during the engagement period. These include:

- Survey (available in hard copy and online)
- Engagement events in Bridlington
- Written feedback, letters and submissions
- Reviewing existing patient experience data

3. Accessibility

It was important to ensure that as many people as possible were able to participate and give their views. A number of steps were taken to make the engagement

accessible and encourage participation from a wide a range of people as possible. This included:

- Survey translated into different languages (top most-translated versions produced).
- Large print and easy-read versions of the survey.
- Accessible online survey platform offering translation, audio, large font, colour contrast.
- Hard-copy surveys with freepost address for returns.
- Phone number given for people who wanted to provide feedback into the engagement through a conversation or if they needed help with the questionnaire.
- Advertised widely through local media, the trust's website and social media channels.
- Posters sent to GP practices, libraries and Bridlington Hospital.
- Events held in an accessible venue with a quiet breakout space at different times of the day to help more people attend at a convenient time for them.
- Events and survey shared with multiple community groups both to invite them to participate and also to ask for helping with promotion. The list of groups and stakeholders is at **appendix A**.
- Email to York and Scarborough Foundation Trust members and communication to trust staff.

4. Survey findings

In addition to the engagement events a survey was created to provided further opportunity for people to share their views and to enable a level of quantitative data to be captured in addition to the qualitative data gathered at the events. Paper copies of the survey were also available for completion at the events.

Questions were designed to gather views on the Bridlington Care Unit, the provision of alternative services, and the future strategy for Bridlington Hospital and any future developments.

They key findings are summarised below. A copy of the survey is at **appendix B**, and a full data set is at **appendix C**.

The survey was open from 6 July to 9 August. 463 surveys were returned. It was not compulsory to complete all of the questions, therefore the analysis included fully completed and partially completed surveys.

The sample population for the survey were self-selected as the survey was part of an open public engagement exercise. It cannot be interpreted as statistically significant in representing the Bridlington population as a whole. The findings should be considered alongside clinical, operational, workforce and financial evidence when making an assessment on future service developments.

4.1. Questions related to Bridlington Care Unit

Awareness of the BCU was high amongst respondents (90% were aware), half of the respondents had either been patients on the unit themselves (15%) or had a friend or family member who had used the unit (35%). There was also high awareness of the proposal to close the unit (91%).

There was strong opposition to the closure of the unit: 91% of respondents said they do not support at all or mostly do not support the proposal. There was a good level of understanding that the proposals only related to the closure of BCU rather than Bridlington Hospital as a whole (64% vs 7%).

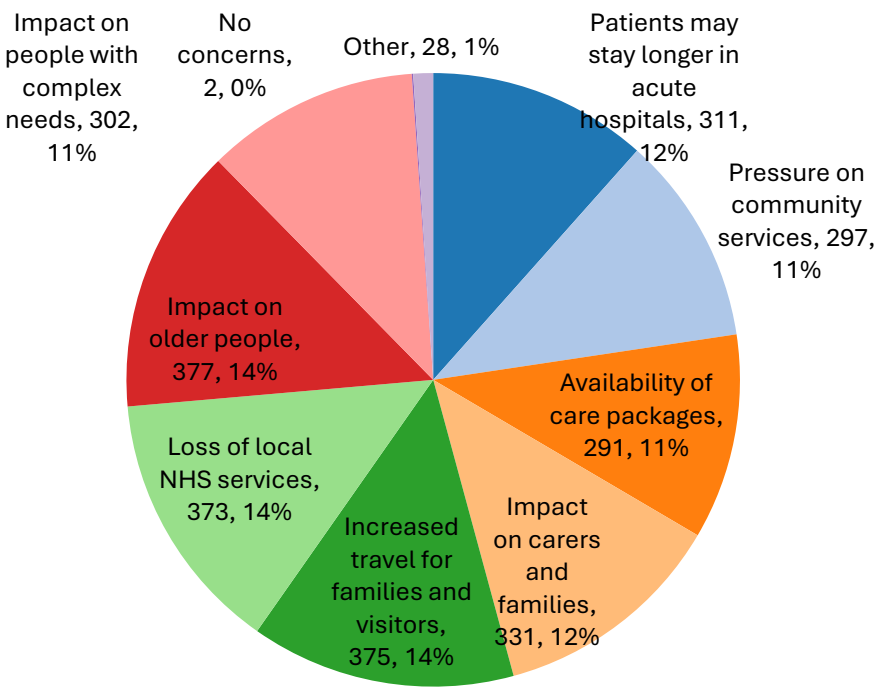
Respondents were invited to provide further information to explain why they did or did not support the closure of the BCU. These comments can be grouped into eight themes:

1. Local access, distance and transport
2. Family, carers and visiting burden
3. Older, vulnerable and complex patients
4. Population growth and local underinvestment
5. Community capacity and safe discharge
6. Acute hospital pressures and patient flow
7. Rehabilitation, step-down and end of life care
8. Trust, rationale and transparency of decision making

Some of the themes listed above, and the specific comments under these themes, demonstrate there is still misunderstanding about the role and function of the BCU. There is more work to do to explain to people that some of the patients they are concerned about, for example, those requiring ongoing medical care, those still recovering post-surgery, those with dementia requiring specialist care home support, would not have been admitted to BCU and will continue to receive the care they need in the appropriate clinical setting.

When asked to say what their concerns were about the closure, picking from a list, the responses were relatively evenly split amongst all options, indicating respondents had concerns in all of the suggested areas. **This is illustrated in chart 1 below:**

Chart 1: Which of the following concerns, if any, do you have? (Select all that apply)



When asked 'to what extent do you agree that people should be supported to return home as soon as it is safe to do so, rather than remaining in hospital longer than necessary?' 89% tended to agree or strongly agreed. This suggests that there is support for a 'home first' approach, but responses to other questions suggests that this is dependent on having confidence that the decision to discharge is safe and that the services and support required to be at home are in place.

The top three things that people most wanted to be assured about before BCU could close were:

1. Community services having enough staff
2. Social care packages being available quickly
3. People being able to return home safely

34 narrative comments were shared to support people's responses to this question, the majority of which were expressing opposition to the closure.

At the end of the survey participants were invited to share any comments, feedback or views on the BCU and the proposed changes.

There were 172 comments and these can be grouped into the following ten themes, in order of prevalence:

1. Local access, distance and transport
2. Acute beds and wider system pressure

3. Community/social care readiness and safe discharge
4. Explicit reference to retention of the unit and/or opposition to closure
5. Investment and greater use of the hospital
6. Population growth, aging and demand
7. Health inequalities and vulnerable groups
8. Criticism of management and financial motives
9. A lack of trust amongst respondents and a call for further engagement
10. Praise for staff and current services

4.2. Questions relating to out of hospital services and how care is provided for people once they are ready for discharge from hospital

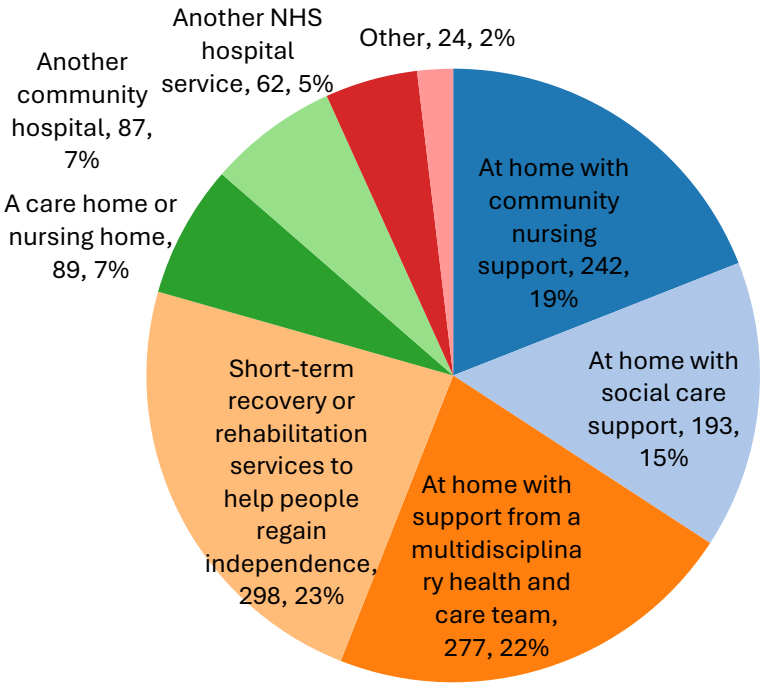
In terms of home-based/out of hospital care, people were asked which of the following statements was closest to their view:

- People should be supported to recover at home whenever it is safe to do so (26.5%)
- People should usually remain in a hospital setting until they no longer need any ongoing care (15.3%)
- It depends on the individual circumstances (58%)
- Don't know (0.2%)

This support the feedback through other responses that people require a level of confidence in decision making regarding discharge from hospital and the provision of services in the community before being able to fully support the idea of people being cared for at home.

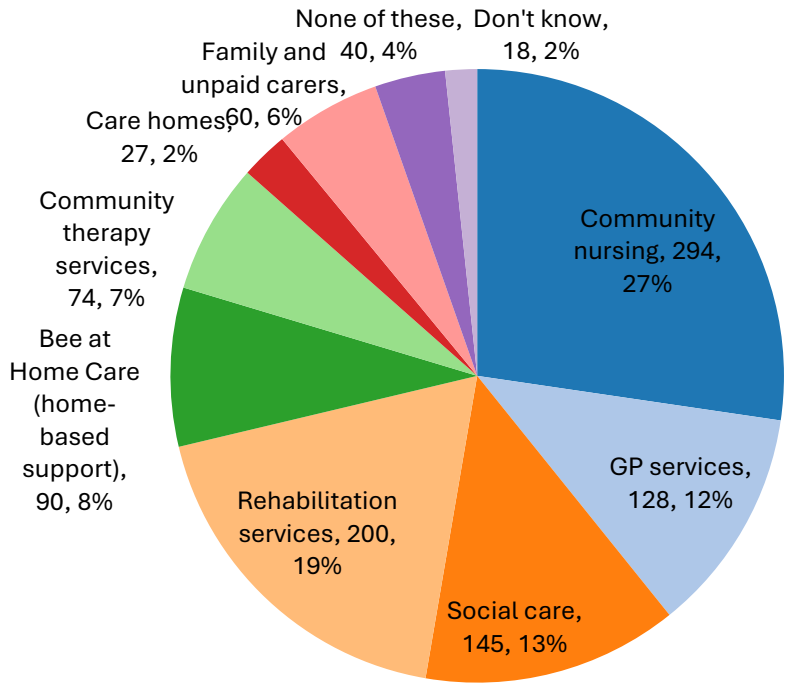
When asked to say how care and support would best be provided for people who are ready to be discharged from acute hospital services, the most selected options were for home-based support. A community hospital or other NHS hospital service was 12% of the choices, with support from a home-based community nursing, social care or a multidisciplinary team collectively making up 56%. For those selecting 'other', nine people commented that the Bridlington Care Unit would be the place to receive this care. **See chart 2 below**.

Chart 2: Thinking about people who are medically ready to leave hospital but still need some ongoing care or support, where do you think that care should happen? (Select all that apply)



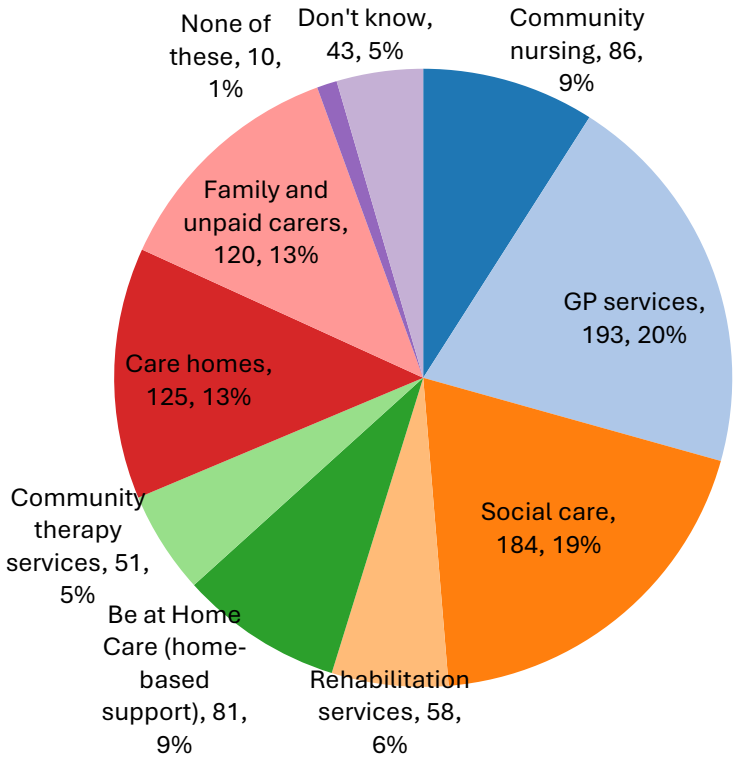
There was low confidence amongst respondents that people could be safely supported at home or in the community rather than in the BCU, with 72% of respondents saying they were not very confident or not at all confident. **See chart 3 below.**

Chart 3: Which services would give you the greatest confidence that people could safely return home? (Select up to three)



When asked to select up to three options, the services that gave people the most confidence were community nursing, rehabilitation services, social care and GP services, however GP services and social are were also reported as giving the least confidence. **See chart 4 below**.

Chart 4: Which services give you the least confidence? (Select up to three)



When asked to choose the most important factors for planning services for people when they are ready to leave hospital, the most frequently chosen options were well coordinated care and care closer to home, totalling 50% of overall choices.

When asked what was 'most important if more people receive care at home or in community settings', the responses were:

1. Patients receive enough support to remain safely at home (29.5%)
2. Care packages are put in place quickly (19.2%)
3. Healthcare professionals communicate well with families and carers (18.2%)
4. Family and carers receive practical support (11.7%)
5. Community services work together (11.1%)
6. Patients can access rehabilitation quickly (10.4%)

When asked 'which areas of community care are most important, selecting up to five', the top five were:

1. Community nursing (14.7%)
2. Social care packages (12.3%)
3. GP services (12.2%)
4. Rehabilitation services (10.2%)
5. End of life care (8.4%)

When asked to 'select one area that would make the biggest difference for people needing care or support after leaving hospital', the responses were ranked as follows:

Ranking	Area
1	Community nursing
=2	Social care packages
=2	Be at Home Care (home-based support)
4	Rehabilitation services
5	GP services
6	Hospital Outpatient Services
=7	Support for unpaid carers
=7	End of life care
9	Community therapy services
10	Mental health support
11	Frailty Services
12	Care home capacity
=13	Diagnostic services
=13	Planned surgery

For the question ‘when planning services for people leaving hospital which of the following is most important’, the top four selected were:

- Receiving safe care (20%)
- Well-coordinated support (19.7%)
- Receiving rehabilitation support (12.6%)
- Being close to family and carers (12.3%)

4.3. Questions on wider services and future plans

As well gathering feedback on the BCU and how people are cared for when they are ready to leave hospital, we wanted to understand people’s views on the Trust’s future plans and to gather views on what matters to local people to help with the development of the trust’s clinical strategy. We asked them to consider which of the four broad areas of the trust’s clinical strategy they would most like to see developments in for Bridlington, picking up to two of the four.

The responses were:

- Cancer and planned care (such as planned operations, diagnostics, and outpatient appointments): 33%
- Acute illness (assessment and treatment for people who become suddenly unwell): 29.9%
- Frailty and end of life care (support for older people, people living with frailty and end of life care): 18.6%
- Best start and women's health (for example maternity, gynaecology and services for children and families): 13.8%

53 people selected ‘other’ and wrote a comment.

The comments support broad areas rather than pointing to a single additional service, and many comments call for the development or provision of services within the four broad areas listed, rather than being ‘other’, as in additional suggestions.

The strongest message is a call for a more consistently-used local hospital, often including urgent assessment and 24-hour emergency or minor-injury provision.

Key themes from these comments were:

- Comprehensive provision and greater use of the hospital
- Urgent and emergency care and acute assessment
- Diagnostics, outpatients, surgery and follow-up
- Local access and reducing travel
- Frailty, rehabilitation, dementia and palliative care
- Population growth, capacity and system pressures
- Specific services not listed
- Women's health, maternity and children's services

5. Public engagement events

Two public engagement events were held at the Spa in Bridlington on 27 July, 16:00-19:00 and 28 July, 10:00-13:00. A total of 250 people attended across both days.

Approximately 30 colleagues from health, social care and voluntary and community organisations attended each day to facilitate the events and support the conversations. The following organisations were represented: York and Scarborough Teaching Hospitals NHS Foundation Trust, NHS Humber and North Yorkshire Integrated Care Board, CHCP, East Riding of Yorkshire Council, Healthwatch East Riding, Carers Plus Yorkshire and Surecare.

Facilitators supported 12 display stands with information on a range of topics such as diagnostics, planned surgery and the surgical hub, outpatients and planned care, palliative care, frailty, rehabilitation and the BCU, along with travel and transport and services provided by health and care partner organisations.

The events were three hours each and were drop-ins, enabling people to arrive when convenient and stay as long as they wanted.

Colleagues captured feedback on forms which have been analysed for themes.

35 comment forms were submitted, each containing a varying number of comments and notes. These have been recorded and a thematic analysis undertaken.

Theme 1: Care closer to home and the future role of Bridlington Hospital

Participants repeatedly called for Bridlington Hospital to be retained, better used and developed as a centre for local care. Particular requests included additional outpatient clinics, urology, rheumatology, pathology, rehabilitation, frailty, palliative care, diagnostics, minor injuries provision and post-operative follow-up.

It was generally accepted that specialist surgery and complex treatment may need to take place elsewhere. However, it was questioned why pre-operative assessment, post-operative review, routine follow-up, blood tests, diagnostics and some consultant appointments could not be offered more consistently in Bridlington.

Several people described being sent to York, Scarborough, Malton, Hull or Selby, only to learn that the same or a similar appointment could have been provided locally. Others said Bridlington appointments were available only after they had actively challenged the original booking.

This has contributed to a perception that Bridlington is a “forgotten hospital” and that local services are not being offered proactively. Participants were particularly concerned by the hospital appearing quiet or underused, while patients were simultaneously travelling significant distances and joining waiting lists elsewhere.

Theme 2: Transport as a barrier to access, attendance and family support

Transport was the most pervasive theme in the feedback. Participants described early morning appointments that could not be reached by public transport, lengthy journeys involving several connections, high taxi fares, difficulties with hospital parking and limited support after discharge during the night.

Examples included a five-hour return journey for a ten-minute consultation, and expensive taxi costs. Participants also reported cancelling appointments because public transport could not get them to another hospital in time.

Families and carers were sometimes unable to visit relatives because of cost, distance or mobility difficulties.

Feedback on local bus services included infrequent routes, a lack of shelters or suitable seating, inaccessible stopping arrangements, poor communication about timetable changes and concerns about personal safety when waiting in isolated locations. Residents called for better joint planning between the NHS, local authority, community transport providers and commercial bus operators.

Transport was also the key theme in the feedback provided by Healthwatch East Riding of Yorkshire based on their conversations during the events.

Theme 3: Communication, information and navigation

Residents repeatedly stated that they did not know which services were available at Bridlington Hospital, how frequently they operated or how they could be accessed. Participants asked for a regularly updated list of local services, including referral routes, opening times and service availability.

There was frustration that primary care, booking teams and patients appeared to receive inconsistent information. Examples included general practices not knowing how to refer into services, appointments being allocated outside Bridlington when

local capacity may have existed, and patients receiving conflicting advice about whether services were available locally.

The feedback suggests that communication problems are affecting both public confidence and service utilisation.

Theme 4: Fragmented pathways and organisational boundaries

Participants described care as fragmented between York and Scarborough Teaching Hospitals, Hull University Teaching Hospitals, Humber and North Yorkshire Health and Care Partnership services, general practice, community services and social care.

Particular concerns included the sharing of diagnostic images and results, communication between consultants and GPs, inconsistent referral routes and patients being passed between general practice, urgent care, pharmacy and hospital services without a clear understanding of responsibility.

Residents whose care crossed organisational boundaries felt that the system did not consistently operate as a single pathway. They reported repeated journeys for blood tests, scans and outpatient consultations that could potentially have been coordinated into fewer visits.

This fragmentation was especially apparent at discharge. Some participants described excellent community nursing support, while others reported little or no follow-up, insufficient home care and uncertainty about who to contact when problems arose.

Theme 5: Frailty, rehabilitation, palliative care and discharge support

There was strong concern about the future of beds and services supporting older people, rehabilitation, end-of-life care and recovery after an acute hospital stay.

Participants placed considerable value on the BCU and the ability for family members to visit locally. However, there was confusion about the unit's role and concern that changes were being understood as a closure of rehabilitation or inpatient provision.

Palliative care generated particularly emotive feedback. Residents referred to earlier discussions or commitments that they believed had not been delivered and expressed a strong preference for people to receive end-of-life care near their families and communities. They also recognised that many people would prefer to die at home, but questioned whether community and family support was sufficiently reliable to make this a realistic choice.

Feedback also highlighted gaps in rehabilitation, medical review, home care and equipment provision following discharge. The absence of coordinated support was seen as increasing pressure on families and creating a risk of deterioration or readmission.

Theme 6: Public trust, engagement and accountability

Although participants welcomed the opportunity to engage, some were disappointed that the event did not provide a panel or a ‘town hall’ style Q&A and presentation. Others felt that previous proposals, including palliative care and diagnostic developments, had not been followed by visible delivery or adequate explanation.

The result is a degree of mistrust, heightened by fears that Bridlington Hospital could gradually lose services or close. In some cases, uncertainty appears to be filling the space left by a lack of clear and timely information.

Nevertheless, residents expressed a desire to work collaboratively with the NHS. Participants wanted positive news to be shared alongside areas of challenge and asked for an ongoing relationship with the Trust and integrated care system rather than engagement only at points of service change.

6. Wider feedback

The Trust received feedback from a number of other sources. These are summarised as follows:

- Charlie Dewhirst, the MP for Bridlington and the Wolds presented a petition to the Trust with 5,784 signatures calling for the BCU to remain open. The petition was formally received by the Board of Directors at its May 2026 meeting. In response the trust acknowledged the depth of feeling in the local community represented by the petition, and reaffirmed its commitment to carry out an engagement exercise.
- The Bridlington Health Forum wrote to the Trust on a number of occasions raising concerns about the closure of the BCU. The Trust’s executive team met with Health Forum members at Bridlington Hospital to discuss these concerns.
- The Trust received letters from three East Riding of Yorkshire Councillors raising concerns about the closure of the BCU.
- Three letters were received from MPs outside of the Bridlington area raising constituent concerns about the closure of BCU, as part of a coordinated campaign.

7. Summary

We thank the people of Bridlington for their openness and willingness to share their stories as part of this process.

The engagement has provided a clear and consistent account of the issues that matter most to Bridlington residents, patients, staff and stakeholders. There is strong local support for Bridlington Hospital, a clear desire to see the site better used and developed, and a strong expectation that routine, follow-up, diagnostic, outpatient,

rehabilitation, frailty and palliative care should be provided locally wherever this is clinically safe, sustainable and operationally possible.

The feedback also demonstrates the strength of feeling about the proposed closure of the Bridlington Care Unit. Survey responses show high awareness of the proposal and strong opposition to closure, while also showing that most respondents understood that the proposal related to the BCU and not to Bridlington Hospital as a whole. This suggests the engagement has helped provide clarity on the scope of the proposal, while also underlining the need for further communication about the future role of the hospital site.

Although opposition to the BCU proposal is significant, the findings suggest that many people support the principle of helping people return home as soon as it is safe to do so. Their concerns are focused less on the principle of care at home, and more on whether community services, social care packages, rehabilitation, communication with families and discharge arrangements are sufficiently robust to make this safe and reliable in practice.

The engagement has helped to improve understanding of the scope of the proposals for the BCU, although some misunderstanding remains as to the function of the Unit and further communication is required, particularly to help to clarify that the BCU is for people who have already been assessed by hospital clinical teams as medically ready to leave acute hospital care, and that any future model must include clear safeguards so people are supported in the right setting, with the right care, at the right time.

Across all engagement channels, the most consistent concerns related to access, transport, communication, confidence in community capacity, the coordination of care across organisational boundaries, and the need for a clearer long-term vision for Bridlington Hospital. These issues go beyond the BCU proposal and should inform the Trust's developing clinical strategy and wider system planning for Bridlington.

The engagement has also highlighted a need to rebuild trust. Residents want greater transparency about decisions, clearer evidence about the options considered, and an ongoing relationship with the Trust and system partners rather than engagement only at the point of potential service change.

8. Key findings and proposed responses/actions

The engagement process has provided a clear account of the issues that matter most to Bridlington residents, patients, staff and stakeholders. We are grateful to the people of Bridlington for their openness and willingness to share their experiences, concerns and ambitions for local services.

1. Strong support for Bridlington Hospital and a clearer future role

What people told us: There is strong local support for Bridlington Hospital, a clear desire to see the site better used and developed, and an expectation that routine, follow-up, diagnostic, outpatient, rehabilitation, frailty and palliative care should be provided locally wherever this is clinically safe, sustainable and operationally possible.

Proposed response/action: The Trust should use these findings to inform the developing clinical strategy and the future role of Bridlington Hospital, setting out which services can be developed locally, which need to remain on larger hospital sites, and how Bridlington Hospital will contribute to the wider clinical strategy. This should be supported by clear communication and further engagement with local people and partners.

2. Significant concern about the proposed closure of the Bridlington Care Unit

What people told us: Feedback demonstrates the strength of feeling about the proposed closure of the Bridlington Care Unit. Survey responses show high awareness of the proposal and strong opposition to closure, while also indicating that most respondents understood that the proposal related to the BCU and not to Bridlington Hospital as a whole.

Proposed response/action: The engagement findings should be considered as part of the decision-making process for the future of the BCU, with a clear explanation of how feedback has influenced the proposed model and subsequent decision. The report should also be shared with the East Riding of Yorkshire Health and Wellbeing Scrutiny Sub-committee as part of the Trust and ICB response to the OSC's recommendations, and published on the Trust's website.

3. Support for care closer to home, but concern about whether services are sufficiently robust

What people told us: Although opposition to the BCU proposal is significant, many people support the principle of helping people return home as soon as it is safe to do so. Their concerns are focused less on the principle of care at home, and more on whether community services, social care packages, rehabilitation, communication with families and discharge arrangements are sufficiently robust to make this safe and reliable in practice.

Proposed response/action: The Trust and system partners should provide practical assurance on safe discharge and community capacity, including the community nursing, rehabilitation, social care and escalation arrangements that will support people to return home safely. Any future model should include clear safeguards so people are supported in the right setting, with the right care, at the right time.

4. Ongoing need to clarify the role and function of the BCU

What people told us: The engagement has improved understanding of the scope of the BCU proposals, but some misunderstanding remains about the function of the Unit, particularly that it is for people who have already been assessed by hospital clinical teams as medically ready to leave acute hospital care.

Proposed response/action: Further communication should explain the role of the BCU, the distinction between acute hospital care and step-down or onward care, and the safeguards that would need to be in place in any future model. This should form part of wider communication about the future role of Bridlington Hospital.

5. Access, transport and coordination remain central concerns

What people told us: Across all engagement channels, the most consistent concerns related to access, transport, communication, confidence in community capacity, the coordination of care across organisational boundaries, and the impact of appointment location, timing, discharge arrangements, visiting, carer travel and public transport availability on Bridlington residents.

Proposed response/action: The Trust should continue to review how service location and travel arrangements affect Bridlington residents, and work with local authority, community transport and voluntary sector partners to identify practical improvements. This should include consideration of appointment scheduling, discharge planning, visiting arrangements and access to information for carers and families.

6. Need for clearer information about local services and continued engagement

What people told us: Residents, staff and stakeholders want clearer, more reliable information about what services are available at Bridlington Hospital, how to access them, and how decisions about services are made. The engagement has also highlighted a need to rebuild trust through greater transparency, clearer evidence about the options considered, and an ongoing relationship with the Trust and system partners rather than engagement only at the point of potential service change.

Proposed response/action: The Trust should develop and maintain a single, reliable source of information about services available at Bridlington Hospital, including referral routes, opening times, appointment availability and points of contact. This should include contributions from other providers of services at Bridlington Hospital. Working with local patient groups and other stakeholders, the Trust should also establish a regular programme of communication and engagement, including opportunities to report back on progress, share positive developments, explain constraints and involve local people in the continued development of services.

Appendix A: Survey and event information and suggest content for sharing in communications sent to the following:

Healthwatch East Riding
Bridlington Pride
East Riding Carers Support Service
Emmanuel Church
Christ Church Bridlington
HEY Smile Foundation
Bridlington collective
HEY Volunteering
Active Humber
Bridlington Cricket Club
Bridlington tennis club
Bridlington Diabetes Support Group
Dementia support in Bridlington
Right Minds
Age UK Hull and East Yorkshire
Hull and East Yorkshire MIND
Community VISION CIO
Carers Plus
Bridlington & District Stroke Group
Bridlington Bay Bowling Club
Fuse youth organisation
The Hinge
Bridlington Butts Close Best Start Family Hub
East Riding Place VCSE Collaborative
Bridlington Central Library (King Street)
North Bridlington Library (Martongate)
Bridlington Leisure Centre
Bridlington U3A
Bridlington business network
Bridlington Men in Sheds
Bridlington Priory Choir & Junior Choir
Bridlington RUFC
Bridlington Health Forum
Inclusion North (co-facilitate the East Riding LD partnership Board)
Drs Reddy and Nunn (GP practices)
Bridlington CYP

York and Scarborough Teaching Hospitals
NHS Foundation Trust

Residents invited to help shape the future of health and care in Bridlington

The closing date for this survey is midnight Sunday 9 August 2026. York and Scarborough Teaching Hospitals NHS Foundation Trust, together with NHS Humber and North Yorkshire Integrated Care Board and other health and care partners, is encouraging patients, local residents, staff and community organisations to share their experiences, ideas and priorities as work continues to develop a long-term vision for health services in Bridlington. The feedback gathered through this engagement will help inform: ● The future of services currently provided through the Bridlington Care Unit ● Development of the Trust's emerging clinical strategy ● Future health and care services in Bridlington ● The longer-term vision for Bridlington Hospital Find out more about Bridlington Hospital here: https://www.yorkhospitals.nhs.uk/news-and-media/a-bright-future-for-health-and-care-in-bridlington/

Introduction

All responses are anonymous, and we will not ask for your name or contact details. If you need this survey in large print, another language or another format, or if you need help to complete it, please contact: Email: yhs-tr.communications.team@nhs.net Telephone: 01904 721855

Before today, were you aware of Bridlington Care Unit?

- ☐ Yes
- ☐ No

Have you or someone close to you ever used Bridlington Care Unit?

- ☐ Yes – I have
- ☐ Yes – a family member or friend has
- ☐ No
- ☐ Unsure

Before completing this survey, were you aware of the proposal to close Bridlington Care Unit?

- ☐ Yes
- ☐ No

Which statement best describes your understanding of the proposal?

- ☐ Bridlington Hospital is proposed to close
- ☐ Only Bridlington Care Unit is proposed to close while other hospital services continue
- ☐ Some services at Bridlington Hospital are proposed to close
- ☐ I am not sure

Overall, to what extent do you support the proposed closure of Bridlington Care Unit?

- ☐ Fully support
- ☐ Mostly support
- ☐ Neither support nor oppose
- ☐ Mostly do not support
- ☐ Do not support at all
- ☐ I don't know enough to say

What are the main reasons for your answer?

Which of the following concerns, if any, do you have? (Select all that apply)

- ☐ Patients may stay longer in acute hospitals
- ☐ Pressure on community services
- ☐ Availability of care packages
- ☐ Impact on carers and families
- ☐ Increased travel for families and visitors
- ☐ Loss of local NHS services
- ☐ Impact on older people
- ☐ Impact on people with complex needs
- ☐ No concerns
- ☐ Other

If you selected Other, please provide details below

Which statement comes closest to your view?

- ☐ People should be supported to recover at home whenever it is safe to do so.
- ☐ People should usually remain in a hospital setting until they no longer need any ongoing care.
- ☐ It depends on the individual circumstances.
- ☐ Don't know.

To what extent do you agree that people should be supported to return home as soon as it is safe to do so, rather than remaining in hospital longer than necessary?

- ☐ Strongly agree
- ☐ Tend to agree
- ☐ Tend to disagree
- ☐ Strongly disagree
- ☐ Don't know

Thinking about people who are medically ready to leave hospital but still need some ongoing care or support, where do you think that care should happen? (Select all that apply)

- ☐ At home with community nursing support
- ☐ At home with social care support
- ☐ At home with support from a multidisciplinary health and care team
- ☐ Short-term recovery or rehabilitation services to help people regain independence
- ☐ A care home or nursing home
- ☐ Another community hospital
- ☐ Another NHS hospital service
- ☐ Other

If you selected Other, please provide details below

How confident are you that people could be safely supported at home or in the community instead of at Bridlington Care Unit?

- ☐ Very confident
- ☐ Fairly confident
- ☐ Neither
- ☐ Not very confident
- ☐ Not at all confident
- ☐ Don't know

Which services would give you the greatest confidence that people could safely return home? (Select up to three)

- ☐ Community nursing
- ☐ GP services
- ☐ Social care
- ☐ Rehabilitation services
- ☐ Bee at Home Care (home-based support)
- ☐ Community therapy services
- ☐ Care homes
- ☐ Family and unpaid carers
- ☐ None of these
- ☐ Don't know

Which services give you the least confidence? (Select up to three)

- ☐ Community nursing
- ☐ GP services
- ☐ Social care
- ☐ Rehabilitation services
- ☐ Be at Home Care (home-based support)
- ☐ Community therapy services
- ☐ Care homes
- ☐ Family and unpaid carers
- ☐ None of these
- ☐ Don't know

Which three factors are most important when planning services for people who are ready to leave hospital? (Select three options)

- ☐ Receiving care close to home
- ☐ Returning home as soon as possible
- ☐ Having support from family nearby
- ☐ Receiving specialist rehabilitation
- ☐ Well-coordinated support
- ☐ Avoiding unnecessary hospital stays
- ☐ Choice of location where care is provided
- ☐ Other

If you selected Other, please provide details below

Before Bridlington Care Unit could close, what would you most want to be assured about? (Select up to three)

- ☐ Community services have enough staff
- ☐ Social care packages are available quickly
- ☐ People can return home safely
- ☐ Unpaid carers receive enough support
- ☐ Enough district nursing support
- ☐ Rehabilitation services are available
- ☐ Care home places are available
- ☐ Patients won't stay longer in acute hospitals
- ☐ Readmissions won't increase
- ☐ Patients will receive the same quality of care
- ☐ Other

If you selected Other, please provide details below

If more people receive care at home or in community settings, which of the following are most important?

- ☐ Patients receive enough support to remain safely at home
- ☐ Family and carers receive practical support
- ☐ Healthcare professionals communicate well with families and carers
- ☐ Patients can access rehabilitation quickly
- ☐ Care packages are put in place quickly
- ☐ Community services work together

Which areas of community care are most important? (Select up to five)

- ☐ Community nursing
- ☐ Be at Home Care (home- based support)
- ☐ Social care packages
- ☐ Rehabilitation services
- ☐ Frailty services
- ☐ Community therapy services
- ☐ Mental health support
- ☐ GP services
- ☐ Care home capacity
- ☐ Support for unpaid carers
- ☐ Hospital outpatient services
- ☐ Diagnostic services
- ☐ End of life care
- ☐ Planned surgery

Which one area should be developed that would make the biggest difference for people who need care or support after leaving hospital?

- ☐ Community nursing
- ☐ Be at Home Care (home- based support)
- ☐ Social care packages
- ☐ Rehabilitation services
- ☐ Frailty services
- ☐ Community therapy services
- ☐ Mental health support
- ☐ GP services
- ☐ Care home capacity
- ☐ Support for unpaid carers
- ☐ Hospital outpatient services
- ☐ Diagnostic services
- ☐ End of life care
- ☐ Planned surgery

When planning services for people leaving hospital, which of the following do you feel are most important (select up to 4 from the below)

- ☐ Receiving safe care
- ☐ Returning home as quickly and safely as possible
- ☐ Being close to family and carers
- ☐ Receiving rehabilitation support
- ☐ Well-coordinated support
- ☐ Avoiding longer stays in hospital than needed
- ☐ Independence
- ☐ Access to specialist staff

Bridlington Hospital will continue to provide a range of hospital services and there are plans to further develop the site in the future. Looking ahead, which services would you most like to see developed at Bridlington Hospital? (Select up to two)

- ☐ Best start and women's health (for example maternity, gynaecology and services for children and families)
- ☐ Cancer and planned care (such as planned operations, diagnostics, and outpatient appointments)
- ☐ Acute illness (assessment and treatment for people who become suddenly unwell)
- ☐ Frailty and end of life care (support for older people, people living with frailty and end of life care)
- ☐ Other

If you selected Other, please provide details below

What are the main reasons for your answer?

Is there anything else you would like to share about your views on Bridlington Care Unit or the proposed changes?

About You

The following questions help us understand whether we are hearing from a wide range of people. It will also help us understand if different groups have different experiences of healthcare services. All questions are optional and responses remain anonymous. We would like to know a bit more about you to help us to better understand the answers you have given during this survey, and the health and care needs of our local communities. We know that people of different ages, ethnicities, sexualities, and other protected characteristics, have different health needs, access healthcare services in different ways, and sometimes have different experiences of care. By answering some short questions, you can support our work aiming to reduce health inequalities in Humber and North Yorkshire, giving everyone the opportunity to receive care in a way which is most appropriate to them, and improving outcomes for patients. In line with data protection law, your information will remain anonymous and will only be used to support this survey etc. To find out how we use your information, please visit https://www.yorkhospitals.nhs.uk/about-us/information-governance/privacy-notices/development-of-services-at-bridlington-hospital-public-engagement-survey-privacy-notice/ You do not need to answer these questions if you do not want to.

Which best describes you? (Select all that apply)

- ☐ Community and voluntary sector representatives
- ☐ Elected representatives
- ☐ Health and care professionals
- ☐ Local residents
- ☐ Trust staff and volunteers
- ☐ Patients, families and carers
- ☐ Prefer not to say
- ☐ Other (please specify)

If you've selected other, please provide details below.

What is the first half of your postcode e.g. YO16? (Please do not provide a full postcode)

What is your age?

- ☐ 0-19
- ☐ 20-24
- ☐ 25-34
- ☐ 35-49
- ☐ 50-64
- ☐ 65-74
- ☐ 75-84
- ☐ 85 and over
- ☐ Prefer not to say

Which of the following best describes your ethnic background?

- ☐ Asian / Asian British
- ☐ Black / African / Caribbean / Black British
- ☐ Chinese
- ☐ Mixed / Multiple ethnic group
- ☐ Prefer not to say
- ☐ White
- ☐ Not on the list (please specify):

Gender

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Prefer not to say
- ☐ Other (please specify):

Is your gender the same as assigned sex at birth?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What is your sexuality?

- ☐ Bisexual
- ☐ Heterosexual (Straight)
- ☐ Lesbian or gay woman
- ☐ Gay man
- ☐ Asexual
- ☐ Prefer not to say
- ☐ Other (please state)

Do you consider yourself to have a disability or long-term medical condition that limits your daily activities?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What is your religion or belief? (Please select one option)

- ☐ No religion
- ☐ Buddhist
- ☐ Christian (including all denominations)
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Another religion or belief (please specify)
- ☐ Prefer not to say

Thank you for taking the time to complete this survey.

Your views will help shape future health and care services in Bridlington. We will publish a

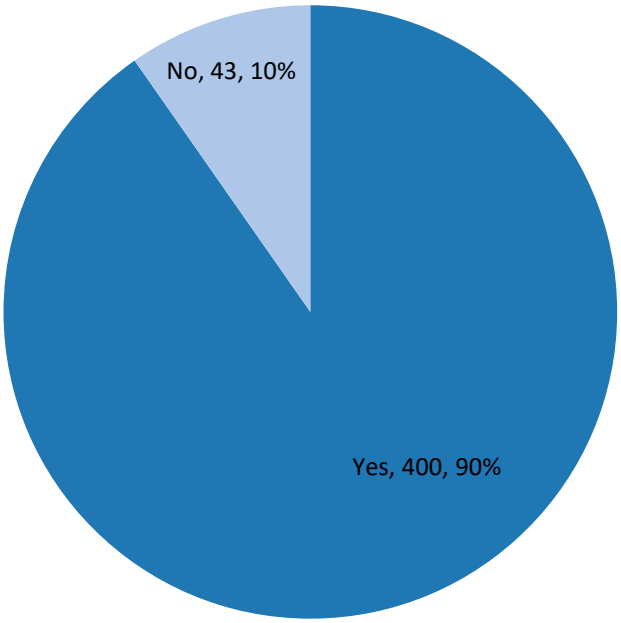
summary of the feedback received, together with information about how the feedback has influenced future plans, on the Trust website following consideration by the Trust Board. For updates, please visit: www.yorkhospitals.nhs.uk/bridlington-bright-future/

York and Scarborough Teaching Hospitals
NHS Foundation Trust

Bridlington Hospital Survey Report

1st July to 9th August 2026

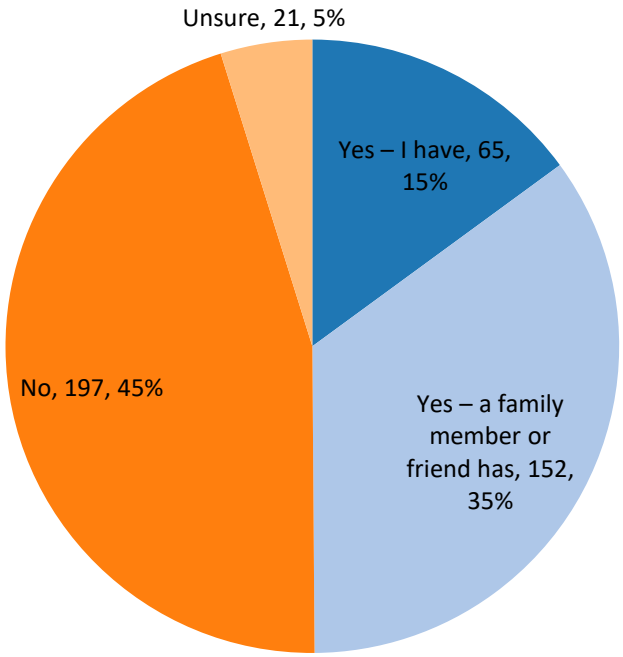
Before today, were you aware of Bridlington Care Unit?



Answer	Total	Percent
Yes	400	90.3
No	43	9.7

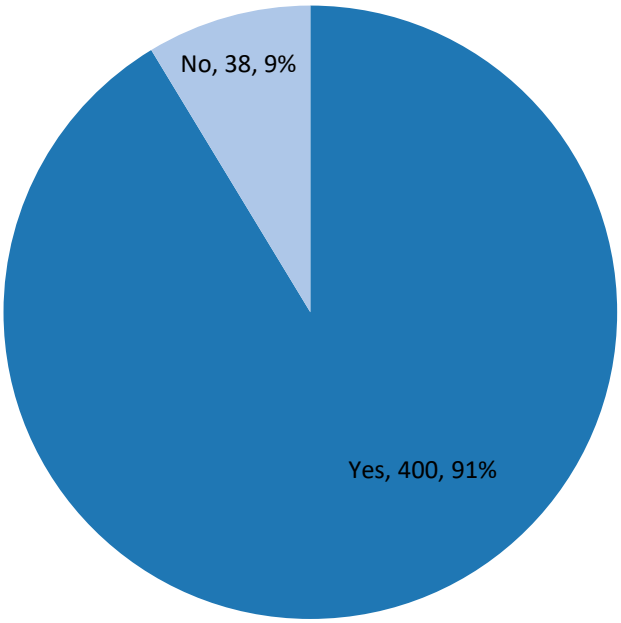
Total responses	443	

Have you or someone close to you ever used Bridlington Care Unit?



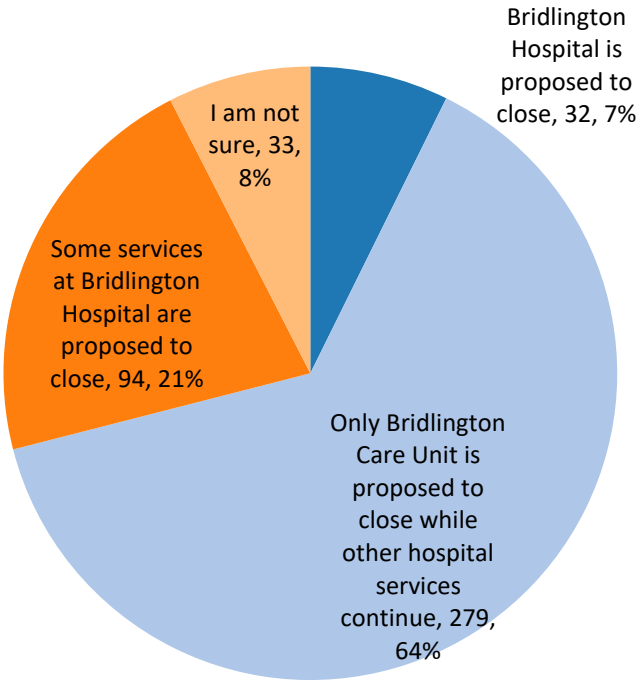
Answer	Total	Percent
Yes – I have	65	14.9
Yes – a family member or friend has	152	34.9
No	197	45.3
Unsure	21	4.8
Total responses	435	

Before completing this survey, were you aware of the proposal to close Bridlington Care Unit?



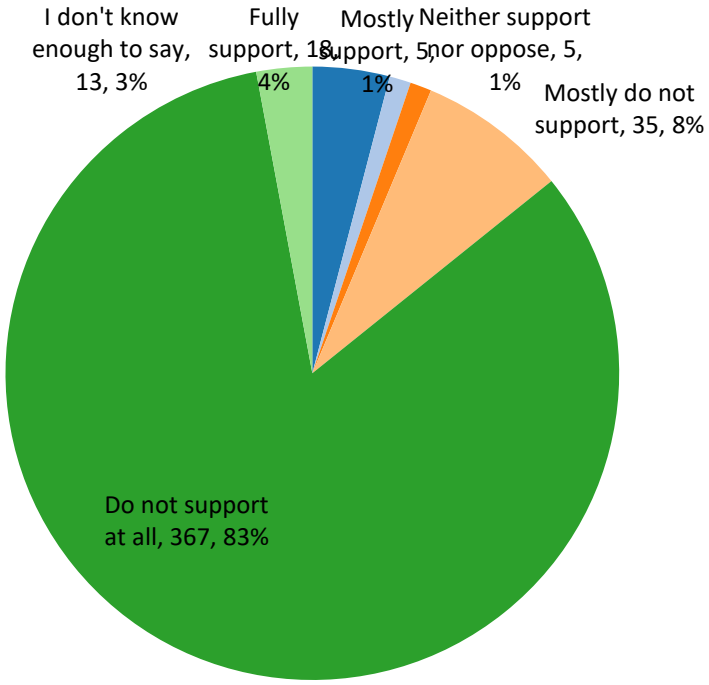
Answer	Total	Percent
Yes	400	91.3
No	38	8.7
Total responses	438	

Which statement best describes your understanding of the proposal?



Answer	Total	Percent
Bridlington Hospital is proposed to close	32	7.3
Only Bridlington Care Unit is proposed to close while other hospital services continue	279	63.7
Some services at Bridlington Hospital are proposed to close	94	21.5
I am not sure	33	7.5
Total responses	438	

Overall, to what extent do you support the proposed closure of Bridlington Care Unit?



Answer	Total	Percent
Fully support	18	4.1
Mostly support	5	1.1
Neither support nor oppose	5	1.1
Mostly do not support	35	7.9
Do not support at all	367	82.8
I don't know enough to say	13	2.9
Total responses	443	

What are the main reasons for your answer?

Service	Comment
Bridlington Survey	We are a growing town and travel is difficult. Noone should have to travel more than 20 car driver minutes for health care.
Bridlington Survey	Bridlington is the largest town in East Yorkshire and and has not acute medical services for the county, it has no palliative care beds, there are no community nursing beds. The community beds have also disappeared from Driffield, Withernsea and Hornsea. The community ward at East Riding Community Hospital is now a community stroke ward. The pressure on acute hospitals must be immense with there now being no community beds in the county. Private home care providers are struggling to get staff and I note in your questions below mention the Bee AT Home Service they are a domiciliary care provider the same as social care providers, not sure my you highlight this service separately. Bridlington hospital wards could be used as a step down from acute services for patients in the East Riding and support with patients from Hull, York and Scarborough hospitals and freeing up beds for the acute hospitals and providing nursing/medical care to patients nearer to their own home. A recent example a neighbour of mine (lives in Bridlington) was admitted to SGH following a fall and after surgery was Transferred to Holy Name Rehab Unit in Hull for rehabilitation - miles away from home and if you do not drive Holy Name is very difficult to get to. Another example of where Bridlington Hospital could be used was for the Community Diagnostic Centre, but this was placed in Eastfield in Scarborough which already has a large General Hospital and again if you do not have a car it is difficult to access and if you live outside Scarborough it can require catching a number of buses to get there. Bridlington and East Yorkshire need the Bridlington Care Unit, they also need a palliative care unit, and they the hospital could also support with wider rehab/step down for patients who require short term rehab following operations, stroke, frailty admissions.
Bridlington Survey	Bridlington is the largest town in East Yorkshire and and has not acute medical services for the county, it has no palliative care beds, there are no community nursing beds. The community beds have also disappeared from Driffield, Withernsea and Hornsea. The community ward at East Riding Community Hospital is now a community stroke ward. The pressure on acute hospitals must be immense with there now being no community beds in the county. Private home care providers are struggling to get staff and I note in your questions below mention the Bee AT Home Service they are a domiciliary care provider the same as social care providers, not sure my you highlight this service separately. Bridlington hospital wards could be used as a step down from acute services for patients in the East Riding and support with patients from Hull, York and Scarborough hospitals and freeing up beds for the acute hospitals and providing nursing/medical care to patients nearer to

	their own home. A recent example a neighbour of mine (lives in Bridlington) was admitted to SGH following a fall and after surgery was Transferred to Holy Name Rehab Unit in Hull for rehabilitation - miles away from home and if you do not drive Holy Name is very difficult to get to. Another example of where Bridlington Hospital could be used was for the Community Diagnostic Centre, but this was placed in Eastfield in Scarborough which already has a large General Hospital and again if you do not have a car it is difficult to access and if you live outside Scarborough it can require catching a number of buses to get there. Bridlington and East Yorkshire need the Bridlington Care Unit, they also need a palliative care unit, and they the hospital could also support with wider rehab/step down for patients who require short term rehab following operations, stroke, frailty admissions.
Bridlington Survey	We need to keep inpatients and relatives close to each other in the same community
Bridlington Survey	This community hospital is vastly underused . The town population keeps growing with new builds . No additional infrastructure . This hospital just needs staffing to get it up and operational . Beverley has a community hospital up and running with a ward for older rehab patients. With a much lower population . My mother was there for three months in 2024 and it was invaluable to have her close at hand . She recovered very well and is 89 and going well . The pressures on the Scarborough / York hospitals is clear . Let's get the funding to have our own functioning hospital serving the community and the influx of tourists
Bridlington Survey	This is a badly needy ward.
Bridlington Survey	You closed the palative care unit and I feel it is so wrong to close this. Patients family should not have to travel miles to see loved ones it's unfair. The staff on the ward deserve better too.
Bridlington Survey	We need the service in Bridlington
Bridlington Survey	Nit everyone is able to travel for hospital appointments or visit relatives when in scarb or further afield
Bridlington Survey	I might need it one day
Bridlington Survey	I was a patient in BCU in January 2026. I was younger than the other patients so my experience maybe different to others but | am going to say anyway. The Staff were hit and miss with care and definitely over worked. The physio staff just walked around the wards and didn't enteract much with the patients at all. The toilets were disgusting! I know people with mind issues don't know what they are doing but isn't that where the staff come in to help? The ward itself is dated and needs a good overhaul. However, putting that aside, I feel strongly that the services are needed. If closed it will just put

	extra unnecessary pressure on Scarborough and other hospitals, especially with the new builds being erected.
Bridlington Survey	It's a vital local service for the area and all of us residents never know when it is going to be needed. It gives peace of mind knowing there is a facility to hand when needed without the extra hassle/cost/worry of getting to somewhere further afield. This is especially important for older people and people who cannot drive.
Bridlington Survey	The unit provides much needed support for patients who cannot always obtain it immediately elsewhere
Bridlington Survey	Nearest hospital to Bridlington is Scarborough which is overwhelmed transferring patients to BCU @ Bridlington elevates some if the pressure on Scarborough hospital. Also travelling time from Bridlington to Scarborough hospital can be up to 1 hour at peak/holiday time & that's in a car if a train (then bus) or a bus has to be taken can take longer. This makes it difficult to visit loved ones.
Bridlington Survey	The impact on families having to travel to visit the patients elsewhere or there may not be anywhere else they can be cared for safely. If a patient is normally resident in Bridlington then the unit should be available at Bridlington Hospital for them.
Bridlington Survey	There is a need for interm care
Bridlington Survey	Bridlington care unit is in use by myself and my family. I dont have the means of getting myself anywhere else other than to call an ambulance which, should the unit be closed, we would have to do regularly to ensure medical care can be received. The plan to remove the bridlington care unit should be considered a safeguarding concern for the residents of bridlington. Also from a visitors perspective. It is NOT person centered care to remove the possibility of visitors to patients due to lack of transport.
Bridlington Survey	Short sighted reaction to financial pressures at the Trust. Closing the BCU will impact pressure, waiting times and patient care at ED. Patients will either stay longer in beds on acute site or be discharged too soon without proper discharge planning leading to increased levels of readmissions, poor patient experience and increased risk of patient safety. There needs to be a full system review so that all elements of a Patients journey during and after an acute or elective hospital stay. The remit or criteria could be reviewed in order to provide additional overflow capacity ensuring that elective capacity is minimised during periods of high acuity through ED.
Bridlington Survey	We need a hospital that is local
Bridlington	Older people need this facility - otherwise they will be forced to stay in hospital or as is more likely sent home on their own too early or sent miles

Survey	away somewhere else. A lot of older people's relatives no longer drive and so it is hard for them to visit their loved ones. I am also sick of NHS facilities being removed from this town - this is a town with a big elderly population - coastal regions are already underfunded and lack NHS services so to deliberately close one is neglect.
Bridlington Survey	BCU is an essential part of Bridlington Hospital, it has been successful in providing care for the last 5 years for patients who are not acutely unwell and do not require an acute beds , but cannot leave the hospital yet as they need support ie Package of Care at home or Nursing/Residential placement which in turn can take a week or 2 to source . This unit helps the steady flow of patients come through the Scarborough/York and even Hull hospital . Bridlington is growing in population and is an important asset to have in Bridlington! It makes no sense at all to close the unit . They are wanting to have more care in the community but the community is struggling with the work load as it is !
Bridlington Survey	Bridlington needs to have a service like that as there are a lot of elderly people living here
Bridlington Survey	I think that the BCU is still needed as I've just had a friend die in Scarborough Hospital, which were looking for care in Bridlington. Plus I think it is connected to the Palliative Care proposal of two years ago that has not happened for undisclosed reasons.
Bridlington Survey	It is a disgrace that local people cannot be treat in their own town. Family and friends should be able to see terminally ill patients in Bridlington without having to travel to Scarborough, Hull or York. Some people cannot drive / own a car or are unable to afford taxi fares.
Bridlington Survey	Bridlington hospital needs to be utilised to provide more health facilities for locals rather than reducing them.
Bridlington Survey	The unit provides a safe space for families , a more comfortable and friendly environment once they have left a medicall setting
Bridlington Survey	The care beds are needed for people to recover, be local to families to aid recovery and free up beds in Scarborough.
Bridlington Survey	There's no evidence that care in the community can take up the slack and no credible plan for those who cannot be discharge to Home.
Bridlington Survey	Bridlington hospital is a vital part of Bridlington and surrounding areas Everyone that lives works and comes here are desperate for all services to be expanded and all Nursing and Dr roles full I worked as a Fully qualified Nurse at Bridlington in the 1990s and until 2002 when I moved to Scarborough for Promotion and then on to working for the Care Quality Commission I was a paitent in January 2026 Mr [ ] Surgeon removed some titanium plates and screws from my ankle which Mr [ ] had put in 2 years earlier because we believed I was allergic to them as Ive a huge rash on my leg where they were

	I was looked after perfectly and extremely well I would encourage anyone who needs replacement parts to opt for Bridlington hospital I believe the Fracture Clinic that was there a short while ago also needs taking back there The hospital is run very well Its extremely clean and the staff are all very well trained and extremely helpful making patients feel comfortable and at ease
Bridlington Survey	This unit is absolutely fundamental to local residents/patients and their families
Bridlington Survey	This ward is essential in the community, it allows patients to be closer to home and relatives while they wait for their care plan to be put in place. It also frees up beds needed on wards at near by hospitals for patients who need medical treatments and assessments.
Bridlington Survey	Local care is critical, when you need immediate medical expertise travelling to Hull or Scarborough don't cut it.
Bridlington Survey	Bridlington requires in patient facilities to provide simple care close to home
Bridlington Survey	Bridlington is building many more houses but without the health care needed
Bridlington Survey	Is Care in the Community ready to cope with demand?
Bridlington Survey	We have a perfect unit in our lovely hospital and we shynit been made to travel to another hospital
Bridlington Survey	The care unit provides a mid point between hospital care and return to home. All hospitals have a problem with “bed blocking” and to remove a facility which reduces this is a retrograde step in patient care
Bridlington Survey	Bridlington is a growing aged community it needs all the health facilities available.
Bridlington Survey	It gives people chance to get sorted before going home to make sure there is help if they need it. Stops clogging up other hospital beds.
Bridlington Survey	I feel that services should be offered locally to the residents of Bridlington and surrounding areas . It makes good use of the purpose built hospital and all the facilities are there to make use of . Bridlington is growing with lots of new estates so there will be an increasing need for facilities locally. Many people especially elderly residents find it so distressing travelling to Scarborough or York hospitals as patients or visitors . It makes sense keeping local facilities with the increase need for ambulances whilst they are backed up with patients Scarborough or York espiecally during winter months when they are needed for emergencies locally .
Bridlington	Why should we have to travel to other hospitals when we have a perfectly good hospital unit in Bridlington. The care unit needs to stay open for the

Survey	people who need it
Bridlington Survey	It’s a vital service which allows patients to remain close to relatives & friends.
Bridlington Survey	Population is growing in Bridlington. Scarborough cannot cope with demand. Local residents should have access locally to a variety of services
Bridlington Survey	We actually need more facilities in Bridlington, not less
Bridlington Survey	Needed for rehabilitation between hospital and home. Mum was due to go there but went to the equivalent ward at Beverley which enabled her to go back to get own home
Bridlington Survey	The area is now getting bigger with more housing and generated holiday area and needs full emergency cover
Bridlington Survey	The hospital is important in a town with an aged demographic. Scarborough or York whilst not great distance in miles, are not close in travelling time. It is important that following care in the main hospitals that people are able to continue recovery closer to home. Loss of any service is a slippery slope for Bridlington. More services should be coming here not less. The hospital is seriously underused for what it was built for. We appreciate that there are insufficient resources to man all hospitals fully and so “centres of excellence” are created. However, Bridlington is a large and widespread town, arguably as big as Scarborough but we suffer from a lack of services.
Bridlington Survey	We need this facility
Bridlington Survey	We need the ward open to help Scarborough hospital by taking patients that are not ready to go home but are ready to be discharged from a main hospital to free a bed up.
Bridlington Survey	Where else can people from the local area go. It provides a safe place for people to be coming from hospital and awaiting assessment for ongoing care
Bridlington Survey	From what I understand is that the BCU was only a short term plan through covid, but from what i'm aware of there's been no information available as to what services were actually funded for this unit or what the plan was. The announcement of its closure was sudden and unexpected. There's no mention of why it's closing or what the future plan is going to be for the ward. Is there a plan to use it for something else?
Bridlington Survey	Bridlington hospital should be a fully functioning hospital with people not having to travel to other hospitals.
Bridlington Survey	People need it, not everyone has a care package in place when they are able to be discharged from hospital

Bridlington Survey	I think this service is needed
Bridlington Survey	Bridlington is a big town and needs this facility locally - not having to travel a long way to Scarborough for vulnerable patients
Bridlington Survey	It is a valuable asset to the town
Bridlington Survey	If patients need care following hospital treatment I feel they would receive better monitoring in a care unit rather than being returned to a place they call home.
Bridlington Survey	Step down beds to aid rehabilitation and safe discharges are still needed, and without them the overcrowding of A+E and wards at Scarborough hospital will worsen. Bridlington also needs more employment - the hospital is underused but could provide more local jobs for a socioeconomically deprived area. Travel to hospitals further away is not always possible for those employed at the hospital.
Bridlington Survey	It is a valued site for the vulnerable to rehab while waiting for care packages that are hard to find and reliefs anxiety around going home
Bridlington Survey	Because Bridlington is majority an elderly community without transport, it is vital that they are able to access treatment & care in their town and not having to pay £50 one way for a taxi to SGH
Bridlington Survey	Because it is a good unit for the residents in Bridlington
Bridlington Survey	Lovely hospital could be used more for patients and operations with ecellent staff and care
Bridlington Survey	People in Bridlington need services on their doorstep. People do not always have the means to travel to Scarborough or further, the public transport is shocking. Patients recieving care closer to home are likely to get more visits from, friends and family and surely this is a vital contribution to their recovery. We have a big population and deserve easy to access services, to help level out the health inequality people in Bridlington suffer from
Bridlington Survey	We need local accessible health care fascilities
Bridlington Survey	Bridlington needs a fully functioning hospital including this care unit (and A&E)
Bridlington Survey	Personal experiences from the use by family members. The bridlington community is being neglected and I believe because of the number of elderly in the town the situation will only get worse as time goes by
Bridlington	Having to travel to other hospitals further away not good for patients or visiting

Survey	
Bridlington Survey	Bridlington lacks a good supply of healthcare. We need more open not closed!
Bridlington Survey	Local and serves a valuable purpose for those people in Bridlington and east yorkshire
Bridlington Survey	The local population need to have this facility. It's unfair to expect Bridlington residents to travel for this type of care
Bridlington Survey	Ward is essential to relieve pressure in the acute hospital while patients wait for support to be put in place to facilitate a safe discharge in their own community
Bridlington Survey	Ward is essential to relieve pressure in the acute hospital while patients wait for support to be put in place to facilitate a safe discharge in their own community
Bridlington Survey	We need to keep this unit open as Bridlington is a growing community and also have a aging population
Bridlington Survey	This unit helps patients recover nearer to home as well as providing access for families to visit in the town where they live. This cuts down travel and enables visitors for loved ones whereas if out of town may and often does not happen. In the long run if patients have families visiting on a regular basis then this promotes wellness and a want to get better and get home quicker. The hospital should be used and staffed for this service to be provided.
Bridlington Survey	We need a local bridging service between staying at outlying hospitals and Bridlington that enables relatives to visit more easily. Efficient use of an excellent local resource.
Bridlington Survey	With an aging population, many who cannot drive to other hospitals for care
Bridlington Survey	The closure would make it difficult for family and friends to visit loved ones making them isolated even more then already having to be in hospital.
Bridlington Survey	Bridlington needs this care unit!
Bridlington Survey	It is the only place open when the GP is closed. Many people may not drive and it's the closest in the area. Scarborough hospital is quite hard to get to for people that don't drive and costs quite a bit of money to get there.
Bridlington Survey	Care unit is essential to give patients time to recover from procedures and to gain confidence to cope with everyday life. It is not just being able to make a cup of tea. It's confidence to deal with everyday life.
Bridlington	I believe there could be a need for this as a stepping stone and possible extra excercise/body strengthening therapy before returning home. A kind of

Survey	convalesant ward.
Bridlington Survey	Bridlington needs this facility not only for the locals but also for the many visitors that come to Bridlington
Bridlington Survey	It can be utilised to support with further rehabilitation services onsite and relieve pressure from Waters Ward and the acute sites
Bridlington Survey	Bridlington Hospital is a resource that should be built up not torn down piece by piece
Bridlington Survey	Community care deserved by locals
Bridlington Survey	We need a hospital
Bridlington Survey	A local care unit is many times better than a distant one for patients and visitors. Patients need a period of recovery before being sent home. However good home care is, it cannot be as useful and safe as hospital rehabilitation with 24 hour access to care. Patients sent home too soon are likely to be readmitted. Is there evidence that there would be enough home care available anyway?
Bridlington Survey	We need MORE services at Brid Hospital, not less! Scarborough is too far for people who don't drive, the elderly and the chronically ill. Use Brid Hospital to it's fullest extent!
Bridlington Survey	I think it should stay open as what are the elderly going to do while waiting for care packages
Bridlington Survey	Bridlington needs its own hospital. The town is growing massively, with large developments in Hilderthorpe, Scarborough Road, Pinfold Lane and Bempton Lane. The nearest A&E unit is more than 20 miles away. The nearest centre for acute inpatient treatment is more than 20 miles away. Transport to this centre - Scarborough Hospital - is seriously problematic unless one has a car, and the road from Bridlington to Scarborough is single lane, narrow and winding. This is absolutely unsustainable. Bridlington needs its own hospital, and we actually have a purpose built hospital that has been woefully underused for years and years because of insane policy decisions bearing no relation whatsoever to the needs of Bridlington residents. My mother was hospitalised three times in 2023 and 2024 at Scarborough Hospital, dying there in early January 2024, on a night where - having driven the 20-odd miles there late morning and having been there all day and driven the 20-odd miles back to Bridlington at 1am, I drove back that 20-odd miles through blizzard conditions at three a.m. Imagine what that might have been like if I had had to drive two miles from her home to Bridlington Hospital. After her second hospitalisation she had been transferred to Bridlington Hospital to recuperate for a few days. It was SO much easier to visit her there.

	Bridlington needs its own hospital.
Bridlington Survey	Bridlington has very few hospital services as it is and it had an aging population that requires a variety of care needs in a variety of settings. Resident in Bridlington have to travel to York , Hull or Scarborough for hospital treatment and this distance to travel can sometimes mean that their loved ones struggling to visit and at high personal cost. the patient themselves struggle to get to hospital or they can get there only at huge personal cost . I am aware that their us and alternative of care from local services but these services too are under pressure, so until this alternative is costed and properly funded, there are new staff recruited a d trained the care unit should not be closed and even then I feel that the unit should be kept open for the most vulnerable of patients. Finally Bridlington in terms of health inequalities is the poor neighbour and there should be more services offered closer to home than less
Bridlington Survey	It's difficult enough trying to obtain a GP appointment but at least there's always the choice of visiting the care unit. Because this is a seaside town with lots of visitors on holiday and resident elderly people there needs to be easy availability of health care and advise. Closing this last bastion of readily available care could be fatal.
Bridlington Survey	It is a well used and needed unit for the residents of Bridlington and surrounding area!
Bridlington Survey	Because the infrastructure is not there to arrange care or provide car for people at home.
Bridlington Survey	Its helps a lot of people who cant get to scarborough hospital
Bridlington Survey	Lack if service for local communities
Bridlington Survey	The area needs as many care facilities as possible given the increase in housing in the area.
Bridlington Survey	We have lots of old people here. We are fed up of having to travel further away when we have an underused hospital on our doorstep
Bridlington Survey	Bridlington is the most convenient hospital for our family to attend. We are rural and this saves prolonged journeys to Scarborough / Hull / York. As a family we use the hospital at least 5/6 times a year currently, however usage is due to increase due to ongoing health complications. Having vital services removed would force us to go further afield and cause a significant unnecessary impact on our family. Familiarity is necessary with SEN individuals, those with complex disabilities and needs and change can become catastrophic.
Bridlington	It is a very needed ward, for pt that are awaiting care package or a placement,

Survey	sometimes they are waiting for over a week to be seen by social worker and then again to sort carers at home or fine a place
Bridlington Survey	Closing the unit will make bed pressures worse amd result in people not getting the proper care they deserve. Closing the unit will alao meqn people being discharged home when not fully suitable and will bounce back into the hospital more regulary especially the older generation
Bridlington Survey	It is an invaluable patient resource. It supports patients discharge, and means that can be cared for closer to home.
Bridlington Survey	It has worked well and there is not enough community provision in place to support the close
Bridlington Survey	There is a need for this service
Bridlington Survey	Losing valuable beds for Bridlington residents. Families of patient will have to travel further
Bridlington Survey	Losing valuable beds for Bridlington residents. Families of patient will have to travel further
Bridlington Survey	It was always temporary and not always full
Bridlington Survey	The trust has so many med fit patients in the acute bed base and is closing more acute beds with Oak ward moving. The medical consultants have been stopped going into ED. which has meant more admissions. the trust lied about palliative care beds. Patients want to be closer to home, so med fit patients who are elderly, and need their loved ones to visit who can't get to Scarborough or pay £40 each way for a taxi will be disadvantaged.
Bridlington Survey	I do not have any current information on this.
Bridlington Survey	A lot of empty beds and wards at Bridlington, theatres could be used more
Bridlington Survey	Losing valuable beds for Bridlington residents. Families of patient will have to travel further
Bridlington Survey	Family friend (widowed and had no children) was on Bridlington Community Unit over Christmas and he was very well looked after. As a Bridlington resident, he understood he was IN Bridlington (he had previously had bad experiences at Scarborough Hospital) Additionally we were able to visit more often with also living in Bridlington (especially over the winter months) which was so important to him, with having no direct family in the town - which believe aided his recovery greatly.
Bridlington	Unfunded

Survey	
Bridlington Survey	The trust has so many med fit patients in the acute bed base and is closing more acute beds with Oak ward moving. The medical consultants have been stopped going into ED. which has meant more admissions. the trust lied about palliative care beds. Patients want to be closer to home, so med fit patients who are elderly, and need their loved ones to visit who can't get to Scarborough or pay £40 each way for a taxi will be disadvantaged.
Bridlington Survey	I work with a lot of residents in the east riding who really struggle to access other hospitals outside of Bridlington.
Bridlington Survey	This was meant to be funded by the icb as a stop gap for medically fit patients as community provision was not available it was a community unit. York also had one and as funding for this stopped this was closed.
Bridlington Survey	Social care in the community needs investment and improving - these patients should not be in a hospital setting.
Bridlington Survey	Medically fit patients will backlog onto wards in Scarborough instead - causing reduced flow through the Scarborough wards.
Bridlington Survey	Brid is a fantastic hospital with so much potential and people who live there should have the opportunity to use it rather than travel elsewhere
Bridlington Survey	I believe services in Bridlington need to be invested in rather than reduced. The size of Bridlington is growing with three new build estates and an elderly population. With this in mind, more services are needed in this area. Some families don't have the opportunity of transport to travel to other hospitals 40-45 minute drive away and family can be important in a patients recovery journey. Not having access to family as often can have a detrimental impact to a patients mental health.
Bridlington Survey	I believe services in Bridlington need to be invested in rather than reduced. The size of Bridlington is growing with three new build estates and an elderly population. With this in mind, more services are needed in this area. Some families don't have the opportunity of transport to travel to other hospitals 40-45 minute drive away and family can be important in a patients recovery journey. Not having access to family as often can have a detrimental impact to a patients mental health.
Bridlington Survey	If the money will be spent on care in the community then it could be a good thing although come winter time we will need the bed space as waters ward cannot take all the extra patients. Some patients seem to stay on waters for months without any community care packages available to them.
Bridlington Survey	This unit is necessary for local people who cannot travel or who’s family can’t travel and all facilities are here on site it makes sense to keep a place running instead of forcing people to have to use centres scattered around the region
Bridlington	Bridlington is always being stripped of healthcare services and unfortunately

Survey	us residents are made to feel that we aren't valued as the town isn't 'big enough' to support the running of a hospital or care unit. I think my concerns with closing the care unit would be the impact on the local community, both those who work there and those who receive care there. Bridlington has an ageing population and therefore is in greater need or wards and care units for the elder population. If these are closed in Bridlington, then these people are going to have to move to either Scarborough or other east riding trust buildings. Not only does this move them further away from their own home, but further away from their families. A great thing about Bridlington hospital is that it is very easily accessible through public transport. Therefore, for those who don't drive and the elderly who often cant they can still see their loved ones regularly. If this unit was to close these people would have to commute further, which for a lot of individuals would be very challenging. Being a resident of Bridlington I always wish more care could be offered at Bridlington hospital, it has a great community feel and the staff and services are always brilliant, you are seen quickly, by caring individuals. Unfortunately people who aren't local to Bridlington often don't see this due to how much of the hospital is unused. We need to stop putting money into supporting other projects that perhaps impact the local community into a negative way, and start listening to what residents actually feel matters.
Bridlington Survey	Much needed for patients waiting for safe discharge into the community. Otherwise patients would stay in the acute hospitals taking valuable bed space while their safe discharge was arranged whether it be packages of care or placement to facilities which can meet patients often complex needs. Additionally, patients are able to be closer to family and friends which contributes to their wellness while waiting for safe discharge. Without this valuable service patients would be cared for in Scarborough or York which prevents regular visits. This has great impact on patients and families mental wellbeing not to mention the cost impact on travelling and the time involved. Often patients families do not have the luxury of their own transport and have to rely on public transport which is very expensive.
Bridlington Survey	It’s vital to the community
Bridlington Survey	I think this is where a friend was able to be moved from Scarborough after 6 weeks with a complicated leg break (she has MS) and was able to continue with physiotherapy and receive visitors at most times. I think it was boring for her, but at least she was bored close to home! And still receiving whatever care needed. And I could visit immediately I found out about her move (I’ve got MS too). And so many people in Brid are older and maybe don’t drive (like me!).
Bridlington Survey	The BCU provides an option to move patients from other beds within Scarborough hospital to the BCU to free up beds until social care can be arranged.
Bridlington	I'm sure there's a lot of detail Joe Blogs isn't aware of when it comes to

Survey	decisions such as this. I'd want to know more about the expected impact on beds in SGH + financial implication of staying open vs closing. What will become of the space and equipment?
Bridlington Survey	It helps with flow between the acute site and those awaiting community support.
Bridlington Survey	Bridlington needs more services for residents and holiday makers not less
Bridlington Survey	There are a lot of people within Bridlington who do not have family to go home to, so if this service can help them to get something in place it should continue
Bridlington Survey	Bridlington need more not less Services
Bridlington Survey	Need to understand if the BCU is doing the job it is designed to do and if the money spent on the unit could be better spent elsewhere within the hospital
Bridlington Survey	As bed blocking is a key restraint, and there is always an issue over whether NHS or LA funds care in the community this facility is needed to provide that care close to the family / support network (if any) . The support at home is chaotic at best even if you can get the right amount of carers and support!!.
Bridlington Survey	Bridlington have a very big group of older aged community along with families, that are less well off. Even living in Scarborough, when I have to go through to York for an appointment it is a very expensive and many people don't drive. Closing bridlington hospital would mean many older people would go without care and a huge increase in ambulances been used for less urgent care than life threatening.
Bridlington Survey	The care unit removes strain on Scarborough Hospital. It allows easier access for local residents to visit their loved ones. Travelling to Scarborough Hospital would is a 2.5 hour round trip with traffic. As well as increased traffic pollution and fuel costs / use.
Bridlington Survey	Hugely useful for many people
Bridlington Survey	We have many vulnerable and aged people in Bridlington who do not have transport to travel
Bridlington Survey	Alternative is Scarborough hull york or malton which buses do not go to so expensive and difficult to get to i have to go to York for parkinsons clinic which is taxi. Train and taxi
Bridlington Survey	Many older people retire to Bridlington every year possibly more than any other area on the East coast. This valuable service needs to continue to meet their needs and everyone else living in Bridlington and the surrounding area
Bridlington	Closing this unit will mean that Bridlington residents will in future have to

Survey	travel 20-30 miles at a minimum to access NHS services. The walk in centre provides that link between the larger hospitals ensuring that patients do not have to face journeys of an hour or more for blood tests and other tests. It also provides a service for tourists meaning that they can be seen and treated locally. Not everyone has a car, long days travelling for a ten minute appointment is not acceptable. Bridlington deserves better!
Bridlington Survey	I consider that it offers a valuable service to a growing population.
Bridlington Survey	Bridlington and its surrounding areas need this service many cannot travel the miles to another care unit enough people here in Bridlington and surrounding areas to warrant keeping it open .
Bridlington Survey	Nearest hospital if it closes is scarborough and the public transport is in adequate from bridlington to Scarborough meaning only alternative is ambulance or taxi. As taxi to or from Scarborough can cost in excess of £50 depending on time of day etc this is making free nhs treatment unaffordable
Bridlington Survey	Too few hospital services locally. The town has a large aging population which often require hospital services.
Bridlington Survey	It is needed by local residents
Bridlington Survey	The population is growing with lots of new homes and a lot of elderly people. It is ridiculous residents are expected to travel out of the area for treatment when we have a perfectly good hospital which is not used to its full potential
Bridlington Survey	Too far to travel to other hospitals & leaves Bridlington without any hospital beds whatsoever.
Bridlington Survey	Not able to access treatment and care locally without transportation
Bridlington Survey	Having seen the shocking level of patient care - especially the elderly in hospitals awaiting onward care, a dedicated unit bridges that much needed gap
Bridlington Survey	The unit should remain open Bridlington has a ageing community with limited care facilities to close the unit would mean for patient's to remain in overcrowded wards limited recouses and family members travel would be a very serious issue for many. Scarborough hospital without transport is difficult to access justice to few issue's around the subject of saving not only the ward but Bridlington hospital. Bridlington is expandinrapidly with new housing with younger peeople moving into Bridlington and area's.
Bridlington Survey	Scarborough health and our local GPs don't want to be there for caring elderly people around our area. They want people who needs care long term or care at home need to look at these new builds care homes. I also have concerns for people who need assistance to have dressings or injections the

	community nurses ask if there is someone who can do it for you. Bridlington hospital was full fully functioning hospital when all the local hospitals in our area was moved under one roof. It was a great place to work and care for people. That is what nursing is about and give care properly at homes when reasonable treatment. No all you get it go to A&E at Scarborough.
Bridlington Survey	It's the only one close for residents in Bridlington and surrounding areas
Bridlington Survey	We need Bridlington hospital to carry on&thrive as Scarborough is getting overloaded&we are getting more&more folks coming to live here in Bridlington so it makes sense to keep the hospital fully open
Bridlington Survey	I believe their needs to be a radical overhaul in the funding and provision of services to support people at home. However, even if this was in place, units like Bridlington would still be needed in specific circumstances.
Bridlington Survey	The Bridlington unit is an essential local service for a generally aging population in the area of bridlington and surrouding villages
Bridlington Survey	As it is a struggle to identify and access reliable, consistent and good quality home care. I speak from experience.
Bridlington Survey	People of Bridlington. Need and should have care in their home town. Travelling to SGH or York is not easy without a car. Alot of these people and their relatives are elderly
Bridlington Survey	Having being diagnosed with the progressive disease I need regular blood, ultrasound and endoscopy services. As an older patient Bridlington Hospital affords me with the opportunity to access services without the anxiety of travelling.
Bridlington Survey	The whole area needs and used this service at the valuable hospital
Bridlington Survey	Bridlington used to have 3 hospitals until the new one was built. This hospital now has limited services for local residents who have to travel to get treatment. As the area has expanded over the years I feel it is unfair to local residents not to have a fully functional hospital in the town.
Bridlington Survey	We need more care/hospital facilities around not less
Bridlington Survey	Bridlington hospital should be available to everyone, in all departments. Not just the care units. No one should have to be forced elsewhere for treatments. Bridlington population is expanding but we do not have the necessary infrastructure in our hospital or dental practices to cope with the increase
Bridlington Survey	It's the start of a slippery slope, lots of services have been stripped from our hospital already...we need more services not less. We have an aging population who need local services not having to go to Scarborough Hull or

	York for treatment. Also hundreds of new homes are being built which means a bigger population. We have an underused hospital, no NHS dentists and one doctors surgery...its absolutely crazy!!
Bridlington Survey	Bridlington has an elderly population many of whom do not drive and find it difficult to reach other care facilities. Plus they are the people that have paid NI and taxes all there working lives
Bridlington Survey	Postpones discharge. Exposes patients to infection.Deteriration, and further transfers between the hospital sites
Bridlington Survey	Very long distance to other facilities
Bridlington Survey	People need to stay closer to home so relatives and friends have easier travel arrangements and more often
Bridlington Survey	We are elderly, it is too much for elderly people to have to travel to Scarborough, York or Hull for help or appointments when we have our own hospital.
Bridlington Survey	Elderly population. More is needed not less
Bridlington Survey	My husband and I have only lived in Bridlington for 19 months and we were extremely disappointed that Bridlington Hospital does not offer more services especially as I do not drive. In the snow it took me over 3 hours to reach Scarborough Hospital by having to walk to the railway station, catch the train, and then walk again to the hospital. Pressure was on as the last train back to Bridlington goes just after 9 o'clock and then I faced a further 40 minute walk in icy conditions. As a 77 year old I should not be in the position of walking in such extreme conditions to access medical care. If my husband is taken ill, closing the unit would mean me trying to visit him in Scarborough Hospital or York Hospital which takes 2 hours to reach by train and then you have to walk to the hospital, as do you in Scarborough. As pensioners we cannot afford to take taxis! Bridlington is expanding rapidly so it is ridiculous to start reducing facilities rather than increasing and utilising the hospital fully.
Bridlington Survey	I think this care unit provides a vital link between hospital stays and being sent home into the community.
Bridlington Survey	Do not know enough information yetDo not know enough information yet
Bridlington Survey	Bridlington needs a hospital. The distance us residents have to travel for treatment is unacceptable
Bridlington Survey	Bridlington needs a hospital. The distance us residents have to travel for treatment is unacceptable

Bridlington Survey	It helps prevent bed blocking
Bridlington Survey	Bridlington needs decent health care. Scarborough or York is too far to go when a patient or the family of one. Local transport is not the best.
Bridlington Survey	I think as many services as possible should stay local. Especially for the elderly and infirm, if hospital step down is required this removes them from the acute hospital and prevents bed blocking there m whilst providing the care still required before they are ready to return home. Also enabling visits from family and friends without the stress of a long journey
Bridlington Survey	It is definitely needed by the elderly of Bridlington. It is easier to be sent back to Bridlington from Scarborough hospital to wait for care packages or to get back on your feet before going home. It saves bed blocking in Scarborough hospital, so freeing up medical beds for others waiting to be admitted from A & E. Sometime an elderly patient can be deemed medically fit, but that does not mean they are strong enough to be sent straight home. If you close the Bridlington ward, the elderly will be sent home too quick from Scarborough and just end up being re admitted. My mum at 96 has used this facility a good few times so I have a lot of experience on how well it works, and it has been far better to help her recovery than sending her straight home too quickly from Scarborough. It takes the pressure of the elderly wards in Scarborough, which are at full capacity most of the time. So if they close Bridlington, Scarborough hospital will be under greater pressure to send elderly home far too quickly, and it will be the elderly people that suffer in the long run. The unit in Bridlington is ideal as a safety net, making sure the person is actually fit enough to go home, which many times Scarborough say they are, when this is not the case. It helps them get back on there feet after been bed bound having treatment in Scarborough.
Bridlington Survey	Bridlington is growing, new houses being built, more tourists, we need decent and local health care facilities. The population is quite elderly and they / we need reassurance that we can get medical help quickly if needed.
Bridlington Survey	We have a high number of elderly people in Bridlington - we need better services for them
Bridlington Survey	The care I receive here was the best hospital care ever. I understand about appropriate use of resources and it was quiet when I was there. However travel for care on east coast is difficult for patients and visitors so what services are offered should be looked at carefully. I have been a patient at Scarborough too and they seemed very stretched.
Bridlington Survey	The alternative if closure is enforced is Scarborough. This is too far for people to travel, many of whom may not have transport and would need expensive taxis. Bridlington deserves better and services should be expanded not shrunk as the town and surrounding areas are constantly growing in population.

Bridlington Survey	There is a high percentage of people over 75 who need care in Bridlington Driffield and villages and need to be close to home. Transport links to Scarborough are poor so families struggle to visit and patients feel isolated. The facility is already there and runs very well so why remove it. Baby and bathwater syndrome?
Bridlington Survey	The unit serves more than just Bridlington. Would be users would have to travel about 25 miles at least if it were to close. Bad enough if you have a car but pretty impossible by public transport
Bridlington Survey	Closure of local services will adversely affect the local community - which includes areas of high deprivation - there are financial barriers to folk travelling further afield for medical care
Bridlington Survey	We do not have enough care already in Bridlington. Removing this unit is will make our services worse than they already are. I can't remember the last time I had an appointment with an actual dr ant my GP practice. With a long term health condition and for a town full of older people, it seems ludicrous to reduce an already struggling town. We need more, not less.
Bridlington Survey	Bridlington has an aging population. There are many single people with no immediate family who could benefit from this service. Without this service they could be forced to occupy a much needed bed in the hospital.
Bridlington Survey	It has been suggested that people recover better when they are able to have visitors, taking this care unit away would make this extremely difficult for an aging population to visit loved ones further especially if using public transport (not to mention the cost involved) therefore denying the patient holistic recovery. Furthermore, putting these patients into Scarborough will further cause bed-blocking there when beds are scarce, especially over flu season.
Bridlington Survey	The hospital seems to be shrinking as Bridlinngton seems to be growing.
Bridlington Survey	It's incredibly important due to other hospitals are far away and the majority of people are 50 and over. It is a great hospital for stroke people whe need to try and recover...operations for people to recover to leave space in main hospitals
Bridlington Survey	We need a safe option for people who are bed blockers elsewhere to be cared for until everything is in place for them to go home!
Bridlington Survey	Beds for rehab are desperately needed within Bridlington
Bridlington Survey	I live in Bridlington and would want my care to be in Bridlington
Bridlington Survey	Services at Bridlington hospital should be extended to relieve the pressure on Scarborough and york, not closing. You have empty wards and rooms just sitting there, why?, when you could utilise the space , freeing but beds in the

	other 2 sites. If the trust paid out more money on Services opposed to ridiculous amounts on wages for office staff and roles such as DEI then residents and visitors to Bridlington would benefit. Services should be based on getting the most qualified person for the role to benefit those in need, not on tick boxes, to pander to the woke narrative. Health and providing quality services should be at the forefront of the trusts agenda. Any proposed closers or reduced Services at Bridlington hospital puts residents and patients at risk. If more money where invested into extended Services such as a 24 hr A and E department and discharge wards patients and residents would benefit.
Bridlington Survey	The start of loss of services and care in Bridlington
Bridlington Survey	Travel to Scarborough hospital too far
Bridlington Survey	Yet another local service taken away when population of town is growing
Bridlington Survey	The BCU enables earlier release from overcrowded hospital wards & is closer to family & friends to enable visiting more regularly which helps speed up getting home.
Bridlington Survey	Following a recent stay in a&e (40hours). I was unable to be moved to a ward due to lack of bed space. Having to spend 40 hours on a variety of reclining chairs whilst I received rehydration treatment, with a long term condition of rheumatoid arthritis was not pleasant. Places like Bridlington Care Unit would help to relieve the strain on the wards a Scarborough to allow a better flow through the hospital. It would also allow people who need continued care in a hospital setting who are from Bridlington to be cared for in Bridlington where families can visit them. Which is important both for the families and for patients to aid recovery.
Bridlington Survey	We need this hospital fully working as it is a long way to scarbrough and york bridlington has a largest urban population in east yorkshire second only to Hull yet we have no fully functioing hospital our population doubles in summer with vistors ..
Bridlington Survey	Scarborough, York or Hull are far to far away to travel, particularly if you don't have own transport.
Bridlington Survey	Until adult social care is acceptable in the area then this unit must remain open. The aftercare isn’t there and it’s detrimental to patients being pushed from pillar to post and sent to care homes until social services get their acts together.
Bridlington Survey	I believe that it is a key factor of health within Bridlington. I myself have used it on a few occasions and my grandparents certainly have too.

Bridlington Survey	Because it's the only one in the area
Bridlington Survey	We need more services not less
Bridlington Survey	Health services need to be expanded to be available to all the community and be accessible to all not closed
Bridlington Survey	It offers a service that is badly needed
Bridlington Survey	Scarborough is too far for visitors to see their family.
Bridlington Survey	It concerns me greatly that Driffield's hospital and Bridlington's hospitals could be used for so much more than they are. It's a trip to hull Or Scarborough, sometimes for simple things and it isn't always easy to get there! Thank you
Bridlington Survey	Elderly population in Bridlington area is growing, once one thing closes it continues to another area and then another- Bridlington Hospital has amazing facilities and staff. I have had operation there and my husband attends the Parkinson's consultant and nurse clinic who are both amazing- please don't close - utilise it's facilities
Bridlington Survey	The ward is a 28 bed buffer ward for patients that are not acute, but need to have care plans and special needs prepared after leaving the wards. This can take time and would block up beds on acute wards while arrangements are made for patients to be discharged home with a care package or supported by various providers or even moved into another home that suits their condition needs. It is clear that these types of patients would block up acute beds while care plans and service arrangements for them had to be organised. This takes time from a few days to 6 months or even a year in the worst case. It is therefore necessary to provide a buffer ward in the system to keep acute beds free. By closing the care unit acute beds will not be freed up and patients who are not acute would be stuck on acute wards. There would be a saving on the accounts sheet by closing the ward, but overall the saving would be Negligible.
Bridlington Survey	It's important to have local services like this to support people and their family and friends. Lack of access to local healthcare and having to travel or be far away from family and friends during difficult times is not right. Removing and downgrading local services like this is detrimental to health and wellbeing of all local residents - especially those who cannot travel to appointments or visiting loved ones . More local services are needed not less.
Bridlington Survey	It is an amazing ward that provides the stop gap for patients waiting a package of care or placement in care home this can often take weeks/months to get sorted it is a vital service that is needed and it is a good use of the hospital rather the. It just going to waste as I am sure there is t many wards at

	Bridlington
Bridlington Survey	It is so necessary for people in Brid to have this facility. My friend has no family and was in Scarb.hosp. he was moved to Brid for a care package to be put in place. Once in Brid his friends were able to visit him as they could not get to Scarb. It also released beds in Scarborough for other people. He was so much happier once in Brid with people who could visit
Bridlington Survey	We residents should not have to travel to York/Scarborough for this essential service
Bridlington Survey	Very worried about the ever increasing population in Bridlington and the surrounding areas and the ever decreasing care facilities in our local healthcare system.
Bridlington Survey	I live in Skipsea, and any hospital appointments get referred to Hull or Scarborough, both of which are very difficult to get to. Having any facility that is easier to get to by car, bus, or taxi is badly needed.
Bridlington Survey	We need local hospital wards because of travelling distance to other hospitals, some people can't travel. I had to ask for move from scarborough to bridlington, so my husband could visit me when I was in hospital, he'd had a stroke so couldn't drive anymore. A neighbour drove him to scarborough to give me items I needed and carried them for him. It was hard times because I was in york, scarborough, bridlington, then york and back to bridlington, so We didn't see each other for a lot of the time and relied on phone calls. So I know how important it is to have wards in bridlington hospital, partners need to be nearby to visit .
Bridlington Survey	The local area is getting bigger and services are disappearing
Bridlington Survey	We need a care and hospital in bridlington has scarbough to far away and people will die has a result
Bridlington Survey	Need local care
Bridlington Survey	It’s needed until care packages are in place, these are not quickly available
Bridlington Survey	Not sure it actually makes the care system situation worse or not
Bridlington Survey	The town needs the ward
Bridlington Survey	Government policy is housebuilding and more and more houses are being built in Bridlington. All healthcare provision needs to grow in Bridlington because of this, not be reduced. Scarborough and York hospitals are becoming over burdened because they are being expected to cover too large

	an area. Simply accessing the carpark at York is causing huge traffic problems on Wiggington road because of the overburden and that's before you even get into the hospital.
Bridlington Survey	Hospital should stay open to serve the community of Bridlington as it is too long to travel to Scarborough and costly especially if you need to go to hospital in the evening.
Bridlington Survey	Local services are vital to the local areas. Whilst Scarborough and Hull are within an hour or so, living in the countryside and rural locations depend highly on the services offered. Public transport to the bigger hospitals is not easy, takes time, costs money (don't get me started on having to pay for hospital parking - that's just wrong on a national level) I would prefer an increase in services and with the ever increasing housing stock and increase in population even more reason to retain and grow what is available.
Bridlington Survey	We have an massive population of elderly people living in Bridlington. We should be cared for in our local area Many of the older generation do not have families living locally. Therefore if someone needs the social care unit it is easier for living spouses to visit which helps recovery!!! Rather than having to travel to Scarborough when it may not be possible financially or physically. Everyone needs someone close to them when unwell
Bridlington Survey	It is very useful for the person who needs it at the time
Bridlington Survey	This area needs all the medical and health resources possible.
Bridlington Survey	We need a local Care unit we have an elderly population that require somewhere close to be able to get there easily by bus a lot of people don't own a csr
Bridlington Survey	We need hospital for emergency's
Bridlington Survey	Needed
Bridlington Survey	We have no a&e for such a vastly populated area it's dangerous as it is and to close our other only source of urgent treatment seems absurd you are putting the people of the town in great danger
Bridlington Survey	This care unit essentially frees up vital services at the NHS trust hospitals.
Bridlington Survey	Because Bridlington has a big enough population to warrant a unit of this type. It provides convenience for carers/family and reduces stress for the patients.
Bridlington	Only providing it with care in the community is inconsistent and often does not

Survey	provide adequate support. Acute hospitals and currently overwhelmed and will have to cover this gap in provision.
Bridlington Survey	With the elderly population we need somewhere near, easily accessible, and familiar to the community to help with their recovery, family can visit especially spouses. If you are in an environment you are familiar with you are relaxed and that aids mental health, we have to learn to look at the holistic approach to the person centred care not what is convenient to the specialist, doctors, district nurses.
Bridlington Survey	Closing sectors of the hospital that are currently in need will only cause problems in a sector already crying out for more help is a desicion borderlining severly counterproductive
Bridlington Survey	Bridlingtons population is rapidly expanding with many new houses. facilities are stretched already. travel to scarborough is difficult already
Bridlington Survey	My husband was transferred to BCU following a fractured hip repair in Scarborough. It was excellent Peter to regain his independence. Also we are older residents and driving is getting to be more difficult.
Bridlington Survey	Concern for people staying in hospital longer than necessary..... 'bed blocking'
Bridlington Survey	We need this facility
Bridlington Survey	I am concerned that services are not available to meet the needs of patients from the care unit who would require home care should it close
Bridlington Survey	The cost of travel and time to Scarborough on the bus or a taxi is phenomenal. It would take nearly a full day to visit a care patient in Scarborough from Bridlington. Just paid £75 for a taxi to York Emergency Eye Unit and £45 back on the train.
Bridlington Survey	An essential service for a town that has a high elderly population.
Bridlington Survey	Ageing population. new homes being built in the area.
Bridlington Survey	Patients discharged from acute setting who are deemed 'medically' fit to leave often need support to continue their recovery in a round the clock setting - essential for preventing readmission to an acute ward. Resulting in stretched services of ambulance service and A&E staff. Higher demand (on already fully stretched) for community nursing staff and LA social care services. Demographics - Bridlington has highest population of over 60s in the area. Lots of elderly people without unpaid carers do not understand the process and all the changes in health reorganisaton.

Bridlington Survey	Care will worsen in area; Scarborough and Hull will be overrun.
Bridlington Survey	Most of the patients are bridlington based. This means that relatives are also useually bridlington based and are able to visit the patient. the fact that relatives are able to visit easily greatly enhances the recovery rate of the patient. If relatives were having a 35 mile round trip to visit the patient they might only be able to visit once or twice a week instead of every day. the lack of familiar contact could be detrimental to the patient. Bridlington care unit should not close as this will only add to the health inequalities already suffered here.
Bridlington Survey	Needed in Bridlington
Bridlington Survey	Bridlington needs more services, not less!
Bridlington Survey	It's an essential aspect of service in a town the size of Bridlington
Bridlington Survey	The care unit is vital in this community. this is not the staff available at/in any of the home care systems that are available to be used. short term or long term. the staff are underpaid and overworked as it is. some of them not given adaquate training. given the increasing number of residents in bridlington this ward is vital in the ongoing care that is required by any person on being discharged from hospital.
Bridlington Survey	This is very important for people who have not sort any support at home.
Bridlington Survey	No proper stepdown care pathway with community care
Bridlington Survey	I do not think the care unit should be closed
Bridlington Survey	More older people in Bridlington and outer areas who need this one.
Bridlington Survey	Full care without exceptions are essential in a growing community.
Bridlington Survey	Because after someone has been hospitalised say in Scarborough they should be able to be discharged to a care facility closer the there home if they need is appropriate before eventually returning home
Bridlington Survey	Bridlington has a high proportion of elderly people who have many different medical needs. They should have access to care close to home rather than having to travel miles - often by expensive transport - and suffer the

	associated anxieties.
Bridlington Survey	Valuable resource for patients and families after patients discharged from acute care hospitals
Bridlington Survey	Was only opened to help with the over flow of cocid patients. Not staffed to be a functioning ward
Bridlington Survey	The town needs a fully functioning hospital with a&e not a reduction in services
Bridlington Survey	Too far to travel to other hospitals, especially for people who don't drive
Bridlington Survey	Lots of older people who need to be near where they live
Bridlington Survey	Plain and simple - because we need it. In a town the size of Bridlington it’s absurd not to have a Care Unit.
Bridlington Survey	Accessibility for Bridlington residents if are admitted to hospital / are closer to home and the relatives able to visit more regularly (especially if they do not drive) Hospitals can be a very lonely place (especially for the elderly) so believe visits are extremely important in their recovery.
Bridlington Survey	People will not receive adequate care at home due to lack of services. Those who do not have the support of family will end up back in acute care hospital. Until proper community care can be guaranteed the unit must stay.
Bridlington Survey	We have hospital and staff yet the health trust want us all to travel to Scarborough which for some people is not doable
Bridlington Survey	We, as Bridlington residents, need a local care unit.
Bridlington Survey	We need all resources at this Hospital
Bridlington Survey	If funding can be used better to improve the hospital overall for every patient I would see that as positive, although unblocking beds is easier said than done as social care from start to finish is in dire need of an overhaul not only for patient care but for the staff who work and continue to work in the sector
Bridlington Survey	We need more care services in Bridlington not less
Bridlington Survey	It is not acceptable that so many residents in need of hospital care,especially in the rural areas of East Riding of Yorkshire, have to travel much further to Scarborough, Hull or York with ever rising costs of fuel etc'.
Bridlington	People don't want to travel further afield for hospital treatment especially the

Survey	elderly.
Bridlington Survey	The growing number of new housing in Bridlington
Bridlington Survey	If i needed a server op I'd like to know i could stay closer to home. Rather then at scarbough where I have bad memories there.
Bridlington Survey	While I agree there should be no need for this service, people should be able to go home for care, there aren't enough carers in Brid. But having had two parents in Scarborough hospital this year, both of whom have had appalling care, falls, lack of respect, I wouldn't wish Scarborough hospital on anyone. So keep the unit open but work with social care to get things moving and remove the need the for this unit before closing it. Patients shouldn't be there for any longer than two weeks however. I do know some patients deteriorate quickly in the unit if they wait too long for a care package
Bridlington Survey	We need local services for local residents
Bridlington Survey	Having to travel long distances to receive care.
Bridlington Survey	Local people need local care
Bridlington Survey	No valid justification for its closure, will support bed blocking at Scarborough , hull, York etc.
Bridlington Survey	Bridget is the largest twon in East Riding. We need our hospital fully working. No ghost wards please
Bridlington Survey	Bridlingtin is a populous and growing area, needing more medical and supporting services rather than fewer. While I appreciate the reasoning behind the proposed closure, I feel this is a backwards step and will place more onus on neighbouring hospitals, with 'bed-blocking' by patients who could have been transferred to Bridlington.
Bridlington Survey	It is nice for Bridlington to have this ongoing care unit. But why don't other areas have the same services? East Riding is a very large area, if the NHS can provide this ongoing care facility why can't other towns in East Riding have the same services?
Bridlington Survey	Worry that it will cause bed-blocking in Scarborough and Hull. People "recover better in a non-hospital setting" but only with properly funded and co-ordinated community nursing support.
Bridlington Survey	It’s just another care unit to close when we as a town are crying out for this unit and need it
Bridlington	Life and the improvement of services

Survey	
Bridlington Survey	There are no enough care facilities across Bridlington and Holderness area already. Waiting times are too long, friends anre left ant home before they anre anble anns then the home care is insufficient and there is no need to put extra pressure on the hospitals. Closing this will cause residents to have to travel further to hull Driffield or Scarborough. It will expose vulnerable people to long queues and waits. Public transport to either is limited and costly.
Bridlington Survey	If there is no clinical/safety need then it's right that resources should be routed elsewhere. However if the need is there it's right to retain.
Bridlington Survey	Thin end of the wedge going forward I can see more services being cut at our hospital We are a seaside town where our population trebles but already no a&e service our ageing population has to travel to Scarborough or Hull for most hospital services Have you tried parking at these sites or even travelling to these in the hight of summer We the increased building programme in Bridlington our hospital needs to be fully functional Helping our elderly residents re get help out of hospital before going home is essential Just common sense
Bridlington Survey	We need to keep services like this as local as possible so that people are not having to travel long distances to get the same services.
Bridlington Survey	It's a necessity for this town
Bridlington Survey	My husband and i are getting older and so easy to get to, rather than somebody having to take us to York etc.
Bridlington Survey	When one unit closes it is just a matter of time before another then another then the whole hospital will close!
Bridlington Survey	Very worrying that in a time of need there was no local care unit
Bridlington Survey	My husband and I are pensioners and are very fit at the moment,, we have always in our lifetime felt we could rely on the National Health Service if we ever needed it , we have always worked and paid into the system,for over 50 years,never been unemployed,I was aNHS staff nurse for 35 years, my husband was a baker and confectioners . I feel if we needed a doctors appointment we are a burden to the system so we keep ourselves as fit as possible.The feeling of having to travel out of our town to another hospital many miles away is frightening, we don't have transport , which means the travel would inevitably cost us more money via a taxi because of the distance. I think reassurance is a state of mind and being worried about getting ill would make a visit to see a Doctor (if we could get appt) more likely.
Bridlington Survey	Hospitals need to move "bed blockers" to somewhere to free up space in Hospital. Frail people who are sent home "too early" bounce straight back into

	hospital. Brid is half way between scarbs and hull so ideally placed. Home support sounds good but fails in practice due to time constraints.
Bridlington Survey	It is an invaluable support system for people being discharged from hospital and for when hospital admission is not suitable
Bridlington Survey	Why would the trust take yet another service away from Bridlington hospital. After spending a significant amount of time over the last few years at Scarborough hospital with family members. I have seen first hand the strain and pressure that hospital is under, how far too many beds are taken up with people who do not need acute medical care but need a place where rest, recovery and rehabilitation is provided. The Bridlington BCU provides exactly that. In my opinion this type of unit needs increasing not removing. My mother spent over 6 weeks in Scarborough hospital last summer after a fall resulting in a broken hip. A stay that should have been a week maximum but due to the over stretched situation at Scarborough key medical care which should have been monitored was missed and resulted in a prolonged stay. When she was well enough to move to BCU there were no beds available so her bed was moved into corridor next to the nurses station with a screen around her in Scarborough. Absolutely disgusting and totally unacceptable) luckily after 2 days a bed did became available at Bridlington BCU where she spent another two weeks. So how many more vulnerable people will this be the case for if they shut the very much needed BCU
Bridlington Survey	I Believe the unit will be repurposed. but after care is needed if there is a lack of home/Community support
Bridlington Survey	There is more new builds being built in bridlington high preposition of elderly
Bridlington Survey	Worsened access to Diagnostic tests
Bridlington Survey	Lack of Local Fascilities we live nearer to Bridlington thanScarborough whichbis a night mare to get to.
Bridlington Survey	I think the care unit at Bridlington hospital is an asset: relieving the pressure of delayed discharges from acute hospitals and so freeing up hospital beds, providing care close to home for people whose care packages haven't yet been put in place, enabling loved ones to visit without long travel times. Without care units such as Bridlington's the likelihood of there being overhasty discharges from acute hospitals will increase. I don't believe what I was told at the consultation at Bridlington Spa that there is not a demand for it. I think it's shocking that the 28 bed unit has been quietly reduced to 15 beds and only currently holds 8 people. This is particularly shocking when we know that acute hospitals such as Scarborough have a poor record when it comes to delayed discharges. The 60 bed care unit that Scarborough hospital is planning to build won't be there for years but the fact that the hospital is even planning to build one shows how much it is needed. I can only repeat

	that I think the Bridlington care unit is an asset which has been shockingly ignored by the powers that be.
Bridlington Survey	It provides a much needed local facility for patients who need to be cared for in a clinical setting before going home. This frees up acute hospital beds, ensures that all the required ingredients for home care are in place for the individual concerned and enables their family to visit them more easily and at lower cost than travelling to a hospital like Scarborough or Hull. It worries me that the gradual closure of BCU has been going on "under the radar" in a situation where Scarborough hospital is under great pressure to discharge patients asap and I'm not sure that the services to enable adequate home care for each individual's needs are in place. I believe that other community hospitals that are in a similar situation to Bridlington are keeping their care units rather than taking the drastic step of closure and see this as the best outcome particularly for elderly and vulnerable people.
Bridlington Survey	It would mean having to travel out of town when there is a purpose built facility already in Bridlington
Bridlington Survey	The town is growing, lots of new developments attracting new residents and income to the town. Bridlington needs to care for its citizens
Bridlington Survey	I think it is important for people from Bridlington to be able to come to BCU so that they can easily be visited by family and friends as they prepare for discharge into the community. Many people in Bridlington are not able to drive, which makes access to Scarborough or York hospitals very busy. Also, having capacity at BCU can allow beds to be freed up in Scarborough Hospital to avoid corridor care, which is a Trust priority.
Bridlington Survey	Provision is already low. Closure will surely increase the problem.
Bridlington Survey	We need to keep people close to their homew for travelling and much needed visiting purposes.
Bridlington Survey	To have local people in their own town so that they can be visited whilst convalescing is far better for their overall recovery. It is far easier for relations & friends to keep in close contact with the patient. During a winter it is easier due to adverse weather conditions to travel locally, then in a summer when there are more travel problems due to tourists (which are much needed for local economy) it is a saving of at least 90 minutes travel time on top of a visit.
Bridlington Survey	Bridlington has a large number of elderly, we need wards adding not removing! Not everyone has access to transport nor the funds to travel. Our community deserves better
Bridlington Survey	Best in care hospital
Bridlington	Beds lacking at Scarborough Hospital

Survey	
Bridlington Survey	I will use it in the near future
Bridlington Survey	This was a covid funded initiative. I understand that people in the unit are discharged and return after. High number of readmissions. Better models of care, home care.
Bridlington Survey	Size of town, elderly population, i should imagine it would be busy
Bridlington Survey	The population increases greatly in Summer. This obviously also includes Scarborough where facilities also come into more pressure. Bridlington saved care for its own.
Bridlington Survey	Local need for a largely elderly and increasing populous
Bridlington Survey	Needs to stay local
Bridlington Survey	It needs to be local for residents to attend. Scarborough or York is too far to travel, especially if you don't have transport. Care should be closer to home
Bridlington Survey	Bridlington Hospital is one of our prized health care facility. I was there at the opening. Far more organised than Scarborough
Bridlington Survey	It is needed
Bridlington Survey	Think they will close care unit then it will be another unit until they close all the hospital
Bridlington Survey	Lack of care facilities or in your own home
Bridlington Survey	My 96 year old mother was cared for here and i cannot fault the care she received up to her death
Bridlington Survey	Future use and ease of availability
Bridlington Survey	The care unit provides important local services. Travel is a nightmare if you are unwell
Bridlington Survey	Mental illness patients i.e. dementia, Alzheimers, BPD etc need regular contact with familiar people to encourage eating and healing - stop deteriorating, non contact mental stimulation. Patients family / friends many do not have access to suitable or affordable transport (as need door to door as cars offer) to visit as regularly as they and the patients need. Patients with no family or neighbour / friends will to help (or finances to pay for) need this

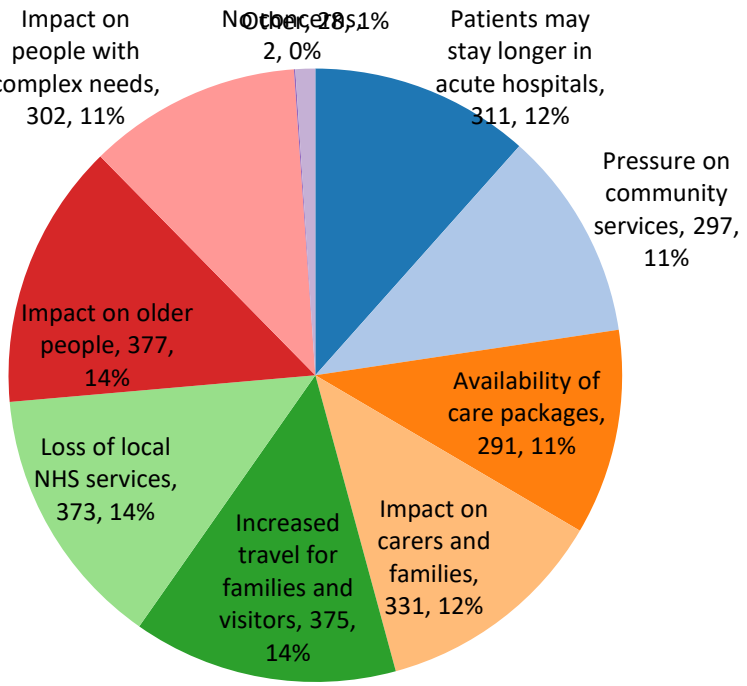
	ward to stay in as the mid step between hospital and being alone a home.
Bridlington Survey	Great need for step down support before discharge for older people. Would lessen readministration to acute facilities.
Bridlington Survey	We need care for Bridlington and surrounding villages. Especially as we are a tourist area.
Bridlington Survey	We need a care unit for relatives to visit easily for the wellbeing of the patient. Also patients fair better when they are close to home.
Bridlington Survey	Without further care units in Bridlington, this is vital for families who would have no transport to travel further afield.
Bridlington Survey	We need services in Bridlington Hospital.
Bridlington Survey	Because it is needed to help stop bed blocking. As the town expanded the services at Bridlington Purpose built hospital all have contracted.
Bridlington Survey	Lots of older people live here. Could be in the care unit until care package is sorted instead of taking up a hospital bed then released home quicker.
Bridlington Survey	Bridlington Hospital is one of the best in York/area Check patient satisfaction surveys.
Bridlington Survey	Keep it local, less travel issues.
Bridlington Survey	If the unit closes there will be more travelling for friends and relatives, many of them elderly and stressed with worry about their loved ones.
Bridlington Survey	We need the bridlington care unit
Bridlington Survey	Impact on the elderly
Bridlington Survey	I do not support it at all. We need as much support it's too far to Scarborough and we need a hospital fully working in Bridlington.
Bridlington Survey	Living in Bridlington now for 38 years plus, from the hospital's original opening and offering so many beneficial services to the local community. I have with great sadness seen many of the original premises close. I am now getting to an age where I may need my local hospital facilities more, hence my interest in this forum.
Bridlington Survey	Vulnerable people need reassurance and positivity knowing these services are available. Most aide recover and prevent re-admittance to hospital
Bridlington Survey	Although it was a temporary measure to assist during covid it has continued to provide a step down measure to enable patients to be cared for in their

	'preferred place' eg hom
Bridlington Survey	Bridlington Care Unit provides an intermediate stage between a large hospital and going home, like the old convalescent homes or cottage hospitals. We need the unit to get patients out of hospital to make way for others (to save bed blocking)!
Bridlington Survey	It is an important asset
Bridlington Survey	The NHS no longer service the people. Bridlington, that includes the doctors practice, neither staff or patients know what to do
Bridlington Survey	I believe that care facilities should be available as close to a person's home as possible. All the reasons in answer (7 apply.
Bridlington Survey	This facility is much needed. Care should be as close as possible to home to ease problems with travelling.
Bridlington Survey	We need more services in Bridlington hospital. Bridlington is a town with a very large elderly population which needs a good local service. Not in York or Scarborough or Malton. In Bridlington
Bridlington Survey	My husband was cared for in the care unit
Bridlington Survey	We need patients closer to home. It's a 40 mile round trip to Scarborough from Bridlington. I recently had cause to visit someone in Scarborough Hospital. When you are elderly as I am it's such a trek. I was visiting 3 times a week and there was never spaces in the car park you had to queue until one became available. Then it cost over £5 each time. The thing is when people are in hospital they need to be near home so their loved ones can easily visit. A lot of elderly people don't drive.
Bridlington Survey	We need care for people in Bridlington closer to their homes and relatives.
Bridlington Survey	Care should be kept local. The general population needing this facility are elderly and travel is difficult
Bridlington Survey	Patients are being discharged and returned to their homes when they are not ready - no support!
Bridlington Survey	We need a local hospital. Not everyone can get to Hull, Scarborough or York Hospitals
Bridlington Survey	We need care in Bridlington
Bridlington Survey	The care unit offers excellent short term provision for patients from hospital but needing care at home or in a care home (two friends of mine) that was

	vital
Bridlington Survey	Not everyone's care can be safely delivered at home
Bridlington Survey	Local people need local services. It is almost impossible to get to other hospitals by public transport. Malton from Bridlington is totally unreasonable.
Bridlington Survey	Bridlington's population is growing exponentially with a population of 48,000 including the surrounding area. And with a large retired population we need all the help we can get.
Bridlington Survey	Patients need to be closer to home. it is so important for family and friends to be able to visit. this aids recovery with both physical and mental health.
Bridlington Survey	It is needed in Bridlington. Bridlington has an ageing population.
Bridlington Survey	Bridlington is growing right across the board. Therefore even more care is needed.
Bridlington Survey	Scarborough and York hospitals are too far away from Bridlington for any emergencies. Also why isn't there a maternity unit in Bridlington Hospital?
Bridlington Survey	32% of the bridlington population are over the age of 65
Bridlington Survey	The town is getting larger. We need facilities covering as many services as possible.
Bridlington Survey	Bridlington is becoming more populated, mainly with older people. Travelling to hospitals further afield, is not the way forward. It can be expensive and difficult to get to these venues if you don't have transport.
Bridlington Survey	A growing and expanding town requires relevant services and not diminishing services.
Bridlington Survey	Lack of community care provision at home Lack of step down beds and care provision in Bridlington
Bridlington Survey	Easier access for Bridlington residents at al times
Bridlington Survey	Because of the needs of the hospital which should be to serve the population and the added number of visitors - we want to increase facilities availablen nor decrease them!
Bridlington Survey	Needed to release beds in main hospital to keep waiting lists down
Bridlington Survey	Important to have a hospital in such a big town and not have to travel miles

Bridlington Survey	Bridlington has an ageing community and anyone needing end of life care should be close to family and friends who can pop in to visit every day and the patient is not worried about their loved ones having to travel for an hour or more to visit plus the cost whether in a car or public transport
Bridlington Survey	As the town expands it seems insane to reduce healthcare facilities not only for the patients but or families of patients who may not have a private means of transport to travel to Scarborough, York or Malton
Bridlington Survey	I am one of many elderly who need a hospital which I can get there easily . Currently I se local taxis!
Bridlington Survey	Complete lack of social care by other local authority or private providers in the community. No fast track service for end of life - for people who want to die at home (preferred. place of care) Currently average length of stay at the care unit is 27 day because of the above!! No community provision!

Which of the following concerns, if any, do you have? (Select all that apply)



Answer	Total	Percent
Patients may stay longer in acute hospitals	311	11.6
Pressure on community services	297	11.1
Availability of care packages	291	10.8
Impact on carers and families	331	12.3
Increased travel for families and visitors	375	14
Loss of local NHS services	373	13.9
Impact on older people	377	14
Impact on people with complex needs	302	11.2
No concerns	2	0.1
Other	28	1
Total responses	2687	

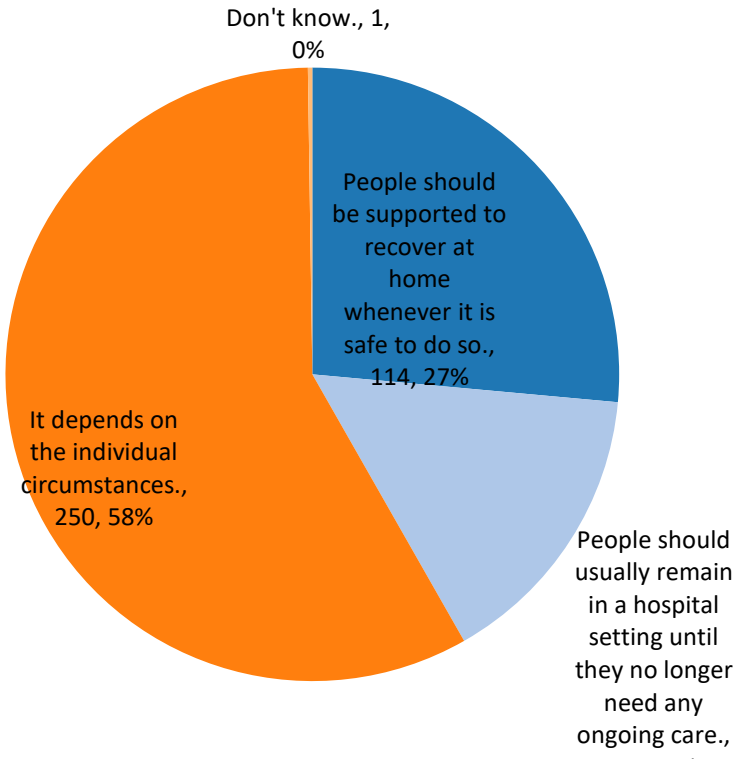
If you selected Other, please provide details below

Service	Comment
Bridlington Survey	Impact on patient safety, readmissions and elective capacity due to bed base being full
Bridlington Survey	Access is a major problem especially for Bridlington Residents. For example, approximately half of Urology appointments were missed that were to happen in Malton. The senate report of 2020 was totally ignored…that asked for a reversal of using Malton…and a move to services being in Scarborough- access to that would be easier than Malton. Similar concerns about Dermatology and Opthalmology. ACCESS is a my primary concern.
Bridlington Survey	I feel that if Bridlington hospital looses the Care Unit that would be the start of the hospital closing down It would mean families and patients travelling further afield when we have a fabulous well run and equipped hospital here hospital here If the correct packages are offered to clocal nurses they would go back and work in the hospital Ratger than travelling to
Bridlington Survey	Needs a A&E depth for the community
Bridlington Survey	Increased congestion of wards at Scarborough Hospital and a knock on problem with admitting patients from A+E.
Bridlington Survey	Convalescence wards historically enabled patients to regain their confidence. Their value should not be disregarded.
Bridlington Survey	More readmissions to acute hospitals. Longer recovery time meaning even more staff needed.
Bridlington Survey	With the number of homes being built the population is increasing by at least a quarter of present population
Bridlington Survey	Impact on valued Bridlington hospital staff
Bridlington Survey	Palliative care beds not being provided as promised. The question below is misleading, we all want to be at home, but it's not always possible and people may have to wait for care packages etc..
Bridlington Survey	I have many friends who live in Bridlington and they are very upset that Bridlington Hospital has been a bit of a "white elephant". They feel sad that such a good hospital is not fully utilised and wish that the same care could be offered there as well as at Scarborough and York. They feel that the local resident who bequeathed the hospital to the local

	community would be mortified if they realised how little this was actually use.
Bridlington Survey	Palliative care beds not being provided as promised. The question below is misleading, we all want to be at home, but it's not always possible and people may have to wait for care packages etc..
Bridlington Survey	Finances. Loss of jobs.
Bridlington Survey	N/a
Bridlington Survey	Patients may be sent home before they are ready.
Bridlington Survey	Any closure or reduction of services at Bridlington hospital will have a negative affect on all the above aspects. I cannot understand why the trust cannot not see this. How many of the trust members have actually spent 24 hrs in a a and e department? How many of the trust members have experienced or seen patients being left in corridors because of lack of beds? It seems ridiculous when you have empty wards at Bridlington
Bridlington Survey	We had a fully function hosptial untill we were hived off to north yorkshire health authirty when they was in finaciale difficulty and every think was taken form bridlington hospital we had to travel to get any services
Bridlington Survey	Surely Bridlington as a thriving town needs one?
Bridlington Survey	People can due with a hospital not being near
Bridlington Survey	The travel to scarbough hospital is a total night mare especially for the elderly and those that don't drive . Bridlington had at least 3 hospitals when I was a young mum Brid was also much smaller it's madness having to travel to York,ect
Bridlington Survey	They are important
Bridlington Survey	Lack of emergency care
Bridlington Survey	A town the size of Bridlington needs a complete service provided by a fully functioning hospital. Full economic costing might even show that in many cases it would be more cose effective than having ambulances travelling to and from scarborough/hull/ york etc
Bridlington Survey	Increased worry to elderly patients that their loved ones (family & friends) are so far away, and have to travel further to see them when in admission

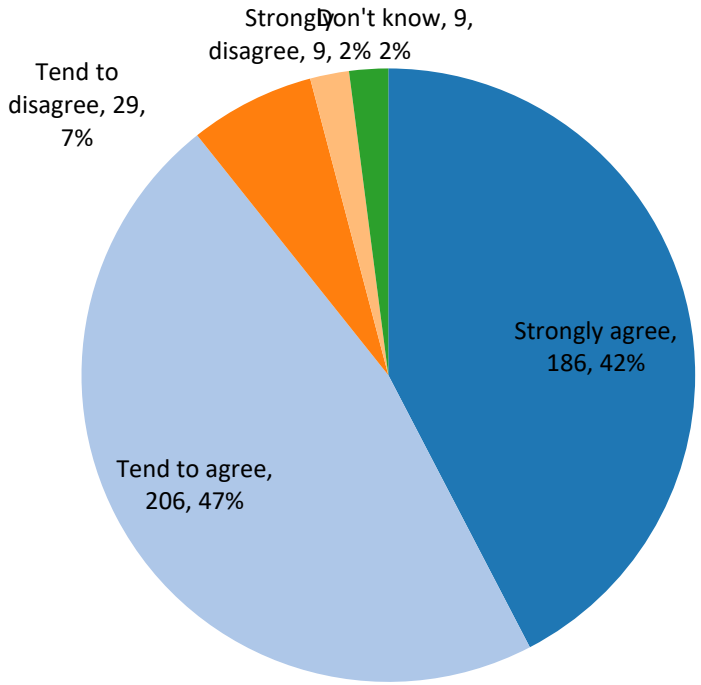
	on hospital
Bridlington Survey	Bridlington hospital has been unde threat of services closing for many years and now York Trust seem to be burying parts of the hospital closing Yet you gave money to build new facilities in a new building out of Bridlington Uss that money and make Bridlington hospital better like it used to be when I worked there in the 1990s and before that
Bridlington Survey	The way all of this is presented
Bridlington Survey	Impact on disabled people with limited accessibility. Impact on dementia and Parkinson’s sufferers who will refuse care from unfamiliar environments
Bridlington Survey	As above
Bridlington Survey	New models of care needed eg elderly care practitioner
Bridlington Survey	A neighbour's husband unexpectedly had a risk to life deterioration whilst in Brid Care Ward. His life was saved because he was in the right place for Defib / CPR as staff became aware of symptoms and pulled equipment immediately to him.
Bridlington Survey	Poor experience elsewhere.
Bridlington Survey	Palliative Care Unit - not just for end of life but frailty patients too. Some access to community beds cared for by skilled multi-disciplinary teams.
Bridlington Survey	People in hospital long term become known as bed blockers. they lose their self esteem and ability to care for themselves.

Which statement comes closest to your view?



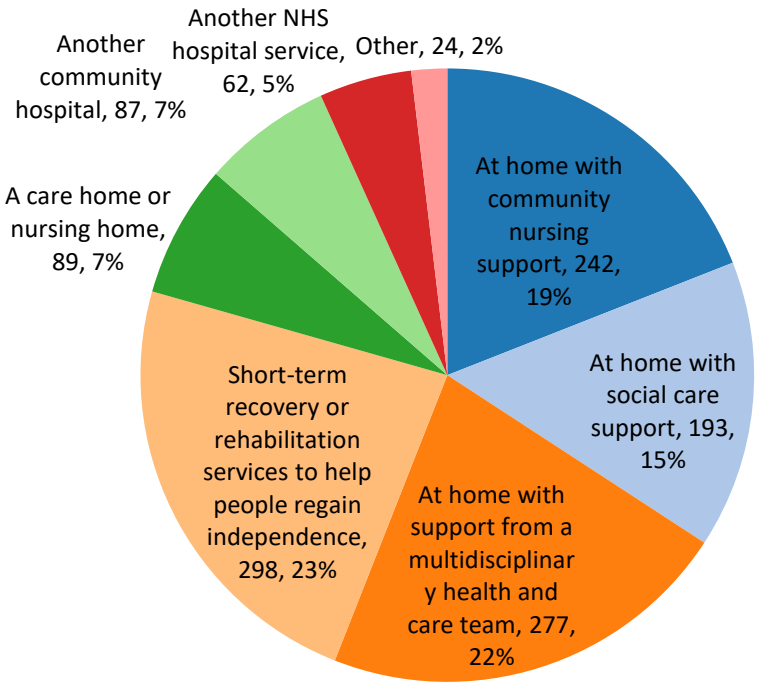
Answer	Total	Percent
People should be supported to recover at home whenever it is safe to do so.	114	26.5
People should usually remain in a hospital setting until they no longer need any ongoing care.	66	15.3
It depends on the individual circumstances.	250	58
Don't know.	1	0.2
Total responses	431	

To what extent do you agree that people should be supported to return home as soon as it is safe to do so, rather than remaining in hospital longer than necessary?



Answer	Total	Percent
Strongly agree	186	42.4
Tend to agree	206	46.9
Tend to disagree	29	6.6
Strongly disagree	9	2.1
Don't know	9	2.1
Total responses	439	

Thinking about people who are medically ready to leave hospital but still need some ongoing care or support, where do you think that care should happen? (Select all that apply)



Answer	Total	Percent
At home with community nursing support	242	19
At home with social care support	193	15.2
At home with support from a multidisciplinary health and care team	277	21.8
Short-term recovery or rehabilitation services to help people regain independence	298	23.4
A care home or nursing home	89	7
Another community hospital	87	6.8
Another NHS hospital service	62	4.9
Other	24	1.9

Total responses	1272	

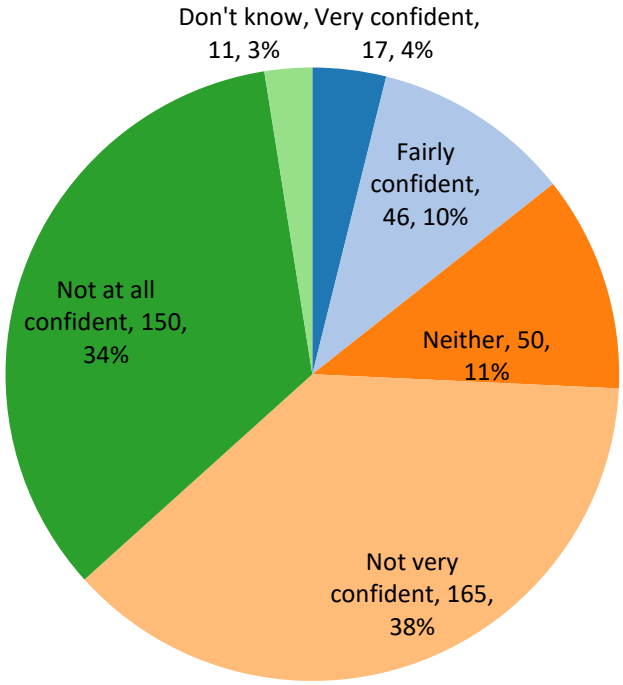
If you selected Other, please provide details below

Service	Comment
Bridlington Survey	Stop making patients go home before they are ready and ensure social services act promptly because at the moment they lack in every aspect.
Bridlington Survey	Depends on their needs
Bridlington Survey	Ongoing care and support should be provided LOCALLY in Bridlington Hospital until community nursing support/care plans are mature, capable and in place.
Bridlington Survey	Keep the Bridlington care unit open and increase number of beds available
Bridlington Survey	This is a broad question as there are many different scenarios which would require a multitude of different outcomes. Not all of which are listed or covered above. A tick list is appallingly discriminating because it doesn't allow for all situation just a basic overview, which causes unease for complex individuals.
Bridlington Survey	BCU
Bridlington Survey	BCU
Bridlington Survey	All of thabove may apply depending on the needs of each individual patient. Suprt in bridlington care unit should remain a local option
Bridlington Survey	N/a
Bridlington Survey	A place like the BCU unit is the ideal place till they have built up the strength and are definitely safe to return home
Bridlington Survey	All depends on circumstances. If CORRECT and READILY AVAILABLE, care in the community would be ideal. This is generally not available. Hence the need for continuing care in a hospital care facility.
Bridlington Survey	I think this needs to be assessed on the patients needs, they should have options as to what suits their needs and requirements
Bridlington Survey	Home care services are appalling,
Bridlington	In an ideal world home support would be good, far from the truth with

Survey	current services overstretched and under funded.
Bridlington Survey	People are discharged to early from Scarborough hospital ,soon as they are responding they are sent home a total nightmare when the person at home carer ,wife ,husband is just suppose to deal with the new health diagnosis
Bridlington Survey	All options should be explored and the best fit be available for that individual depending on their circumstances.
Bridlington Survey	Bridlington hospital
Bridlington Survey	Each person needs are different
Bridlington Survey	Depends on individual care needs not everyone fits one box. short term care is hard to come by both costwise and availability
Bridlington Survey	I think it is a complex situation and would be very different for many different situations and patients
Bridlington Survey	It all depends on what the individual's needs are (so I've answered yes to all of the above)
Bridlington Survey	The specific place and nature of care provided depends on individual circumstances for example (a) the operation they have had (b) where they live e.g. rural and inaccessible and (c) who they live with.
Bridlington Survey	This is an individual question. Depends on the level of care needed
Bridlington Survey	First short-term recovery or rehab services in hospital based space and staff. Then either at home (if have one) with support from multidisciplinary etc or community hospital which HAS care home replacement wards. I know care homes, they are 90% of them rubbish. Uncare homes they should be honestly called.
Bridlington Survey	Depending on the level of care needed. Hos our local NHS got the staff to cover patient's needs. Private companies charge unbelievable rates with many under qualified people working for them. They have limited time with paying patients, so I have little faith in many local companies as I regularly see and hear of local issues which concern me.
Bridlington Survey	Working with charity organisation to enhance quality of life experiences
Bridlington Survey	It absolutely depends on a person's situation
Bridlington	Most people want to be at home but need support in some way. Not

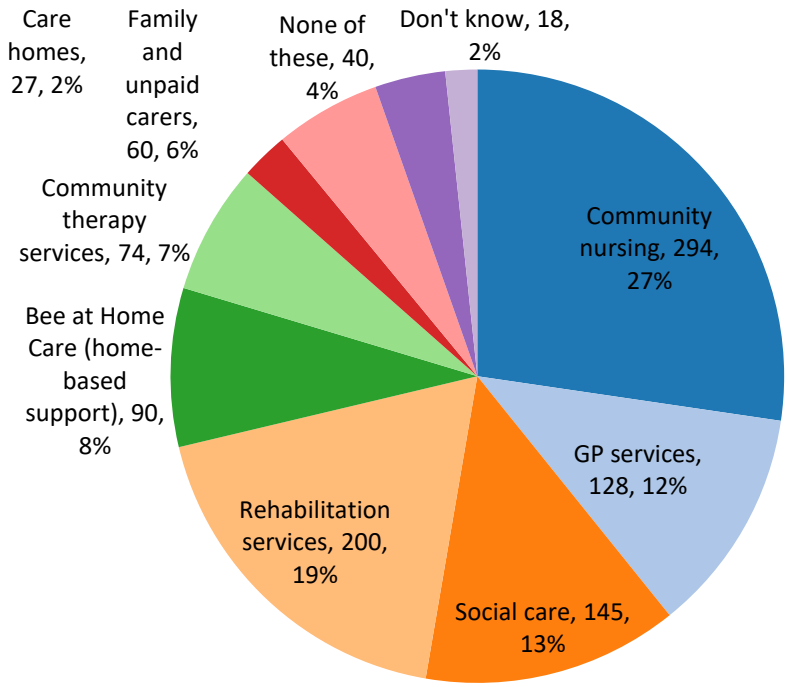
Survey	everyone has family.
Bridlington Survey	Care/nursing home should be a last resort. too expensive, long waiting lists and people are often placed too far away from family and friends.
Bridlington Survey	We need a community care unit in addition to the above
Bridlington Survey	If you are a person living on their own, staying in a hospital setting is better, until able to return home.
Bridlington Survey	There is a need for care for patients between medical/surgical procedures and home care.
Bridlington Survey	I believe the reasoning is sounds but its the lack of community at home provision that means it is very concerning to shut BCU

How confident are you that people could be safely supported at home or in the community instead of at Bridlington Care Unit?



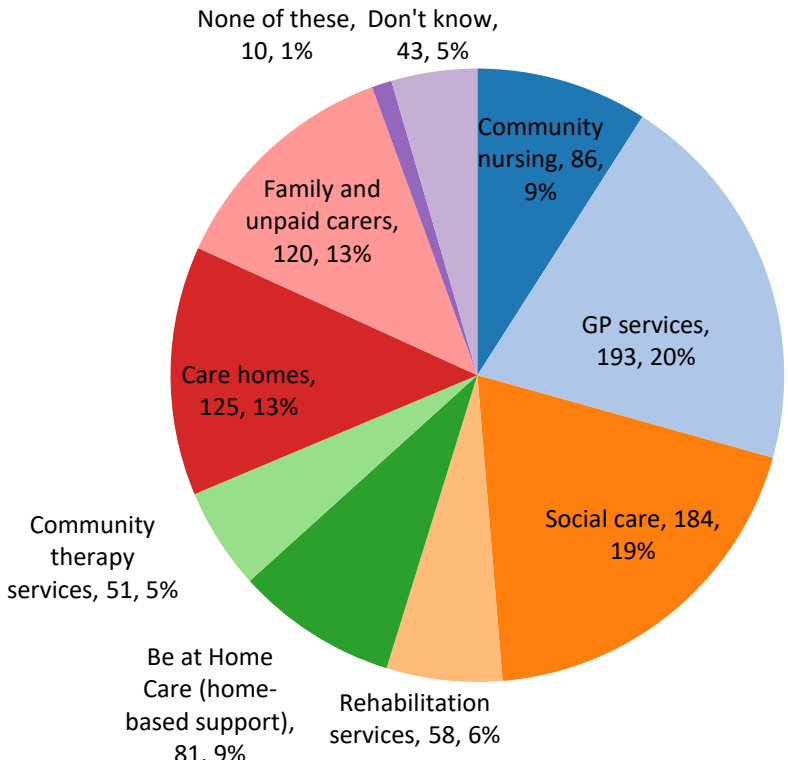
Answer	Total	Percent
Very confident	17	3.9
Fairly confident	46	10.5
Neither	50	11.4
Not very confident	165	37.6
Not at all confident	150	34.2
Don't know	11	2.5
Total responses	439	

Which services would give you the greatest confidence that people could safely return home? (Select up to three)



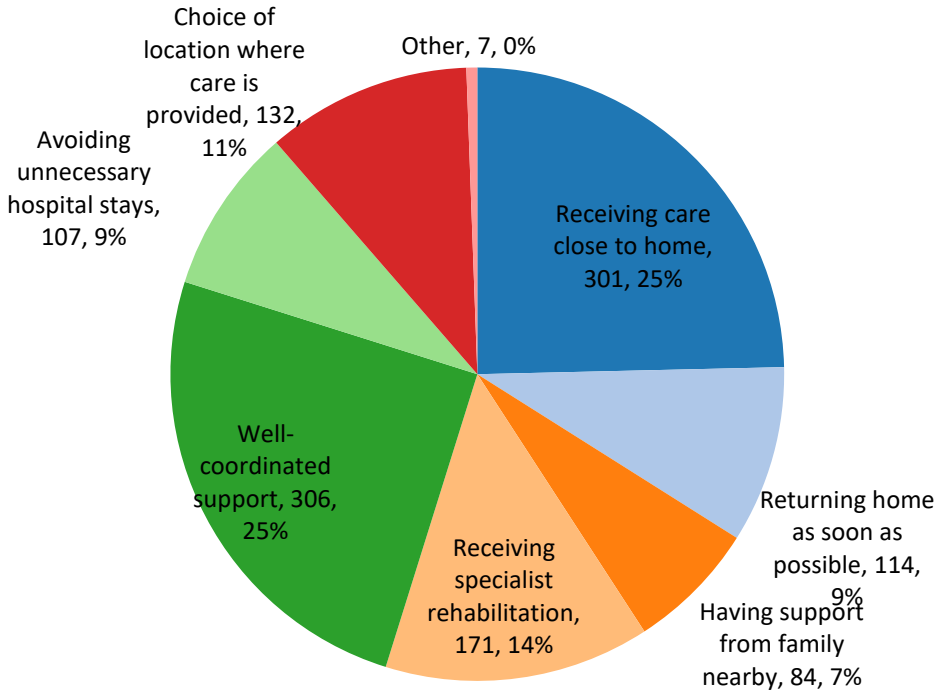
Answer	Total	Percent
Community nursing	294	27.3
GP services	128	11.9
Social care	145	13.5
Rehabilitation services	200	18.6
Bee at Home Care (home-based support)	90	8.4
Community therapy services	74	6.9
Care homes	27	2.5
Family and unpaid carers	60	5.6
None of these	40	3.7
Don't know	18	1.7
Total responses	1076	

Which services give you the least confidence? (Select up to three)



Answer	Total	Percent
Community nursing	86	9
GP services	193	20.3
Social care	184	19.3
Rehabilitation services	58	6.1
Be at Home Care (home-based support)	81	8.5
Community therapy services	51	5.4
Care homes	125	13.1
Family and unpaid carers	120	12.6
None of these	10	1.1
Don't know	43	4.5
Total responses	951	

Which three factors are most important when planning services for people who are ready to leave hospital? (Select three options)



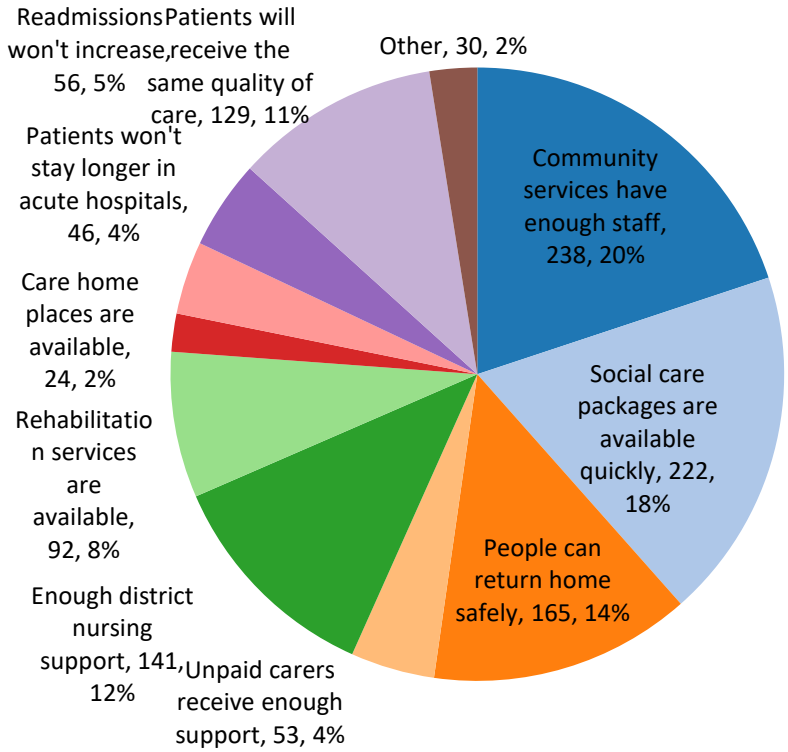
Answer	Total	Percent
Receiving care close to home	301	24.6
Returning home as soon as possible	114	9.3
Having support from family nearby	84	6.9
Receiving specialist rehabilitation	171	14
Well-coordinated support	306	25
Avoiding unnecessary hospital stays	107	8.8
Choice of location where care is provided	132	10.8
Other	7	0.6
Total responses	1222	

If you selected Other, please provide details below

Theme	Total
Neutral	8
Positive	1

Service	Comment
Bridlington Survey	Patient safety and well being
Bridlington Survey	Social worker allocation
Bridlington Survey	N/a
Bridlington Survey	I feel that if your getting help from specialist & family that can check on you recovery should be quicker
Bridlington Survey	When needed they are released from main hospital into appropriate suported care asap
Bridlington Survey	Having consistant ongoing and specialised/personally suited treatment at home with the correct support from the correct healthcare staff, whether that is community, gp or specailist help.
Bridlington Survey	Don't close the care unit, increase services in Bridlington Hospital.
Bridlington Survey	All important. All essential
Bridlington Survey	You can't choose three. all are important! best option - dont close this unit!!

Before Bridlington Care Unit could close, what would you most want to be assured about? (Select up to three)



Answer	Total	Percent
Community services have enough staff	238	19.9
Social care packages are available quickly	222	18.6
People can return home safely	165	13.8
Unpaid carers receive enough support	53	4.4
Enough district nursing support	141	11.8
Rehabilitation services are available	92	7.7
Care home places are available	24	2
Patients won't stay longer in acute hospitals	46	3.8
Readmissions won't increase	56	4.7
Patients will receive the same quality of care	129	10.8
Other	30	2.5

Total responses	1196	

If you selected Other, please provide details below

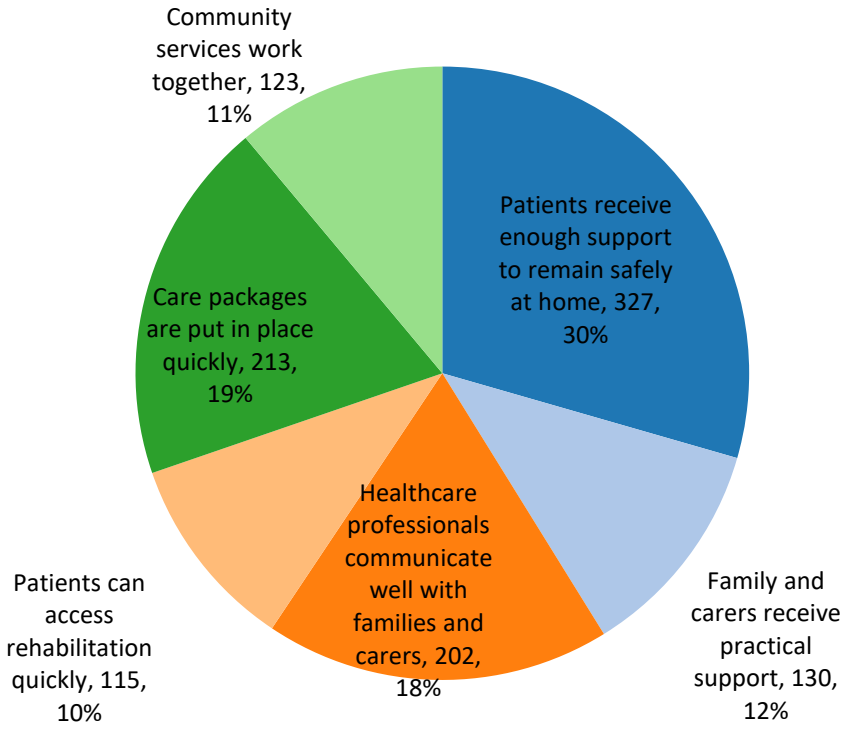
Theme	Total
Negative	15
Neutral	14
Positive	4
Both	1

Service	Comment
Bridlington Survey	The Care Unit should not close - nothing will make me think otherwise
Bridlington Survey	I do not think Bridlington Care Unit should close because from being in nursing for the past 35 years I believe everytime a hospital based provision is closed no provision is made by the people closing the unit make any difference in the Community Having seen many wards closed and "Provision in the Community being organised this does not actually materialise after the event People often wish to return home but are put into care homes where they would never have chosen to go Yet go because they feel a burden
Bridlington Survey	I don't want it to close.
Bridlington Survey	The Bridlington care unit SHOULD NOT close.
Bridlington Survey	I don't support Bridlington Care Unit being closed under any circumstances whatsoever.
Bridlington Survey	I don’t think it should! It is a long way to any hospitals and the visitors cannot afford the fares to get there as we have a large aging population on pension from government! So no extra money for it!
Bridlington Survey	More options should be available for selection, this doesn’t give anyone the ability to fully answer the question, this just forces answers, again in a closed tick box exercise! Which is not appropriate for the information required to support our community.
Bridlington Survey	All of the above of course!!!!!
Bridlington Survey	All of the above of course!!!!!
Bridlington	Emergency and Acute Care access could be improved in Bridlington should

Survey	readmission arise (Addition of A&E in Bridlington and a hospital run UTC with expansion rather than through CHCP).
Bridlington Survey	Emergency and Acute Care access could be improved in Bridlington should readmission arise (Addition of A&E in Bridlington and a hospital run UTC with expansion rather than through CHCP).
Bridlington Survey	N/a
Bridlington Survey	That they can guarantee that they are making more ward beds available in surrounding hospitals like Scarborough. Because if not the staff will feel even more pressure to send people home before they are ready. Last time mum was in a ward, there were beds in the middle of the room because they were running out of normal bed space. They then have to send patients to d2a beds in care homes to free ward beds up. Bridlington at least eases some of the pressure on Scarborough. All the nurses I spoke to thought it was idiotic to be closing BCU, but they dare not say anything for fear of there jobs.
Bridlington Survey	NHS is just looking to pass the responsibility I do not believe the services will be available
Bridlington Survey	Faith in all of these services are at an all time low - all underfunded, inadequate and patient care is compromised.
Bridlington Survey	It will all help if these things are set up
Bridlington Survey	Three choices are not enough
Bridlington Survey	It should not close
Bridlington Survey	Had a need for recent paid care support from independent companies on recommended contract list, but on too many occasions carers failed to turn up due to their cars breaking down in accessing a rural location, or staff leaving and unable to replace. It is vitally important to have the same carers wherever possible, as this is always a reassurance to the patient recovery.
Bridlington Survey	I do not think Bridlington Care Unit should close This is York Trust trying to waste money building a not needed hospital when we have a verh good hospital already Whise been taking back handers ?
Bridlington Survey	Please don't close Brid Care Unit
Bridlington Survey	Social care care assistants need more training before anything

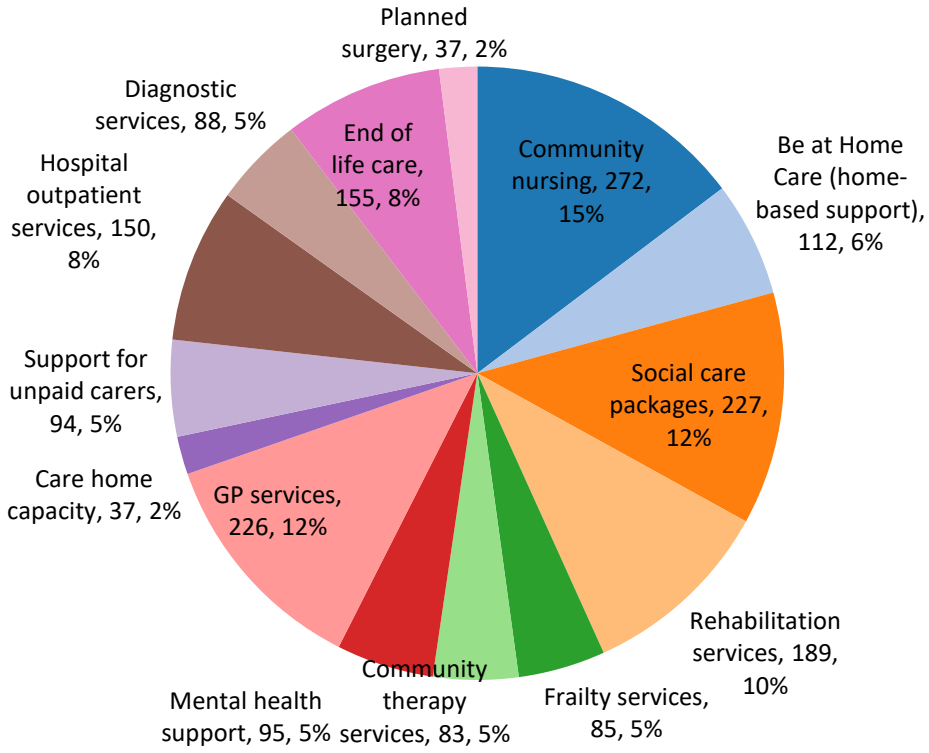
Bridlington Survey	Why do we have to choose only 3, all of them are very important. Especially important: patients need a phone number they can call 24/7 and have a trained, English speaking person for any changes after discharge to be triaged and relevant care put in place with necessary depts and staff, patient transport and informed appointment details.
Bridlington Survey	We do not want it to close we need as much services as possible here.
Bridlington Survey	It is a disgrace that closing in this vital care unit is even being considered.
Bridlington Survey	Care is holistic, provided by multidisciplinary teams. A flexible workforce providing safe care at home or on a unit close to home (not a care home)
Bridlington Survey	It should not close, end of!
Bridlington Survey	The hospital should remain open! Specialist care in one place, especially with an expanding population.
Bridlington Survey	I don't want it to close.
Bridlington Survey	Care is as close to home as possible but if 24-hour care is needed then this is available rather than carers visiting three or four times a day.
Bridlington Survey	All of these are important
Bridlington Survey	That the Bridlington Care Unit stays open
Bridlington Survey	Care unit should not close. It is there already just need manning
Bridlington Survey	That it didn't close

If more people receive care at home or in community settings, which of the following are most important?



Answer	Total	Percent
Patients receive enough support to remain safely at home	327	29.5
Family and carers receive practical support	130	11.7
Healthcare professionals communicate well with families and carers	202	18.2
Patients can access rehabilitation quickly	115	10.4
Care packages are put in place quickly	213	19.2
Community services work together	123	11.1
Total responses	1110	

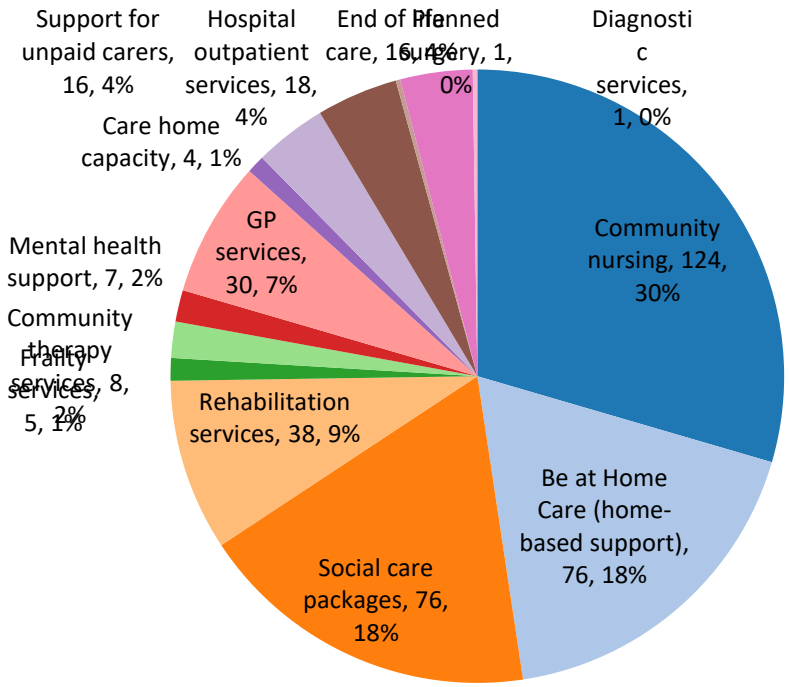
Which areas of community care are most important? (Select up to five)



Answer	Total	Percent
Community nursing	272	14.7
Be at Home Care (home- based support)	112	6.1
Social care packages	227	12.3
Rehabilitation services	189	10.2
Frailty services	85	4.6
Community therapy services	83	4.5
Mental health support	95	5.1
GP services	226	12.2
Care home capacity	37	2
Support for unpaid carers	94	5.1
Hospital outpatient services	150	8.1
Diagnostic services	88	4.8

End of life care	155	8.4
Planned surgery	37	2
Total responses	1850	

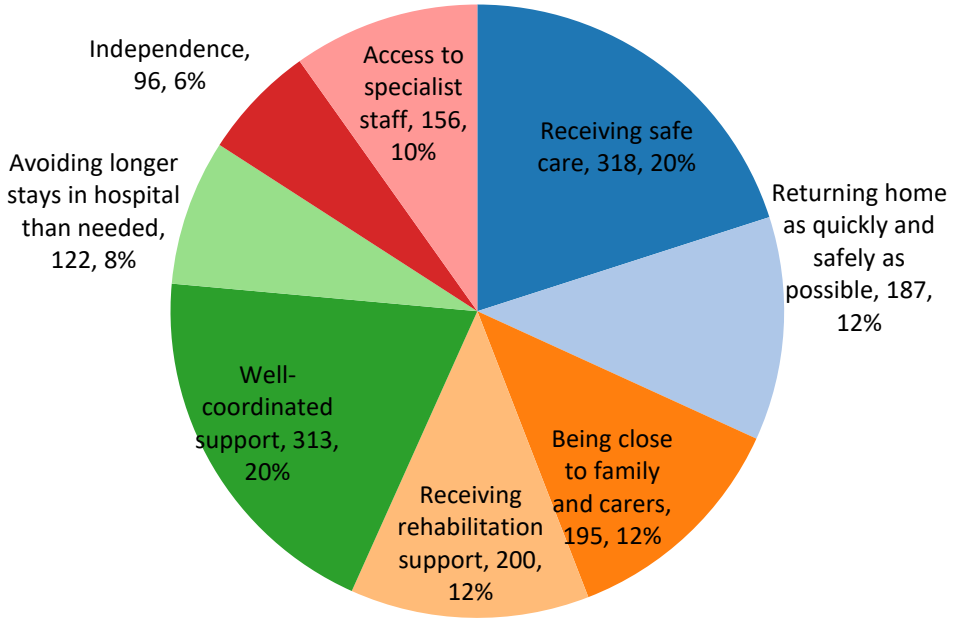
Which one area should be developed that would make the biggest difference for people who need care or support after leaving hospital?



Answer	Total	Percent
Community nursing	124	29.5
Be at Home Care (home- based support)	76	18.1
Social care packages	76	18.1
Rehabilitation services	38	9
Frailty services	5	1.2
Community therapy services	8	1.9
Mental health support	7	1.7
GP services	30	7.1
Care home capacity	4	1
Support for unpaid carers	16	3.8
Hospital outpatient services	18	4.3

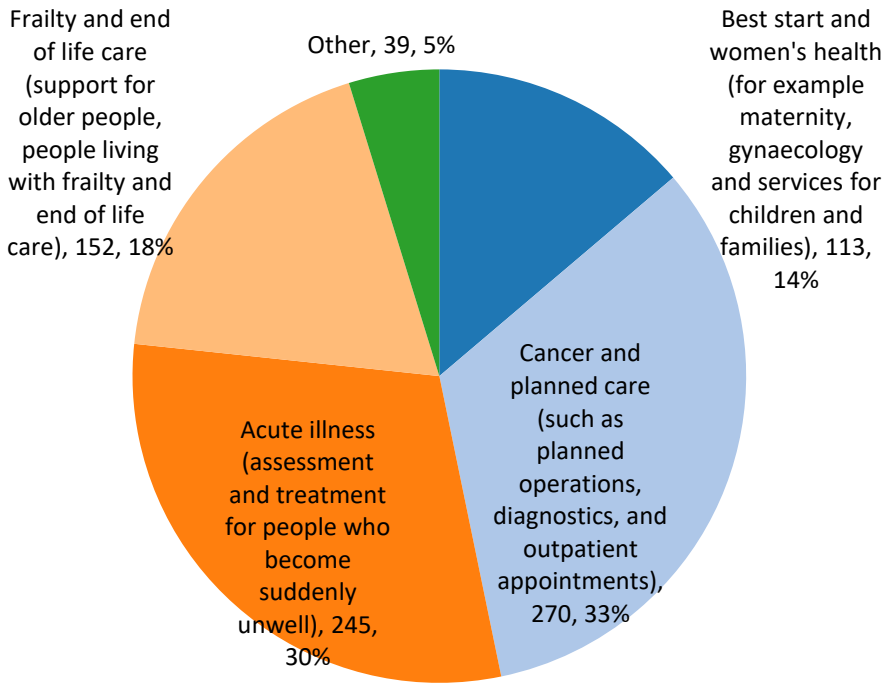
Diagnostic services	1	0.2
End of life care	16	3.8
Planned surgery	1	0.2
Total responses	420	

When planning services for people leaving hospital, which of the following do you feel are most important (select up to 4 from the below)



Answer	Total	Percent
Receiving safe care	318	20
Returning home as quickly and safely as possible	187	11.8
Being close to family and carers	195	12.3
Receiving rehabilitation support	200	12.6
Well-coordinated support	313	19.7
Avoiding longer stays in hospital than needed	122	7.7
Independence	96	6
Access to specialist staff	156	9.8
Total responses	1587	

Bridlington Hospital will continue to provide a range of hospital services and there are plans to further develop the site in the future. Looking ahead, which services would you most like to see developed at Bridlington Hospital? (Select up to two)



Answer	Total	Percent
Best start and women's health (for example maternity, gynaecology and services for children and families)	113	13.8
Cancer and planned care (such as planned operations, diagnostics, and outpatient appointments)	270	33
Acute illness (assessment and treatment for people who become suddenly unwell)	245	29.9
Frailty and end of life care (support for older people, people living with frailty and end of life care)	152	18.6

Other	39	4.8
Total responses	819	

If you selected Other, please provide details below

Service	Comment
Bridlington Survey	Cancer because many people suffer with cancer and surely being helped nearer home must be better for patients Acute care because Bridlington hospital many years ago did take people with Acute health issues and this worked very well and kept numbers down in other local hospitals like Scarborough and Hull
Bridlington Survey	Bridlington hospital should be a full functioning hospital
Bridlington Survey	Return to Bridlington Hospital of 1. Outpatient Services 2. Safe local Surgery 3. Diagnostics including on-site CT and MRI Scans 4. Appropriate Urgent Care with strengthened links with Scarborough A + E 5. In hospital Palliative Care for those in greater need than care at home (including for their carers)
Bridlington Survey	Care at certain times of life & with certain diseases should be provided & available close to home
Bridlington Survey	Stoma care has more availablity then one day a week clinic
Bridlington Survey	Things that urgent and unplanned need to be initially looked at locally I e within travelling distance of peoples homes. Also frail older people need to receive service near to friends and family, for both the patient and the extended family/carers
Bridlington Survey	Feel a hospital should cover all basic necessities not just a couple
Bridlington Survey	Again this question and the options are absolutely appalling. Where is the option to select “ALL OF THE ABOVE”, every option is vital to every member of our community locally and wider. Selecting 2 options is far from appropriate!
Bridlington Survey	All of the above, by restricting answers it feels like this survey is rigged.
Bridlington Survey	All of the above, by restricting answers it feels like this survey is rigged.
Bridlington Survey	Understanding what the population actually require that is the key in what needs development devices that meet the demand of the local population
Bridlington Survey	More therapy services i.e rehabilitation space

Bridlington Survey	A 24 hour emergency a&e or out of hours run by York Hospitals Trust but all the option are very important
Bridlington Survey	Mental health
Bridlington Survey	I would like to see a fully operational a and e dept including scans,X-rays etc 24 hour service
Bridlington Survey	Maternity and cancer support
Bridlington Survey	I would like to see properly funded hospice and home based end of life care. I would not want to see end of life care being primarily hospital based.
Bridlington Survey	More houaws are being built, more people are moving here. We need bridlington to become a bigger hospital to accomodate more clinics so that people are not having to travel further.
Bridlington Survey	I worked at BDH for a number of years. We can't go back to the good old days for a variety of reasons. This needs to be cleito the general public. Stop waisting time and money on schemes that will not work long term. Decide once and for all what it can provide and stick to it. Not constantly increasing expectations. If it's rehab then provide the best team around to ensure quality care with good outcomes and timely discharge. I am heartly sick of the units providing a poor service. I acknowledge that for some patients and relatives they have no complaints.
Bridlington Survey	N/a
Bridlington Survey	Also more appointments in the areas already covered instead of expecting people to travel to places like Malton, which is very hard to get to. One dr travelling to see 50 patients in a clinic is better than expecting 50 people travelling far afield to have check up appointments. Not very green! I was offered appointments to have a wound dressed in Driffield after major surgery, because Bridlington didn't have capacity. But everytime you went to Bridlington there was hardly anybody there. We are under using facility's we have due to lack of staff I guess.
Bridlington Survey	We shouldn't have to choose - as a hospital in a large town with an ever growing population we should provide all services
Bridlington Survey	More variety of disciplines with outpatient activity Palliative care Step-down at BCU Increased options for minor surgery
Bridlington Survey	A 24 hr A and E department is essential to reduce the wait times at Scarborough and York. For serious illness patients could be then transferred to Scarborough or York for specialist care

Bridlington Survey	Brid hospital must be opened up to all services it previously had and was intended for. More houses built and less services make no sense.
Bridlington Survey	A and E
Bridlington Survey	In all these loaded question where I'm supposed to choose a limited number of answers or areas, all areas need to be available, improved and running with patients as a priority.
Bridlington Survey	We have as a family suffered. My answers involve those who need care asap. people with cancer, serious illness where time is of the essence or people at the end of their lives can wait, they are vulnerable, often terrified, as are their loved ones. Communication between teams is dire. Travelling, waiting lists, medical professionals who do not have the time to care. Scarborough hospital can be truly shockingly bad, we need OUR hospital where we have at least a fighting chance of keeping an eye on our loved ones as much as possible. So many elderly patients with elderly other halves who cannot easily visit due to travelling difficulties. We must use our hospital as it was meant to be. Unfortunately it's only through personal experience that u truly learn how bad things are. When you've felt the fear, helplessness, despair etc
Bridlington Survey	I would like to see Bridlington hospital being utilised as much as possible for a whole range of services. It may not be able to offer surgery but could be made far more use of than it is, bringing Bridlington patients back to Bridlington as soon as safe to do so.
Bridlington Survey	The distance to Scarborough or Hull Royal is absolutely ridiculous for the patient & their family
Bridlington Survey	Families children need a Comunity hospital not far from home
Bridlington Survey	Diagnostics
Bridlington Survey	Impossible to choose two. Bridlington Hospital used to have much wider services when the population was far less then it is now i.e wards for surgical, mental health, elderly maternity, community services including MacMillan Wolds Unit (palliative care). These included: Alderson, Kent, Holtby, Johnston, Lloyd, Avenue, Thornton, Waters and Buckrose.
Bridlington Survey	Decent emergency provision without having to travel
Bridlington Survey	Quicker access.
Bridlington	All of these

Survey	
Bridlington Survey	Dementia
Bridlington Survey	Keep as it is
Bridlington Survey	Services such as Fracture clinic need to be at Bridlington Hospital Things like Acute health and well being For all ages
Bridlington Survey	It seems dangerous that a town the size of Bridlington with new large developments and an increasing population should lack A&E provision
Bridlington Survey	Longer opening hours for urgent treatment centre to relieve pressure on scarbs NHS
Bridlington Survey	A&E
Bridlington Survey	24 hour minor injuries unit
Bridlington Survey	Cardiac as per A&E. Be for assessment and immediate treatment required.
Bridlington Survey	I want to know what all the services available.
Bridlington Survey	Utilise and expand the day surgery unit. Post-op/illness consultation in Bridlington, even if treatment is elsewhere.
Bridlington Survey	Outpatient clinics at Bridlington, and on time. I am supposed to be seen on a 12 monthly basis, but get lost in the system and wasn't seen for 4.5 years, when I phoned in and queried it. But after that I have now been waiting 2 years and 3 months with no sign of an appointment. There is a reason why you should be seen at a certain time and it's disconcerting when you're not. I have lost all faith in the care from Scarborough Hospital, I feel that patients in Bridlington are not treated as they should be, we are like the poor relations.
Bridlington Survey	All of these services are required at bridlington hospital.
Bridlington Survey	Dementia services and diabetes services
Bridlington Survey	There were 9 wards on 2 floors: 220 beds it's disgraceful that the majority of these have been closed.
Bridlington	Maternity and optometry

Survey	
Bridlington Survey	I am 86 and health seems to be proving to be a bit on the up at the moment, mobility no problems are a concern. Sight is worse
Bridlington Survey	Services that are needed is like cateracts joints knees hips shoulders. Not having to travel to get some sort of transport to get to hospital appointments. A lovely hospital just going to waste. Facilities needed nearer home

What are the main reasons for your answer?

Service	Comment
Bridlington Survey	Keeping families children and relatives all close together cutting down traveling time.
Bridlington Survey	I was a nurse,people need community nurses , GPs and a well coordinated discharge. As a town we need emergency care / X-rays/ scans to relieve larger hospitals and long waiting times. EOL care should also be a priority
Bridlington Survey	Instead of creating posts such as discharge nurse confusing everyone adult social care in particular needs an overhaul and new management as they fail.
Bridlington Survey	Travelling from Bridlington to another hospital- Scarborough Hull York etc for cancer care is detrimental for recovery and end of life care needs to be available where family can visit easily and where patients feel comfortable
Bridlington Survey	It's a long way to travel in an emergency from Bridlington- that is scary
Bridlington Survey	The services to Bridlington and surrounding areas are poor when it comes to emergency treatment. Plus if you are very unwell it is a very long journey to a main hospital and not everyone has the transport to get there. The Patient Ambulance services and madie the criterier to use them much stricter. Even if you did use transport it is still a long journey to these places when unwell.
Bridlington Survey	Worry about ageing and good palliative care close to home
Bridlington Survey	I live here and don't want to travel to Scarborough or hull
Bridlington Survey	These are needed in Bridlington
Bridlington Survey	We have to travel too far to access care at other hospitals when we are at our most vulnerable
Bridlington Survey	There is much space at Bridlington Hospital to increase access to several things. There is widespread need in Bridlington…and it needs to be widely developed, with Scarborough rather than Malton. The need is greater in Bridlington
Bridlington Survey	I believe the hospital should be developed to provide facilities that would benefit the majority of the local population.
Bridlington	We have an aged population in this area. The previous McMillan unit was

Survey	well used and attended and alot of people miss the support and treatment in which they received there, now having to travel many miles to receive this care whilst unwell causing more exhaustion and symptoms associated with their illness
Bridlington Survey	BDH needs repatriation of consultant led outpatient clinics with development of Frailty and Palliative services
Bridlington Survey	The building can be used as a fully functional hospital, it did this before and our town needs it for locals and for visitors
Bridlington Survey	Improved UTC provision. Full use of inpatient ward facilitied
Bridlington Survey	When unwell with cancer it's a lot of travelling and long days for treatment making it very hard some days.
Bridlington Survey	I feel we have a large elderly population in Bridlington and surrounding areas that find it extremely difficult to travel or be away from their local area . I feel if you need immediate attention at any age for an acute illness it's much better to have local facilities then to have to wait lengthy times for firstly an ambulance then to travel at least 18 miles to Scarborough only to wait again lengthy periods to be seen . Can be the difference between life or death .
Bridlington Survey	Bridlington needs a hospital that is fit for the community it supports
Bridlington Survey	Both would ease stress & pressure.
Bridlington Survey	Access to services close to home for life threatening and distressing illnesses has to be better than having to incur travel time and costs at the worst time. Being close to family is important when coping with severe health issues
Bridlington Survey	The options open to the people of Bridlington and the surrounding areas are miles away. Difficult for the elderly to get to and the stress of having to travel to an A&E miles away is unfair. Being ill is bad enough but to add transport, family care & visits doesn’t lend to a healthy recovery.
Bridlington Survey	I feel there should be local services for woman and children's health. Also local diagnostic services and treatment available locally for people with cancer. They should develop more wards for surgery to happen locally rather than Scarborough or York
Bridlington Survey	Bridlington had a vast ageing community
Bridlington	Bridlington needs an A&E so patients do not have to travel to Scarborough in a time critical emergency. It also needs to look after it's most vulnerable

Survey	patients closer to their home and support network.
Bridlington Survey	Many residents are elderly. We need local palliative care for those who cannot go home. We need local out patient and diagnostic appointments. Please note we also need local children's and family services but only 2 answers were permitted.
Bridlington Survey	Majority of the Bridlington population are elderly
Bridlington Survey	We have an ageing population and the need for relatives to see their loved ones without having to travel
Bridlington Survey	The population of Bridlington has expanded MASSIVELY in recent years due to new house building it needs a fully functioning hospital of its own with A&E and maternity services. Travelling to hospitals miles away in Scarborough, Hull or York is environmentally unfriendly, stressful for the patient and practically impossible for those reliant on public transport or expensive taxis - most in that latter group simply give up !
Bridlington Survey	Services at Bridlington have been eroded to inaccessible Hospitals at Malton, York, Eastfield CDC and Scarborough
Bridlington Survey	Being passed around when illness starts from Brid hospital to scarboriugh hospital and then to York hospital is a discrace and I am confident people have suffered harm because of this.
Bridlington Survey	Safe and timely discharges for Patients
Bridlington Survey	Home first would be best practice. However patient's should be able to access services in their local community or have care and support until they can return to their community
Bridlington Survey	Home first would be best practice. However patient's should be able to access services in their local community or have care and support until they can return to their community
Bridlington Survey	Safe and timely discharges for Patients
Bridlington Survey	I feel that these are the most important services and would improve the patient's mental health, stress & worry if they were on the doorstep and you didn't have to travel up to one hour to access these services when you are unwell.
Bridlington Survey	These are important to me.
Bridlington Survey	Recently had an ileostomy with complications and had to travel to and from Scarborough hospital to be cared for which caused excruciating pain

	during travelling
Bridlington Survey	Beginning and end of life care hopefully provides everyone with a good chance of a healthy life and a dignified end when the time comes
Bridlington Survey	Work within the NHS and see the impact of not having these services
Bridlington Survey	Bridlington has an ageing population including myself so these services vital moving forward
Bridlington Survey	We need more services not less
Bridlington Survey	Bridlington has an elderly population so local services are essential. More than two answers should have been allowed for this question.
Bridlington Survey	As above
Bridlington Survey	Hospitals are a necessity not a luxury
Bridlington Survey	Bridlington has an elderly population and a older demographic. Having personal experience of traveling to York and Scarborough for consultant appointments, tests and scans whilst the care received is very good the travelling is soul destroying. Cancer treatment, early detection etc is a must have locally given they the statistics of 1 in 2 people will have cancer .
Bridlington Survey	I believe Bridlington hospital should be fully opened up, and many more services offered, including an A&E department.
Bridlington Survey	My mother in law never got the help she needed when came out of hospital and died in Scar hosp last Jan due to there been no care plan or anything in place
Bridlington Survey	Cancer is everywhere. We are all getting older and more scared of how our lives will end
Bridlington Survey	NOT ENOUGH CARE
Bridlington Survey	Because more people need local services and not everyone has online access or continual online access, there are many people unable to communicate their views and again this is appalling, every single household should have received a survey. Towns are expanding and the NHS is just removing our vital services from our communities and this is not acceptable. The lack and level of care given currently is way below that of compassionate care available 20 years ago.

Bridlington Survey	Patients deserve safe care
Bridlington Survey	All areas need to be developed to provide localsied care as traveling can be expensive.
Bridlington Survey	Acute illness for the need for quick access if suddenly unwell (and for all the holidaymakers who come to the town) Frailty due to the aging population of Bridlington (many move to retire to the town)
Bridlington Survey	All areas need to be developed to provide localsied care as traveling can be expensive.
Bridlington Survey	The elderly population in Bridlington needs acute care .
Bridlington Survey	As Bridlington and east coast is used as a political chip
Bridlington Survey	Local people need local care without having to travel unnecessarily for it
Bridlington Survey	Acute Illness is a gap in Bridlington and due to the ambulance waits which I have experienced myself I would not want my relatives waiting that long for an Ambulance to then be driven 40-45 miles away for resuscitation and stablisation if this was required. I worry about this a lot in my family with my grandparents getting older. My daughter also has medical conditions and we can get anxious and would like peace of mind that there is a local A&E department to bring her to if required to be seen rather than travelling. I think this would help and assist ease patient flow at Scarborough hospital with the growing population of Bridlington. I think the Frailty element is addressed by Warters Ward to an extent but having an Acute Frailty unit rather than a Community unit would assist with this. This would allow patients to access a local service rather than having to travel. This would in turn reduce health inequalities in Bridlington. Since moving back here I think it has opened my eyes to how much Bridlington struggles with Acute and Emergency Care in the area.
Bridlington Survey	Acute Illness is a gap in Bridlington and due to the ambulance waits which I have experienced myself I would not want my relatives waiting that long for an Ambulance to then be driven 40-45 miles away for resuscitation and stablisation if this was required. I worry about this a lot in my family with my grandparents getting older. My daughter also has medical conditions and we can get anxious and would like peace of mind that there is a local A&E department to bring her to if required to be seen rather than travelling. I think this would help and assist ease patient flow at Scarborough hospital with the growing population of Bridlington. I think the Frailty element is addressed by Waters Ward to an extent but having an Acute Frailty unit rather than a Community unit would assist with this. This would allow patients to access a local service rather than having to travel. This would in

	turn reduce health inequalities in Bridlington. Since moving back here I think it has opened my eyes to how much Bridlington struggles with Acute and Emergency Care in the area.
Bridlington Survey	I'm 72 and live on my own. Have MS but fortunately not cancer. - but so many get it and if I did, better for me to be somewhere easy to access for my age group. And though convinced I will grow older taking care of myself, there is no guarantee of course!
Bridlington Survey	Bridlington Hospital is vastly under utilised. Developing the space to cater for these services should result in less pressure on other sites and services within the catchment area.
Bridlington Survey	Demographics, socio-economics and public transport - people can't afford taxi's, public transport is unreliable. Unhealthy habits & lots of old retirees means demand for care is high.
Bridlington Survey	Work in therapy and see a lot of patients bounce back into the hospital as community services are not available or not got enough support at brid they can be assessed properly and recover off the acute site
Bridlington Survey	Having two elderly parents it is heart breaking to drive them all the way to Scarborough in a very serious, life threatening situation. I have already had to do this. Also having family here including a young baby, trying to get care in the middle of the night is also very important without having to travel for ages or ringing an ambulance
Bridlington Survey	Bridlington population is growing and more housebuilding is planned which needs more facilities. All the areas you state need to be provided and are important. I suspect the demographics of Bridlington and it's catchment area will have a higher proportion of older people than othe East Riding areas.
Bridlington Survey	Should have been able to select all 4. Bridlington Hospital needs all services. The population explosion in the Summer along with the hundreds of new build houses equates to a well run Hospital with all needs met by increased Hospital services
Bridlington Survey	Ageing area so more help is needed
Bridlington Survey	It's a long journey if not available and all the new houses being built there should be as many services as possible locally
Bridlington Survey	Being a retired nurse and soon to be pensioner I have often seen older people becoming seen as a burden on society and having to put up with inadequate care in order for them to continue to live fulfilling lives. It's not ok to be expected to wait in hospital corridors because they are ill. It's not acceptable not to get help at home without having to pay for it as they've been sensible, worked hard and been careful with their finances. People

	shouldn’t have to travel for hours to see a consultant for a 10 minute appointment. People shouldn’t have to travel 20+ miles in an emergency to A&E.
Bridlington Survey	Not enough done for mental health
Bridlington Survey	Aged population that is increasing as people retire to bridlington
Bridlington Survey	There are a lot of elderly people needing care
Bridlington Survey	At the moment lack of ongoing support and communication. Delays in receiving help from Occupational health
Bridlington Survey	It's so difficult, actually impossible, to get any information from GP's these days particularly if you are diagnosed without having seen a GP and say a referral has gone through by being left no other choice than arranging a private consultation. It would be nice to have local services where you could at least ask questions about the surgery you have been told you need.
Bridlington Survey	Waiting time and distance of travel to Scarborough hull royal etc
Bridlington Survey	We care very much about Bridlington hospital and to hear wards ,departments are closing each time the trust or the decision makers look to saving money .Bridlington hospital needs to be used as it was intended for the people of Bridlington and are. Hopefully the [ ]can deliver for the future of Bridlington hospital and the necessary departments mentioned.
Bridlington Survey	I know what it is like to care for family members at home to the point when they need medical help.
Bridlington Survey	Thats how i feel&there are heck of a lot of elderly folk here in Bridlington who deserve the best care possible
Bridlington Survey	We don't have good maternity services. Cancer support to detect cancers early.
Bridlington Survey	Close Proximity for local people - not having yo travel to york hull or scarboroughfor treatment
Bridlington Survey	People and their families should receive local care, as accessibility to care in other towns can be difficult and stressful
Bridlington Survey	Additional services are required to support all generations of residents. The GP surgery is over subscribed
Bridlington	Having this in place locally will mean people not having to travel to get the

Survey	care they need particularly in later life
Bridlington Survey	Access to immediate care fir stroke and heart attack victims
Bridlington Survey	Exper
Bridlington Survey	N/a
Bridlington Survey	Local is always best, being elderly and travelling is too much.
Bridlington Survey	Elderly population and the right treatment/service for sudden illness locally
Bridlington Survey	I think the Health Trust might be missing an opportunity to bridge the gap between acute care in hospital and ongoing care in the home. This doesn't just apply to the Care Unit which is excellent but also other areas of health care too. Bridlington hospital is a clean efficient hospital but on the occasions I've been there as a patient for outpatient clinics, it's been bereft of patients. It seems like a waste of a valuable resource, particularly as Bridlington & Driffield are much larger towns now with a lot more people.
Bridlington Survey	Avoiding travel for patients and their families
Bridlington Survey	I worked in social care. I know from experience of caring for a large number of people with different physical needs and backgrounds the issues that will make them fail quicker. I also saw the whole care disintegrate between the 80s and 90s and its gone more down hill since. I myself am getting older and I fear for what that may look like
Bridlington Survey	Hospital already built Growing population Already deprived areas need more support
Bridlington Survey	For those on end of life care, being closer to home means that family and friends are more able to visit because of reduced time and cost implications. There is substantial research on the benefits of ongoing social interaction in palliative care, especially when approaching things holistically. Cancer and planned care are areas which can largely be operated on an outreach basis from larger hospitals, as is seen in other parts of the country (especially rural areas) which means that access to a wider variety of specialities can be made a available at a local level.
Bridlington Survey	As a growing town, we need more services available to support the local people that live here. As the town grows more families arrive and we are all struggling with access to health care. Personally I would have liked to have chosen all the answers above, but you only have the option of 2. These are the ones that are most important to me and my family. It’s

	difficult to go to Scarborough for urgent care, epically if you don't have transport, it's expensive and last time I went with my husband we have a 15 hour wait before he was seen. It's outrageous!!
Bridlington Survey	Bridlington Hospital has the potential to be used for the benefit of the entire community thus taking the strain off Scarborough Hospital & York Hospital. Having to travel for treatment puts a great strain on families. A well staffed & operational hospital will be of benefit to all sections of a growing population.
Bridlington Survey	Bridlington is a growing town with an ageing population. Many areas are classed as deprived, and as a coastal area is nationally recognised as in need of extra support. Travel elsewhere for patients and visitors is difficult and expensive for the vast majority.
Bridlington Survey	Bridlington Hospital needs to be fully utilised, there are many empty or partly-used wards which could be used to provide many much needed services. The population of Bridlington continues to grow, so it is vital that there are necessary departments within the hospital, - such as: A&E, maternity, cancer treatment, increased diagnostics, palliative care, etc. I work at the hospital and wish there were more services present, as our patients report that they have difficulty travelling to other sites for procedures and consultations that used to be available at Bridlington. The whole point of building the hospital was to ensure the local residents and holiday makers had adequate healthcare provision. Many services have been moved away, for no good reason, with many lives permanently altered or lost as a result.
Bridlington Survey	Bridlington needs a better a and e
Bridlington Survey	Bridlington is a town of ageing population and both of these would be of use for the population meaning that travel for cancer services could be reduced and end of life care could be local helping families at a time of need
Bridlington Survey	There is a perfectly good hospital not running as it should. WHY????
Bridlington Survey	I just think these are something Brid needs.
Bridlington Survey	Time it takes waiting for an ambulance then time it takes to get seen at Scarborough A and E
Bridlington Survey	Most important
Bridlington Survey	Because i feel we are loosing far too much locally! We used to have a brilliant system at Driffield but it was all taken away

Bridlington Survey	There is no maternity ward currently at Bridlington to say its covers a large area people have to travel to Scarborough or hull to give birth which is not ideal.also with people living longer I feel there is not enough eol care available
Bridlington Survey	If you are pregnant you should be able to receive expert care close to home in a hospital where it was provided before If you have cancer you should also receive expert care at the hospital close to home whenever possible Both of the above shouldn't have to travel to receive care Not everyone has transport or can afford travel costs or the extra time it would take.
Bridlington Survey	Patients who are unwell or need operations and their families should not have to travel miles to access suitable healthcare. In some cases travelling to several different hospitals over months/years has a detrimental effect on both health and mental wellbeing as well as the cost to families at the worst times.
Bridlington Survey	Hull and Scarborough are too far and too difficult to get to for local villages.
Bridlington Survey	Need quick assessment and treatment when ill at nearby centre and women need a lot more support.
Bridlington Survey	My family have recently been through losing a loved one. He was months on and off in Scarborough hospital. Different staff all the time, phones not answered, waiting to be seen, teams not communicating, notes not made or if they were , not read, staff taking bloods etc not even speaking to the patients , falls and injuries while there, discharge letters not done, family not informed of meds changes, district nurses not in place when sent home, elderly relatives unable to always travel to visit, the list goes on.
Bridlington Survey	The
Bridlington Survey	Have alot off family and older people in bridlington
Bridlington Survey	The situation gets more and more ridiculous. Live in Bridlington but expected to trail to Hull, Scarborough, York, Malton for appointments. For non drivers this is a real problem as public transport is inadequate and takes a huge amount of time if available at all.
Bridlington Survey	Scarborough hospital can't cope and the journey is too far and costly. Plus keeping services local helps not only the families but the environment. We are a very large town now with many new houses and holiday makers yet we have no infrastructure.
Bridlington Survey	I feel the older people deserve more care as they have paid into the NHS longer

Bridlington Survey	Travel is important not being able to get to hospital
Bridlington Survey	Less travelling for patients & visitors
Bridlington Survey	My husband is a stroke survivor. He was 3 miles from our local acute hospital when it happened. Currently, if it happens again, he will have to either go to Scarborough or Hull. Given that the first 72 hours are critical, his chances of survival may be reduced in the absence of acute care locally.
Bridlington Survey	Gp's and hospitals still treat the same symptoms on a man different to those on a female. Women's health is complicated and changes continuously, this needs to be given the correct support. Women need to be listened to, taken seriously, and you must remember pain is real to everyone in different degrees. In bridlington specifically, the population majority elderly with influxes throughout the year, especially in summer. As our population lives longer, we need to listen to the wise words of our retired community.
Bridlington Survey	Womens health has been and will always be one of the sectors treated the worse along side mental health services. With more research put into male baldness than endometriosis the NHS continues to show favourtism to those in the "default setting". On the surface there are so called campaigns that are supposed to help level the playing field but when looked at closer are lagging behind. Women's health and mental health are so fair behind it makes it hard to believe we are in 2026 not the 1970's.
Bridlington Survey	I think Bridlington hospital is ideal to recieve financial support to become a centre of excellence
Bridlington Survey	We are getting older, there are more problems with health. More difficulty in getting to hospitals further afield as driving is limited. Treatment can be somewhat invasive and travelling not easy following treatment.
Bridlington Survey	In the early stages of an illness it must be better to get a diagnosis and treatment plan then get the nearest hospital where you can receive most appropriate care
Bridlington Survey	Hospital services are inadequate to the number of people in need. The hospital is a great facility which is massively underutilised. the aging population in bridlington and surrounding areas have a huge need which is not being met.
Bridlington Survey	Many different ages, unfortunately can be diagnosed with cancer. I feel that this lacks the support in Bridlington. I believe that this service gives the patient, family and friends the dignity that is needed for end of life. Where has the compassion gone?

Bridlington Survey	A general service for each of the services in (20) should be offered - obviously they would not cater for highly specialised level of care.
Bridlington Survey	Answer to Q20: we have a maternity ward, just no births. I would wish to see births included in Bridlington. With cancer increasing year on year, I would like to see as many cancer services as possible at Bridlington.
Bridlington Survey	Bridlington has been let down (in the past). Everything taken away from both the town and the hospital. We, the residents, have not been given enough of a say in what happens next. It is a long way to travel to access these services we need them locally!
Bridlington Survey	Patient may need accident and emergency treatment but not have the ability to travel
Bridlington Survey	Planned care needed locally. Not 2 buses, 2 trains away. then feeling anxious or in pain two of the worst journeys there could be. The tightening up of hospital transport means more people cannot afford to go to appointments. Again having travel when unwell or frail possibly alone heightens the fear of whats going to happen to me and where. a good % of the people who attend the walk in at Bridlington hospital, are told cant deal with this here go to A&E scar/hull. People go home instead and deal with it best they can themselves.
Bridlington Survey	Bridlington is a town of quite a lot of elderly people and needs the best hospital facilities possible.
Bridlington Survey	Bridlington and outer areas need more help for elderly in ALL AREAS.
Bridlington Survey	With the increase in housing development in Brdilington there should be more services available in our local hospital not fewer.
Bridlington Survey	We don't want the hospital to shut. We want the hospital to grown in services. We want to feel safe in Bridlington.
Bridlington Survey	When you are getting older you need to know that everything which is possible to be in place for you to access the care that you need to to be able to carry on with your life without having to worry
Bridlington Survey	The hospital is a local asset and should be used efficiently. Those approaching end of life should be cared for in their own community so family can stay close.
Bridlington Survey	Professional support rather than families and carers is vital when ill or at end of life
Bridlington Survey	An amazing facility with friendly competent staff. Not used enough for local people and much better than having to travel further afield
Bridlington	If the other services selected we have no facilities in bridlington hospital to

Survey	deal with any complications and would be dangerous
Bridlington Survey	Common sense
Bridlington Survey	Not enough support for dementia patients and their carers
Bridlington Survey	People need the care unit
Bridlington Survey	Have aging parents and the population of Bridlington being an older generation, would benefit being looked after nearer to their home, without the stress (and cost) of travelling back and forth to Scarborough Hospital
Bridlington Survey	Ability to access treatment locally less impact on individual and family wellbeing socially, economically, and emotionally.
Bridlington Survey	Because as it is is fine.
Bridlington Survey	My answers are based on my working life in the NHS at Bridlington Scarborough Beverley and Hull plus my last two years working for the Care Quality Commission which I was a Senior Assessment Officer for Hospital services Bridling Hospital can work well again If Managers stop moving funds to other not required services
Bridlington Survey	People have more time to recover and get well in a hospital setting without taking up much needed beds for acute patients.
Bridlington Survey	I need care for my parents. They have both been discharged from Scarborough hospital with absolutely no help or equipment. I have no support. They are not receiving support as they would have to self fund and noone assists with this. We are on our own. I worry immensely about readmission to Scarborough as the care is so poor. Bridlington hospital is underused. Scarborough is dangerous. Social care is none existent.
Bridlington Survey	I am worried that patients will be discharged from hospital too soon with no care packages in place, not enough support and no follow up plan, for example ,visits from healthcare professionals or a GP. .
Bridlington Survey	Travelling long distances and the expense. It cost me £210 in taxi fares for my wife and I to attend York hospital on a Sunday… no other transport was available for us,
Bridlington Survey	I think Bridlington Hospital is not fully functional. Bring back more services.
Bridlington Survey	If no A&E is possible, then an acute illness unit which stays open as long as possible through the week is a must, given Bridlington's growing residential population and the seasonal influx of visitors. Improved cancer

	and planned care is also a must, for the above reasons.
Bridlington Survey	Concern that underfunding is placing people at risk
Bridlington Survey	You never know when you need this help and having a fairly new hospital on your doorstep and we carnt use to its full capacity is a disgrace
Bridlington Survey	I see the hurt in the community without the above
Bridlington Survey	I feel it's important not to need to travel out of the local area for people who are frail or seriously unwell.
Bridlington Survey	Bridlington has an ageing population and needs more support for the elderly who can't travel out of the are for care and rely on ageing family who may not be able to access transport to visit should care be out of the area.
Bridlington Survey	I do not wish any part of bridlington hospital to close. all are vital to the community.
Bridlington Survey	Reassurance that we have a hospital when we need it
Bridlington Survey	My friend had kidney and bladder cancer and broke both her shoulders in a fall when asked the 'care home team' if they could rub ibprofen gel over the counter medication, responded 'didnt have the cirtificate or training to do'. who will be monitoring the standards of private companies.
Bridlington Survey	I think all four services above have merit. I've selected acute illness because that would apply to anyone of any age and would reduce pressure on A&E at acute hospitals. Best start and womens health would apply to a large section of the community.
Bridlington Survey	The examples given for "best start and women's health" and the assessment and treatment of people who suddenly become unwell embody the most important inputs that I think a hospital can provide to its community.
Bridlington Survey	So there are services in the town for its citizens
Bridlington Survey	I think eol care close to home where family are able to visit easily is very important. Bridlington is a deprived area where many do not drive and it can be very difficult for family and friends to visit their loved ones who are dying. This is health discrimination. Women’s services should be accessible to women, many of whom are working and struggle to get time off work for appointments.
Bridlington	The services most relevant to me and my family

Survey	
Bridlington Survey	It would be far easier & aid their wellbeing for people who are already ill to have ongoing appointments & treatment locally. Also to treat children and families locally instead of a 90minute round trip with all the problems that entails. Not all people have their own transport and it means more than one bus, or a train & bus to get to hospital, which lengthens travel time immensely. Not everyone can afford taxis.
Bridlington Survey	There are a large number of new properties being built bringing in new families, there is no real infrastructure in place for children and families, I feel womens health comes secondary and more should be provided, the role women have in society demands strength to support children and homes, illness takes a back seat. The other is people should not have to travel miles for lifesaving cancer treatments when they are already feeling awful and fighting
Bridlington Survey	Longer of life
Bridlington Survey	I have had 3 experiences of scarborough a&e. I waited 6.5 hours for an ambulance that never came (I was repeatedly passing out while vomiting poo!). Eventually a friend took me. All the ambulances were in the car park with patients that there wasn't room for. 2. By ambulance after chest pain. Was on a trolley in a holding bay for 48 hours. No beds! No meals from hospital kitchen. No jug of water. 3. By ambulance after chest pain. Corridor after corridor lined with people on trolleys or in wheelchairs. Having a hospital in Bridlington that has never been fully utilised makes no sense when Scarborough clearly can't cope.
Bridlington Survey	I will be soon in the care of the hospital
Bridlington Survey	1. Too many people dying in hospital which is not their preferred place of death. 2. Cancer rates increasing too far to specialist cancer centre
Bridlington Survey	Distance travel for elderly patients can be traumatic due to distances involved from family/careworkers or friends
Bridlington Survey	I would like to see care closer to home with the hospital to offer a wider range of services. The population of Bridlington are elderly and need support where they do not have to travel. More support for cancer care in Bridlington and a walk in service when A&E is not the right place to go.
Bridlington Survey	Nowhere do you address patients having no family near. People who are totally on their own
Bridlington Survey	You don't want to travel far if you're suddenly taken ill
Bridlington	Having given care to both parents with cancer / end of life care at their

Survey	home and having to travel to York for treatment I fully see the need for these services to be provided locally.
Bridlington Survey	It is essential to keep this unit open. The home care is non-existent or rubbish. NHS do not have capacity for home care. This unit treats everyone as an individual not just a number and MUST BE KEPT OPEN
Bridlington Survey	My answers are based on end of life. Brid & villages are inbetween At Cath's and St Martins. Both financial worry. Brid hospital had a great Cardiac department and an A&E. Frailty - high proportion of elderly and infirm is Brid's population. Not looked after they become a larger health and social problem. My fiance had concerns one night. Couldn't get a GP appointment. Went to A&E walk in, waited but had to leave, long drive home and shift worker - sat in hospital, no pay. Went home, work. Week later no GP appointment available, he was with me had catastrophic heart attack. I trapped under him. Now I'm a mess and he is dead.
Bridlington Survey	Local support and treatment. Access to specialist staff for rehabilitation, and appropriate and sensitive re; frailty and end of life care. Use local facilities effectively.
Bridlington Survey	Do not want the hospital to just be an extension of a care home. It needs to be used as a hospital to help people get treatment quicker and without travel.
Bridlington Survey	To serve a wide section of the community not an extension of care facilities when this should be addressed through other means. Quick and close service.
Bridlington Survey	It's important to have services near to your home and not worrying about how to get either appointments or visit loved ones.
Bridlington Survey	Personal experience
Bridlington Survey	We residents of Bridlington feel that we don't matter. Most feel that this is a waste of time coming to meetings as everything is already planned. We keep being promised but do but not much happens. We do understand that equipment is very expensive but this hospital should be working 100% and not 35%.
Bridlington Survey	The hospital was designed and built to cater for all these needs. The town has almost doubled in size. There is large retired population. Cater for all the needs of the community, not sending them all over Yorkshire.
Bridlington Survey	A lack of concern about the population of Bridlington. Overcrowding of patients in York and Scarborough. In the last eight months I have visited relatives in Scarborough on three occasions. In six bedded ward there were seven and even eight beds. These extra patients had no access to oxygen, electric power points or even curtains. Privacy. What a joke. A

	lack of insight of [ ]. Patient service across the Trust always shows Bridlington as the highest scoring. The largest population in the East Riding.
Bridlington Survey	The use of the local Bridlington Hospital for as many users as possible
Bridlington Survey	Both options would reduce the amount of travelling currently experienced.
Bridlington Survey	This is a town with lots of older people like myself who live on their own and have no one to get them to Scarborough, Hull or York. This hospital is big enough to open most of it up. It's disgraceful how we have been let down by every Government that has got in. No one cares about the older people that live in Bridlington and the younger ones having babies as well. They have to trail to Scarborough and having experience of the baby delivery, no thank you it's crap. We had a baby delivery we need it back. Medibus is good but having to be ready 2 hours before and god knows what time you are getting back is no good.
Bridlington Survey	So much time is taken up by local patients having to travel miles to be seen when a building within a 5 mile radius is not being used to its full advantage. Many elderly people have no family or very limited resources which when they are poorly just adds considerable stress to them. Also this town's footfall increases doubly on a daily basis during holiday seasons and it is predominantly by older people.
Bridlington Survey	Travel and distance are the problem. Urgency is paramount with sudden illness. Pushing to other areas will only mean delays and overworked medical centres increasing stress for staff and over used utilities.
Bridlington Survey	If you become acutely ill you need to be seen very quickly. Bridlington Hospital is the closest place for the local area so an assessment or treatment there would be much better than having to go to Scarborough, York or Hull (which is the case at present). Time is of the essence. Services for children and families in our area are very important so women of all ages could do with this service in Bridlington. There is nothing like this any more in Driffield or Hornsea).
Bridlington Survey	We need an A&E in Bridlington. We need longer opening hours for the urgent treatment centre. There needs to be adjustment for the population difference in summer and winter due to tourists. The long term expansion of villages has to be taken into account. A run to Scarborough, York or Hull at night is not a good option. Your questions here are pointed and require more information for an informed answer but you may already know that. A network needs to be set up to ease current problems. You claim cost is the issue but what is the cost of community care and how good is community care. What is the training for community care? A lot of the questions are age related and are not look at the younger age group who most likely

	won't attend this event as they may not be worried due to their youth.
Bridlington Survey	Patients need care locally
Bridlington Survey	Some of the options offered we have, and they are failing. Most older people want independence so maybe home helps and wardens could take the pressure off NHS, and the 10 mins allowed each patient would have some back up from the council. The Council run home helps and wardens, people pay towards this service.
Bridlington Survey	Although an A&E would be a welcome addition to Bridlington again, it would probably not be viable at the moment. But with expanding estates and villages, I feel this has to be looked at in the future. At present, a 24 hour extended opening times at the urgent care centre would be an alternative. On call services for x-rays etc could be used to facilitate this.
Bridlington Survey	I believe that people should have quick access for cancer and other acute illness. No time should be lost in diagnostics and treatment. It should be local and readily available.
Bridlington Survey	The increase in people diagnosed with cancer is continuing to rise and therefore access to these services needs to increase and also be local so that treatment and after care does not involve great travelling distances. If people become suddenly unwell they need an assessment facility close to where they live so that treatment can be given ASAP.
Bridlington Survey	My husband was in the care unit which helped him so much
Bridlington Survey	I used to attend Bridlington Hospital for my 12 monthly clinic visits. After I was lost in the system for 4.5 years I received a telephone appointment. The doctor I spoke to didn't seem to know where Bridlington was. So I don't even know where I will have to go until I eventually get an appointment. We are kept very much in the dark. To be honest I am almost 90 years of age and never in my life have I felt less looked after by the NHS as I do now.
Bridlington Survey	The ages of the population, new housing brings young families and children. The residents are of an older generation in general and need to be near friends for support and travel is difficult and expensive.
Bridlington Survey	You restrict us to 2 answers. we need them all but priority must be given to our children and quick diagnosis and treatment in emergencies.
Bridlington Survey	The are all important but I believe those 2 are most needed. My 3rd choice would have been cancer etc
Bridlington Survey	Acute illness requires longer hours than the minor injuries centre currently open. An A&E department is needed - more new estates built, influx of tourists and visitors in summer, cancer and planned care, permanent

	scanners for CTs, more diagnostic facilities, outpatient follow-up etc. From a personal viewpoint, follow-up colonoscopies, long travelling time for three tests - very stressful!
Bridlington Survey	Bridlington has the largest population in the east riding. the hospital is needed for other areas around Bridlington. New homes being built mean more families. So womens health, maternity etc is required. Also end of life care for people living in the area. Bridlingtons population are fed up having to travel, sometimes to York and Leeds, for care that can be given here!
Bridlington Survey	My husband has Alzheimer's and I have diabetes
Bridlington Survey	Services closer to Bridlington to be provided in modern easily accessible hospital which is currently under utlised
Bridlington Survey	Services that are needed is like cateracts. Not having to travel asap. Not having to travel Not having to travel or get some sort of transport. A lovely hospital going to wast4e, Facilities needed nearer home

Is there anything else you would like to share about your views on Bridlington Care Unit or the proposed changes?

Service	Comment
Bridlington Survey	Keep it open and get the rest of our hospital up & running. Bridlington is now a huge town and we deserve better.
Bridlington Survey	Don't keep making Bridlington Hospital the poor relation, we deserve a fully funded and operational NHS Hospital not the odd clinic or ward. Get rid of the top heavy management and employ actual health and support staff - there's too many chiefs and not enough Indians.
Bridlington Survey	Do the right thing for people not for money.
Bridlington Survey	I feel strongly that BCU should continue to stay open but maybe a commitee of health staff, admin, and local residents could make this up, so that BCU can improve and lessen the restaints on other hospitals where they are already stretched to the limits.
Bridlington Survey	We need clear communication if intent and reasoning behind decisions. Many hospitals are overcrowded but we have Bridlington which is under utilised, why?
Bridlington Survey	Pushing patients out of town or out of hospital wether it be into understaffed care homes or overwhelmed family who care for them is adding to the systematic neglect of the towns residents
Bridlington Survey	The buildings and site could be used more effectively with little capital investment required
Bridlington Survey	It should not happen - it provides a much needed service in Bridlington which is one of the most underfunded areas in the country for NHS services
Bridlington Survey	Leave the care unit as it is
Bridlington Survey	It stated that it was only temporary but after nearly 5 years you count that as permanent. I feel for the hard working staff on the unit
Bridlington Survey	Is there any evidence that care in the community services are ready for the closure of BCU?
Bridlington	I do not feel closing the Care Unit in a town where the population and people in surrounding villages are predominantly elderly is helpful Largely

Survey	because bed numbers run high at Scarborough and local people can be taken good care of in our local hospital Care unit which has surely always focused on keeping local residents local to their families and friwnds
Bridlington Survey	It provides a good service helping people get the help they need before leaving hospital rather then getting home then being readmittid for not having the right care.
Bridlington Survey	I do believe all this is due to funding and employment . Bring back time and motion especially for managers and above to make sure they are accountable for their paygrade.
Bridlington Survey	Was treated by very qualified staff when post op wound got infected look at quickly and most professionally
Bridlington Survey	The hospital is a good resource which is seriously underused but sitting in the heart of a community that begs to use it. People have good things to say about the care they receive in Bridlington and personally I can agree. People are worried that losing services will mean we lose the facility completely.
Bridlington Survey	What are the plans for the ward if BCU closes?
Bridlington Survey	The care unit is needed in Bridlington
Bridlington Survey	Closing this unit is an outrage. More services for Bridlington's vulnerable patients being closed and siphoned off to Scarborough, where it puts strain on family and friends visiting their loved ones.
Bridlington Survey	It was a huge mistake announcing the closure without community engagement as this has increased distrust in our healthcare commissioners and providers. The historic attitude of telling the community what is best for them is no longer acceptable. Health and social care planning must be collaborative, as should be the design of surveys.
Bridlington Survey	No
Bridlington Survey	Why change what has worked and upset the community hospital when Managers dont know the ground work and only work on figures
Bridlington Survey	We need as much local health care as possible. Having to travel toHull or Scarborough is very difficult for some people and for their visitors. Bridlington is a growing community and we must not lose any services
Bridlington Survey	I have seen at close hand the beneficial effects this unit had for a friend’s husband in the last stages of life it would be absolutely criminal to close it in my opinion!

Bridlington Survey	Bridlington Care Unit should remain open until it can be demonstrated that people can safely return home
Bridlington Survey	They should not close the unit. My mother used this service and was very grateful for the service and staff treatment there.
Bridlington Survey	We were promised palliative beds a couple of years ago. This has not happened. Why do Bridlington residents at end of life need to go to Scarborough Hull or York? This is not fair on families especially considering the local demographics
Bridlington Survey	A loss of so many beds if Bridlington Community Unit were to close would have a massive impact on the Bridlington and wider area community
Bridlington Survey	A loss of so many beds if Bridlington Community Unit were to close would have a massive impact on the Bridlington and wider area community
Bridlington Survey	The hospital must provide a full range of emergency and care services to deal with this growing population. It's no good relying on Scarborough Malton Cottingham and Hull Patients can be dead before they reach those services! Accept that Bridlington needs full service emergency and care provision, fully staffed. Better than the GP services that are currently redirecting patients to A&E!!
Bridlington Survey	Senior nursing staff on site is vital
Bridlington Survey	Would love to see services at Bridlington Hospital expanded including more capacity for emergency care
Bridlington Survey	This is a VERY useful unit for Bridlington and nearby villages and should remain open.
Bridlington Survey	It's a real shame that more services are not delivered to the local community from the hospital. I can remember it being built with loads of promises when the old hospitals closed.
Bridlington Survey	We moved here because it has the hospital
Bridlington Survey	Only as previously said Bridlington has very few facilities closed to home and it is treat like the poor relative against Scarborough and York. Over the next 20 years the population will increase dramatically if you look on ERYC planning website you will see the number of houses that will be built . You need to start planning now for this. Not just with hospital care but dentistry etc
Bridlington Survey	It should stay open and it should have its own trust and not be run by york and scar trust as they are taking all the money which is now affecting our hospital which needs to stay open to help the elderly and to help people who dont drive and people who are carers for young children with disability

	needs
Bridlington Survey	The people in this need more support not less
Bridlington Survey	EXTEND AND UP-GRADE
Bridlington Survey	No changes should be made to remove the care unit, however more training a resources should be given to the care unit, Bridlington has a large population of Elderly residents and residents that don't have extended support available to them. Taking this unit away is forcing those people into unnecessary life changing situations.
Bridlington Survey	Lovely team, very professional and caring staff, couldn't do more for patients and relatives Provides fantastic end of life care for patients and support for families
Bridlington Survey	No
Bridlington Survey	I think the hospital is wasted at the moment, there could be many services that could run from there which would suit the communities of the trust. It would be such a shame to looses services.
Bridlington Survey	Do not close Bridlington Community Unit. Cannot understand the reasoning of the idea, when there is a permanently good ward that would be left empty if closed - yet Scarborough Hospital is full and overflowing. Additionally geographically the older residents of Bridlington would be penalised if the Unit closed as if unwell would have to go into Scarborough Hospital and family / friends would have to travel to visit which is not as easy or elderly may not drive at all. I believe visiting is so important (especially for the elderly) as helps their recovery.
Bridlington Survey	The uncertainty is making the few staff left anxious. And staff on other wards. People need to know what is happening and when, including the public.
Bridlington Survey	About 30 years ago I had surgery for a non - malignant tumour when I had 4 yr old twins at home. Everything went fine though I wish there had been some food in house when I got home. And I've heard far worse scary stories (elsewhere in country) of isolated people being taken home to empty fridges and cold rooms, from a warm friendly hospital (however busy).
Bridlington Survey	We need to focus on public health campaigns to prevent such a high burden on local health and social care.
Bridlington Survey	It is an underutilised hospital which could have more service for the area and be a good mixture of day cases, outpatient hub, community services

	and rehab with the existing wards.
Bridlington Survey	No
Bridlington Survey	There will always be some folks who need to stay somewhere while homes are adapted and support put in place. This is all about who funds the care not about patients and your questionnaire is designed to give you the "right answer". While there should be a discussion with Social services about how this is funded it is cheaper for the NHS not to have bed blicking and it is cheaper and more efficient for Social Services to provide care in a short term residential setting than it is peripetically.
Bridlington Survey	The very least a hospital can provide is a safe environment patients can recover in as families are not always available.
Bridlington Survey	Only to reiterate the large amount of older people living in the Bridlington area that require this kind of service/support
Bridlington Survey	Don’t close it Bridlington needs itc
Bridlington Survey	Much larger use of the hospital site for out and in patient services. Not everyone has transport for appointments away from Bridlington.
Bridlington Survey	No
Bridlington Survey	Get the hospital working again and get doctors and consultant's to travel a few miles to see patients who are very complexed health needx
Bridlington Survey	Keep it open ridiculous wanting people to go scarborough
Bridlington Survey	I hope to see positive changes to allow relief to Scarborough and Hull hospital
Bridlington Survey	Any changes should be made open to the public.....this is what the NHS is supposed to provide
Bridlington Survey	With the increase in people in Bridlington I feel there is a genuine need for the town to have access to all aspects of hospital care as we have in the past. Being born and raised in Bridlington i feel we are missing out on too many aspects of health care.
Bridlington Survey	Yes provide us with a hospital that we can be proud of instead of Bridlington been a forgotten area. No one should have to travel miles to get emergency care or treatments.
Bridlington Survey	I think patients are rushed out of hospital before they are fully recovered because of lack of beds and because of this they end up back in hospital, which ends up costing the NHS more money in the long run. The care unit

	would help to make sure patients are not going to be readmitted because they have had the chance to fully recover before discharge.
Bridlington Survey	Experience and a constant noise by the community who use or have used the service
Bridlington Survey	N/a
Bridlington Survey	I feel elderly people are being written off and its unfair.
Bridlington Survey	We need more services not less
Bridlington Survey	A friend of mine was in the Care Unit after leaving Scarborough hospital and every aspect of her care was excellent. This gave her the time and space to realise that she wouldn't be able to go home after all. Until then she was adamant she would be. Returning home, even with a care package, would have been disastrous for her. She left the Unit and went into a care home.
Bridlington Survey	No
Bridlington Survey	The most important thing for all life stages and situations, is the ‘locality’ of services. Ill people need to be able to have local services
Bridlington Survey	Put people first. The people who work in the service and the service users. Life is important. Quality of life should be the priority
Bridlington Survey	We have a hospital. Use it !!
Bridlington Survey	I believe it is vital for the Bridlington area. It enables frail elderly a chance to recover closer to home, which is better for their mental health.They are able to get back on there feet and move around the ward, visiting the day room and just get used to been back on their feet. Where in Scarborough they go from being in bed to home straight away. Who ever suggested closing this unit has no appreciation of how good it is, and it’s just a cost saving plan by people that have no idea on the good that it does.
Bridlington Survey	I feel that the care unit has bridged the gap and filled the holes within the social care system . Massive funding required to be able to offer good services to all from conception to grave !
Bridlington Survey	The community deserves this unit to remain open.
Bridlington Survey	Use the hospital to its full extent which was what it was built for - to take the place of several hospitals in Bridlington and others in the area.

	Scarborough, York, Hull and Castle Hill are very difficult to get to for many people for relatively minor problems or outpatient appointments.
Bridlington Survey	Whatever happens next, clear and transparent communication with the local community will be key.thsi will need to be made available in a variety of formats.
Bridlington Survey	Please consider keeping it
Bridlington Survey	Services need to be returned to Bridlington Hospital, before more people are negatively affected by not being able to easily access services they need or wait for too long for a diagnosis or treatment.
Bridlington Survey	Changes should be made to benefit residents of Bridlington, not make life harder. I understand funding is a factor however I firmly believe that if the trust put patients wellbeing over pandering to woke ideologies, box ticking and pure greed, patients would benefit. Millions of hard working tax payers pay money into the system that gets spent on ridiculous salaries for roles like [ ] which is ludicrous. Roles should be given to those most qualified not because of colour, creed or religion. This wasted money could go towards recruitment of more front line dr and nurses. Services such as home care could improve as its appalling you would treat an animal the way frail and vulnerable people are treated by some care providers. The care sector should never have been privatised it should have remained under government control so care was at the forefront not profit. We are human beings not a number on a spreadsheet
Bridlington Survey	Bridlington Community hospital beds to be used for the benefit of the community. People are struggling to travel to bigger hospitals for outpatient appointments or other services. The hospital needs to be used to its full potential and to serve the population of Bridlington, taking into consideration that both towns of Bridlington and Scarborough increase in population from March to October putting a strain on both hospitals in an acute capacity
Bridlington Survey	IT SOUGHT HAVE EVERY THINK THAT A HOSPITAL NEEDS NOT JUST HALF OF A HOSPITAL
Bridlington Survey	Nothing should close it all needs to open up. Minor ops are offered elsewhere but if you request Bridlington it can be done there! It’s all a ploy to close down. We deserve our hospital.
Bridlington Survey	The travelling adds extra stress to family, the size of Bridlington needs a full functional A&E
Bridlington Survey	We need this service locally for everyone. Scarborough too far.
Bridlington	It is outrageous that they are thinking of closing this much needed service

Survey	to the community without providing evidence that this ward is not needed ie making sure there is enough care providers to pick up the care needs of the patients
Bridlington Survey	Driffield area GPs need to know what facilities are available for their patients
Bridlington Survey	The hospital has a lot of capacity for diffetent uses and it should be used as the area is growing in population and housing developments.
Bridlington Survey	Just as a town, we are desperately in need of a fully functioning hospital HERE
Bridlington Survey	Bridlington hospital was built for the people of Bridlington but its not operating how it use to too many cut backs and too much spent on Scarborough hospital 14 hours my husband spent on a trolly in a corridor when he was very ill it's so wrong ,to get home from scarbough after my husband was sent there then sent home 10 hours later at 4 am the cost of a taxi was £54 :good job we had the money to be able to afford to even get back home
Bridlington Survey	Its a extra ward it helped Malton hospital out not that long ago and what's going in winter when Scarborough over welled
Bridlington Survey	We must stop this closure. It is not a business, it's a necessity.
Bridlington Survey	Bridlington Hospital should be developed as there is a definite need for improved services. Perhaps consideration of a care unit at another site where patients could be assessed to plan their future care which would reduce "bed blocking" in acute hospitals. Keep the current care unit until this is available.
Bridlington Survey	The NHS was set up to guve everybody equal acess to the relevant healthcare. We are in 2026 with our elderly being brushed off with visits from nurses rather than doctors, our women are being treated differently for the same symptoms as their male counterparts and more and more people who can afford it are going private, so those without the income are being left to suffer in pain, discomfort at home, alone, unheard and feeling forgotten.
Bridlington Survey	You are holding this on a monday and tuesday during working hours, therefore the majority of those in attendance are retired. The only reason this came to our attention was were given a leaflet (with sparse details) while in the waiting room of the GP surgery. Therefore, anyone who is not regularly in the gp surgery or who is employed full time cannot express their opinions. This excludes the majority of people from 18-65 who also need these services but now can have no say.
Bridlington	Bridlington Care Unit was excellent in helping patients recover better than

Survey	leaving acute wards and going straight home. The help we received was excellent.
Bridlington Survey	Is this only a financial decision or staffing?
Bridlington Survey	It should not be closed until people can sefely be sent home with adaquate care in place
Bridlington Survey	Open up surge capacity during summer months. Increased staffing at UTC to reduce queues, and introduce a 24 hour pharmacy service (even if only during summer months).
Bridlington Survey	Local services for local people. Bridlington care unit needs to remain open.
Bridlington Survey	It is needed locally in Bridlington. Not moved as in everything else that has been taken away from a growing community. Not always the elderly that requires this service.
Bridlington Survey	I understand having worked with frail vulnerable people (of all ages). There are peak months when the care unit is possibly inundated with patients. followed by possibly months when it's not required/full enough. Surely the powers to be have enough about them to work out a strategy that could work leaving the unit available when and as needed. winter or summer.
Bridlington Survey	Get 30 beds back in Bridlington
Bridlington Survey	A lot of people could be upset if the proposed closure of the care unit goes ahead Because following a time in hospital say in Scarborough and then you might be ok to leave hospital but you still might require some rehabilitation it would be good to transfer to the care unit which is better for love ones to attend without the travel to Scarborough and back and when the patient is well enough to return home the might need more help at home This must make sense if a patient can be discharged from hospital thus freeing up beds for other patients
Bridlington Survey	Bridlington needs a care unit and the hospital is a modern welcoming environment that can provide comfort and care. The people of Bridlington deserve to have a place close to home to rehabilitate. It is also a desperate waste not to use Bridlington hospital to support all the needs of the local people.
Bridlington Survey	The town needs a fully functionkng hospital with a&e/ maternity/heart & stroke unit etc etc
Bridlington Survey	Do not close it down.
Bridlington	Our elderly family friend was in BCU for several weeks over the Christmas

Survey	period and he was extremely well looked after. Knowing he was in Bridlington was a huge help too, to his emotional needs and also ease for us visiting daily (as he has no direct family) around our working hours, rather than the long drive to Scarborough after work. It was also easier to organise his Social Care on discharge at Bridlington (East Riding Council), rather than in Scarborough (which is North Yorkshire Council)
Bridlington Survey	We should be able to access health care/outpatient services without having to travel all over the county at vast expense and time. We have a hospital on our doorstep which is modern and far better than others yet it is not used to full service I would imagine because for outpatient services some Consultants do not want to travel here from York or Scarborough but we are expected to travel there
Bridlington Survey	I worked as a Nurse at Lloyd Hospital I am ashamed to see the lack of Heal provision in Bridlington
Bridlington Survey	Get social care sorted and hopefully everything else will fall into place!
Bridlington Survey	More GP's in Bridlington and better access to be able to see a GP. The return of home visits and get rid of this stupid triage system, I think you can access for your self whether or not you need to see a nurse or a doctor. You would be under a doctor in hospital so you should see a doctor when you come home at least one's a week for as long as necessary.
Bridlington Survey	As previously mentioned, it is wholly unjust and unfair to penalise rural and urban communities across the Wolds in expecting so many requiring hospital care to have to travel further to access services. I experienced this recently in having to travel to Scarborough, Hull and York. When central government are wasting substantial amounts of money 'hidden' behind things like substantial costs of aircraft flights, the unneccessary new No 10 North offices and accomodating ministers then having 2 offices in Westminster and Manchester. Having previously worked as a civil servant in local government I was only too aware of substantial 'hidden' budgets and hpw these funds could be better spent on supporting the people elected ministers are there to represent. If government operated like private companies do, they would go put of business. Everyone deserves to have better, local and more appropriate services. Should also ask Christian churches to pray 🙏 for Jesus to divinely and supernaturally move to heal sick people. Praying costs nothing but is guaranteed to bring about the right outcome. Honesty always the best policy, but sadly we are all only too aware of the lies, deceits and untruths from politicians.
Bridlington Survey	The care unit is there to support you not push you out the door like your trying it relives pressure of York and scabrough main hospitals.
Bridlington Survey	Bridlington Care Unit is very much needed Tge whole town at some time or another will need the services provided by the hospital I hope everyone

	can be given the Care from these services Stop running the services provided down
Bridlington Survey	All mentioned previously
Bridlington Survey	Don't close it
Bridlington Survey	I must admit I don’t know much about the care unit, maybe because I haven’t needed it yet but I’m sure I will. Elderly people shouldn’t have to travel long distances to receive medical treatment and help.
Bridlington Survey	How much money will be saved and who is responsible for the budget deficit, mangers need to be sacked and there pay reduced.
Bridlington Survey	Don't close ir, its needed in Bridlington
Bridlington Survey	We are both 70 and moved to Bridlington 3 months ago, from North Leeds where we were 10 mins drive from St James's Hospital and Leeds General Infirmary. It was a big step for us, and medical facilities were a consideration. We have both needed medical attention in the recent past, but the communications between and within departments at both teaching hospitals left a lot to be desired. Joined-up thinking and planning in a smaller set-up is achievable and desirable. This could happen in Bridlington and it could be a model for other areas to adopt.
Bridlington Survey	There is no further capacity in our community This will only cause harm
Bridlington Survey	I feel people have confidence knowing they've a local hospital that can address local health needs. Community health services are often viewed as being in danger of staff shortages and cuts
Bridlington Survey	To keep services at Bridlington care unit rather than having to travel out of the area.
Bridlington Survey	It needs to be continued for the sake of all people, both client and professional.
Bridlington Survey	To be Honest, I do not understand all the services mentioned, but checked what I felt the best answers. In many cases I fear all options were possibly right.
Bridlington Survey	Please ket Bridlington Hospital provide all services. Its axwonderfull hospital we faught for for many years with a great location for access unlike many hospyltals wel thought through.
Bridlington Survey	I think some of the questions are 'loaded' e.g. q 8 and q 9. Some questions list service names and it is almost impossible to answer questions on

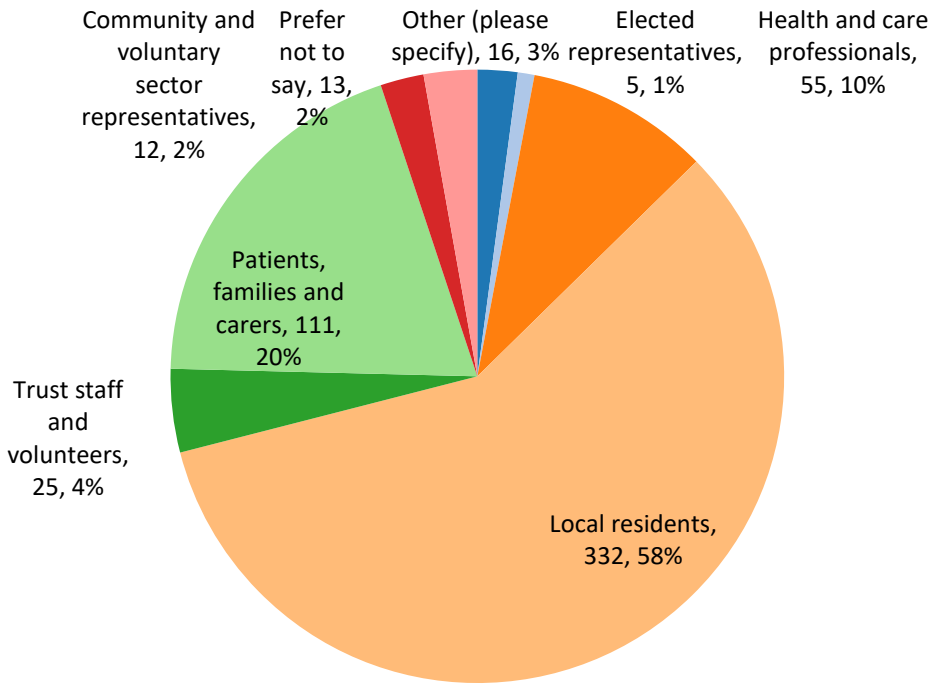
	priority because you would have to know how well they work. Bee at home care is mentioned regularly. As far as I can see this is a home care provider much like any other. They have good reviews in addition to some poor reviews. Often it's not the organisation which is being reviewed but a particular carer. That's no different to other home care providers.
Bridlington Survey	The idea of closing it is just so final yet if this is a mistake it will be very hard to rectify and I wonder how it is even possible to know with surety that the quality and quantity it provides will be replicated without it. Saving money from the NHS budget is being prioritised at the expense of putting extreme pressure on what remains particularly at Scarborough which will lose a safe and dedicated option to house people who don't need an acute ward bed but for one set of reasons or another are not ready to go back home in the Bridlington area. I found some of the questions in the survey contained options for me to consider that were like headings (i.e. generalised) without an explanation to describe what was really contained within them to enable me to completely grasp the range of services involved.
Bridlington Survey	Please bring Out Patient Clinics back to Brid!! Also Accident & Emergency
Bridlington Survey	I have visited people who have been on the Care Unit. It was so easy if they needed anything, I could slip out go to the supermarket or other shop get the items and return the same day to complete the visit. I couldn't do this if they were at another hospital miles away.
Bridlington Survey	Treatment of dementia. My wife sent to Scarborough Hospital when in hospital we saw the bottom of the chart. This patient not to be resusitated.
Bridlington Survey	The NHS is struggling. Everyone seems to want more out of the system but want to put less in. Unless we're prepared and pay more tax we can't realistically expect any better than we have. I would happily pay more tax!
Bridlington Survey	Great orthopaedic reputation for surgery and well organic set up for planned care except for transport for people who cannot drive
Bridlington Survey	Brid simple needs a care unit
Bridlington Survey	More access to diagnostic services
Bridlington Survey	Bridlington Care Unit is a necessity for the community. The elderly struggle to access York or Scarborough. We need care in our own area. We do not want the unit to close. This will be one less service Bridlington would be able to offer its residents.
Bridlington Survey	No buses to York for anyone having to go to other hospitals. Social services take on so many patients they seem to rush in and out of houses

Bridlington Survey	In the national news NHS heads and politicians are saying hospitals need respite wards as halfway houses to maintain discharge flow from acute beds, safely medically supported step before return to home or care home. Why are Humber & Yorkshire cancelling out the very service other regions and London are saying needs to be put in place elsewhere. You are ahead of the game, why undo a good scheme? I have heard say that this ward and Silver Bircher care home in Filey are being superseded by the Eastfield closed surgery geing revamped into care respite. If so need to get transport sorted as no buses or trains coming up from South Eastfield stop any nearer than a mile walk to that building or Eastfield centre.
Bridlington Survey	Don't close vital, local assets.
Bridlington Survey	What I have heard today about the proposed increased services being brought into Bridlington is very good; lets use the facilities that are there.
Bridlington Survey	The care unit needs to be kept open to provide a stepping down from hospital to home. It needs to be kept local for the patients to keep in contact with loved ones. The proposed services I've heard about today seem to be a good step in the right direction. Brid Hospital needs to be locally used.
Bridlington Survey	Out i=of hours access to medical triage
Bridlington Survey	Is it remaining open or looking at future plans to close? If so, no closure.
Bridlington Survey	Bring back more services we have a great hospital why do we have to go miles and miles away!! More local care.
Bridlington Survey	It is most important to have easy access to a local hospital for all people.
Bridlington Survey	With the large increase in the local population there should be more facilities provided and none reduced or removed all together
Bridlington Survey	Keep bridlington care unit its a must for local people
Bridlington Survey	Yes this should not be happening in this day and age, but it seems no one cares about Bridlington. We also need an A&E department. Urgent
Bridlington Survey	This proposed closure could have many more implications created by lack of these facilities. Some residents do not have families able to help and need a safe place to cater for nursing needs as / when they arrive. I truly believe a monetary budget is the behind the scenes problem. Which if the infrastructure is not correct will cost excessive funds.
Bridlington	Bridlington Care Unit is not necessary but also essential. Scarborough

Survey	hospital is under too much strain. Respite and rehabilitation is better near home with a friend and family network.
Bridlington Survey	The inequalities in our town need addressing. Prof C Whitty's Report: Where does the "duty of candour" lay. When will people of Bridlington be notified of the "Improvement plan" and services returning locally?
Bridlington Survey	I am pleased to have the opportunity to attend today. However, I think the notice about this even has been too short, so limited people in the area know about it. I expect a much higher attendance would be probable if more advance notice had been given. I only heard about it at church yesterday. Let more people have their say. Keep the care unit open!
Bridlington Survey	NHS is for all. The fact of where I live should not affect the service. A big population needs more service but a little population still needs a service.
Bridlington Survey	It is vital as so many elderly residents live here.
Bridlington Survey	This hospital need to function as a hospital, not an annexe. Bridlington is growing. That's more families, that means even less medical help, its on its knees already. The only Doctors practice has altered the running of the practice, so now neither patients or staff know what they are doing.
Bridlington Survey	NHS services should be maintained, not axed. Coastal towns and rural villages should not be personalised because of where they are. Everybody pays into the NHS and should, at least, feel confident they need is available when they need it.
Bridlington Survey	All care taking place should be as close as possible to where the person lives. It would allow visitors who are a lifeline to elderly people the opportunity to visit without the visit being an all day event. Being close to home will also benefit the patient. Hospitals should be about providing services, not about what services they can lose. It is a backward step - we need more services, not fewer.
Bridlington Survey	This facility is needed in Bridlington which is continually increasing in size. Care should be as close to home as possible.
Bridlington Survey	It seems the plans will provide less services at the hospital. Transport is a vital issue because we are getting fewer and fewer services in Bridlington
Bridlington Survey	I think that patients in Bridlington should have a care unit at our own local hospital.
Bridlington Survey	I think Bridlington Hospital needs more developments as soon as possible because there are more houses being built with more people needing hospital amenities in many different ways.
Bridlington	It's important that the local people know what services are available in Bridlington before agreeing to go elsewhere. Thereby supporting local

Survey	care.
Bridlington Survey	You are basically sending patients home to die as there is no support in place. It makes no sense as they frequently end up back in hospital
Bridlington Survey	In the care sector the dental department should be reopened
Bridlington Survey	Bridlington Care Unit is needed for patients in the short term. Of course the aim is to get people home as soon as possible when they are fit enough and the necessary care package organised. The care unit would also prevent bed blocking on the wards at York and Scarborough.
Bridlington Survey	I appreciate that staffing levels could pose a problem. However, in a care unit, qualified staff would be well supported with HCALS. A good care package for returning home is vital. with good coordination between services. this would ensure safe and quicker discharges back into the community.
Bridlington Survey	We need a general hospital with an outpatients department and an urgent treatment service that is open until 11pm.
Bridlington Survey	Frankly, it would be nothing short of a disaster if Bridlington Care Unit were to close.
Bridlington Survey	Do not close Bridlington Care Unit.
Bridlington Survey	We continue to hear about bed blocking in hospitals which adds to the shortage of beds in medical and surgical units. This is due to no care packages in place for people. An intermediate care unit is definitely required, particularly with an increasing aging population.
Bridlington Survey	The care unit is a vital part of the Bridlington community and therefore should not close. Patients recovering from surgical operations would benefit from a care until and cancer cervices and not having to travel to Castle Hill
Bridlington Survey	When I came 30 years ago the hospital was new! I think there had been public funding, perhaps residents could help????

Which best describes you? (Select all that apply)



Answer	Total	Percent
Community and voluntary sector representatives	12	2.1
Elected representatives	5	0.9
Health and care professionals	55	9.7
Local residents	332	58.3
Trust staff and volunteers	25	4.4
Patients, families and carers	111	19.5
Prefer not to say	13	2.3
Other (please specify)	16	2.8
Total responses	569	

What is the first half of your postcode e.g. YO16? (Please do not provide a full postcode)

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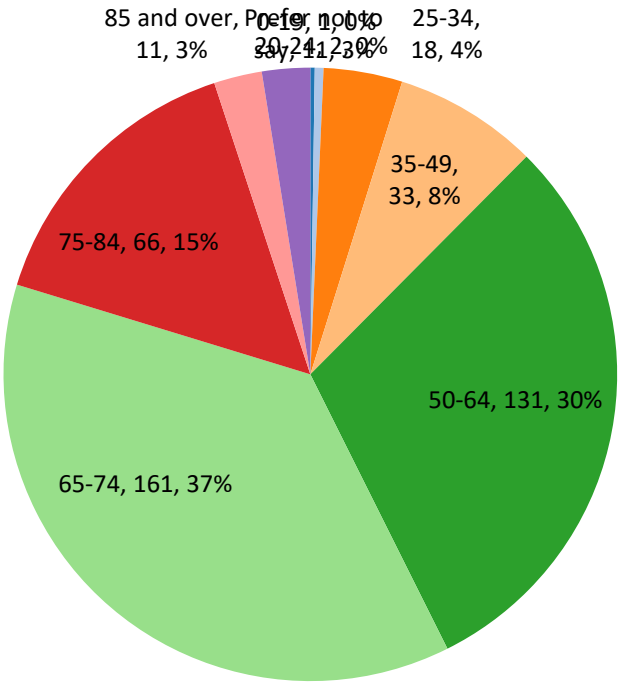
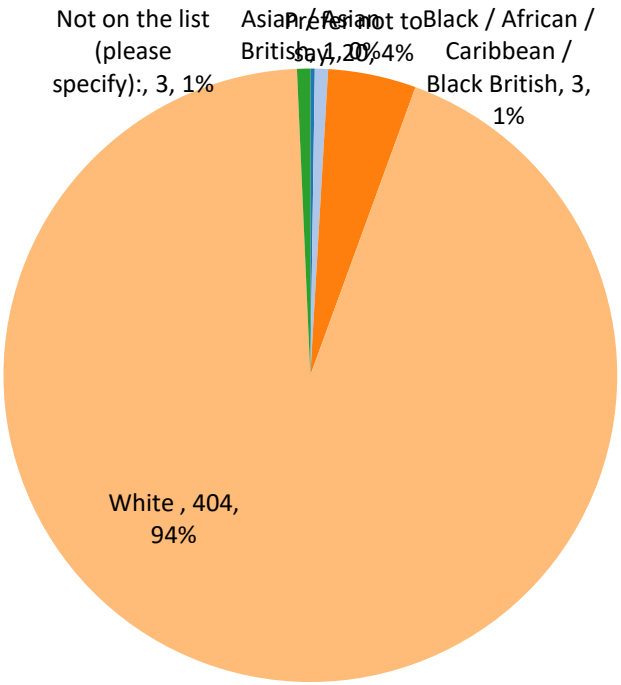
What is your age?



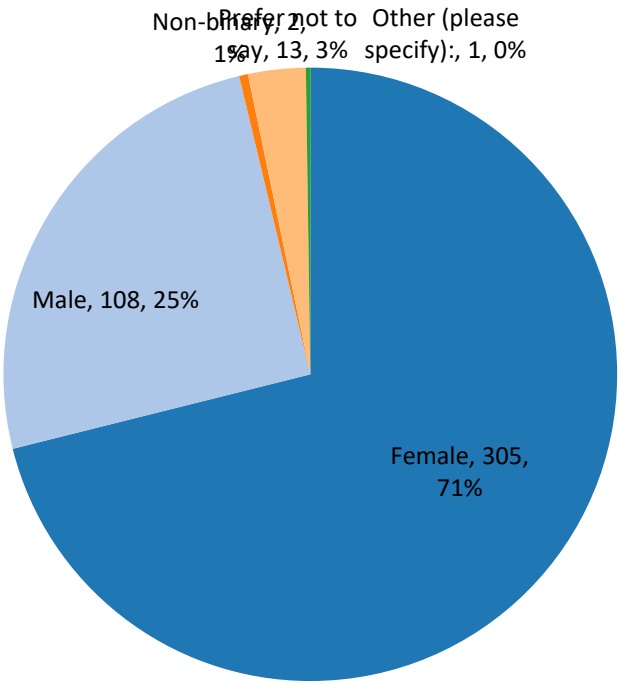
Answer	Total	Percent
0-19	1	0.2
20-24	2	0.5
25-34	18	4.1
35-49	33	7.6
50-64	131	30.2
65-74	161	37.1
75-84	66	15.2
85 and over	11	2.5
Prefer not to say	11	2.5
Total responses	434	

Which of the following best describes your ethnic background?



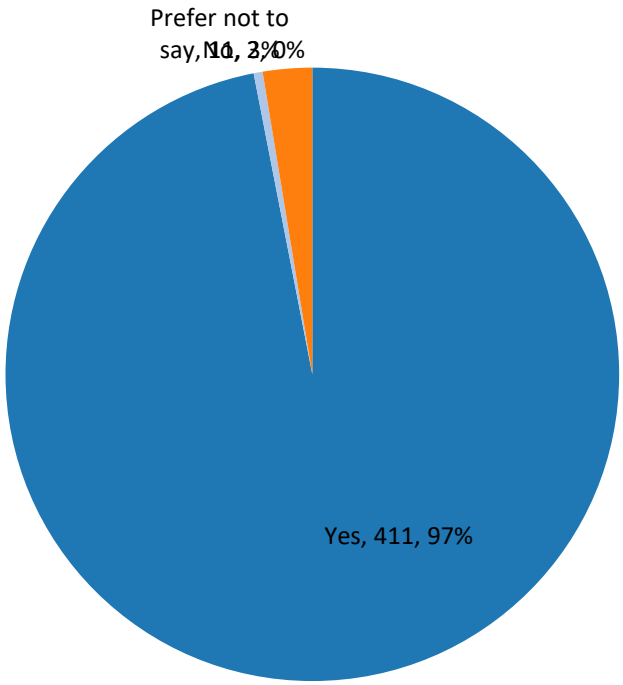
Answer	Total	Percent
Asian / Asian British	1	0.2
Black / African / Caribbean / Black British	3	0.7
Chinese	0	0
Mixed / Multiple ethnic group	0	0
Prefer not to say	20	4.6
White	404	93.7
Not on the list (please specify):	3	0.7
Total responses	431	

Gender



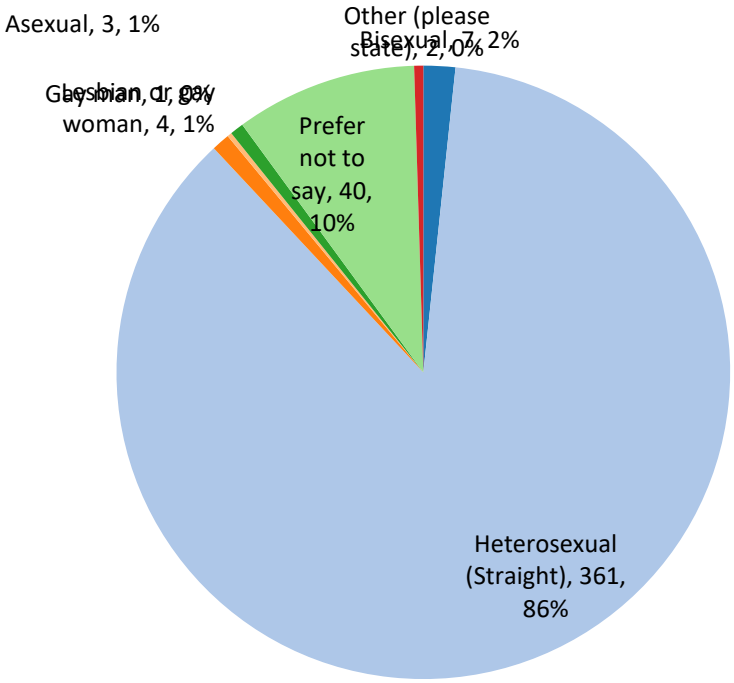
Answer	Total	Percent
Female	305	71.1
Male	108	25.2
Non-binary	2	0.5
Prefer not to say	13	3
Other (please specify):	1	0.2
Total responses	429	

Is your gender the same as assigned sex at birth?



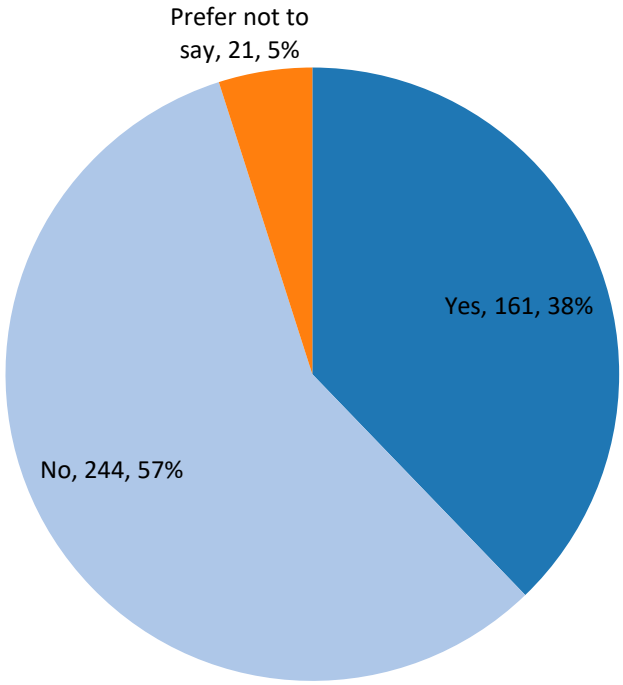
Answer	Total	Percent
Yes	411	96.9
No	2	0.5
Prefer not to say	11	2.6
Total responses	424	

What is your sexuality?



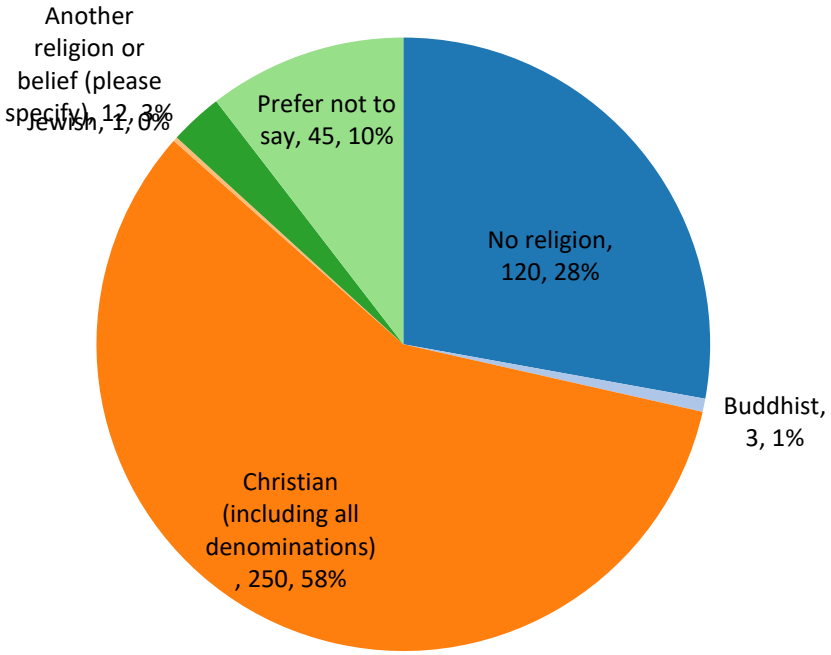
Answer	Total	Percent
Bisexual	7	1.7
Heterosexual (Straight)	361	86.4
Lesbian or gay woman	4	1
Gay man	1	0.2
Asexual	3	0.7
Prefer not to say	40	9.6
Other (please state)	2	0.5
Total responses	418	

Do you consider yourself to have a disability or long-term medical condition that limits your daily activities?



Answer	Total	Percent
Yes	161	37.8
No	244	57.3
Prefer not to say	21	4.9
Total responses	426	

What is your religion or belief? (Please select one option)



Answer	Total	Percent
No religion	120	27.8
Buddhist	3	0.7
Christian (including all denominations)	250	58
Hindu	0	0
Jewish	1	0.2
Muslim	0	0
Sikh	0	0
Another religion or belief (please specify)	12	2.8
Prefer not to say	45	10.4
Total responses	431	