



Analysis of The Impact of the STP Report for Devon ¹

Taken from the STITCH Newsletter

“We are fortunate that we have at least two Stitchers who are ex nurses, and they have looked at the 50 odd page leaked STP Report for Devon and have made some sense of the jargon and what it all means and how these proposed cuts could affect our community if they are implemented.

Here are their thoughts:

“These new cuts will affect everyone in Devon and will make North Devon a post code health lottery with equality of access to healthcare being absent. Here is just some of the list - it makes scary reading!

- In all Devon - 400 acute beds to be cut - in real terms this will mean 1 in 6 beds going
- 190 further community beds to be cut - with this the closure and the threat of selling off of our community hospitals are very real
- 11% cut in the nursing workforce

In North Devon

- A and E for now will stay (but remains still at risk of closure) Doubt about the continuance of emergency surgery
- Acute Stroke service (patients that should be seen within the golden hour for thrombolisation) to be scanned and assessed. From an inside source - very much at risk of closure and moved south to Exeter and Derriford
- This one is the main worry at present - maternity, childrens and neonatal to be centred at Derriford with a 2nd site at the RD and E, not North Devon.

The unfortunate conclusion I and many others have come to is that this is so risky that people will die. I just think of what happened to my daughter and how she

¹ Taken from material supplied by Anne , Phillip, Irene, Stephen et.al

haemorrhaged badly after giving birth and had to have emergency intervention. Luckily she was in a consultant led maternity unit when our granddaughter was born. If she had been anywhere else she might not still be with us as the haemorrhage was so bad. Just think of someone having to get from Lynton to Plymouth in that state - Exeter is bad enough.

By 2020 this local NHS states they will have a 572 million deficit otherwise.....

I will leave you to draw your own conclusions but I far as I can see the care of the patient is very definitely not in the centre of this plan.

What is set to replace this ,our health service? The underfunded and understaffed model of care that was trialled in Torrington (Care closer to Home) trialled without our consent and that has been sent back to the Dept of Health by Devon County Health and Wellbeing Scrutiny committee as unsatisfactory as it was flawed. The CCG/Success Regime/Northern Devon Healthcare Trust fully intend continuing to roll this out across Devon and are still using it in Torrington despite lack of funds, staff and resources. I personally think this is unethical and morally corrupt. We have case studies to show this model has not worked. But according to the Success Regime in the future in the main our care will be based upon encouraging "self care" amongst the population.

Unfortunately and deliberately the NHS is on its way to becoming a Do it Yourself service. The intention by the government is to have associate physicians, who will only need a science degree and to do a one year post grad certificate to become a "doctor". In the future you will rarely see a qualified doctor, instead seeing an associate physician, the NHS on the cheap. Similarly with nurses, band 4 instead of registered nurses will be used.

If you question if we can afford to have a proper health service, as one of the richest countries in the world, just look at many other European countries. Even Portugal pays more per person than we do. The medical director of the Trust has spent some time last year visiting the US to see how they do things. So you can see the way this is going.

The fact is that under successive governments they have decided deliberately to allow more and more privatisation , and erode our NHS. Our own health visitors are now run by Virgin. As well as no community beds in Torrington we will soon have no hospital under these proposed plans as NHS property is intended to be sold off. WE already have no sexual health /family planning clinic in Torrington and much reduced health services at the "Hub". The Health and Social Care Act 2012 abolished the NHS in legislative terms and opened the NHS to unlimited privatisation. NHS England is now in charge of the health service and intends to make savings – not of patients – of money!. In Britain out of £30 billion NHS contracts tendered since the Act came into effect £16 billion has been awarded with 34% going to the private sector. One may ask who this benefits?

I have written a letter to Geoffrey Cox MP asking him to vote for the NHS Reinstatement Bill which is to have its second reading in November and could start the reinstatement of our NHS. Here is his reply.

“I am sorry to say that I oppose this Bill as I believe it is based on a false premise. On 13th July Margaret Greenwood claimed that the Bill was necessary to stop the privatisation of the NHS. However, I would argue that the privatisation of the NHS is not occurring, therefore the Bill is unnecessary.”

He needs to be convinced that we, who he is representing, think otherwise and will not accept these very dangerous proposed health cuts that will put many lives at risk and give an already deprived area further inequality of access to what should be our healthcare services. Nor will we accept selling off any more of our services for gain so please write to him. North Devon will never accept any cuts! This is our “Red Line”. There is no negotiation on this!

Geoffrey Cox MP can be contacted by e mail tellgeoffrey@geoffreycox.co.uk

We have a choice, we can sit and let this happen or we can fight to bring back our NHS. As far as I can see there is no other option. When its gone - its gone! No point in grumbling when it's all happened. People are only beginning to understand the gravity of these and future cuts. As far as we are concerned we are going to fight these imposed changes on behalf of not just ourselves but for the old and frail and vulnerable in our communities who can't speak for themselves and also for future generations that may never know what it is to have a proper NHS if these proposed cuts go ahead. We are aware from experience of so many previous sham and flawed consultations that this next success regime consultation will be window dressing and whitewash. We need real numbers out there, this time wearing red showing that we want to our NHS that puts patients first back. Look out for the run up to “North Devon sees Red “day Saturday 22nd October. It will be well advertised.

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Cat's out of the bag!.....Shocking, Scary and Stupid²

A leaked first draft of the Wider Devon Sustainability and Transformation (STP) plan for radical changes and cuts in our health service health service provision was the top story on Radio Devon and Spotlight SouthWest throughout broadcasts on September 8th.

As predicted by Save our Hospital Services (SOHS), we in the northern part of the county will suffer the most drastic cut in services and access with the loss of all our acute specialities at NDDH. Under the plans, only Accident & Emergency at our hospital in Barnstaple will survive the cuts, leading consultant clinicians to ask what sort of A&E it could be under such circumstances.

² Stephen and Irene Clark

Across the region, 590 beds are due to be closed by 2020/21 and there will be an 11% cut in nursing staff, with 900 of the staff who do survive the cull “retrained.” This comes on top of the closure of dozens of beds in community hospitals in Torrington, Lynton, Ilfracombe, Bideford in the past three years, and the pressure for more bed closures at our two surviving community hospitals in South Molton and Holsworthy.

Meantime, as councillors and campaigners have repeatedly pointed out medical and surgical beds in NDDH are already been eliminated, 36 are now being cut in an on-going reconfiguration of medical, surgical and stroke rehabilitation wards.

Here’s an immediate overview assessment of the leaked draft report that SOHS have now posted on our website at: www.sohs.org.uk:

- In essence, the proposal is to move certain health care away from local hospitals to "centres". The main hospital for North Devon, the NDDH, will not be considered a centre.
- Emergency care will be centred on four acute hospital sites in Devon. (Presumably Exeter, Plymouth, Torbay and Barnstaple.) These will be the only places for emergency care. If you live at a distance, by the time an ambulance has come from some remote hub and then driven to the centre, the patient may well have died.
- Stroke Care will be centred at "various (yet to be) specified sites".
- Parents, you will not like this one! Maternity, paediatrics and neonatology will be centred at Plymouth, with Exeter as back up. Not good journeys from North Devon!
- A comprehensive specialist mental health service will be established at some unspecified location.

There will be a stronger focus on out of hospital self-care. This sounds very good, except that whilst it may work for minor issues, it is unlikely to work for any major health issues. No evidence has been presented that this can even be delivered, especially with local authorities (who have to provide home care support) having further cuts to their budgets. "Community Centred" is the buzz phrase. Watch out for these type of phrases as they are used to conceal very unacceptable proposals.

They claim that they have already achieved, " A growing awareness, understanding and acceptance of the need for change by the public and staff". They have given this a nice

red tick in the report. The only reason they can make this claim is that they have kept the public in the dark, or are deceiving them by spin. Let's make them aware of just what we think and make them untick that box!

For months now, we in SOHS have been accused of scaremongering. We have always replied that in refusing to rule cuts or downgrades to ANY service provided at NDDH, it is the ludicrously entitled “Success Regime” designers of this misnamed Sustainability and Transformation Plan (STP) that are scaremongering. How correct we have been proved. Local media and commentators have described the draft plan as “shocking,” “scary” and “stupid.” For once, we agree.