

## This is a transcript of the letter presented by Councillor Andy Boyd to Torrington Council

As to the situation regarding North Devon Hospital.

There has been a very active "fear" campaign, run by a select few, that is being laid down with a view to some attempting to benefit/gain advantage, Politically, at the County Elections coming up in May. as such, I feel that it is first necessary for me to allay the fears of the Parish Council by adding a bit of actual context to the wild tumours that are doing the rounds.

The first thing to accept is that the world really operate with some basis in common sense. When considering the provision (essential provision) of health services across the whole of Devon...indeed across the whole country, it doesn't a lot to realise that things have to change. we have to find, develop and/or install a new system of provision, that is to say that we can no longer continue to provide health services in the 'ad-hoc' way that it has been operated up to now. things have grown too big! there are too many demands on a very weak infrastructure!

People are always afraid of change. their main fears are that something is going to stop, or that they are going to lose out in some way. One of the main reasons for Scrutiny ( by that I mean the Devon Health & Wellbeing Scrutiny Committee) is to investigate, question and where necessary, challenge the changing proposals that are being developed by the Health Services in Devon. So, not only do the medical profession want the best outcomes for the public (not least through the Hippocratic Oath) but every professional who has any input into the process wants the best outcomes for the public...and the public themselves want the best outcomes!

In assessing the changes necessary to provide the best xxxxxxxxxxxxxxxxxxxxxxxx across Devon, have considered everything I would be astounded xxxxxxxxxxxxxx hospitals and health centres, and concentrating on one central facility! I would also xx they didn't reject that as a possibility, pdq! ( these xxxx were blacked out words)

Let's go back to the 'common sense' thing. If they were to close NDDH, there would be absolute chaos, and it would be almost impossible for them to provide the 'best possible' health service across the County. It is ridiculous to imagine an A&E patient having to negotiate the road network from the Torridge rurality to either Exeter or Plymouth. Currently, patients arrive at NDDH A&E, and are assessed as to whether the best treatment can be provided on site, or if that patient should be transferred to a 'specialist' unit somewhere in the UK... or even abroad! there is no sound reason to alter this process.

The same s true of Maternity (another one of the rumours!) It would be a poor service that required expectant mothers to travel, unnecessarily, across the County.

This process of 'service improvement/management' will undoubtedly result in changes. But we have already understood that there must be change, and we have a plethora of checks and balances that will ensure that those changes are only made for the improvement of the service.

The situation at the moment, is that a 'Sustainable Transformation Plan' has been devised for the whole County. This STP will detail how the service will 'transform' from the current model, to an improved model. This is undergoing a period of consultation with the public, and the health practitioners (those professional who actually look after our health) It will then be modified to take into consideration the results of the consultations....then it will be put out to public consultation again! we must also consider that no agreement has yet been reached in respect of what an improved service will look like, let alone how we will get there!

I'm sorry that I have ranted on, but the fears that stem from these malicious rumours is a huge concern. I am also confident that you would not have accepted the short answer...which is that there is a long way to go, and a lot of hurdles to cross, before anything happens, and that will only be with the approval of the GPs that we rely on for all our health needs! So don't panic Mr Mainwaring!

Thank you for your attention to this letter, and I hope that it may have helped to dispel unwarranted fears. I would also ask you to bear with me until the next PC meeting, when I will do my best to answer any further questions you may have.

---

## A reply given by the Redlines Editor

I fear I must address an ill-informed statement by a local Councillor as it accuses me (indirectly) of being a fear-monger and disseminating wild rumours. It is perhaps no surprise that the Councillor is a supporter of the establishment and therefore is probably trotting out the official line. It is quite clear there is little thought put into it and, as is often usual in such cases, there is not a scrap of support attached to it. It is all "I think", and unfortunately the truth is, he doesn't.

The entire piece is available on our website, but I shall pick out a few items for comment, scrutiny and examination by thinking people. Mr Boyd's words are in *blue italic*.

*There has been a very active "fear" campaign, run by a select few, that is being laid down with a view to some attempting to benefit/gain advantage*

This is an interesting comment as I would suggest that the diametrically opposite is nearer the truth. Always ask the question, who benefits financially from the action?. In this case it is unlikely to be the Red Line Warriors. They are fighting, not for financial gain, but for the sake of their health, and that of their families. However, if the changes are made then certain rich people are likely to become even richer. They have no worries about their health, they have plenty of money and can afford private health care for themselves and their loved ones. What matter if a few people die, as long as their bank balances swell? I am not suggesting the Councillor is such a person, as I have no knowledge of his personal circumstances, but I regret that he seems to have been deceived by those who have a vested interest in furthering their own gain.

He goes on to suggest that the campaign might be for political purposes to influence the elections in May. Hang on, while I recover from laughing. SOHS is deliberately not party political. It is a very diverse group, and people who would usually be political opponents have joined forces. Not only that, if the Councillor thinks his particular political party is under-represented, then he knows how to change that balance; SOHS holds a public meeting every fortnight.

*The first thing to accept is that the world really operates with some basis in common sense.*

Exactly, that is why all SOHS arguments are backed up by solid fact. However, I am sure that he would be amongst the first to observe that many of the things that happen in the world are not based on common sense. Certainly some recent events have defied the best predictions of both scholars and cranks. Undoubtedly the scholars used common sense, and possibly the cranks didn't. But they both failed to predict the unpredictable.

*It doesn't a lot to realise that things have to change. we have to find, develop and/or install a new system of provision, that is to say that we can no longer continue to provide health services in the 'ad-hoc' way that it has been operated up to now. things have grown too big! there are too many demands on a very weak infrastructure!*

We have no disagreement with this. This is accepted. Flash the lights, hang out the flags, we agree. But don't stop there. Ask the question of why we got in the mess, and what things we can do to stop it. Suppose you return home to find that the boiler has broken and there is no heating. You say, "We have to do something. We can't live with no heat". OK, no argument, so far. So is your next statement likely to be; "We'll move to another house at great expense, and abandon this one"? I doubt it. I think you are more likely to consult a heating engineer. He might suggest repairing the old boiler or he might suggest a new boiler. Now, how about he says, "I suggest this new boiler. It has not been tested. Once it is installed, you are stuck with it, you can't go back to the old boiler. Nobody knows if it will work, or if it is adequate to support all the radiators in your house, but I'd recommend it". You would say, "On your bike, I'll find a heating engineer who knows what he is talking about". He replies, "but it is common sense..."

*One of the main reasons for Scrutiny ( by that I mean the Devon Health & Wellbeing Scrutiny Committee) is to investigate, question and where necessary, challenge the changing proposals that are being developed by the Health Services in Devon. So, not only do the medical profession want the best outcomes for the public (not least through the Hippocratic Oath) but every professional who has any input into the process wants the best outcomes for the public...and the public themselves want the best outcomes!*

Typical politician puff-speak. All conjecture.

*It is ridiculous to imagine an A&E patient having to negotiate the road network from the Torrridge rurality to either Exeter or Plymouth.*

It is ridiculous. That is why we find it astonishing that the STP plan contains these proposals, and the journey times have been understated publicly by TPTB. Sorry Mr Councillor, these are not our claims, but they are made by the Success Regime.

*This is undergoing a period of consultation with the public, and the health practitioners (those professional who actually look after our health) It will then be modified to take into consideration the results of the consultations....then it will be put out to public consultation again!*

Thank you Mr Councillor. Please provide actual evidence that they will actually examine and debate the results of the consultations. If you submit the documents to me, I promise I will make them available to readers of Redlines. We have much evidence that public opinion is not taken into account. You will find in this edition of Redlines **solid** evidence of actual bed closures. This is fact. We have many testimonies of people who have experienced the home based care. They all say that it falls short with often inexperienced and unqualified personnel who are not appropriately trained to carry out the care necessary. Dozens of testimonies. Mr Councillor, please send me just half that number of letters from real people who have had first-hand positive experiences of the care at home system. Surely if it works, these would be available. We also have documentation of the failings of the experiment in the Torbay area. Sorry, but I think the public consultations are nothing more than a box-ticking exercise. They are not advertised very well. You would have thought a full-page ad in the local newspaper would be called for, at least. No, not even a little advert to my knowledge, only a press release at most. You would have thought there would be prominent notices in doctors' surgeries, clinics and so on. I live next door to a surgery, and even though I put on my bionic spectacles I was unable to locate the tiniest poster. The so called 'consultations' and engagement are a farce. One was even held the day before Christmas!.

[The same is true of Maternity \(another one of the rumours!\) It would be a poor service that required expectant mothers to travel, unnecessarily, across the County.](#)

We agree. So why was it suggested in the STP? Have you actually read the STP plan, Mr Councillor? I have spent hours studying it. I have prepared digests, and extracts, all of which are available on our website. If it is so ridiculous, as to not be countenanced, why did these expensively-hired-in professionals suggest it? We must also consider that no agreement has yet been reached in respect of what an improved service will look like, let alone how we will get there!

A very strange statement. There have been at least two versions of the Sustainability and Transformation Plan. Now correct me if I am wrong, but surely a plan such as this is demonstrating what the service will look like. And to my knowledge there is no other plan. Yes, it may be tinkered, modified slightly, but the plan has already been made.

[I'm sorry that I have ranted on.](#)

We agree. Perhaps next time you will check out the facts before accusing us of being ill-informed idiots otherwise you might appear to be an, er, ill-informed idiot.