



No.13 - 3 December 2016

WELCOME

We've managed to run to four pages again this week, even though our "staff" have reduced to just me. I had probably better apologise in advance for any typos that have cropped up, as proof-reading is not my best skill, and I usually leave that to my wife.

The SOHS team all seem to have been really busy and their activities seem just a blur to me from my editorial desk. They are clearly making an impact, though, and it is encouraging to learn of things that are going on. When they get time to catch their breath, we might get some reports.

Recording the progress of SOHS is important, and it is one of the reasons I think *Redlines* is an vital tool in our campaign.

Newletter subscriptions seem to have increased in pace slightly, so if you are a new reader, welcome. We hope you find the information helpful, and don't forget to visit our website and our Facebook page, where there is even more for you to see. There is so much going on, it won't all fit in the newsletter!

Material for future newsletters editor@sohs.co.uk by Thursday SOHS-Save Our Hospital Services (A non- party group whose aim is to campaign to protect our health services in North Devon)

SUCCESS SOHS FAILURE

Standing between success and failure the SOHS Red Line. It doesn't look much does it? Maybe when the Success Regime started implementing their plans for changing the shape of the NHS they thought they were going to have an easy job. Maybe that was why they were optimistically named the Success Regime, a label which now seems foolish, presumptive, even ridiculous. Of course those chosen to be axemen were no doubt hand-picked and offered promises of great rewards. Being one of the chosen ones is only an honour if the one doing the choosing is honourable. The rag tag warriors of SOHS might not seem a formidable foe, but although we are a small group, with often-divergent political opinion, we have made a significant impact, make no mistake.

As we approach the end of 2016, our numbers of supporters and followers continue to grow. We have thousands on Facebook, hundreds who take the newsletter and many many

visitors to our website. Alongside all that, we have an undefined crowd who have joined us on marches through Barnstaple, Ilfracombe and Exeter. Dozens, hundreds, have attended public meetings arranged around our region. The secret plans of the STP (Sustainability and Transformation Plan, to give it the full, snappy title) have been exposed in the local and national press. And while the writers of the STP report have tried to keep things wrapped in vague and deceptive language, we have mercilessly shone the full glare of the spotlight on the attempted deception.

We are not letting up on the pressure. We do not intend to. We are not hired-in mercenaries like some of our opponents, we are ordinary people who want to fight to protect our family, our children, our own health.

We must not forget that behind this fight there are real people, people who will be hurt

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Published by North Devon Save Our Hospital Services
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Graphic Design: Paradox www.paradoxuk.com

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and damaged if these changes are carried out. Those that want to implement these heartless plans have yet to explain how an elderly and infirm person is to make their way to a hospital appointment 60 miles away, and be there at 7am in the morning. For many, the luxury of a taxi or an overnight stay in even the meanest hotel is way beyond their budget. There are no hospital car schemes now. They were abolished in this brave new world. These are real people, with very harsh difficulties, often

fighting poor health and wrestling with a low budget, and the STP is an underhand blow, the equivalent of a professional boxer taking down a 5-year-old. The people who proposed these plans should hang their heads in shame at the degree of human suffering they are seeking to cause.

I could give other examples, but I won't: a single example is enough to make my case. The reason we must fight, we must continue to campaign to protect the weak, the sick, the vulnerable can be summed up succinctly: IT IS THE RIGHT THING TO DO.

sort of hijacked meeting is invaluable.

Lack of agreement of what Ms Nicholas had been invited to do meant there was a mutiny from the start. When she tried to show the East Devon consultation video on community bed closures many in the audience quickly made clear they knew all community bed closures because they had already suffered them. It was all free rolling, off-piste from there on.

Some SOHS members read out distressing case studies, but we also had testimony from the front line in the audience detailing close shaves and dangerously long journeys to distant hospitals, passing those closed or diminished. No one missed the irony of Ms Nicholas arriving 17 minutes late at 7pm at night from Exeter, even though she had no tourists or morning/evening rush to delay her. Other testimony included a guy who spends much of "every weekend dealing with the effects of unsafe discharges," the parish councillor who drove one of the JCBs that cleared the land to build our hospital that took so, so long to secure....

One could sit back and enjoy the entertainment, explore a few of their new — sorry, very old — lines of argument and develop a few new lines of attack to counteract them. At that level, expressed so forcefully to someone so senior (one resident described her as the organ-grinder and demanded to speak to the conductor, so she's above monkey rank at least in his estimation), one has to hope the message is being conveyed at some sort of conference/crisis meeting in Newcourt House this morning.

Expect a reaction, the like of which we are already witnessing up here. They have not started yet. But then neither have we. And last night should serve as a perfect warm up for the public meeting in the same hall on January 13 when the Branton public will really hear the real facts — from us.

A Meeting Someone Won't Forget

Phillip Reports on a visit to a CCG event in Branton

Together with several other SOHS people, I went to quite an extraordinary event in Branton last night.

The Branton meeting was billed "Hear the Facts": from, we knew not whom or what. The poster advertising it should be a collectors' item. The speaker turned out to be Laura Nicholas, effectively the No. 3. in this regime, behind only Ruth Carnall and Angela Pedder. Presumably

the poster meant that the audience was to hear the facts from the CCG/Success Regime, but in this case, it was Laura Nicholas who heard the facts as North Devonians see them and that the CCG/Success Regime/STP regime refuse to acknowledge. As access for the public at many meetings is tightly controlled to prevent sustained questioning or following a real integrated line of argument, this

Diary dates

Visit our new diary page on the website. More dates and pretty pictures!

Thursday 8 December 14.00 - 17.00
Devon County Council, Full Council meeting. County Hall, Topsham Rd, Exeter EX2 4QU, UK

Councillors Greenslade and Biederman's motions to be voted on. **LARGE NUMBERS NEEDED!**

Thursday 8 December 14.00-16.00,
Bideford Consultation Meeting, Caddesdown Business Support Centre.

Friday 9 December 19.30, Our Future Care, SOHS Public Meeting, Sidmouth Parish Church.

Could you be our new diary keeper? We are expecting a lot more things to happen in 2017, and need someone to maintain the diary. You don't need any special skills, just average computer ability. Contact webmaster@sohs.org.uk

Wednesday 14 December 19.00 SOHS full meeting at The Guildhall, Butchers Row, Barnstaple, EX31 1BW

Saturday 28 January 2000 - 2200 Ricky Knight and Friends, benefit event for SOHS. The Plough Arts Centre, Torrington EX38 8HQ £7 from Box Office: 01805 624624 www.theploughartscentre.org

Don't forget to send us your dates to include in the diary. If people don't know, they won't attend

Notes from SOHS wider Devon: East Devon actions

- Expansion of SOHS: numerous organisations and individuals across Devon (from Plymouth to Lyme) have been so impressed by SOHS activity in North Devon that we agreed on 2 November to adopt your logo, your name and your website to expand the campaign to all parts of the County. We know this is a challenge for you but also a great tribute to your effectiveness.
- Many thanks to all in SOHS North Devon who have been mentoring us, and working for us, for example by preparing and providing the poster for the all-Devon See Red Day on Saturday December 3rd. Red Lines will assemble at 11.40 at six points to parade from six directions into the centre of Exeter to rally from 12 till 2 at Bedford Square. Princesshay in the centre of the city.
- The East Devon Independent Alliance and the Devon Federation of Women's Institutes have endorsed and promoted this event along with the usual suspects,

KONP, Momentum, churches, etc.

- On 22 November we secured a U-turn by East Devon District Council Conservative Group, who seek to distance themselves from the political decisions that have caused the crisis by turning their ire on the Clinical Commissioning Group, whom they have denounced as "unethical, illogical, irresponsible" etc.
- Further meetings (e.g. Sidmouth Parish Church 7.30 on 9 December) are planned in towns and villages to challenge CCG proposed bed closures and to push the campaign further to:
 - increase social care funding,
 - remove wasteful market costs in the NHS, and
 - reverse the pernicious 2012 Health & Social Care Act.

(Professor Allyson Pollock spoke to Wonford Hospital senior legal and medical team last week, who were overwhelmed by her arguments, which are also available as a 20 minute TED talk.)

I think this must be the one on our website. It's in our news section. The easiest way to find it is to go to YouTube and type in Allyson Pollock, that should lead you to her page and the video (ed)

Asking Lots of Questions

We start with a list of questions Ian has compiled which can be used as guidance for asking questions at open events.

Questions for CCG / STP Roadshow.

1. What is the Clinical justification for the removal of Stroke facilities to Exeter?
2. What is the Clinical justification for the removal of Obstetric facilities to Exeter?
3. What is the Clinical justification for the removal of Neonatal facilities to Exeter?
4. What is the Clinical justification for the removal of Paediatrics facilities to Exeter?
5. What is the impact of the above losses to the full range A & E Services in Barnstaple?
6. Where is the proof that Care in the Home is the preferred option for treating patients?
7. What Clinical Care resources are available to treat patients in the home and to take blood samples etc to regularly monitor the patients progress and well being.
8. What will be the impact on the Ambulance Services when they are required to deliver patients to Exeter and Plymouth?
9. It is generally recognised that Family and Friends support has a positive effect on recovery. Given the rural nature of the area with much reduced public transport, how does relocating patients to Exeter and Plymouth benefit the patient?
10. Why are Patients, Parents and Carers obliged to take a day off work to have a 10/15 minute Consultation in Exeter or Plymouth prior to admission?
11. Why are Patients obliged to be admitted at 7.00am requiring the sick patient to rise from bed at 5.00 at the latest in order to attend?
12. Why are Patients released from Hospital Care at 10.00pm

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Christmas Cards



Yes, we have made SOHS Christmas Cards available as requested by a number of people. The cards, which are A6 in size are supplied with a cheerful bright red envelope (now where have we seen that colour before?). They are supplied in packs of 10 and you can choose either the cartoon, or the "no room at the hospital" design. Price £3 per pack. You can collect them at SOHS meetings or you can order them shortly from the website by clicking on the shop tab, and they will then be delivered by post. (Tab should be there in next couple of days, just finishing the page.)



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or later when public transport is non-existent?

13. The further reaches of Northern Devon (Hartland, Clovelly Lynton and Lynmouth) are 1 hour and 30 minutes travel time from R.D & E. assuming perfect travel conditions i.e Non Summer, no Road Works, No rush hour traffic in Exeter. Assuming the instant availability of an Ambulance, what will be increased risk to a stroke patient given the 'Golden Hour'.

14. Where are the Risk Assessments and Equality Assessments for the proposals to limit Acute Services in Devon to two Centres of Excellence in Exeter and Plymouth.

There's a lot of searching questions there, and we know that the CCG/SR cannot give an adequate answer to them.

Paul Freeman has also come up with a list of questions and these are longer, but may be useful to readers to adapt for their own uses.

1. The consultation document

identifies that a large proportion of patients in hospital do not need hospital medical treatment. It also says that the proposed alternative is medical care at home. Can the CCG confirm that all the patients not requiring hospital medical treatment are capable of living at home with only visits, and if not all what proportion of them will NOT be capable of living at home and what the CCG's proposed alternative is for these patients?



2. When patients are treated in hospital, they effectively get both medical and social care. Can the CCG confirm that their plans are

to provide like-for-like care in people's homes and that the social-care element will be provided, and explain how this will be provided and who will be responsible for its provision (NHS or local councils)?

3. Can the CCG confirm when they will have a fully costed business case for these changes to include costs other than staff such as travel costs, the additional costs of providing specialised equipment in people's homes which cannot be shared with other patients etc.?

4. Can the CCG please provide the detailed evidence from com-

parative clinical studies that show that care at home is as effective and safe as care in hospital?

5. Can the CCG please provide their detailed risk assessments that show that there are no additional risks from complications and emergencies to patients receiving care at home without the immediate nursing care and emergency facilities available in hospitals?

6. Can the CCG confirm that at least high-level outline plans for the implementation of community care will be made available as part of this consultation so that the public can confirm that the transition will be done safely?

The Ways of Deception

We have come across an interesting technique being deployed by the SR/CCG which enables them to fulfil their "consultations" more easily. The method is to organise the event at short notice, and then publicise it very poorly. This means that most people don't even know the "consultation" is taking place, and attendance is poor. The powers that be (TPTB) hope that this gives them an easier ride and that they don't have to deal with awkward people from SOHS who are armed not just with very difficult questions, but also with reams of facts and information.

Fortunately we are wise to the deceptive ways of the TPTB and as soon as information is discovered it is circulated.

Exeter See Red Day

At the time of preparing this newsletter the Exeter event had not happened, so we were unable to provide a report for this issue. Hopefully we will be able to give you more details next time and there will be content added on the website.

Bideford Public Meeting

We have heard that the Bideford meeting was a great success with members of the public being given information about the STP and the campaigning work of SOHS