

“TERMINAL” THOUGHTS AND CONCLUSIONS

- However much “*hype*” and “*spin*” is given to the BCUHB proposals – there is absolutely no way that the proposals contained within, can deliver a **better** and **safer** Health Service, as is continually suggested.
- The word *consultation* is clearly misleading –as GP’s and health professionals are continually articulating. They are not persuaded that that they have been *real* partners in this process, as they were not properly engaged in the process—as is being suggested and promoted within the document.
- Some of the proposals within the consultation - **will without doubt cause unnecessary suffering and deaths**, - thus anyone sanctioning the detrimental consultation proposals — should in the future be held to account — perhaps we could call their actions “*Health Crimes*”
- To conclude, if the BCUHB members genuinely cannot respond positively to the hues, cries and concerns of the public and the health professionals - then communities and the general public expect and indeed demand that the **Welsh Government** and its **Assembly Members** intervene and protect what is - literally— OUR LIVES !
- This is happening *on your watch*— do not be seen to and go down in history as someone who did nothing. History is littered with such people !
- We fully realise that these problems are not localised—though rural areas do have their own unique characteristics. Wales respectfully expects its politicians to do something about these proposals - which are literally, going to threaten our future existence ! Thank you.

A DOCUMENT PURPORTING TO BE DELIVERING AN IMPROVED SERVICE !!!

OCTOBER 2012

Health Care in North Wales is Changing — a critique of the BCUHB consultation proposal.



A ticking
Time-bomb ! -
That must be
DEFUSED !

How the proposals will –

- ▶ • Be detrimental to the health and indeed safety of the general public— particularly to those residing in rural areas.
- Severely impact on existing health provision and services.
- **Cause unnecessary suffering – and indeed deaths.**
- Be unacceptable to the communities it is meant to be in theory serving.

The Consultation

The purpose of a consultation document is to sell products or services to a targeted audience—in this case the general public— as contained within the geographical area serviced by the BCUHB —basically North Wales.

Consultations can be a great way of selling provided the arguments are convincing and compelling. The staff, GP's and the public in North Wales remain unconvinced by the proposals and rationale contained within the consultation. This has been reflected in some of the hostile demonstrations and meetings held across North Wales as part of the consultation process. That might be a bit of a problem for BCUHB—but that is the medicine that the public and GP's demand that they take on board—it is also the reason why WAG need to intervene to ensure that we do not come to any harm !

This will be an acid test to see if WAG really does care about our communities and our wellbeing—and that they are willing to do something about it !

Terminally ill patient in the Bala area with Hospice Nurse in attendance -OOH Doctor was summoned urgently, but Doctor was in Machynlleth -then went on to Tywyn and then arrived in Bala some 3 Hrs later — by which time the patient had unfortunately died - in some considerable distress. Totally, totally unacceptable !

Haven holiday camp — with some 5000+ people residing at its peak — was directed to send people to Allt Wen Hospital for Minor Injuries — not to Bryn Beryl that they have historically used for 50+years !!

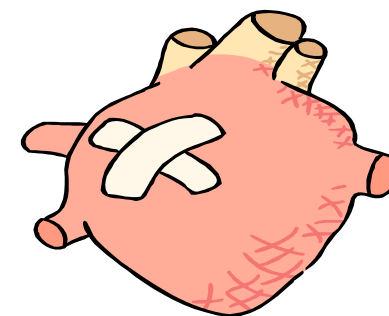
We have regular reports of NHS Direct also doing this -thus undermining the service provided at Bryn Beryl— to the detriment and safety of the public !OOH GP's also more or less refuse to go to Bryn Beryl— they demand that the mountain has to go to Mohammed !!

Gentleman in Llangwnadl subject of 999 call, no ambulance available locally —one dispatched from Dolgellau — some 1 1/2 hrs away. Arrived to take patient to Bangor which is still a good 1 1/4Hr + away.

Ambulance got lost in Nanhoron — eventually made its way to Bangor— where the gentleman's daughter— who had been summoned, had been waiting for some considerable time.

So much for the “Golden Hour” — this example had all the ingredients of a fatal tragedy !

One ambulance man only covering Pwllheli and the Llyn Peninsula 15/8/12— not an isolated instance !!



↑
We deserve something better than sticking plaster !

**SADLY AND SHOCKINGLY
THERE ARE PLENTY MORE
STORIES LIKE THESE
AVAILABLE !**

The Consultation Document



Time and in particular the “Golden Hour” is something that the seriously ill and emergency patient cannot afford to miss out on ! The new proposals in the consultation will not improve the “Golden Hour” scenario—in fact it will worsen the situation. Demands on the Ambulance service in particular will increase - as they are already presently struggling. Living in a rural area is now becoming literally dangerous ! The future is bleak and **increased suffering and unnecessary deaths will without doubt occur** - due to the poor response times of the beleaguered Ambulance service and the thinly spread OOH service !



Recent work by Professor Jon Nicholl Dean of School of Health and Related Research, University of Sheffield clearly shows that travelling time clearly has a proportional impact on the survivability of emergency patients. These proposals clearly work against the interests of patient ! So much for the patient safety argument that is being continually rolled out by BCUHB !!



Cause and effect, proposals, costings and practicalities clearly have not been properly discussed with the Ambulance Service, staff, GP's, Social Services etc before the consultation was published. The consultation document however does give a slightly contrary impression !! Naughty !



UNLOCKING RECRUITMENT – A TALE OF WOE

BCUHB have failed in their recruitment drives to attract more health professionals. Locum costs are going through the roof. The Out Of Hours service continues to struggle for Doctors. The crisis is unlikely to be unlocked by what is contained in the consultation. GP practices in Dwyfor cannot attract new doctors and have numerous obvious retirements pending - which will be the eventual straw that breaks the camel's back. To address this crisis -something needs to be done NOW - as some GP practices are oversubscribed and must be approaching operating “*unsafely*” and subsequently will have to consider closing their “*lists*”.

IMPRESSIONS OF A SELF CONFESSED CYNIC

Reflections on past performance locally

Past BCUHB management proposals for restructuring our local Community Hospital over the winter period, clearly demonstrated an embarrassing and total lack of knowledge of the building, what was physically there, and what they are actually managing. It also managed to de-motivate a despairing workforce who were shocked by their lack of specifics. When presented with some facts and practicalities –the proposals were eventually withdrawn and an accommodation was reached.

The current proposals—suggest that a joined up approach to services still has not been thought through and the continual reference to delivering a **better and safer service** is offensive to many at all levels and disciplines.

BCUHB like it or not, is presiding over the biggest meltdown of Health Services in North Wales. This is happening on their watch. The general public are certainly not fully aware of the potential problems that lie ahead. Problems that will end in tragedy !

Transparency and cascading of information to staff at the coal face appears not to have been considered a priority. If in doubt, ask the staff !! Also take the time to ask GP's !!

OUR COMMUNITIES— IN URGENT NEED OF HELP FROM WAG !



Cause and effects at Bryn Beryl (just one example)

Proposed closure of X-Ray Department

As with the proposed temporary closure of a ward last Xmas – in relation to the recently upgraded X ray Department, no discussions took place with the health professionals that were most affected – in this case being the Local GP's, the X-ray Department, the MI Unit and significantly visiting Clinicians. So much for the aspiration to deliver locally community based services as alluded to in "Setting the Direction" and "Together for Health" both of course WAG publications. Despite calls by the community for the X ray department to be better used, the facility has laboured under the poor management and the obscenity of hundreds of people literally passing its door to be carted off to remote locations for the same service that was available on their doorstep. Madness. A cursory glance at the figures also demonstrates how very efficient the Bryn Beryl Unit is when compared to others.

Removal of X ray facilities will mean that :

1. Rheumatology and Orthopedic clinics taken by visiting Consultants cannot thus take place at Bryn Beryl. Patients many of whom have already spent some considerable time in just getting to Bryn Beryl will then have to travel even further to Allt Wen or Ysbyty Gwynedd . Some areas of the Llyn would mean, that certainly with public transport – these journeys could not be made in one day. Also to be considered is the fact that many of these people already have mobility problems and are in constant pain. The sum total will be therefore that an outreach service delivered in a local community hospital will be lost completely –with all the poor outcomes that will result from such an action.

2. A GP wanting to admit a patient say with a suspected fall/and chest infection or Urinary Tract Infection be they in their home or on a Ward at Bryn Beryl – will not under the consultation proposals, have the flexibility or convenience of the X-ray facility at Bryn Beryl. This therefore will delay diagnostics, will mean tying up ambulance resources even further and will add to the distress and discomfort being experienced by the patient. Travelling times would also increase dramatically. It has never made sense that a digital machine capable of excellent results and diagnostics has been underutilized and certainly has not embraced the best use of resources that the BCUHB has been continually advocating. Carting ill people around in ambulances on long journeys and in all weathers cannot be interpreted as being in their best interests or their improved safety.
3. GP's who would far prefer to access community based solutions to their problems, will by default in the best interests of the patient – be forced to send people to hospital with all the problems and logistical debris that results from such a decision –adding even more to the woes of a beleaguered Ambulance Service and the Acute hospital.
4. The resultant bed-blocking and inevitable increased demand on the Acute Hospital X-Ray department will be chaotic, inefficient and undoubtedly will compromise patient safety.
5. Scheduled precautionary/prudent X-rays by GP's or indeed the MI Unit would not be carried out locally – with all the resultant inconvenience, time and resultant expense for all parties involved.

THE ABOVE COMMENTS ARE BY NO MEANS EXHAUSTIVE - AND ARE BRIEF COMMENTS IN RELATION TO JUST ONE SERVICE PRESENTLY AVAILABLE AT THE COMMUNITY HOSPITAL. IF THE BCUHB CONTINUE TO PULL BRICKS OUT OF THE WALL THAT COMPRISES OF THE FACILITIES AT BRYN BERYL – THEN THE WALL WILL EVENTUALLY COLLAPSE – WHICH IS PERHAPS THE LONG TERM GOAL OF THE BCUHB!!