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Dear members of the petitions committee,

Thank you for considering the issues highlighted by this petition.

UNISON is disappointed with the response the petition has received from the Minister for Health and Social Services, particularly when taking into consideration the strength of feeling the petition garnered. The petition received over 13,000 signatures and with this in mind UNISON had been hopeful the Minister would intervene to ensure these important services continue.

The petition calls on the Welsh Government to stop the proposed closure of the Sam Davies ward at Barry Hospital. The closure is still planned and so we do not feel the issues have been adequately addressed.

The letter from the Minister refers to the introduction of more community based services to support patients, however, this is a longer term vision and these services will not be in place in time to address the additional demand caused by the closure of the ward – an issue UNISON has raised at engagement sessions.

Social care services and funding continue to be stretched to breaking point. Efficient and effective community services need proper funding and planning, and this has not taken place.

In addition, we cannot assume the community services the patients on Sam Davies ward will need or even if community services will be appropriate. Some patients will still require a hospital stay, with the nearest hospitals being Llandough or the Heath. This will be taking patients out of their local community, where they may have relatives and established support networks in place, and potentially isolating them.

We wholly support the notion that care should be provided as close to home as possible and in the community where appropriate. In our view, the closure of this ward will have the opposite effect.

We have included some testimonial evidence from workers on the Sam Davies ward for the committee to consider.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Amber Courtney'.

Amber Courtney - UNISON

## Life as a worker on the Sam Davies Ward, Barry Hospital

UNISON has gathered the testimonies of NHS staff employed at the Sam Davies Ward.

There are around 30 staff on this ward and all are women: healthcare workers; a staff nurse; a ward co-ordinator; occupational therapist; physio; caterers; doctor and consultant.

The different reactions are separated by normal and italic font.

### 1. Why do you like your job?

We help people get back home and get their independence and confidence back

*Seeing the progress getting a patient walking again is an amazing feeling*

We live locally and the patients are local people; they might be our neighbours or your friend's gran or old school teachers – we get a lot of them. We are helping our community. If patients have to go to the Heath or Llandough, that local link is lost.

*We have one person who has been coming in regularly for years for respite care and we are a big part of the help for the patient's partner. The patient's bed-bound and with mobility problems, if the hospital ward closed, the patient wouldn't be able to go anywhere else and that respite care would be lost.*

As we live locally, we do whatever we can to get the hospital going, including coming into work in knee-deep snow.

### 2. What do you do in your role?

We wash and dress patients; help feed them breakfast if they need assistance.

*We take them to the toilet and wash and shower them and we might stay at their bedside to calm them if they are distressed.*

They are patients who might have had falls or strokes or suffer with dementia or they have acopia and can't cope at home. There might be social admissions where a person is admitted because they are homeless or their house is in a state of disrepair.

*We've had patients on our ward for a year and some can go home within a matter of weeks; three weeks.*

### 3. Why are you so angry?

This is not the first time there's been a threat to a ward at the hospital. It's the second or the third time. Each is the same – there's no consultation. There's no compassion from managers.

*I'm not angry about what it means for my job; more for what it means for the community of Barry. You see an elderly woman in the ward and her elderly husband can come to visit and easily find a parking space. Sometimes elderly husbands will come twice a day. At Christmas time patients' partners are invited for Christmas dinner. That local connection and ease of visiting goes if ward patients are sent to the Heath or Llandough disappears.*

Patients are very used to our ward and are comfortable with its size and that's really helpful if they have dementia, they are more quickly settled. There's nothing comparable elsewhere with Heath or Llandough.

*Nursing homes come in to assess and turn down a patient because their nursing needs are too high for that environment, so the question is where would he go if we closed? The mental health team has no spare beds so he remains or is transferred to the Heath.*

### 4. How do you feel the health board has behaved?

Terribly. They came en mass – around 8 of them and it felt intimidating.

*No-one was happy. No-one thought what they were proposing was a good idea.*

They are not using our experience or listening to the staff and they've brought in an outside consultant.

### 5. What would Barry Hospital be like without the Sam Davies ward?

I'm sad. Without the Sam Davies ward, Barry hospital would go. They want to keep one ward open but it would just be offices and move to more outpatients in Barry.

*Changes are being made which are not fair on the community.*

Barry is a big town and needs this ward.

*It would be hard for Barry families to visit patients in Llandough. It would be tiring and they would have to catch buses – we're talking about some people in their 80s.*

The staff you have here, you can rely on. It's not perfect but no-one moans if we're short-staffed, we just get on with it.

*We're like a family here. We're used to everyone.*

**6. What do you want to happen?**

We are effective in what we do. We need more money into social care. There is no common sense.

*We agree that we want patients to go home after 3 weeks but they haven't set up the infrastructure in the community for that to happen. The social worker must ask for the care package for the patient but there can wait 6-8 weeks for that to come through.*

We will go back to the old days where if you have money you will go to a nice care home and if not, you'll be shoved anywhere.