

Lewisham Issue 35 (20 December 2013) Hospital Worker

A Workers' Liberty healthworkers' bulletin

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Stop the Hospital Closure Clause - No To Clause 118!

On Monday 16 December the government came a step closer to passing clause 118 into law. Clause 118 is the government's response to their double defeat in the High Court by the Save Lewisham Hospital Campaign. Shadow Health Secretary Andy Burnham spoke in opposition:

"The people of [Lewisham] stood up to an arrogant Government, and won a victory for every community that was worried about the future of its hospital. One would have thought that, following humiliation in the courts, the Government would have backed off gracefully, but no: here comes the Secretary of State again today, like someone who, having been caught breaking in through the back door, has the brass neck to return and try to force his way in through the front. Well, we will not let him get away with it. We give him notice that clause 118 is wrong, that it is an affront to democracy, and that we will oppose it every step of the way.

Hospital reconfiguration should always be driven by a clinical case first and foremost, but clause 118 paves the way for a new round of financially driven closures. It rips up established rules of consultation and the clinical case for change. It allows the Secretary of State to reconfigure services across an entire region for financial reasons alone, which means that no hospital, however successful, is safe. The House needs to stand up to this audacious power grab by the Executive."

Despite the Conservative manifesto pledge to "stop

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the forced closure of A&E and maternity wards" the Coalition voted for clause 118. We have a few more opportunities to stop them before it is passed into law. We should also seek a Labour committment to repeal clause 118 if they get back into power. Check out the Save Lewisham Hospital Campaign website for more details.

Are We Nearly There Yet?

Compared to a CT scanner, or a pacemaker, an ambulance is a pretty low tech piece of kit. Yet, of all the challenges in co-ordinating the care of our patients, transport seems to be the most difficult factor.

For patients at home, the transport can be the reason they just can't face coming to clinic any more. Some patients report having a 10 hour outing just for a 20 minute appointment! In the other direction, transport is often the reason that patients end up being discharged in the middle of the night. Delay follows delay and then when transport finally arrives it's dark! We are making superhuman efforts just to move our patients a few miles across borough.

The G4S staff are doing their best, often skipping breaks to try to meet the demand. But it is G4S shareholders that are benefiting. One driver told LHW a double handed crew ambulance was worth £600 a trip! We pay for a limosine service but G4S pockets the money and sends a horse-and-cart. Maybe management could have written a better contract. But if the hospital brought the service back in house, they wouldn't be bound, by a poorly written contract. We need to renationalise the NHS - all of it!

Serco takeover?

According to the GMB union, Lewisham management are considering whether hand control of procurement services, a contract worth £200 million to Serco. Privatisation is never good for the NHS but Serco is a particularly corrupt organisation. In recent years their name has been associated with the abuse and sexual assault of asylum seekers. They've had to give up NHS contracts in Cornwall and Essex because of multiple failures. More recently the government has banned them from having any contracts with the probation service while they investigate a £50 million fraud where it is claimed nearly 3000 ex-offenders were tagged many of whom turned out to be... DEAD. In a more civilised world, run in working-class interests, these people would be in prison - not being handed control of the NHS.

Private Equity Vultures asked to take over the NHS Private Equity firms are being asked to take over NHS organisations that control billions of pounds of NHS money. As part of the government's privatisation drive, the government has set up 19 "Commissioning Support Units" which it hopes to selloff to the private equity sharks by 2016.

An anonymous source at the DoH told the Financial Times: "It's a great opportunity for the private sector... They're not big businesses but they are likely to be increasingly influential and control billions of [NHS] pounds."

Private Equity firms are massive multi-million pound organisations that specialise in buying up, and expanding and/or asset-stripping medium-sized businesses and then selling them on a few years later for bumper profits.

Some of these medium-sized businesses are already involved in providing healthcare on the NHS.A private equity firm like August Equity, which already owns healthcare companies, could take over a CSU and then direct funding to its own businesses. These businesses could expand very rapidly swallowing up large parts of the NHS service.

In 2011 we commented "GP commissioning is the next step when NHS money and control over administration is handed over to [private] firms." This is now beginning to happen. If we want our children and grandchildren to grow up with a free, universal healthcare system then we need to stop this government-organised corruption from destroying the NHS.

District Nurses Stretched to the Limit

When the TSA wanted to shut down our hospital, he said that more patients should be treated at home. But community services are stretched to the limit. There's a range of nursing care that can be delivered in the patients own home but it requires highly skilled, adaptive, and confident district nurses. District nurses can provide a detailed holistic assessment, monitoring the condition of the patient, referring on to other agencies as needed, and advising the patient when to be reviewed by their GP or transferred to hospital for more specialist input. In Lewisham there is an overnight district nursing service, who aim to respond to a call within an hour - a much faster service than SELDOC. The presence of this particular service gives patients and their families the confidence to stay at home, knowing there is access to 24 hour nursing help. But the district nursing service is on its knees. Nurses are working huge amounts of overtime, and often can't get to see all the patients referred. Overnight, there is not always a qualified nurse available. Without good access to nurses at home, some patients are coming in to our busy hospital when they don't need to. More are

waiting at home with dressings overdue, and insulin given at the wrong times of the day. Relatives and patients spend huge amounts of time on hold to the district nurse call centre, or waiting in for visits, that are either completely off schedule, or cancelled all together without notice.

For all the rhetoric about 'moving healthcare into the community' this essential service is being neglected. Management needs to focus on recruiting more district nurses. Enthusiastic and motivated nurses are getting burnt out for want of a recruitment strategy. The wards fill up with patients who 'can't cope at home' and who have to wait until someone dies before they can move to a nursing home. The path from home to hospital to nursing home is often a miserable and expensive one. We need to put pressure on management - stop ruining the service and pay for some adverts!

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