

Notes of a public meeting called to address the crisis facing Aldeburgh Hospital, held at the Jubilee Hall on 31st July 2005

This meeting was called by the town of Aldeburgh because the Primary Care Trust has decided to reduce the number of beds at Aldeburgh Hospital from 36 to 20 in an attempt to save money.

This meeting was called at short notice and took place on a Sunday evening. The Hall was full to capacity, with people standing. Others who were unable to get inside were crowded into the outside spaces where loudspeakers were relaying the meeting. There were probably about 400-450 people attending.

Panel:

- Celia Leggett, Deputy Mayor (Chair)
- Ian Tait, President, League of Friends
- Sheena Griffiths, Chairman, League of Friends
- Simon Ball, GP Aldeburgh
- Tim Lockington, Consultant and user of the hospital
- Nina Parkinson, Matron of Aldeburgh Hospital
- Tony Cooper, Patient and Public Involvement Forum

The Deputy Mayor thanked everybody for coming and introduced the panel.

Sheena Griffiths gave a brief history of the Hospital (attached to these notes) and explained the part the Friends have played, and continue to play, in maintaining standards by providing funding for building and equipment. She spoke of the panic measures taken recently by the East Suffolk Primary Care Trust, who hold the purse strings. The League of Friends (LOF) is working on alternative suggestions for the future. Sheena also told the meeting that Carole Taylor Brown of the Primary Care Trust (PCT) had met with the LOF on Wednesday of this week, and said that she was "committed to the future of Aldeburgh Hospital and its NHS beds," and is actively seeking a commissioner for another ten beds. Sheena finished by saying that the generosity of the community had created a facility at Aldeburgh Hospital which the health service cannot afford to lose.

Dr Ian Tait then said that the turnout showed the immense support for the hospital. He commented that people are concerned, and some are furious, at seeing our hospital sacrificed to some inexplicable happening. He has spent his life working with the hospital and spoke about how he used to feel that the NHS worked with the hospital to solve problems together. In 1992, after a huge public fund raising effort, the land and buildings were transferred to the NHS. Soon after this, the 'Trusts' arrived. In 2000 the Primary Care Trust (PCT) was formed and critical new financial responsibilities were given to them. They became the budget holders. In Ian's opinion, the PCT never had the competence to cope with that responsibility, and this has led to the desperate situation in which we now find ourselves. The Strategic Health Authority intervened and insisted that the financial problems be sorted out immediately. This response to the situation is not about patients but about money.

Dr Simon Ball spoke from the GP's point of view. He felt that the current problems had arisen from the introduction of the new GP contract in 1990, where the Trusts are competing for funds rather than working together. He stated that GPs need three simple things: beds available for terminal care which can be used immediately; beds to get people out of Ipswich and into rehabilitation close to their relatives (this is under threat with the new funding arrangements); beds available for treatments such as blood transfusions and intravenous antibiotic injections, which would otherwise have to be performed in Ipswich. He told us that the 20 beds currently available are not enough for this, but that the Trust is not listening.

He then spoke about the Minor Injuries Unit. This has regrettably been shut, partly due to shortage of trained staff. However, during surgery hours, injuries can be dealt with by the doctors there and after hours by NHS Direct or Suffolk Doctors on call.

Local care for patients has been reduced. It may be possible for beds to be commissioned by GPs under new arrangements currently under discussion.

Only in 1997 a Department of Health document stated that the new NHS was modern and dependable, and claimed that care close to home was important and particularly significant in rural areas. Our hospital is cost effective, close to our homes and close to our hearts. The PCT should look elsewhere to make savings.

Dr Tim Lockington spoke next, from the point of view of a consultant working out of Ipswich. He explained 'step up' and 'step down' as concepts. 'Step up' is looking to where someone will end up while complex problems are being dealt with. 'Step down' is where a patient will be sent when the acute stage is finished, but he is not ready to be sent home. With the cuts, Aldeburgh will only be used for 'step up'. Dr. Ball felt this would be fine when a problem was fully diagnosed and understood, but could be dangerous for both the patient and the hospital otherwise. With the cuts there will be no 'step down' available at Aldeburgh Hospital.

The government should be celebrating community hospitals as places which can do a range of things; the cuts fly in the face of this, which is tragic. Mr. Lockington also said that performance by results exploits a loophole in that it encourages the PCT to keep patients in one centre as then they do not have to pay for recuperation. This is clever accounting but not in the interests of patients, another tragedy.

Nina Parkinson, the matron of Aldeburgh Hospital, then gave the current position. Of the 36 beds now open, 11 are funded by Social Care, and this funding will cease at the end of September. At this stage there will be 20 step up beds.

She understands all the concerns expressed so far but feels we should try to make some positive suggestions to the PCT. We are in a better position than many other community hospitals because we have huge support, excellent facilities and a hard working staff.

The PCT is seeking alternative commissioners for 10 beds. We have an opportunity to look at different services that we could consider providing. One possibility is a kidney dialysis unit. Another could be a non-profit making company. Nina then asked for other suggestions to be sent to her. She reminded us that the 3 month consultancy period for the hospital begins tomorrow (1st August).

The Deputy Mayor then stated that no-one from the PCT had felt able to attend. She then invited questions from the floor.

Marianne Fellowes from Aldeburgh Town Council said that 'step down' had helped her mother and herself, and asked about care and choice in the equation, if we are to lose this facility here. Tim Lockington replied that he thought the government did not know about the payment 'loophole' and we should all write to point this out. Celia mentioned the 'care in the home', initiative and Simon Ball said that this needed a lot of people to carry it out successfully. Many of the bed blockers in Aldeburgh Hospital were there because of a current lack of care in the community, but the PCT does not see this as their problem. (Audience reaction here showed they felt this to be disgraceful.)

Robin Hitchcock of Aldeburgh asked how much of the £30 million deficit was in fact due to a reducing budget. Tim Lockington said a paper had stated that the cake should be sliced to reduce the care to the elderly and increase the money available to socially deprived areas. This was one of Suffolk's problems. It did not let our PCT off the hook, but we did not have a level playing field, receiving less funding than cities.

Robin Hitchcock then asked under what terms the hospital land had been given to the NHS. *Marian Wilton*, a lawyer, told us that there was a restrictive covenant in force so that the land could only be used for 'a hospital or similar health facility'.

Frank Loeffler from Aldeburgh asked how much money would be saved by closing 16 beds. Matron took the question, but said that so far she has been unable to find out from the PCT financial division the cost of a bed at Aldeburgh Hospital.

Colin Hart, a county councillor from Framlingham, asked whether any of the ideas would address the 'step down' issue. Matron answered that this had been discussed with *Carol Taylor Brown* of the PCT on Wednesday and was a key issue, but that the new payments by results agreement was hard to unpick, meaning that funding would not be available for patients to be transferred to Aldeburgh from Ipswich.

Roger Warren, a district councillor from Aldeburgh, commented that national funding makes no allowance for the age of the population. Suffolk Central only gets 90% of its possible total whereas Liverpool gets 110%.

Michael Ninnmey, Felixstowe Town and District councillor said his local hospital had gone from 58 beds to 0 in as many days. He praised the speakers for their courage in coming forward. He also felt demographics to be an underlying factor in the problem. He was worried that care in the home will not be adequate for old people who go home early as there is not step down care. Tim Lockington answered that the best way to improve health was to inject money into the infrastructure. However the tragedy is that we must close the debt gap in three months.

Peter Mellor, also from Felixstowe Council then said that we should look to a county-wide campaign. The next meeting of the County Council is on 5th September and we should contact our County Council member to speak on our behalf. He wondered if a national campaign should be considered, and wondered about the potential of the internet in setting this up.

The Deputy Mayor then asked the Meeting what we should do to protect our hospital and move forward.

Robert Preen who attends the Willows day centre in Saxmundham spoke about money wasted on PatientLine TV and phone services which could perhaps be better spent elsewhere.

Trevor Passett from Leiston said all hospitals should stand together with health charities and all other concerned parties who care about patients, not money.

John McGough, an Aldeburgh GP, said that it is essential that we send our views to the government and the Ministry of Health as well as the PCT. We have to discuss the health service rationally, avoiding their newspeak of 'justification not consultation'.

The Deputy Mayor explained about individual letters being more valuable than petitions or repeated letters. She suggested writing to Patricia Hewitt and John Gummer with individual experiences of Aldeburgh Hospital.

Di Hinvis asked whether we have a right to see the PCT accounts. Matron answered that we do, under the freedom of information bill, and to write to Carole Taylor Brown requesting them.

Gill Forrestier-Walker from Snape suggested a march.

Peter Fife from Aldeburgh reinforced the suggestion of personal letters with a copy each time to John Gummer and another copy to be kept here.

Roger Warren would like a reassurance from Social Care on whether they are able to provide the support promised when patients are discharged early.

Dr John Havard, a GP from Saxmundham, offered advice from his 3 years involvement with the PCT. He said the PCT hides behind a shifting balance of power, and that they are in a difficult position as there really is not enough money. It is difficult to get letters to the addressee.

Jenny Brabazon, the chairman of the Patient and Public Initiative, would like to have someone from Aldeburgh on the committee. They are an independent body with legal powers. As the health service moves away from star rating hospitals, the Health Care Commission will consult the PPI for views on the PCT. The PCT AGM is on 28th September and this year's accounts will be presented then. This will take place at Kesgrave Community Centre at 10.15. People can attend. Anyone interested in contacting Jenny may do so at Suffolk ACRE, Suffolk House, 2 Wharfedale Rd., IP1 4JP. Jenny's phone number is 07985 082972.

Nigel Hartley, vicar of Aldeburgh, offered the assistance of himself and the church in any way they could be useful. He could receive the 3rd copy of the letter for example. He stressed the importance of maintaining a high profile in the media.

Chris Gonin of Leiston commented that the NHS would be more frightened of a group than an individual. Corporateness is important.

Roger Warren said that the final responsibility for the budget lies with Patricia Hewitt, and not to be mealy mouthed in our letters.

Paul Walkden of Aldeburgh asked for the Aldeburgh Gazette to give addresses and ideas for letters.

Keith Coventry of Aldeburgh suggested we all contact people of influence who live locally, possibly sending them the minutes of this meeting.

Barry Slater, a district councillor for Yoxford, said his area was as concerned for the future of our hospital as we are. He had attended a meeting where two senior representatives of the PCT had been subjected to 'robust questioning' about the reduction of beds to 20 (close to the non-viable 19.5). They gave reassurance that the remaining beds would be taken over by Social Care. Mr Slater is not convinced that Social Care has either the money or the resolve to adopt these beds. He says we must act now to defend the number of beds or in 2 or 3 years we may be fighting for the hospital itself. We should have an action committee and a demonstration at the AGM of the PCT in Felixstowe.

Kev Hopayian, a GP in Leiston, said we need a plan for how to develop the hospital.

Tim Lockington then made a special plea for outreach clinics to be considered in future plans for the hospital, as they are a strong and useful service.

The Deputy Mayor then closed the meeting, asking anyone who would be prepared to help with an action committee to stay behind to give their names.

(Notes taken by Deborah Bone, secretary League of Friends. Apologies for any inaccuracies or misinterpretations.)