

Campaign to Save Mental Health Services in Norfolk & Suffolk



OPEN LETTER FROM NSFT NURSES IN NORWICH CARING FOR THOSE FROM GREAT YARMOUTH & WAVENEY CCG RIGHT NOW

The consultation on the proposal put forward by the Great Yarmouth & Waveney Clinical Commissioning Group and Norfolk & Suffolk NHS Foundation Trust (NSFT) is **misleading in the extreme**.

The Oxford English Dictionary defines a 'proposal' as being 'a plan or suggestion, especially a formal or written one, put forward for consideration by others.' The problem with this consultation is that the 'proposal' is not a plan or suggestion at all! A plan or suggestion describes an action is going to be taken in the future. **You cannot plan for an event that has already happened...** unless you are Norfolk and Suffolk NHS Foundation Trust it seems.



The CCG and NSFT claim to seek public opinion on whether to close further beds in Great Yarmouth and Waveney. Page 12 of the consultation document highlights that there are currently no patients in either the Larkspur (Dementia Assessment) or Laurel (Complexity in Later Life) wards at Carlton Court. That is because **these wards have already closed. Staff have been made redundant or placed elsewhere. Why are local people only now being consulted on whether or not they want this to happen when it happened last year?** The photographs in this letter show the **empty, unstaffed Larkspur and Laurel wards at Carlton Court**.

Perhaps NSFT wanted to prove that the Dementia Intensive Support Team (DIST) is a success and has dramatically reduced beds as intended (and indeed as stated in the proposal). Let's see...

The proposal claims that patients needing admission for dementia assessment will be admitted to Blickling ward in Norwich and functional patients (with bipolar, depression or psychosis) will be admitted onto the adult (18 years of age and up) wards at Carlton Court and Northgate Hospital (which are due to be cut by eight beds themselves). Three assessment beds will be available on Sandringham Ward (in Norwich) for more complex patients with age-related needs.



Yet, at the time of writing there are eight patients from Great Yarmouth and Waveney on Sandringham Ward alone. That is nearly three times the number of patients NSFT claims will have beds available and only two less than the ten beds Sandringham Ward will have in total to cover an area from King's Lynn to Lowestoft! As it stands both Sandringham (functional) and Blickling (Dementia Assessment) wards have been **unable to reduce as planned from 22 to 10 and 22 to 15 beds respectively due to the constant pressure to place patients into a bed in Norfolk**.

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Sandringham and Blickling wards are dangerously understaffed with injuries and sickness worryingly high and a near-permanent reliance on temporary staff. So what are the chances, to quote, 'beds will be available' for patients from Great Yarmouth and Waveney?!

The evidence does not show that the so called Dementia Intensive Support Team (who also look after patients with no diagnosis of dementia at all!) is reducing admissions by anywhere near enough to justify further bed closures, a point that almost seems irrelevant now as the wards discussed in the proposal have already closed!

The proposal demonstrates either a misguided confidence in an unproven system (ignoring the current evidence that it is not working) or it is designed to deliberately confuse and mislead those whose opinion it seeks.

Before you respond to the proposal we implore you to ask crucial questions:



- Why has the plan in the proposal already been implemented and why is this not clearly stated?
- If the new Dementia Support Team is working so well to avoid admissions show us the evidence. Why are there still so many coastal patients admitted on Sandringham and Blickling wards in Norwich?
- How can the CCG and NSFT claim with such confidence that beds WILL be available when they are NOT currently and the plan is to reduce Norwich beds still further? Won't these beds just be used by any patient that needs them?
- Why should people have to travel to Norwich for treatment or to visit a friend or relative? Will visits be 'rationed' by the CCG?
- Would you really want to be on a ward with teenagers and young adults when in your seventies and eighties?
- Are the vulnerable being made to pay for NSFT's arrogance, incompetence and failure to fight for decent funding for mental health?

This proposal is misleading in the extreme. Read between the lines. Ask for the facts.

We are holding a Campaign meeting immediately after this sham public consultation to plan a decent future for mental health services and save beds and community services. Join us at 8.15 p.m. in Unity Room, United Reformed Church, Lowestoft – on this site.

On behalf of the Campaign to Save Mental Health Services in Norfolk & Suffolk on 13th February 2014.

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