

Statement to the Health and Wellbeing Scrutiny Committee - 19.9.16

1. The appointment of the Success Regime and the plans it is producing are driven, among other reasons, by a funding shortfall. A shortfall that is entirely a political decision in the fifth largest economy in the world.

Britain is spending less as a percentage of GP than other countries in Europe and that percentage is now falling year on year. Devon's services, particularly those in North Devon, are underfunded compared to other parts of Britain.

2. Decisions to change services must be made for clinical reasons and to improve care not for financial ones that lead to a worsening of care.

3. The proposals in the September Newsletter entitled "Your Future Care" look unexceptional on the surface. None of these ideas are particularly new but the two problems not addressed are staffing, including proper manpower planning, and funding.

4. Keeping people fitter in the first place is a sensible idea but the budget for public health has been cut by £200 million nationally and Devon County Council has borne its share of this cut. If this was a serious plan the budget should be increased rather than cut.

Part of the plan is to ask people to use their local pharmacist for minor ailments instead of going to their GP. Following concerns expressed by several residents of GT, our Town Clerk was able to speak to the Chief Executive of Lloyds a couple of weeks ago and learned that there was a shortage of 300 pharmacists in the south west. The pharmacist in our local chemist has been working 12 hour days six days a week over the summer which is dangerous and unsustainable. How can she provide more consultation time? Proper manpower planning including ensuring we, as a nation, are training an adequate number of pharmacists needs to be reinstated.

5. The care co ordinator role is not new. I was training staff in the care programme approach twenty years ago but comprehensive assessment and identification of patients at risk needs adequate numbers of and properly trained Health and Social Services staff to achieve it. And where is the pump priming to make this possible?

6. Care closer to home sounds wonderful but how much is this really just a shift of cost from health which is free at the point of use to local authority provision which is means tested. Since there is a statement that the continuing care budget is bigger in Devon compared to other parts of the country, this must be the intention.

I understand that the additional 2% that could be raised in Council Tax for 2016 -7 for adult social care raises £6.6m in this financial year. This does not even cover the cost of £7.2 m for the rise in the minimum wage. The financial settlement for DCC

for the same period is down by £28 m. which provides Inoroom to maintain let alone increase its funding of social care.

Early discharge for people who live alone, or have frail elderly partners is not humane unless you are prepared to fund many hours a day and night of care. It is terrifying and cruel to be left alone, afraid you will not make it to the toilet or will fall on the way, unable to call for help if you relapse.

8. The travel times the Success Regime are working with are far from accurate. They make no allowance for people travelling from north of the North Devon District Hospital - an additional half to three quarters of an hour even by ambulance. A retired paediatrician wrote to the NDJ ten days ago begging that we do not return to the bad old days of the 1960s and 70s when people died on their way to hospital because of the long journeys. There seems to be no consideration for people who have to use public transport. Public transport is almost entirely by bus, using often infrequent services and more than one bus to reach the hospital, sometimes three. Many very elderly people can no longer drive and their families may live too far away to help. We should not be imposing journeys of several hours each way on frail or sick people.

Time prevents me making further points but I hope the committee can give careful consideration to what I have said in the context of the Success Regime's proposals.

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