

Holy Trinity Community Centre Boundary Road Newark
7.30 pm 24 July 2013
Chairman's Address

Ladies and Gentlemen welcome to this evenings AGM.

May I extend a special welcome to all Parish, Town, District and County Council Councillors present here this evening.

I would also like to welcome the Chief Executive of Sherwood Forest Hospital Foundation Trust Mr Paul O'Connor and the Chairman Mr Sean Lyons.

As you will be aware Foundation Trusts were formed as part of the government's programme to create a "patient-led" NHS. The stated purpose of such a Trust is to devolve decision making from a centralised NHS to local communities, like you here this evening, in an effort to be more responsive to your needs and wishes. Once this meeting has finished I am sure that you will be eager to ask questions of these two gentlemen who are ultimately responsible for the operation of our Trust and who have kindly agreed to speak.

I would like to offer, special thanks to Holy Trinity Community Centre, for their generous offer and free use of this fine building for tonight's event. Many thanks to Fr. Michael O'Donoghue, Julie Nicholson, Robert Beal, Donna and to all the staff in attendance this evening, for making this possible.

We often hear reports of the excellent care provide at Newark Hospital at the same time, appalling accounts from some who have been transferred and treated elsewhere.

And so, we publicly here tonight pay tribute to all the staff and the many volunteers at Newark Hospital.

Our Campaign has consistently argued of the need for investment at Newark Hospital, so that we might have a similar level of service as can be found in towns of similar size such as Worksop or Grantham. And Sean Lyons the Chairman of SFHFT who is here tonight lives in Worksop and so he can tell us what services are like in Worksop and how they compare to Newark.

We are asking for equality and nothing more.

So what have we achieved over the past year?

At last year's AGM we launched a poster and leaflet campaign, encouraging people to use Newark Hospital. We held market stalls distributed leaflets and badges, asking people to Say Yes to NH, to request appointments there. That campaign has been an enormous success. The Newark Advertiser reported that in 2012 there had been an increase of nearly 2,000 additional outpatient follow-ups and overall attendances were up by 3%.

In our vision for Newark Hospital we also asked for a new look at Friary Ward. The Fernwood Ward is a 12 bedded facility offering rehabilitation for elderly patients has since been open. We welcome this as a step forward.

We have argued that long journeys disadvantage patients who require emergency care. The Mail on Sunday newspaper visited Newark and published an article on ambulance transfer times and the detrimental impact that was having on Newark patients and their families.

In September Monitor the Independent Regulator of NHS Trusts published a report stating Newark Hospital was 55% underutilised and criticised the Trust for not having any strategy for Newark Hospital. Two weeks after Monitor announced it was preparing to investigate the Trust, shortly after the Trust's Chairman Tracy Doucet resigned.

In December BBC Radio Nottingham & East Midlands Today visited here, at Holy Trinity, and recorded the Andy Whittaker show. At the end of that programme a vote was taken from the audience and the result - no person present that evening believed the NHS in Newark was fit for the future.

In late December BBC Nottingham announced that the Trust was facing a £1bn overspend because of the PFI and had lost £4m since the downgrading of Newark Hospital's A&E.

In March 2012 we asked Simon Burns the Health Minister to look at mortalities rates in Newark he told us that the figures were not available. Then towards the end of last year Dr Foster's the independent organisation that reports on hospital statistics, stated both of the trusts where Newark patients are taken – Sherwood Forest Foundation Trust and United Lincolnshire Hospitals, had been assessed as having low efficiency and high mortality rates.

Using a FOI request we asked for specific data on the '30 day death rates' that data shows mortality rates have increased for patients from the Newark NG23/NG24 areas since 2008, whilst it has fallen, for other patients from other areas visiting the same hospitals. We believe these facts speak for themselves. In May the Mail on Sunday newspaper published a front page story on Newark and mortality rates claiming death rates for emergency patients from Newark had shot up 37% since the closure of that A & E.

There was a House of Commons debate and later Daniel Poulter the junior Health Minister visited Newark Hospital and said, **"we have to provide more care away from the big hospitals. It is much better for people to be looked after in a hospital like Newark than be rushed off to a big hospital elsewhere."** These words were welcome because this is exactly what we have been saying for the **last three years**.

Last month people spoke to the Keogh Review Team about the good care they received at Newark and lack of care, compassion and dignity many had experienced after long journeys at Lincoln, Grantham, and Kings Mill hospitals due -- mainly to the staff being stretched to their limits.

The overriding message from Keogh was Newark Hospital requires investment in staff so that it might operate 24/7 and provide a higher level of emergency care that would allow more patients to be treated locally.

Last week the results of the Keogh review were published. In brief the key issues identified for Newark were:

- Both consultants visited the hospital on the same days Tuesdays and Thursdays. (What does this mean?)
- The current single doctor covering the ward and MIU out of hours was considered too low. It was also noted that there may not be surgical cover at the hospital overnight.
- A single anaesthetist and surgeon for surgery may not provide adequate cover if these are complications.
- There was an absence of a clear strategy for Newark Hospital with no clearly articulated future use for the hospital and best use of these facilities.
- Major operations (joint replacements) are carried out at NH yet NH does not have adequate facilities should serious complications arise.

Of course the Trust could solve this problem by putting in the out of hours cover that we so desperately need. Unfortunately we have heard this week that more operations from Newark will be lost pending review. Those procedure must come back.

How might we move forward? There are two ways.

Firstly, it is the Newark and Sherwood CCG who are responsible for commissioning emergency & urgent care, ambulances, and out-of-hours services. There is a statutory obligation placed on them to exercise functions to secure ***continuous improvements in the quality of services provided.***

We need to see those ***continuous improvements in the quality and services provided, in the following ways:***

- Suitable level of emergency care and assessment
- Suitable out of hours cover
- The reopening of NH to admissions 24/7
- Appropriate protocols permitting the return of some emergency ambulances.
- Telemedicine and support from other hospitals
- Rotation of staff, so that staff retain skills
- Improved public and patient transport

We call on everyone here tonight to lobby the CCG. They are the people paid to commission these services and you the taxpayers pay their wages. You need to tell the CCG what you want.

Secondly, it is also the responsibility of Nottinghamshire County Council to take the lead for improving efforts to protect the public's health and wellbeing across the county.

We ask tonight our County Councilors, Stuart Wallace; Tony Roberts; Keith Walker; Sue Saddington, and; Maureen Dobson to work together to secure an improvement to the health care provision, that will then mean more people can be treated locally.

Finally - A Lady wrote to me giving permission to tell her story tonight. I will read it in her words:

My mother 84 had fallen and broken two ribs, Paramedics and 'out of hours' duty doctors assured us that she was well enough to be cared for at home. But later I became anxious as I felt that she was very poorly, she was short of breath. When our family GP visited he felt that my mother should be admitted to hospital. Our Doctor booked an ambulance but was not able to give us any idea as to how long we would have to wait. We did in fact wait 3 hours.

My husband and I accompanied my mother to the hospital. We arrived at A&E at approximately 10-15pm that night. A doctor did not see my mother until the following morning at about 5-00 am. We were then told by a doctor to call our family, as my mother was unlikely to live longer than a couple of hours."

This case is one of many we hear of where a patient often vulnerable or elderly are transferred away from our town to overcrowded distant A& Es. Many of these patients could have and should have been treated at Newark Hospital – for that to happen however there needs to be a real commitment from the health authorities to invest in Newark Hospital.

The strong passionate feelings expressed last month at Keogh listening event at the town hall clearly shows that the people of Newark want services to be returned to Newark Hospital.

With your continued support the fight for Newark Hospital continues we must not let our community down.

Thank you

Francis Towndrow

Chairman

Say Yes to Newark Hospital