

## **DRAFT**

### **BSPA ARTICLE FOR THE BUCKDEN ROUNDABOUT – MARCH 2009**

It was with enormous sadness that we learned of the sudden death of Jim Perkins on 1<sup>st</sup> February. Jim was already a well established member of the BSPA Committee when I joined 5 years ago and he brought to it his inimitable brand of warmth, wisdom and charm. He was a staunch supporter of our Doctors, our Surgery and our Committee; he never missed a meeting or failed to support fundraising events. He was an absolute joy to know and along with many others, I'm having great difficulty imagining life in Buckden without him – who is going to kiss my hand and call me 'Hon' now? He was very special and our sincere sympathies go out to all his family.

The results of the Surgery Survey that was conducted in the third week in January are being collated and I will return to that topic in a future letter.

Once again rumours abound about the future of Hinchingsbrooke Hospital and as usual there is a reluctance by the **Primary** Care Trust [PCT] to communicate even with healthcare professionals, however, when the news does come it will not be good. Therefore I have decided to take a retrospective look at political decisions taken over the last 3 – 4 years and their effect on Huntingdon's patients and their hospital.

In early 2006, the Government published a document entitled "Ensuring a Patient Led NHS" in which it proposed the abolition of the Huntingdon PCT [then acknowledged to be 11<sup>th</sup> out of 264 in terms of efficiency and patient satisfaction] Despite overwhelming local opposition and a huge body of evidence from prestigious independent organisations suggesting enlargement of PCTs would lead to the degradation of local services, an inability to respond to local needs and most certainly not deliver the economy of scale that was claimed, the proposal was passed and it was swallowed up by Cambridgeshire PCT. In the Eastern Region 17 PCTs became just 3. With this enlargement, Addenbrookes Hospital came into the equation with its insatiable appetite for power and expansion – and its huge debts. Then Hinchingsbrooke Hospital became the target of unfair competition from Addenbrookes, and throughout 2007 services were stealthily and steadily eroded from Hinchingsbrooke to Addenbrookes. There were fears that Hinchingsbrooke's A & E would close which would have had a devastating and destabilising effect on the whole hospital. Staff morale was crushed as the future viability was cast into doubt. Local people rallied magnificently, high profile meetings and marches were held which demonstrated the strength of local opinion and support for their local hospital. Once again as with the PCT proposals another highly expensive 'consultation' process resulted offering 4 options of which only one [Option 2] seemed remotely acceptable. Option 2 acknowledged the need for savings through a reduction of GP referrals and a shift from Hospital based services to Community based services, as for example, our Dermatology Clinic here at Buckden Surgery. In return Hinchingsbrooke would continue to provide broadly the same range of services including A & E and Maternity. We were then cautiously optimistic – Hinchingsbrooke Hospital had been saved.

It would now appear that this Option 2 has 'failed' and now a 'Refreshed Option 2' is being studied which will almost certainly involve a further reduction in beds and services – possibly including Maternity.

With the enlargement of the PCT GPs, Consultants and healthcare professionals rightly feared our local needs and concerns would be subordinated to those of Addenbrookes and greater Cambridgeshire. GPs decided to join together to form **Huntscom** to ensure our Primary Care needs were more forcibly represented by speaking with one voice rather than as individuals in the hugely expanded Cambridgeshire PCT and I hope to talk more about their work in next month's letter. And who knows, there might even be more news about the Darzi, sorry, The Equitable Access Clinic in St Neots too!

Sue Paul