

## **Mid & South Essex Sustainability and Transformation Partnership (STP) proposals for reconfiguration of local NHS services**

You may have felt that the hospital plans have gone quiet just recently, but the current position, as we know it, is as follows:

It has always been BERA's view that the current STP proposals have not been thought out properly or in sufficient depth to make these plans sound, solid and safe for the residents of not only Southend-on-Sea but Rochford and Castle Point. Therefore, it is extremely pleasing that Southend Council, at the last full council meeting in July, rejected the current plan and unanimously supported the view that unless the proposals by the STP are amended and made safe, that they would refer the matter back to the Secretary of State for Health and Social Care, therefore rejecting the recent local public consultation on those plans as ineffective and inadequate.

The reasons we believe this should happen are:

1. Only a very small fraction (0.3%) of the population in the south Essex area responded, and we believe this is because residents felt that the plans were a done deal and nothing would change.
2. The plans were vague and lacked detail.
3. Patients will have to travel excessive distances for treatment in 'specialised hospitals'.
4. The transfer of patients between hospitals is chaotic and potentially dangerous. According to the latest government findings, the East of England Ambulance Service are the worst performing in England. To recruit, train and re-equip their fleet will take years and they will need a huge increase in capital spending. The STP has no budget or plan for non-urgent patients. For close relatives accompanying patients there is no plan to assist them, so they will be incurring expensive fares and facing long journeys by public transport.
5. Southend-on-Sea, as well as Rochford, Rayleigh and Castle Point has an increasing and aging population. The current hospital covers a huge area so it cannot be sensible to run down services at our local general hospital, increasing risk to our residents. On top of this it has one of the busiest lifeboat stations in the country and an expanding international airport.
6. The STP has made assumptions about primary care reconfiguration and self-care but the investment required is not guaranteed.
7. Following the STP's recent public presentations, there is no guarantee that the gold standard set by Dr Paul Guylar will be met for stroke services and patient care. Recruiting and retaining staff is the cause of many problems and this will not be resolved. Our latest information indicates a shortage of medically trained staff of around 2,500 which is acknowledged by the STP, and it currently lacks the capacity to staff any of the 3 hospitals (Southend, Basildon and Broomfield) as fully functioning general hospitals.

There is a scrutiny meeting taking place later today and we will let you know the outcome of that in a future newsletter.