THE SUSTAINABILITY AND TRANSFORMATION PLAN FOR LEICESTER, LEICESTERSHIRE AND RUTLAND

38 Degrees Loughborough - Submission to the Leicester City Council Scrutiny

Commission

38 Degrees Loughborough wish to make the following submission detailing members concerns regarding the STP for Leicester, Leicestershire and Rutland.

Our concerns include the following:

Lack of evidence to support the STP

- No evidence base that increasing community based services is going to reduce the need for acute hospital beds.
- No financial appendices have been released to the public or to the scrutiny committee to demonstrate that the plan is realistic and deliverable.
- No workforce information has been released to the public or to the scrutiny committee. However, STP footprint 15 envisages a workforce reduction. Where is the evidence base that staff numbers can be reduced whilst safely maintaining care standards within the community?

The lack of capacity for community services to deal with increased patient care

It's not consistent to be closing acute beds in order to move more care
into the community whilst at the same time reducing the number of
community hospitals and beds. There would have to be huge investment
in social care to safely care for more people in the community.
 Community based services are already at breaking point and we have
several members who have personally experienced this recently.

One member recounts his recent experience of returning home 5 days after a double heart bypass. He states, "Thanks to [my wife], I was able to cope with the first two weeks- the most difficult time. I was a prisoner in my body not being able to get out of the bed without help, not being able to pick up a glass

of water on the bedside cabinet. I was not able to turn and had to sleep on my back. I was not able to take my own medication. [My wife] had to help me in all these. If I was on my own, who will be there to help me 24 hrs? I may have had a carer in the morning and evening, but in my condition it would not have been sufficient."

Lack of capacity for friends and family in being able to provide the care necessary when patients are not admitted to hospital or discharged earlier

• The STP will undoubtedly put more pressure on friends and family to provide care at home. However, with an ageing population as well as large numbers of individuals living alone, it is unrealistic that families will have the capacity to take on this extra burden of care. Already we are experiencing the rise of elderly and young filial carers who may need care themselves. In addition, there are now very high participation rates among women in the workforce — women would previously have undertaken this caring role but no longer have the capacity to do so. It is also of particular concern given that Britain is a low pay economy where many families are 'just about managing', working full time to pay basic living costs.

Quality of care provided will deteriorate under the financial constraints imposed by the STP

- In order for the STP to make the savings required there is potential for a
 downskilling of the workforce. This will be particularly dangerous when
 caring for patients in a community setting as staff will lack the level of
 supervision that can be provided in a hospital setting. The staffing in a
 community setting will need to be more qualified and more experienced
 to deliver care autonomously.
- Social Services are reported to already be struggling to provide an adequate level of care. How will these services cope with increased pressure?

38 Degrees member, Peter Todd, describes the care received by a family friend suffering from Parkinsons. He states, "[My friend] is undoubtedly better at home but this is dependent on good support from social services

which has been far from satisfactory." He has concerns over the inconsistency in quality of care provided with some carers lacking even compassion. He cites the frequent changes and high turnover of care workers as leading to poor continuity of care. He also describes one serious incident where no carer attended leading to no food or medication being provided. Consequently, his friend became dehydrated and had to be admitted to A&E.

The STP leading to further privatisation of NHS services

There is potential for the STP to lead to further privatisation of NHS services due to the temptation to tender out contracts to the lowest bidder in order to save money. Leicestershire has already experienced what happens when unrealistic tenders collapse after a local social care provider failed to attract and retain enough staff. This resulted in some patients being left without care for days. We now face the prospect of more health care services being privatised with a consequent reduction in quality and reduction in staff wages.

In conclusion, we believe that the STP represents a political decision to deliberately underfund our NHS. Driven by such huge cost cutting the plans are undeliverable and unrealistic. Furthermore, the STP is based on unsubstantiated assumptions that will potentially lead to poor quality care and unnecessary suffering. The focus of any NHS 'transformation' plans should be people not commodities.

On behalf of 38 Degrees Loughborough