

Item 16

Public Involvement

Submission from Madeleine Dickens

STP - Current situation

No successor has been found to the former chair of the STP board. It is now likely a new chair will be imposed from on high to bring the STP into compliance.

Acute Care services

Footprint 33 is one of possibly 3 out of the 44 with no announcement of the fate of acute services. So far there has been a merger of BSUHT and Coastal West Sussex trusts with most members of the BSUHT board being replaced (for supposed 3 year period).

There are rumours about possible moves (eg the Eye hospital to move to Worthing), possible closures and mergers of services. The fear is that arrangements are being determined behind closed doors and that faits accomplis will be presented, on which there will be cursory if any public consultation.

GBEB and the Naylor report (re sale of NHS estate)

In extract from the minutes of the GBEB of 18th July below a direct link is made between estate sales and the implementation of the STP. So far only the Brighton General news has been made public. Perhaps the STP group could find out what other properties are under consideration:

“the Terms of Reference of the Property Group will be expanded to support the delivery of the Health and Social Care agenda with property (ie the sale of) as an enabler to Brighton and Hove’s Caring Together Strategy and the Sustainability and Transformation Plans. *Due to commercial sensitivities, all meetings of the Property Board and the Property Group are held in private.*” (Agenda Item 8)

Primary and Social Care

STP Plans have been incorporated into CCG operating plans round the region. These include the establishment of MCPs (multi speciality community providers). We have heard of possible Care UK involvement in these centres. This is not confirmed.

Madeleine Dickens (Sussex Defend the NHS)

Submission from John Kapp

1 The **HWB** should be in charge of the budget for social care (about £200mpa) and health (about £400mpa) **total £600 mpa**, but contrary to my public questions and many papers objecting (published on section 9 of www.reginaldkapp.org) they have not taken their statutory responsibility for this, and leave it entirely to the CCG board (all of whom are appointed officers, not elected councillors) Indeed, I took this complaint to Cllr Dee Simson in 2016, which is one reason why she set up the STP working party. I hope that the STP working party report will make the point strongly that only **elected councillors** can legally take statutory responsibility for the spending of public money, particularly the £400mpa CCG budget, breaking the law since 2012. That **nobody is in charge** accounts for the deterioration of NHS services, that no one wants to be a GP, and the increasing lack of public confidence, (akin to the negative mood around Grenfell tower)

This point was confirmed by Rob Persey at today's meeting, apologising for the lack of progress on the integration of health and social care: 'The CCG is responsible to NHS England' implying not the Council. Although funded by them, NHSE is no longer **in charge of the spending of the health budget**, and although represented on the HWB by Pennie Ford, she never attends, so Rob's statement is institutionally not true. The Health and Social Care Act 2012 'filled the democratic deficit in health' by devolving its budget to the Local Authorities, as social care has always been devolved. The CCG is supposed to be the executive arm of the HWB, but this has not happened to date, and should.

2 Why does nobody want to be a GP? This should be the best job in the world, as it attracts the brightest students, and the salary is 7 times the minimum wage. This should be the main focus of the HWB and the CCG governing board, but although I have attended every meeting of both committees for 5 years, I have never heard any constructive conversation about this. I believe that the reason is that the **NHS is toxic** with overprescribing of drugs (such as antidepressants) which do not even claim to heal or cure, but have side effects which make patients keep coming back in a revolving door, which is soul destroying, and makes GPs take early retirement. I have written this countless times, and nobody has ever responded, so it is not politically correct, taboo, and there is a conspiracy of silence in the press. Please will the STP working party consider this seriously, in their report.

My proposal to remedy this is stated in my papers, and is to apply for the city to become a 51st Vanguard, trialling a Multi-specialty Community Provider (MCP) model for a new mental health service (a mental A&E) by piloting a Community Care Centre (as called for and funded under the Better Care Fund, to treat Rachel (65, depressed and in sheltered accommodation) and ~Dave (40, alcoholic and homeless) See paper 9.116 of www.reginaldkapp.org) I hope that the working party will support this proposal in its report, which could give GPs an effective talking therapy, and give them back their job as teachers (doctor comes from 'doctare' to teach)