UK: Bournemouth Intermediate Care Services axes staff

Ajanta Silva 22 March 2017

As soon as the bogus, obligatory public consultation on dismantling healthcare services in Dorset, in the South of England, ended last month, Dorset Clinical Commissioning Group (DCCG) has begun taking the axe to jobs and services.

The DCCG has withdrawn funding for council-employed community rehabilitation assistants (CRAs) in Bournemouth Intermediate Care Services (BICS)—which is operated by the Dorset HealthCare University Foundation Trust (DHUFT).

This attack on a well-functioning service—which operates as a safety valve for overwhelmed hospital services in Bournemouth—belies the DCCG's claim that the main objective of overhauling vital services under the Sustainability and Transformation Plans (STPs) of the Conservative government is to "deliver care closer to home."

Thirteen out of 21 CRAs, employed by the Adult Social Care Services of Bournemouth Borough Council—who have years of experience and skills in assessment, rehabilitation and acute care—received redundancy letters last Thursday. This comes after the disbanding, in January, of the DHUFT-operated community palliative service. According to some clinicians, this crippling attack on BICS is a step towards destroying the entire BICS team, as is the case with palliative services.

Announcing the redundancies, Tim Branson, the service manager of Adult Social Care wrote to CRAs, "As a result of the withdrawal of funding from NHS Dorset Clinical Commissioning Group (DCCG), I am writing to advise that a decision has been made to reduce staffing in Bournemouth Intermediate Care service (BICS) and regretfully this may result in redundancies. It is therefore possible that your job will be affected by the proposed redundancies, although no decisions have been taken at this stage.

"It is proposed to reduce staffing amongst Community Rehabilitation Assistants."

The claim that no decisions have yet been taken is a barefaced lie aimed at pre-empting any opposition. Branson called a meeting Monday with CRAs affected as a part of the third step of the redundancy procedure.

CRAs who attended the meeting told NHS FightBack, set up by the Socialist Equality Party (UK), it was held only in order to justify the redundancies and to outline the required steps to fulfil them.

CRAs who received redundancy notices and other staff working in the department were shocked and devastated at the news. One clinician told NHS FightBack, "They are destroying our team. This is outrageous. This came out of the blue. I think they are going to do the same to us as they did to the palliative care team. This is happening when more and more people need support in the community." The worker pointed out that DHUFT has not replaced staff that left their posts recently, including a very senior nurse.

Another affected CRA said, "I am still in shock and I can't believe this. I have worked in the team for more than 12 years. All the people I have worked with for many years are like one big family. I have also met the most wonderful older people, who, despite their problems have had such a story to tell us about their lives. This is going to have a big impact on these people who deserve to be looked after, which as a team we do so well."

The CRA added, "The impact on all of our lives is going to be enormous, financially, emotionally and affects our security. I feel like we are being dumped. I am also really scared of not being able to find another job to feel financially secure with."

BICS provides services to patients to prevent avoidable hospital admissions and to facilitate supported discharges. The team aims to optimise functional independence while addressing any acute healthcare needs. The team consists of advanced nurse practitioners, physiotherapists, nurses, occupational therapists, pharmacy technicians, CRAs and administration staff. They liaise closely with other professionals in the area, including General Practitioners and hospital staff to achieve good patient care outcomes.

Since its foundation as the Community Assessment and Rehabilitation Team (CART) 16 years ago, it has evolved to carry out not only assessment and rehabilitation, but acute healthcare of patients in order to reduce the pressure on acute inpatient services in hospitals.

The attack on the Bournemouth workers and local services built up over decades is a part of an unprecedented assault on the National Health Service by the Conservative government. This is aiming at privatizing services and ending the NHS's mandate to deliver care free at the point of delivery, on the basis of clinical need and not the ability to pay.

Last year, the DCCG embarked on a Clinical Service Review (CSR) of Dorset health services as demanded under the government's Sustainability and Transformation Plans. The DCCG must cut its deficit of £158 million by 2021, to be achieved largely at the expense of patient care services and jobs. The deficit of the NHS hospitals trusts in England as a whole have reached more than £2.5 billion—meaning further decimation of services are on the horizon in the 44 areas in England that STP are being introduced.

As in other parts of the country, the DCCG aims to outsource the most lucrative areas of the services as the rundown of services start to bite.

Among its plans is the downsizing of two major accident and emergency departments in Poole and Dorchester, the closure of children's units, maternity units and more than six community hospitals delivering inpatient care.

Thirteen community hospitals—mainly operating as rehabilitation units significantly lessening the pressure on acute hospitals—are going to be replaced with a handful of "Community Hubs," many without beds.

According to the CSR, three community hospitals, St. Leonards, Alderney and Westhaven, will shut and the sites will be used for "other purposes." It has now been revealed that the total loss of beds in Dorset will be 109.

These attacks take place while patients are dying in hospital corridors and bed occupancy in hospitals reaches dangerous levels. Unprecedented levels of underfunding to local authorities have led to an enormous crisis in social care, placing more pressure on existing community teams like BICS and hospitals in particular. This week it was revealed that 95 UK councils have had home care contracts cancelled by private companies. These firms—notorious for paying their staff rock bottom wages—told the councils they were unable to deliver even the most basic services with the funding councils were now offering.

In Dorset, huge sections of the NHS are in private hands. Learning Disability Services in the area once run by the Southern Health Care NHS Trust have been sold to a private company called Dimensions, with workers' wages slashed to poverty levels.

Social Care Services previously run by Dorset County Council, Bournemouth Borough Council and Poole Borough Council were transferred to a private partnership company, Tricuro, in 2015. Last year, Tricuro imposed a massive pay cut on the lowest-paid in the workforce by imposing a new contract.

These attacks have only proceeded due to the connivance of the trade unions and Labour Party who are isolating and dissipating every struggle. Instead of mobilising the more than 1 million NHS workers in a joint offensive against the destruction of public healthcare, the unions have restricted workers instead to writing letters of protest to the very MPs who are implementing attacks. In Dorset, the Royal College of Nursing is openly facilitating DCCG proposals to slash services while Unison, with more than 500,000 NHS members nationally, along with Unite and the GMB have allowed these attacks to go through without raising a finger against them.

As one BICS team CRA member told NHS FightBack, "We cannot expect any fight against these attacks from the unions. But they will come and see whether all the procedures are correctly followed before implementing these attacks."

Similar job losses to those at BICS have been carried out in nearby Poole. Health workers in Dorset and beyond must oppose the sacking of the BICS workers and the axing of the vital services they provide. NHS Fightback urges health workers to share their experiences of similar attacks on jobs and conditions with our organisation and the *World Socialist Web Site*. This is critical in order to alert working people to what is taking place and build a unified rank and file movement of healthcare workers, patients and the working class as a whole to oppose these savage attacks.

To contact NHS FightBack visit www.nhsfightback.org



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