

Robert Aitken Petition to OCC Meeting of 12 December 2023 Re: proposed withdrawal of Short Stay Hub Beds (SSHBs) from Henley

I'm Robert Aitken, resident of South Oxfordshire living in Bix & Assendon. I have had a long participation with the Townlands Steering Group, am a trustee of the League of Friends of Townlands, and was an Ambulance Service Community Responder.

I wish to protest against the proposed closure of the SSHBs in Henley and fully support Councillor Gawrysiack's motion to have this decision deferred to allow proper consultation.

This decision was taken without any communication, let alone consultation, with local interest groups, the community, or even GP surgeries. The existing Hub has been well used and is valued by local GPs.

The argument put forward against consultation is that it is not needed as the beds' contract is with OCC, so not NHS beds. This is pure sophistry. The beds were a direct replacement for NHS beds in the old Townlands under an NHS contract; if that was subsequently switched, that too was without communication or consultation; and the beds continue to function as step down NHS beds.

The sole justification appears to be to fulfil a national target, effectively that no more than 5% of hospital discharges be to bed hubs or equivalent. This is an arbitrary nationwide target, and may or may not be right as that, but for it to be a prescriptive local requirement irrespective of clinical need is inappropriate. The implication that a small minority **would** require a step-down bed is not being respected for this large area of South Oxfordshire as we would have **zero** beds. There is no guarantee of space in alternatives which are getting squeezed too. In any event they are not close enough for family participation in the recovery.

I understand that the "beefed up" Care in the Home Service to support this was not fully in place let alone trialled when this decision was taken. Since then, Government decisions to increase minimum wage, with further unfunded pressure on local authorities, and new limits on legal immigration of care workers' families, are likely to put further pressure on the labour-intensive home care system.

I ask you to imagine the situation of an elderly person, possibly themselves a carer, being discharged from hospital with a spouse unable to care for a rehabilitating partner, or with no-one at home. The idea of servicing this rehabilitating minority only via a drop-in care service does not bear thinking about.

Failure to get this right will be hugely detrimental to those patients affected and to the functioning of the main hospitals left potentially with bed blocking. There is little sign that it has been got right.

Thank you.