Annex 10a

Les Flack Wed, 3 Apr, 21:03 (9 days ago)

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My words read out at the Maldon consultation on 19th March

I grew up in Epping with St Margaret's and Harlow hospital's close by. When moving to St Lawrence Bay my father stressed the importance of local healthcare, it was a stretch of his wise principle but I felt in my trust of authority that St Peter's would continue to serve my wife and I as a community hospital.

My parents faced many significant medical challenges including strokes. I supported them, driving from the Dengie to their home and took one or both for medical care mostly in Epping and Harlow in under 20 minutes.
We know that family support is an aid to patient recovery, rehabilitation and wellbeing. The close medical care made it easier for family to support both my parents even though not living nearby. *Local healthcare is also crucial for the wellbeing of family and friends that support.*
With our own younger family also not local I fear my wife and I will be isolated and separated from each other and family care resulting in expensive taxis and paid carer support for medical visits. The journey times and fragmentation proposed and implemented do not ease family care and are surely a threat to rehabilitation, a drain on the mental and emotional well-being of both the patient ***and*** its family potentially with a legacy of more family health issues.

My wife already has both Ménière's disease and COPD which resulted in severe malnutrition. She often can't walk far without being breathless, this understandably escalates to stress and anxiety. It's an hours journey from the Dengie to St Peters by bus with over 2 hour gaps in the bus schedule. Moving a mobility scooter on and off of buses is challenging and not always possible. Fortunately I usually drive but I can't always be around nor able to drive. Long delays from temporary traffic lights are a regular feature on the Dengie.

Our family health, stress and anxiety cannot afford more worries about varied locations and greater journey times. Many will not afford it choosing to feed the family instead.

My wife is inline for a possible lung reduction operation and will be even more dependant on the support from the Provide staff who visit St Peter's, they are a lifeline for her both physically and emotionally such as at times of chest infections, which is common for those with COPD. I can't begin to imagine the worry for my wife and others of the need to get further afield if St Peter's closes.

I don't feel the ICB grasp the significant practical and emotional impact of their changes and further proposals on the community which can't take an even greater burden of journey cost and time for healthcare. St Peter's is a Community Hospital and needs to remain so.

Shifting gear now I submit that with our rapidly heating and collapsing ecosystem it's clear we must strive to minimise unnecessary travel distances, for less emissions, air pollution, congestion and resource extraction. These goals are not a 'nice to have' - our very futures actually depend on extensive localisation and strengthening the cohesion and well-being of local community. Every fraction of a degree saved in rising global temperatures mitigates against the increasing risk of future pandemics and vector born diseases. Additionally air pollution is a harm to health and rapidly increasing, its greatest risk is to the vulnerable, such as the elderly or those with pulmonary diseases and even more worryingly our children and babies. St Peters is central and well located for public transport, car sharing, trip stacking and future implementation of active travel routes.

In Net Zero times we hear much talk of the need for 15 minute cities, all key services within 15 minutes. We must also look to local futures rurally, not enforced as some fear, but where reduced and easy low impact travel such as for health care, benefits the whole communities well being. We need a more holistic approach to healthcare that takes into account mental and social factors, rather than just the symptoms and treatment of an illness.

Our necessary actions towards our collective responsibility to our global home conveniently aligns with localisation of everything and the needs of the most vulnerable in our society. We must surely look there towards the vulnerable for the primary goals in decision making. For example to the lady Ann that I met in Maldon high street entirely dependent for travel on her mobility scooter, a frequent visitor to St Peter's services, no less than 20 times in the last 2 months.

Consultant appointment, blood test, x-ray all done at same place on the same day, even shopping on the way home. The ICB stated, X-ray is unlikely to be relocated into town due to specialist equipment and if moved is likely to be in Braintree. Not local. How will Ann get there on her mobility scooter ? Another stressful inconvenience and unnecessary journey with all the impacts I describe.

Dismantling St Peter's medical services and casting them asunder around mid Essex flys in the face of localisation and the mental and emotional well being of its served community and in turn has potential effects on physical health.

In 2012 the MDC and Savills Development brief presented a perfectly feasible plan to have new build at the rear merged with restoration of St Peters front section of building. When the ICB say "theres no money" for St Peters thats a choice. This community deserve to be treated with respect and dignity.

My family and this community needs the NHS decision makers to look beyond short sighted outlook of cost saving, whats affordable, whats value for money and take the more holistic approach to our healthcare, look beyond essential medical care to include mental and social factors, treatment and respect of the whole person and the whole community not just the illness or disease.

I propose enhance St Peters existing medical services with a Well-Being centre of excellence centre so that GP's and Social Proscribers can signpost the public to St Peters and regular community and education groups with topics such as weight management, relaxation, pain management, menopause, mindfulness, pace and

plan, thrive and survive even gardening club. These create social network sub groups and build community networks all excellent for health and well-being.
People are under so much pressure, around 20% of GP visits are said to be non-medical such as loneliness, social isolation or issues with debt, relationships or housing. Fragmentation of services and medical care to distributed locations and longer journeys will only exacerbate these social issues further burdening GP's.

So dig deep, get serious about Maldon District and Mid Essex healthcare - holistically.

—-end of consultation talk—-

Sample supporting material follows

Gabor Mate
The physical health impact of social malaise and circumstances

- the medical importance of community and individual wellbeing - improve this, save NHS money

https://www.wholehearted.org/title/the-power-of-connection/

Local Futures

- The need to localise for personal and global health and happiness
- (need to localise and reduce unnecessary travel)

https://www.localfutures.org/

Essex Air pollution
A high cause of death and health issues. (need to localise and reduce unnecessary travel)
https://www.essexhighways.org/news//essexair-website-launched-to-help-highlight-the-issue-of-air-pollution#

Prof Kevin Anderson on the urgency of mitigating Climate change
(need to localise and reduce unnecessary travel)
https://youtu.be/ipdwvvZ8Wu4?si=L5fwxGCW1cODH1hz

BBC Article - climate change increases infectious disease spread (need to localise and reduce unnecessary travel)
https://www.bbc.com/future/article/20231201-fevered-planet-how-climate-change-spreads-infectious-disease

Healthy Life Essex (“We believe in a holistic approach to health issues: dealing with the cause of a problem and not the symptoms”)
Article - The Healthcare sector has a huge carbon footprint thus changes are essential.

This blog looks at four principles of Environmentally Sustainable Healthcare...

https://healthylifeessex.co.uk/about-healthy-life-essex/

Social proscribing hubs

- signpost to activities at St Peter's, day and night
- Look for opportunities within a St Peter's site upgrade

https://www.property.nhs.uk/about/social-responsibility/social-prescribing/

20% GP visits are social issues

- use St Peter's opportunities for community & save the NHS money through well-being and less GP and medical demand

https://www.lbc.co.uk/news/one-in-five-gp-appointments-non-medical/

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