

### Lewisham

**Issue 6 (23 January 2013)** 

### **Hospital Worker**

A Workers' Liberty healthworkers' bulletin

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## People or profit? Whatever Hunt decides, we'll fight on!

By a Lewisham Hospital nurse

So Hunt is mulling it over... Will he or won't he smash our hospital? And how will he make up his mind? Is he thinking about the people or the PFI profit?

Here in the hospital we're waiting and wondering. It feels as though the initial shock has worn off and that it all now feels a bit unreal. The work is still here to be done. The wards are full of patients. The axe hasn't fallen yet.

It feels quite different here to the busy campaigning stalls just a few yards down the road in the town centre. Here in the hospital I think we're not quite sure what to do apart from do what we've always done, focus on our patients.

When we're so busy, its hard to believe that in a few years time this service may cease to exist. If we're not busily looking after our patients, if they're not getting that service here, then where will they go?

They'll be travelling a long way down the road to QEH or KCH (depending on what it's for) but will they get treated there?

#### **NIGHTMARE**

I have nightmare visions of our patients knocking at the door of some other full hospital and being turned away. Or having to go further and further afield in the hope of finding a hospital somewhere, anywhere with the room to treat them.

Reading Kershaw's propaganda he seems to think that we can sort most things out in patient's homes. District nurses can just pop around your house and offer the full hospital service! But District nurses are running around without a minute to spare as it is. And there's so much that can't anyway be done at home. In Kershaw's head the patients just aren't really that ill.

It is clear to everyone in this hospital that people will die unnecessarily as a result of these proposals. We save lives at this hospital. It doesn't always seem so heroic — a drip here, a blood sample there, a dressing change, a quick scan. Its all done in a slick, calm and organised way but that's

how we work miracles. We fight back sepsis and gangrene, renal failure and death with these small acts.

It's more dramatic in resus. The stabbings, the road traffic accidents, many of whom would not make it to KCH. And in maternity, it might have been a c-section, could be a still birth. We deal with death every day and more often than not come out winning.

If Kershaw gets his way, the death count will rise. The patients will die in the back of ambulances as the travel times will be too great. Or patients who should have been admitted will be turned away because we are no longer a fully admitting A&E. Or other patients will be sent home too early. These deaths will be on our conscience – they will happen on our watch, before our eyes. There just won't be enough services to do what needs to be done but we will feel them as our responsibility.

If Hunt does ignore us next week then we've got three years, and the earlier in that time that they give up on the idea of shutting us down, the better.

As soon as the ink is dry, management will start trying to find bits of our hospital that they can take away. We'll have to watch out, and we'll have to be ready to stop them each and every cut, each and every attack on our patients.

They can't do it in one fell swoop. Even this government can see the ensuing chaos if they try to suddenly close the A&E. Instead they'll take away all the little things that support our services, until at last they can say they deliver the final blow.

At some point they will make an order that puts our patient's lives at risk. At this time each and every one of us will have to make a decision. To stand up for patients and our own clinical integrity or to follow management orders. We shouldn't have to make these decisions alone.

Continued overleaf

*LHW* provides a forum for staff at the hospital to tell their stories and air their views. If you have a story to tell or an opinion to share then get in touch. The bulletin is edited by healthcare professionals and we will ensure confidentiality is upheld.





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Continued from front

We need to feel that we are well organised and supported.

If we focus on providing our patients with the service they need and organise together to this end we can force the government to back down.

We all deserve to have the best medical treatment that our society can provide. Rich or poor we all deserve to live until old age, until we get to the point that treatment is no longer beneficial, to have good supportive care and to end our lives with dignity.

Will you be the nurse who sent the patient away to hear later that they died because the ambulance got stuck in traffic? Or they fell on the way home? Will you be the ambulance driver shipping patients from Lewisham to QEH meaning vital wards are shut down? We're worth more than that surely?!

If Hunt agrees with Kershaw, we need to keep meeting and campaigning, to discuss every single threat, and decide the best strategy to defend our hospital, our whole hospital for all our patients. The Hospital Workers Group will keep meeting every Thursday at 8pm in the Lewis club. This bulletin will keep going — write for it, e-mail the editor, tell us what's happening. The Save Lewisham Hospital campaign will carry on campaigning, we'll need to let them know what's happening so they can put on the pressure from the outside. Hopefully when he sees us marching on Saturday Hunt will know the game is up. But if he doesn't listen then this month, he'll have to listen eventually, because we won't sit back and allow this to happen.

As the founder of the NHS, Nye Bevan said: "The NHS will exist as long as there are folk left to fight for it". We must organise and take that fight to the Tories.

# Spanish healthworkers show the way

A local resident and campaigner in Save Lewisham Hospital wrote to *LHW* about her experiences in a Spanish hospital under threat of closure.

The area where we were staying, Nou Baris, is a working-class suburb of Barcelona with a high number of Latin American migrant workers and a traveller population.

Walking up to the hospital we noticed that there were banners draped out of the local flats and shops, all opposing the closure of the hospital. On arrival at the hospital we saw that there were some tents outside and a stall with several people doing a petition, giving out leaflets, chatting to passersby.

Inside, the hospital was equally covered with political materials. Not merely anti-cuts posters, but also cartoons on political economy on the walls and longer political pamphlets left in the waiting rooms.

The staff had anti-cuts posters pinned on the back of their uniforms and the petition against the closure was at the reception. The atmosphere in the hospital was somehow one of camaraderie. While I was there staff members went outside in their breaks to participate in a sit-down in the road. They seemed to do this without fear and in a way that had clearly become routine.

Campaigning to keep the hospital open was something that the staff did at work, it wasn't a private thing that they had to keep quiet. Their political opposition was open and integrated into their work.

Several things were remarkable about the hospital in Spain. Firstly, the campaign had communicated the message far and wide, the whole community was clearly informed about the closure. Secondly, the level of political analysis of the situation by the workers was high. Thirdly, the level of care in this workplace, where there was already some amount of workers' control, was exemplary. As we campaign to stop the closure of the A and E, Maternity and other wards at Lewisham Hospital discussions about occupations might seem far fetched to some.

Looking to Spain, where the occupation movement of hospitals is growing rapidly, planning to occupy seems both obvious and possible.

### **Hospital Workers Group**

The Hospital Workers Group is an ad hoc group of hospital workers that is meeting every week to organise campaign activity. Email lewishamhospitalworkers@gmail.com