

Mr. S. Baines-Andrews
Chair of OSC
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Mrs. L. M. Wise
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Dear Mr. Baines-Andrews,
Having researched the role the committee plays with regard to major changes in health services, I write to you with grave concerns for rehabilitation care at Southampton General Hospital.

I do have first-hand experience of such care at Southampton and would like to take a moment of your time to explain -

In 2001 our eldest son, Andrew, spent nearly a year in VICTORIA HOUSE (V.H) after suffering a brain injury in a road traffic accident late 2000. Initially he had neuro-intensive care in London & then our local hospital. As Andrew's own home is in Southampton he was fortunate enough to eventually be moved to V.H for his next stage of recovery.

On the night of the accident we were warned that Andrew may not survive. From that point the prognosis moved slowly from a possible permanent comatose state to a paralysed, vegetative state. By the

time he arrived at V.H, 2 months after the accident, he was in a wheelchair with no controlled movement & still very low on the coma scale. However, 11 months later Andrew was able to move back into his flat with his fiancé. His rehab continued in various classes, physio etc. but he had been given back an independence and quality of life.

Today Andrew is married and has a beautiful baby daughter who he cares for now his wife has returned to work. He drives an adapted car & although he has very limited communication & no use of his right arm/hand, he leads a happy, full & productive life. I cannot emphasize enough that this is only possible after the amazing support & care he received in V.H. A clear example of what can be achieved with the right rehabilitation environment.

For 2001 my husband & I moved temporarily to Southampton so that we could be with Andrew & help support him. On a daily basis we were able to be involved with the care he received & saw first-hand the process of slow recovery. Step-by-step, in the gym, the kitchen, the bathroom & the communal lounge where he learnt to interact again with other people. Most importantly, because patients had their own room, he could have personal things around him his music & TV for programmes he enjoyed. All to help the memory & brain heal. There we also had privacy when it was needed for him & the family.

I tell you all this because I have recently learnt from Andrew + his wife that the type + quality of care described above no longer exists. Now neurological patients, whether newly admitted from intensive care or at the stage of receiving in-patient rehab, are all together in a ward within the main hospital. There are no dedicated facilities for patients struggling to regain use of their mind + body once they have moved on from solely medical care.

There would appear to be very, very limited space both individually or as a group. Repetition + spontaneous responses are vital for successful rehab but it is impossible to see how this can be put into practice within a ward environment. Many facets of brain injury/repair are embarrassing for a patient, surely they have a right to the dignity more privacy than a ward can afford them.

Equally, for staff conditions must be extremely difficult + demoralising. Nursing care + rehab care whilst equally important, require different facilities for staff. Case studies, outside agencies, group meetings for patient development plans, the list is endless but all vital for any sort of rehab recovery.

I do appreciate funds are limited in the current financial climate and there will always be difficult decisions to make but this decision to integrate care was activated long before funding

reductions. Even in 2001 there were discussions about moving the services of V.H but this was to improve them not to loose them!

I trust you will agree this situation needs investigation by the committee. It stated on your web page that "each committee must be consulted by the NHS where there are to be major changes in health services". Were you consulted?

I cannot see how it can be cost-effective to reduce/remove the facilities that ultimately enable people to be more self-sufficient. They should have the opportunity to become useful members of society again & not a complete expense on the public purse. Something we hear regularly that the Government feels very strongly about.

I look forward to your comments and thank you for giving your attention to this matter.

Yours sincerely,

Arian P. Wise

MRS. LILIAN WISE