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Mansfield QC-chaired enquiry MICHELLE DE LARRABEITI 3 July 2013			
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In advance of this week's high court battle between Lewisham Hospital campaigners and Jeremy Hunt, a People's Commission on Saturday heard damning evidence from clinicians and patients.	Related Articles	Weekly em Subscribe	nail update e to our mailing list
The huge cuts which Jeremy Hunt is trying to enforce at Lewisham Hospital shows what happens when the priority is financial markets, not healthcare. As David Owen said in his opening statement, "This is something that will change the NHS forever."	Closing US Down STUART MONRO	Subscri	be
Michael Mansfield QC outlined the situation in his opening remarks. The downgrade means that Lewisham will no longer be a major hospital. It will close its A&E and all acute admitting wards including, intensive care, childrens, all serious or complex surgery and the reduction of its maternity services to a midwife led unit no longer supported by obstetrics. 60 per cent of the hospital estate will be sold off.		Follow us Tweets	Follow @OurNHS_oD
Mansfield placed the People's Commission in historic context - the tradition goes back to the debates of the Levellers in the English Civil War in the 1640s. Mansfield firmly located this commission in the context of the 1948 Universal Declaration of Human Rights, including Article 12, the right to healthcare. The Commission was also inspired by philosopher Bertrand Russell's international People's Commission set up during the Vietnam War in response to human rights abuses. Mansfield said that healthcare must conform to the four 'A's' "Available, Accessible, Affordable and Acceptable' was a human right. We have been privileged to have an NHS that met these criteria - but this human right is now under attack.		"People will of Commission opendemoor @SaveLewis Expand Ours OurNH @OurN	die" - report of Saturday's People's chaired by Michael Mansfield QC racy.net/ournhs/michell hamAE
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blame for the mistakes of Government policy: namely; the Private Finance Initiative. She outlined how PFI deals meant that borrowing to build new

hospitals was transferred from low interest Government loans to the unaccountable and expensive world of private finance, with interest rates of between 6% and 15%, burdening massive, complex and unaffordable debts. When the Trust Special Administrator (TSA) was sent to South London their primary focus was on the finance and on ensuring that PFI repayments to the private sector continued to be met. Professor Pollock argued that all PFI contracts need to be in the public domain, rather than sacrificing other trusts to service this model.

Called as an expert witness, Professor Colin Leys concluded that privatisation in the NHS will replace patient need with business need with trusts asking 'what must we do to balance the books this year rather than starting with the patient".

Baroness Mary Warnock, Blake Morrison and chair Michael Mansfield QC made up the Commission panel. A team of four barristers questioned 55 witnesses. The day was designed to be as inclusive as possible, with live and video evidence from witnesses, and comments and tweets from attendees being read out throughout the day, and the whole day being filmed.

The inclusivity of the people's Commission contrasted sharply with the official 'consultation', which included workshops organised by McKinsey (who picked up £5million for their work). There was no real interaction at these events, the Commission heard. Consultants and experts were not allowed to present or even mention their research, but were instead presented with a day of ludicrous Apprentice-style language that called on them to have "vision", "aspiration" and to engage in "blue-sky thinking". McKinsey representatives were rude to Patients' representatives at the workshops and even tried to stop Jessica Ormerod, Lay Chair of the Maternity Liaison Committee, from attending, asking her "what she was doing there?" The whole process was "hasty and absurd" said Ormerod, who - after sending many letters - had finally been granted a meeting with TSA report advisor Dr Jane Fryer at her house at 8pm on the evening the consultation process was closing!

Donal O' Sullivan, a Public Health Consultant at Lewisham Council highlighted the evidence gap behind Jeremy Hunt's rhetoric on maternity care. Hunt's claim that shifting maternity services would lead to fewer maternal deaths was "not really relevant as maternal death is not really an issue... There's been no maternal deaths for seven years!" Indeed he could see "no benefit at all" to the destruction of Lewisham's maternity unit with its ability to deal with complex cases through the back up of an obstetrics department. Witnesses stressed that transport links meant most would probably choose the already overburdened Kings.

Sir Bruce Keogh (the National Medical Director) had told locals that 75% of Lewisham's patients would still be treated at Lewisham hospital. But two Freedom of Information requests submitted by Sharon Hawthorne found an "appalling lack of clinical evidence." for this claim. When pushed on this Sir Bruce's response was "This is not an exact science."

John O'Donoghue, a consultant physician working in Lewisham's A&E said the reduction in patients treated was likely to be much larger. Critical care services and the support services behind them were being removed, ambulances would no longer take patients to Lewisham, staff would be reduced, and patients would become reluctant to use it what was little more than a minor injuries unit. The TSA report was "lacking in detail" and Dr O'Donoghue pointed out that empirical evidence now exists "to undermine Jeremy Hunt's claim to 'save a hundred lives a year.' " In Newark, FOI requests had revealed that when their A&E closed there was a 25% increase in deaths. Doctor Louise Irvine's research showed that it could take patients as much as two hours to get to other hospitals. In Lewisham "lives will be lost by this," O'Donoghue said.

Tim Higginson, Chief Executive of Lewisham Healthcare Trust was "shocked that Lewisham was seen as a solution to the financial problems of the SLHT". He had sent a detailed report to Matthew Kershaw of the TSA detailing positive



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suggestions for the future including working together with Queen Elizabeth Hospital in Woolwich. "These were not taken up."

The high level of integration across Lewisham services was a source of pride for many witnesses. Children's Services are highly rated - especially considering that the borough contains one of the highest deprived populations in the country – fifth in the UK. Tony Sullivan pointed out that Lewisham's cross -agency approach was in place long before the Victoria Climbie case resulted in the setting up of a multi-service approach to children's care.

But witness after witness highlighted how this integration will be damaged by the plans. Doctor Helen Tattersfield said GPs will have to track their patients across as many as four different hospitals and connected care will be destroyed. The TSA proposals mean private contractors may provide one facet of care in a variety of locations, completely cutting across "carefully forged clinical pathways" said Lewisham GP, Brian Fisher. The TSA report claims that Community Care will replace services lost at Lewisham – despite allocating no money to it. "If clinicians have to spend their time fixing broken care pathways then patient safety will be jeopardised. "

Many of the witnesses both on video and in the hall spoke bravely about their stories, often speaking publicly for the first time. Stories like Cathy Ashton's, whose husband has leukaemia and is prone to sudden infections late at night. They know her at Lewisham. Her husband needs the swift care he can get there. Or Joan Brown, whose 9-year-old has sickle cell and has to be admitted quickly so her intense pain can be relieved. Joan has the consultant's phone number, the nurses and staff know her. Often her daughter's admissions have led to hospitalisation: she has needed 4 blood transfusions and has had two operations to remover her spleen and gall bladder. She spoke movingly of the heavy emotional cost of having to travel longer distances for treatment and having to explain her daughter's case to new staff each time.

Summing up, Mansfield praised the quality of evidence and witnesses and insisted on the importance of the "principle of public conscience" as seen in the Lawrence case. When Doreen Lawrence was told by the authorities that they were looking after her best interests she chose not to trust them and eventually her son Stephen Lawrence's killers were brought to justice. The concerns raised by the Lewisham case and its implications for wider changes in the NHS across the country demonstrate an "absence of democracy". Decisions are being made by vested interests - around 175 members of the House of Lords have interests in private health companies. The "consultation" did not allow opposition evidence and did not address wider issues like how those PFI contracts at SLHT came to be.

The focus from here is the Judicial Review from 2-4th July, challenging whether the Secretary of State had the legal right to allow the administrator powers to intervene in Lewisham Hospital when it was the SLHT that was in administration.

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