

P-04-431 Against health cuts from the residents of Pembrokeshire – Correspondence from the petitioner to the Clerc, 24.01.13

Thank you for the email

I wonder what did hywel dda have to say about my petition

And I would like to say I am appalled they have not seem to take any notice of the public in their decision making when concerning scbu there is a huge public out cry not including the results from my petition , there is now another online petition picking up momentum with 4, 500 signitures already in a week (not instigated by myself) what more do they need to see the public what our local scbu

I have attached my own questions I would like to see answered from hywel dda

I have quoted them then put my question

Thank you again

Liz butland

Css board report

9.2

We should provide more care for children in their own homes

Or as close to home as possible

Distance from st davids to carms is 46mi

Distance from aberystwyth to carms is 48.9mi

How is this close to home

We sometimes transfer to many other women to hospitals

Outside hywel dda hb

Why are they being transfered if not needed

Is it lack of bed space

! Does that not indicate the need to upgrade

Sometimes we struggle to meet royal collage of obs and gynae

Guidance on consultant cover

Why are we under staffed

Already in discussion on training improvement

So why can the improved training not work for our unit

Neonatal network believe they can only deliver special care

On one site

How does this effect families and staff

Must consolidate services to one site

Why not have level two in withybush and scbu in carms n aber

Reasons for hywel dda hb glan gwili choice

Critical mass would be lost to swansea if neonatal in withybush

how many would go to swansea compared to how many would go to

Withybush

Population of east carms to swansea

Population of west carms Pembrokeshire and cardigonshire

To withybush

More accessible for all 3 counites

How many roads in the past week have been inaccessible due to

Weather

How will they get to carms then

Currently more births in carms

How many in comparison with pembs and Ceredigion

How many neonatal births

High risk babies get to swansea quicker from carms

How many of those babies are level 3 and how many are level 2

And would not need to travel to swansea

Residents of east carms will choose swansea
East carms population is fewer than west carms pems and Ceredigion
Put together
Only level 3 babies to swansea

Women from postcodes closer to withybush are going to glan gwili
To deliver can go to withybush to deliver
Why can they not deliver in withybush now
Is it lack of space is that not a good reason to upgrade
Does that not show the numbers could increase in pembrokeshire
Baby deliveries

1, 350 babies delivered at swansea instead of carms if neonatal
At withybush
Why can they not deliver at glan gwili now
If Pembrokeshire women are delivering there now
Is this not another good reason to upgrade withybush
So there is more room in glan gwili

Women go to quickest access women from carms
Postcodes go to singleton
If the neonatal is built in carms singleton is still quicker
For those in the postcode areas so why would they change there
Choice

960 women who deliver at carms would go to swansea
Whilst an unsustainable 1, 900 will deliver at withybush
Is 960 such a big impact on sustainability

9.3

Women should have the option of giving birth in a 20 min transfer time
What about unsuspected births in cere or pems that need
Transfer to carms or even swansea
Both withybush and bronglais are more than 20 mins away
How long have they been transferring babies to swansea
Level 2 in pems much closer for bronglais

Bronglais has not had a 4 bed scbu for 14 yrs
How many babies closer to bronglais go to withybush
Or even further what about travel for those families
The stress and strains and most importantly bonding and
Breastfeeding

Transport needs to be 24/7
Chant are working 12 hrs looking to extend
What about helicopters
Do they have room and right equipment
Also weather condition in air and on roads

Mothers and families will be supported if they can not deliver

Locally

How will they be supported and what about long term

Eg babies in care for 6 weeks +

Accommodation provide

Thats good but what about families with other children and fathers

That can not get time from work

What about single mothers with more than one child

We are trying to balance this with the needs of rural communities

Hence the retention of obs and peads in all 3 counties

So why not scbu's for the rural communities in all 3 counties

Obs trainees competence is difficult in less than 2, 500

Births

Each birth is different and educational and competence

Could still be met

Ors report

Household survey says 72% for glan gwili

28% for withybush

Where was this survey done

Carms communities have no fears they stand to either gain or stay

As they are do they have threats of closure is neonatal is

Placed at withybush

The number of births in pembs is too small to develop

Enhanced neonatal

If neonatal was at withybush all 3 counties would use it

Raising the birth rate and you have already said yourself

Women from pembs are delivering in carsms so get them to

Pembs and the number would be greater

Fewer families would have to travel out of hywel dda hb

But they would still have a great distance to travel everyday

A thought from me

If a level 2 is built in carsms why can scbu

Not stay open in pembs and care for babies

Who don't need level 2 but just need that little help

Or for babies coming out of level 2 not quite ready

To go home at least they can be closer to home

Which from my own experience is so relieving