

Friends of Blandford Community Hospital Action Group Update...

The role of the Action Group continues to evolve. Di Sale, a member of the group attended a meeting in London about the future of community hospitals where it was made clear that the steps being taken by the action group and the manner in which they have been taken, is very much in line with the advice that was given at this meeting, which is encouraging. In particular, maintaining a continuous dialogue with NHS Dorset, the commissioners of services, and DHUFT, the provider of services, has resulted in minimising the number of services withdrawn from Blandford. There has been a reduction in the hours of the respiratory nurse, minor orthopaedic, colorectal and general surgery has moved to Dorchester and Weymouth (but the outpatient clinics remain at Blandford), there has been an increase in podiatric surgery in the day surgery unit and there has been a reduction in paediatrics outpatient's clinics.

The group were invited to a meeting with the Chief Executive of Poole General Hospital and DHUFT to explore what possibilities there are for consultants from Poole to use the hospital, in particular orthopaedic procedures and a pain relief clinic. It was a positive meeting and the Chief Executive of Poole and Sally O'Donnell of DHUFT are now working on specific proposals.

Meanwhile, by late Autumn it will be more clear as to what procedures will be appropriate at Blandford in the next decade, and this will allow the Action Group to go ahead with looking at the design of the High-tech. treatment room in Portman. Also, in Portman, work is going ahead to establish day procedures such as blood transfusions and chemo-therapy.

As a result of discussions at the May meeting of the group a meeting was held between G.P's, community nurses, practice nurses and Kate Pope the theatre sister and outpatients department lead, to consider the possibility of moving the leg ulcer clinic from the surgeries to the hospital. This would benefit the surgeries that are under great pressures and also increase appropriate activity at the hospital.

There is still much to be achieved but there are grounds for optimism.

Peter Fale, August 2012