

Remembrance Sunday in Wokingham

On Sunday November 14th civic leaders and representatives met in the afternoon in the Town Hall to lay wreaths on the indoors war memorial. We marched down to All Saints for a service with members of the Borough and Town Councils, and the uniformed services.

In the service there were touching memories of those who lost their lives in war, as we were invited to explore the power of love to overcome hatred and fighting.

NHS reorganisation

I read little about the wide ranging management reorganisation of the NHS underway as the institution wrestles with recovery from the pandemic and continues to fight the continuing virus. The reorganisation is one sought by the management rather than being a political blueprint, which may account for the absence of debate.

The NHS in England has been recruiting Boards to run 42 Integrated Care Systems. These in turn work with Integrated Care Partnerships. They are designed to promote collaboration and common working between GPs, Councils, providers of community and mental health services and Healthwatch. In parallel all the provider trusts – hospitals and other institutions providing healthcare and treatment- are to join provider networks, to work with others and to increase their scale of activity.

The Integrated Care Boards will be responsible for finance. They will procure the health services their area needs from a range of providers. Their budget will include “community commissioning money, GP budgets, specialised commissioning spend, budgets for certain other directly commissioned services, central support and national transformation funding.” They can delegate funds to the Partnerships based on their area.

The boundaries of these new bodies create bodies of different sizes and often combine several Council areas. Wokingham for example will come under Buckinghamshire, Oxfordshire and Berkshire West. Its eastern neighbour will be Frimley.

It has proved difficult to get much background information about the costs and benefits of these changes. It is important the new bodies are well primed to procure the services we need to cut the waiting lists and to maintain or improve the range and quality of services on offer so that all are of a good standard.

[Remembrance Parade and service at Arborfield](#)

On Sunday 14th November I joined the British legion in Arborfield for the march to the War memorial and for the service. I laid a wreath alongside others from local Councils and the uniformed services. It was a poignant moment when the names of all those who died in the 1914-18 war were read out. It was too many young men from what then was a small rural village. We looked across at the green fields beyond the road to a glimpse of the rural England they knew and would have kept in their hearts during the terror of the trenches.

[Visit to Evendons Primary School](#)

On Friday 5th November I visited Evendons Primary School and gave a short talk on the role of an MP. The children asked a wide range of questions about Parliament and the role of an MP. They were particularly interested in environmental matters which I wrote about on my website the following day. I thank the Head for inviting me and for showing me the school, and wish the pupils well in their studies.

[NHS spending and capacity](#)

The NHS needs more capacity to get the waiting lists down. During the pandemic the NHS did provide many more beds in the Nightingale units in case the pandemic caseloads became too great. They resisted advice to use these facilities for all covid work to keep the General hospitals infection free and able to carry on with their regular work. As a result we have a big backlog.

Large additional sums of money have been made available to the NHS to handle the one off costs of tackling the pandemic, and to deal with the waiting lists. In order to cut waiting lists we may well need more beds in the NHS. It has been one of the features of the NHS that managers have always chosen to operate with relatively few beds compared to the workload and have said they aim to make very productive use of these beds. It leads to issues over

so called bed blockers, and how easy it is to send patients on to care in the community or recuperation in other NHS institutions beyond the District General hospital.

It should surely be relatively easy to provide more beds. Some of the beds and equipment acquired for the Nightingales might be available to get us started. The NHS could also set up specialist units in different properties to undertake procedures like cataract removal or other simpler surgery away from the DG hospital.

Apparently the new issue is the numbers of staff this will need. Of course just adding beds is no use without enough nurses and doctors to administer to the extra patients. I understand that the NHS has many jobs open for applicants currently, with many more posts allowed for in the budget than the NHS has staff. The NHS needs to see what it can do to encourage qualified people to return to its employment and what can be done to promote more people through education and training . The NHS should also consider the balance of work between highly qualified doctors and nurses and other staff to see if more assistance can be safely given to the medically trained to provide great service to more patients.