SUBMISSION FROM BLACK TRIANGLE CAMPAIGN

We express our burning concern about the Work Capability Assessment that continues to cause harm on a daily basis.

The GMC in its recent publication on Good Medical Practice states that a doctor must (overriding duty or principle) take prompt action if he thinks that "patient safety is or may be seriously compromised by inadequate... policies or systems.

We are concerned about the contractual arrangements between the DWP and General Practice and it is our view that this contractual arrangement needs to be renegotiated.

The new assessment process, measuring eligibility for about 2.2 million no longer able to access DLA, not only costs government to deliver. It also requires the disabled people being assessed to provide independent medical evidence.

For most disabled people this will be accessed via a GP. GPs are already inundated with ESA tribunal appeal requests. This is at times complicated and time consuming and done through good will - good will which I fear may be in short supply.

The Scottish Government is in a difficult position with Welfare a reserved matter and Health devolved and it is unclear how to mitigate for the changes to come. There exists a nexus between the two areas. The latest report from Disability Rights UK (DRUK) examines the cost of obtaining independent medical evidence from GPs and consultants as part of the new PIP assessment process, and of extra spending on GP appointments and hospital stays as a result of reduced support.

As Cabinet Secretary for Health and Wellbeing, I am sure Mrs. Sturgeon in only too aware of the implications of welfare reform on her brief.

Through changes to the Quality and Outcomes Framework and local and direct enhanced services, The Scottish Government has worked hard with General practices and the health service as a whole to address the perennial problems of reducing avoidable hospital admissions and preventing unnecessary hospital re-admissions

The Disability Alliance survey of disabled people published last year also suggested 16% would be more reliant on the NHS.

Many disabled people told Disability Alliance that hospitalisation would be required due to an inability to manage health needs through a difficulty attending routine appointments or being unable to meet other health-related costs. The Commons Public Accounts Committee has also estimated that ‘bed blocking’ costs the NHS £170 million per year. If more people need treatment, there is a lower ability to self-manage conditions (as a result of losing financial support under DLA plans), and if less support is available from councils, the risk is also that delayed discharges will rise - resulting in even greater costs for hospitals as a result of DLA plans.
There will be an increase in people requiring council-funded residential care placements

We may be on the brink of a Heath and Social care crisis the like of which has not been seen for a generation.

The Black Triangle Campaign would like to insist upon a commitment to establish an Independent Living Fund for Scotland. Independent living is a fundamental human right of disabled persons and must be fully protected.

We will not stand by and see disabled people returned to institutions which will in any event cost a great deal more in the long run than providing the necessary support to disabled people to live in their own homes.

The voice of Scotland’s Doctors must be Heeded

General practice in Scotland has called for an end to the WCA “with immediate effect”.

The GMC guidelines are clear that a doctor must take prompt action if he thinks that "patient safety is or may be seriously compromised by inadequate... policies or systems"

As a GP I am in a contractual arrangement with the DWP whereby I am complicit with a process which has been shown to be harmful.

We are looking upon the Scottish Government and the BMA to take a lead in protecting the safety and the rights of long term sick and disabled persons.

We implore the Scottish Government to halt the implementation of the Welfare Reform Bill until these grave ethical concerns are addressed by the Scotland’s health and allied professions.

Wherever it is possible to do so, it is crucial that the assessment system for assessing disability and ‘fitness for work’ be ‘fit for purpose’. We attach an open letter which we prepared to go out to the BMA which sets out our grave concerns in detail.

As Black Triangle, we say with one voice that it is possible to resist Westminster’s decrees and that we must if we are not to see more deaths such as Paul Reekie’s and the one linked to above.#

This situation is intolerable and we, as Scotland’s people must unite across the entire spectrum of our civil society to prevent further harm and maintain our highest ethical standards. UK Welfare ‘Reform’ threatens to stain with blood our good reputation as a beacon of the progressive values of social solidarity and cohesion.

The Scottish Government must join with the rest of us and the medical profession in fighting back against this barbarism. You have our mandate to do so.
It is possible to withdraw co-operation. The Nuremberg Defence is not an option.

We must insist on a fair and just Scotland. It is our inheritance and birthright and now is the time to stand up for Scotland’s sick and disabled people and mobilize a campaign of resistance.

BLACK TRIANGLE CAMPAIGN
APRIL 2012