PE1924/U Petitioner submission of 19 September 2023

Dear members of the committee,

Please find a summary below of the recent events regarding the campaign for improved care and access to care for Highland Gynaecology patients.

In June we held a virtual Round Table event, with a presentation summarising what we have found and what we know from experience. This covers several breaches of UN Human rights treaties caused by the current stituation. You can watch this here: https://www.youtube.com/watch?v=pH9szd2p2T4&feature=youtu.be. This version however does have patient stories redacted, as they were given with the permission that they are shared with decision makers only. Please find these below.

Several members of parliament and Scottish government were invited – unfortunately many did not attend but sent note takers instead. Jenni Minto, Michael Matheson and Maree Todd were all not present. Local GP's, specialist nurses from Glasgow, one dedicated NHS Highland manager and local third sector members however did make the time to hear our concerns and to then make the most of the 45 minute discussion on how we can work together to improve things.

Since then, a monthly rolling meeting has been established between us (https://www.northhighlandwwh.com) and various managers from NHS Highland. We are hoping that moving forward, we can work together and that the information remains transparent.

We are still waiting to see the finished EQIA on Gynaecology in Caithness General Hospital, which was scheduled for release in late June 2023. It is now due to be released in the next few weeks. Our educated guess is that this EQIA is now going to reference systems which were only put in place within the last 4 months. If that is the case, although it won't be a fair estimation of the wider situation, it is still positive change none-the-less, which is much welcomed. As long as the EQIA is based on permanent change and not temporary measures to improve things short term while the review is underway.

Now, NHS Highland are working with us and pushing hard for positive change. But they can't expand the Gynaecology team in Caithness General or Raigmore to reduce pressures without capital.

In March this year then Health Secretary Humza Yousaf told the National (https://www.thenational.scot/news/23405979.yousaf-advance-womens-rights-made-first-minister) *"I want women across Scotland to know that if I am elected first -minister, I will not allow one step back on your rights. I'll fight with you against any attempts to -undermine your right to choose – and will work tirelessly to ensure women and girls in Scotland live in a truly equal society."*

The Women's Health Plan itself states that *"The aim of this Plan is to improve health outcomes and health services for all women and girls in Scotland. It is underpinned*

by the acknowledgement that women face particular health inequalities and, in some cases, disadvantages because they are women."

So why then, when the NHS Highland Gynaecology team recently requested funding to strengthen their team, reduce waiting times and increase coverage to rural areas, were they told that the purse strings are simply too tight and there's no money for them to do it?

Feels like double standards to me...

NHS Highland are working with us now and they truly want to change for the better. However, they can't do that without the backing of the decision makers.

In May I had the privilege to attend the World Congress on Endometriosis in Edinburgh. The next time it's in Sydney and will likely not return to Scotland for many years. It was a global event, with over 50 countries represented and 4 solid days of talks, exhibitions, demonstrations, and networking. Not one staff member of NHS Highland could take the time off to go because they are so stretched and understaffed. Without further education on Women's Health, the service will never improve.

In summary, we are working with NHS Highland to deliver a patient's view into the decisions being made. However, government are very good at asking for people's thoughts and opinions to be voiced. Women ARE voicing their opinions, there's just no change happening.

If any members of the committee would like to discuss this situation further, either as a group or as a one-to-one meeting, I would be happy to sit down with a cuppa and discuss it.

Take care,

Rebecca Wymer

Petitioner of PE1924; Complete an emergency in depth review of Women's Health Services in Caithness & Sutherland

Lived Experience #2

Patient A lives in Orkney and suffered a placental abruption at 32 weeks. ↓ She was taken straight to theatre in the

Balfour Hospital in Kirkwall.

Baby delivered & mum stabilised before transfer to Aberdeen.

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They both survived & Doctors estimate she would have bled out in <1hr

Had she been a Caithness patient, they would likely both have died



Lived Experience #3

Patient B lives in Wick and was trying to concieve her first baby

She suffered an ectopic pregnancy & attended A&E in Caithness General

The air ambulance was called to take her to Raigmore for emergency surgery

They couldn't land due to freezing fog

By the time she had surgery the damage was irreparable and she lost both ovaries along with her chance for a biological family

