

Book Review: *Dementia UK website*
How we treat the sick: Neglect and abuse in our health services
Author: Michael Mandelstam
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This is a truly terrible book. Terrible in its message and merciless in its delivery, it is quite unlike anything I have read from JKP. It is certainly their most daring and significant publication ever. But be prepared: I had to take a break halfway through, exhausted and trembling as I tried to live with the pace and intensity of the writing. It is akin to the grip of a paranoid litigant: on and on and on and on. Every argument and observation is backed up by a series of facts annotated with sound references. Michael Mandelstam shares with many healthcare litigants a deep sense of wrong and loss. Loss of the healthcare system he and I and most of you have believed to be ours: good, and never-to-be hurt or transfigured into something soiled, tarnished, perverted.

This is about the National Health Service and its failure to adjust to the changed needs of our population, most particularly people who need help when they become ill or disabled in later life, most particularly when their problems include dementia.

There are 26 chapters and a postscript which summarises what has gone before and points, less confidently than I despaired for, to a better way for the future.

The terrible truths which you and I and everyone who has encountered general hospitals, mental health services and community services, know from personal experience; but which are consistently denied in official documents, are laid out clearly and honestly.

Quite recently the Ombudsman in: 'Care and Compassion?' and CQC in their review of nutrition and dignity in twelve hospitals have brought the agenda to the media. Panorama and Gerry Robinson have pointed to deficiencies in independent sector Care Homes – 'for profit: bad'.

We can live with that even if the profit is pitifully small and hard-earned because of unreasonably tight budgets.

But this is the NHS – a public service provided for us and by our trusted healthcare professionals when we are in our greatest need.

We are treated to high quality, in depth reporting and analysis: as much, probably more, than most of us can cope with. There can be no doubt that while many people are well served by our NHS. Yet too many who are old and have modern, multi-faceted illness and problems, prove too demanding for individual clinicians and the system, and are rejected and misused as consequence.

There are not enough beds, but bed numbers continue to be cut, especially those in caring community hospitals or specialising in the care of older people.

There is not enough staff but staff numbers continue to be cut. Clinicians are not educated to expect or to respond optimally to the spectrum of challenges coming from that section of the population which needs their help in the twenty first century. Professionals behave toward patients and family members as if they are of no value. They are not seen as equal and deserving human beings, to be served with respect and pride.

How did we get to this situation?

Quoting Grimley Evans (p187)

we have produced: ‘the elderly – a class of *Untermenschen* whose lives and well being are not worth spending money on.’

‘The imbalance between managers and clinicians has had some unfortunate effects. These include the supremacy of political targets over clinical care, welfare and even the lives of patients.’ (p198)

‘in recent years managers in the health service have come to resemble political myrmidons, with chief executives sometimes acting like latter day apparatchiks.’ (p 199)

(myrmidon: someone who carries out the orders of another without fear of pity

apparatchik: a party official in any political party)

Of course there are exceptional managers who remain as human beings and make good despite the system. Examples are given of

individuals in responsible positions who have resigned in dismay as they found themselves pressurised to compromise their values and sense of right and wrong. These offer powerful evidence of the bullying and blaming culture which can often prevail and in which denial and spin out shine truth.

Clinicians and their professional bodies are damned for being silent yet individuals risk scapegoating and worse should they dare to make a stand (This is not hyperbole – examples are given).

The problems are laid out stark as a graveyard in winter.

When it comes to answers we are not offered much hope, much confidence or indeed much in the way of inspiration.

An eight point agenda contains a balance of negatives and monitoring spiked with punishments: stop ineffective central guidance, tell people healthcare is not all high tech and tackle hospital care for older people, hold the health minister and managers responsible, strengthen the criminal law and encourage the Health safety Executive to use it more readily, and the police and Crown Prosecution to take action against hospitals.

Against these, exhortations to ‘adjust underlying mechanisms (undefined)’, to get professional bodies to put their heads above the parapet and to fund the CQC more generously and affirm its independence are less than heart-stirring.

Not enough beds? We need some more and these should include a fair number in local community hospitals

Not enough staff? We need some more but of the right calibre and aptitude and they require properly directed education, ongoing support and supervision and to know that they are valued.

Failing older people? Redesign the organisation of hospitals and other components of the service to be dementia-friendly and to take on board the special needs of people with multiple pathologies, who need time to recover and readjust and are often approaching the end of their lives.

Planning and monitoring: Do these with local people informed by but not rigidly controlled by national and international learning.

Emphasise progressive improvement by learning from successes and errors and celebrate the good.

Cost? We must allocate a greater proportion of the GDP to health and social care than is currently allowed. The present allocation is

internationally low and quite inappropriate to the changed needs of our current and future populations.

This is a terrible book. It should be read by everyone with a serious concern for the health, welfare and pride of this country and others.

It could be the Old Testament from which a New Testament can emerge

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