#### <u>No 1</u>

I have been a patient since 1979 and hate to think what state I would be in without ward 43 and the staff. I have been on different wards and had to ask to have treatments applied and its always what do I have to do and how do I do it or even worse busy just now will get back to you soon and that doesnt always happen. I was on the ward yesterday and heard and if this is true it is beyond belief that peadiatrics moved onto gastric ward and that wasnt good enough so now they want ward 43 and knock all the single rooms through and after all that they will ONLY BE THERE FOR 14 MONTHS before they move into a purpose built unit. What will it be like if we have to be admitted onto an ordinary medical ward with other patients staring or having to be undressed with nothing but a curtain between beds maybe up to an hour while treatments are applied or the comments when trails of skin are left in bathrooms toilets etc a lot of skin complaints are made worse by stress well thanks a lot managers

#### <u>No 2</u>

I have been a patient on this ward many times over the years and I dont know how I would have coped without it. It is devastating to know that people like me will not be able to get the medical help and support that this ward offers. What is happening to the NHS. I need this ward like thousands of other people from all over the country.

#### <u>No 3</u>

My other half has been using the dermatology ward (ward 43) at the LGI since he was aged 9 he is now 50. The powers that be at Leeds Teaching Hospitals don't see the devastating effects of dermatological diseases both physical and mental. The support and care given by the specialised team on ward 43 is second to none. Without this ward patients will be farmed out to other, busy, wards where they will feel vulnerable and not recieve the specialist care the require and deserve. Has anyone contacted the cheif executive yet???

#### <u>No 4</u>

I used to work at the LGI on general medical and surgical wards approx 4 years ago before moving to New Zealand.I know the impact that ward 43 has on dermatology and rheumatology patients, and the expert care that the ward provides for these patients.The patients CANNOT receive the attention, time and the care that they need on a busy medical/surgical ward, however much the staff endeavour to treat them. This is such a specialist area, that surely it must come under 'negligence' by the LGI powers that be, in exposing these patients to MRSA,ESBL etc on general wards.Keep ward 43 open, for goodness sake, for the safety and expert care that these patients deserve.

### <u>No 5</u>

I am devastated at the thought of this closure, i have been an in-patient of ward 43 every year since 1980 & if it weren't for the care/treatment i've received over the years i literally wouldn't be here. The utter despair that is felt prior to admission is horrific but there is Ward 43 where you can see a light at the end of that dark tunnel & i really do not know what i will do if this closure happens

### <u>No 6</u>

This ward has been a skin ward for a long long time. It has shared itself with a lot of other specialities, including Rheumatology and GU medicine. It would be a crying shame if it were to close, there is nowhere within the county which has such a specialised unit as this is. The nurses are highly specialised, to deal with skin conditions, which are distressing enough. Can the Trust promise that the patient who are admitted onto this ward will be treated in single rooms - I think not. Some dermatology problems are extremely distressing and I do not think the Trust appreciates this.

#### <u>No 7</u>

Hi there thanks for signing up to the group.

I have been coming here roughtly around 4 years now, the later 2 being the most often especially now as I have treatment every 4-6 weeks now in the ward for 3-7 days at a time.

I couldn't think if a better ward to be on, the staff are fantastic, you have privacy in your own room, as a patient who comes alot it is more like coming to an extended family which makes hospital visits so much nicer.

#### <u>No 8</u>

i just want to wish everyone involved in this all my best wishes and really hope the ward does not close, i know from my son with diabetes that you get used to and need to see the same docs, nurses etc it does get to feel like a family, wishing you a...ll the very best and hope its good news, keep pushing and trying everything you can.

#### <u>No 9</u>

This is ridiculous!!! I worked on Ward 43 as a health Care Assitant for about 18months and it was one of the nicest wards ever, all staff members got on very well and the standard of care delivered was excellent (even if I do say so myself). There were alwasy positive feedback coming from patients and family members who stopped on the ward. I actually cant believe they are trying to close it down! What will happen to the dermatology and rheumatology patients if it closes down?? What are people doing to stop this happening? Is there anything that people can actually do?

#### <u>No 10</u>

If ward 43 ceases to be, there are not sufficient single rooms within a single ward in the LGI to cater for the dermatology patients (unless of course they are thinking of the private ward) - so you are all going to be scattered - putting strain on your doctors who will be running around like lunatics trying to see you all.

The second and probably most major point is that the dermatology nurses will probably not be going with you if the ward is closed down. Nurses get very little training in skin conditions (I know, after leaving the LGI, I trained to be an adult nurse, we got approximately 1 weeks training on the skin system). As both Anne and yourself know, dermatology patients need not only the nursing care, but also psychological care in being able to cope with their skin condition. If you are moved onto different medical wards, nurses are usually extremely busy caring for a lot of different medical conditions . Dermatology care can come a very definite second as being " not as important" as for example heart and kidney problems. You might want to make the point that you might be given "second class care" because dermatology nursing is a specialised kind of nursing.

Thirdly, what do the consultants say about the ward closure ?, I know and have seen what Prof Cunliffe, Prof Rowell and Dr. Cotterell have said, but I have not heard anything from the latest batch of consultants. Are they on your side or are they not bothered about the ward closure.

#### <u>No 11</u>

When I had to be admitted to a different ward needed to have the daily treatments done which had been done at home by my husband for me.

Because of a different condition I have I cannot get in/out of the bath without help also need to have help bathing and drying but because of my skin condition I need a bath every day with emolients to prevent my skin drying out but there was not the staff or the time for that to happen so over a week I only had two baths that would never happen on ward 43 the staff always found time for my baths.

I also have to have creams etc applied I need my scalp treating twice a day and once again there just wasnt the staff or the time they didnt know how to apply the treatment so I had to explain how why and when so it didnt get done. As you can imagine by the time I went home I was so upset and stressed my psoriosis had a flare up, now if ward 43 closes the thought of being treated somewhere else fills me with dread how would you feel having to ask to be put in the bath and helped with washing and drying and putting creams etc on different parts of the body by which I mean intimate areas at least ward 43 has single rooms not just a curtain, it feels embarassing and degrading to have to ask for these things to be done then what about the risk of infection if I have open sores. The list goes on please think again before you go ahead with the closure.

#### <u>No 12</u>

I am one of the faceless, but not voiceless, patients of Ward 43 & I am totally devastated at the thought of this closure.

My first admittance to Ward 43 was in 1980 (I was 14), I was admitted with Pustular Psoriasis affecting the whole of my body, from the top of my head to the soles of my feet, with barely a dot of "normal" skin to be seen. Without the care I received I would not be here today.

I have been admitted every single year since 1980; between one & four times a year & this month marks my  $29^{\text{th}}$  anniversary.

When I have been at the point of total & utter despair & feel like life cannot carry on I have had Ward 43 where I know I'll be treated with dignity & respect & life will become bearable once more. I cannot contemplate the Ward closing, for what this will mean to me personally & others like me will be utterly disastrous.

Skin. The biggest organ on the human body yet deemed so unimportant that a ward specialising in treating it is closing.

#### <u>No 13</u>

You may have read recently in the Yorkshire Evening Post about the proposed plans to close Ward 43 at the LGI. I am contacting you in the hope you may be able to help. The ward is small with only 14 beds. Patients all have individual rooms so as to safeguard against infection and also to provide privacy and dignity for patients who have visible skin problems and have to have numerous bandages and dressings applied. The staff are a very professional team having all being specifically trained in Dermatology and do a truly wonderful job. Many in patients require their dressings to be changed several times a day and for such patients to be 'farmed out' onto general wards is absolutely disgusting. Through no fault of the general nursing on these wards they do not have the time or the experience to tackle these extra duties and so consequently leave these vulnerable people open to the many SUPERBUGS which are so readily available within our hospitals today. Also to take into account is the humiliation many Dermatology patients would face in the instances where they have to be bandaged from neck to toe. They would I believe be made to feel like Lepers with the quite understandable human reaction of other patients and visitors giving the 'looks and stares' thus causing more stress for our Dermatology patient. On the now very very busy and always full Ward 43 patients are made to feel at ease and in some cases "at home" because of their sometime lengthy stay they have their own space and are cared for by the very understanding nurses, doctors and consultants. More recently my Auntie had to spend quite a long spell on Ward 43 after having to be transferred from another hospital and I cannot stress enough that if she had not gone to Ward 43 when she did then without a shadow of a doubt she would have lost one of her legs! This was not the fault of staff on the previous ward but the fact that they were not educated or trained in the specialist field of Dermatology and so once on Ward 43 under the appropriate team she was diagnosed and treated and thankfully came out of hospital with two legs. Along with many other people/patients my family and I will be forever in debt to this team of truly dedicated and professional staff of Ward 43. There are various petitions (deadline date 21/10/09) to try and help stop the closure of Ward 43 but I would very much appreciate it if we could count on your input and support on this very important matter.

### <u>No 14</u>

my daughter is a rheumatology patient of prof emery she suffers from lupus.in the last few years she had been very ill,had a long stint on and off intensive care.she has frequent admissions to LGI usually gets admitted as a lodger until a bed is available on ward 43 .i dread to think what will happen if ward 43 were to close.as the staff on other wards dont understand lupus.the worry of this has caused nichola and myself a lot of stress.ward 43 has been brilliant and we would be very relieved if it continues.good luck.

#### <u>No 15</u>

my mum works on ward 43, this has affected her a lot, and Im ashamed to even hear about this situation. hope eveything goes well, because this is purely out of order, I mean what are they going to make? offices? oh great there are serious injuries happening, and we're removing a ward that cares for that stuff, for what? small desk job items, and people in suits?!

#### <u>No 16</u>

I have suffered with psoriasis for 60 years – as a child, teenager, young woman, middle-aged and now a pensioner. I have received treatment many times on Ward 43.

I echo the words of Nicki Ellis (YEP, October 12). Ward 43 is my safety net and life line when times get unbearable and you lose the battle with home treatment.

Believe me, this problem makes you desperate and very unhappy.

To prevent in-patient treatment, I have, over the years tried other treatments prescribed by Dr Mark Goodfield – oral medication, injection form, also light treatment. When these are no longer suitable I have had the comfort of knowing Ward 43 was there for me, with all the understanding specialised staff.

They provide comfort and compassion to what this chronic complaint feels like, both emotionally and visibly.

While having treatment on Ward 43 you can relax and look forward to discharge and feeling normal for a while, until the next time treatment is needed.

Treatment on another ward would be unsuitable for both staff and patients. We need our precious Ward 43.

May I take this opportunity to thank all staff on Ward 43 for special care and understanding I have received over many years. Will someone please listen to us?

### <u>No 17</u>

Regarding the closure of Ward 43 at LGI, I also have been a patient since the late 70s.

I visit outpatients every three months, I am also a patient on the ward at least twice a year.

What I would like your readers to know is the whole staff, consultants, doctors and nurses are very clever and dedicated. Also many patients come from all over the country, not just Leeds.

Why don't we have a skin department? We have an ear department, an eye department, a throat department.

Regarding the children's ward. Don't get me wrong, children I love but in my opinion Ward 43 is not suitable for children. The rooms would have to be modernised and decorated. Children would feel isolated by themselves alone in a room. Surely children need to be accompanied not left on their own.

How about looking at wards to close like those for alcoholics and drug addicts who are not even bothered about cutting down on expenses. They get their treatment no matter what, so please readers, please support Ward 43.

### <u>No 18</u>

I've only just seen this and was too late to sign the petition unfortunately. Having worked on ward 43 a few years ago, I can attest to the fact that the care given on there was very specialist and it would be disastrous to just dump these patients on the medical wards!

### <u>No 19</u>

After being quite stable for a long time since hearing about the proposed closure of ward 43 my psoriasis is definitly starting to flare up. As there is nothing else worrying me at the present time and I know that stress and worry cause my skin to flare up it is the only thing I can think of.

### <u>No 20</u>

Having suffered from Acute Eczema from a very young age and having tried various treatments, I find that over the years a short stay as an In-patient with Intensive treatment has helped me to maintain my condition in a manageable state.

I am disgusted and very angry that this decision has been made without any prior consultation with Staff & Patients.

I have found that over the years the staff on Ward 43 have been very kind, considerate, Caring & understanding which has helped me amongst many others to feel relaxed within the hospital environment whilst undergoing intensive treatment.

The stays as an In-Patient can be lengthy and being away from your family & friends can lead to an anxious & stressful time which then hinders your recovery. All the doctor's and staff on Ward 43 helps to relieve these feelings of isolation & anxiety in a very patient, friendly & happy manner.

I know that the field on dermatology is not in the forefront of people's mind in this day and age. Also the fact the various conditions are not seen as life threatening but this a misconception as it has a more widespread impact on a person's welfare and mental health as well as a severe impact on their families.

#### <u>No 21</u>

You have our continuous support to fight against the closure of WARD 43 at the LGI, as patient / carer we need help and support from the medical and nursing staff in our time of needs at location with dedicated area and nursing staff.

#### <u>No 22</u>

I fully support keeping a specialist ward with trained staff after using the services at the L.G.I over the years on numerous occasions for treating psoriasis.

it it better to be in an environment where you know people arn't going to be shocked or will stare at you because everyone with skin complaints goes to the same area for treatment or to stay if need to be admitted. I have never had anything but helpful staff who go out of there way to make you feel comfortable. This is a difficult thing to do when you feel isolated and depressed because of your condition.

I really hope the move is reconsidered and doesn't happen, as it will obviously be to the detriment of the patients, who will suffer even more as a consequence.