

Why the RBH should keep the hydrotherapy pool open



THE CASE AGAINST CLOSURE



Why the Royal Berkshire Hospital Management should keep the hydrotherapy pool open

1. Background

Back in 1998 a campaign led by Arthritis Matters, the MS Society and many other groups representing disabled people and those with chronic pain conditions was launched, with the support of local MP Martin Salter, to ensure that the new consolidated hospital on the Royal Berkshire Hospital (RBH) site contained a hydrotherapy facility. There had been a pool at Battle Hospital since 1977 - **originally paid for by Friends of Reading Hospitals** - but unfortunately no provision for hydrotherapy was made in the relocation plans. The campaign was eventually successful and the brand new pool opened in 2005.

In mid-November 2016, the Royal Berkshire Hospital announced that it would be closing its hydrotherapy pool with effect from 31.03.2017. There has been **no consultation** with patients or, it appears, many RBH staff, including consultants whose patients use the pool, and the RBH's Governors were also only informed after the decision was made public.

The reasons given by RBH were that hydrotherapy is only used by a minority of physiotherapy patients, that the income of the pool does not meet expenditure, that expensive refurbishment of the pool is needed, and that the site could be used for other purposes. **No costings** have been prepared for decommissioning the pool and **no clear plans** are in place for an alternative use for the site.

The RBH management claim they want to use the space taken up by the hydrotherapy pool for some other, as yet undefined purpose. Yet there is **a far larger empty building** - the old wheelchair clinic, podiatry and former outpatients unit - situated directly opposite the relatively new hydrotherapy pool. Why is an important clinical service being sacrificed on grounds of 'space' when other buildings have been left empty for several years?

This is a crass mismanagement of public facilities and must be challenged.

In addition they claimed that hydrotherapy is an **add-on "complementary" treatment with little evidential basis or 'proven clinical need'**. In a most unfortunate television interview with BBC South Today, the head of therapies Jill Gillespie-Shahab said that it was just a **"feel good"** treatment, which has caused a great deal of anger and distress to patients, for which **the RBH has since apologised**.

A campaign group has been formed comprising representatives of the main patient groups and charities concerned with the medical conditions alleviated by hydrotherapy treatment. An online petition has been launched and together with signatures collected in Reading town centre and elsewhere over 3000 people have indicated their opposition to the planned closure of the pool. The campaign has **received strong support from Reading's two MPs** and many local Cllrs who are calling on the new RBH Chief Executive Steve McManus to reverse the decision of the previous management regime.

2. Use of the Hydrotherapy pool

There is evidence suggesting that the RBH management have been actively discouraging clinicians from continuing to refer patients for hydrotherapy and that local charities have been experiencing difficulties in both booking and paying for hydrotherapy sessions as the hospital seek to run down the facility. There has clearly been a failure to adequately maintain the pool despite this it remains a popular and important service for people with disabilities, patients suffering from chronic pain conditions and those recovering from surgery or in need of rehabilitation.

a) Hospital usage

On the Royal Berkshire Hospital's own website they emphasise that they have '*specialist and experienced physiotherapists, working in many different fields, aiming to deliver the best service possible*' to patients.

- The hydrotherapy section acknowledges the role of hydrotherapy in: the relief of pain and muscle spasm; increasing range of movement; improving both strength and control of muscles

It is therefore a valuable treatment in a range of conditions including:

rehabilitation after trauma or other post-operative care
orthopaedics
neurology/ stroke
rheumatology
developmental problems
paediatrics
elderly care (falls prevention)
cardiovascular
respiratory (e.g. COPD)
low back pain

- Hydrotherapy use is highlighted on the website for neurophysiology, including stroke rehabilitation, and rheumatology, and for ante-natal pelvic pain patients who are recommended to continue with hydrotherapy sessions throughout their pregnancy. The RBH website even promotes hydrotherapy as an important 'inpatient service' - <http://www.royalberkshire.nhs.uk/wards-and-services/Inpatient%20Therapies.htm>, and a recent press statement acknowledges the importance of hydrotherapy in helping the recovery of stroke victims - <http://www.royalberkshire.nhs.uk/neuro-rehab-at-rbft-goes-from-strength-to-strength.htm>

All the statements from the RBH regarding the closure maintain that hydrotherapy benefits only a small percentage (<5%) of patients requiring physiotherapy. This view is particularly puzzling and frustrating for the patients who have been told that it is not possible for them to have it, due to the high pressures on hydrotherapy availability.

b) Evening use by groups and charities

Whilst it may be possible to sign patients off as 'cured' following trauma rehabilitation, for many chronic diseases such as arthritis, Parkinson's disease, multiple sclerosis, fibromyalgia, (and many others) there is no 'cure'. The aim in these circumstances is to manage the condition to reduce pain and disability as much as possible, and maximise mobility, independence and wellbeing, thus helping patients to regain some control over their lives.

To help achieve this several charities now use the pool in the evenings and at weekends, paying for both physiotherapists and for the use of the pool, to enable as many of their members as possible to benefit from exercise in warm water. For many of these people this is the **only** time they are able to move freely and without pain; for those who are unable to do land-based physiotherapy, or for those for whom land-based exercise carries significant risk of further damage, hydrotherapy is the **only treatment** offering an opportunity to improve and maintain their mobility and general health.

Arthritis Matters subsidises 3 sessions for up to 7 people per session each week, and six 6-week courses per year, equivalent to a 6-week course for 120 people. This service originally began as one session per week, but was increased as demand rose; it continues to be oversubscribed.

3) Evidence of the benefits of hydrotherapy

The benefits of hydrotherapy have long been recognised and include:

- increased range of movement
- increased strength and stamina
- improved coordination and balance
- improved confidence in walking
- improved cardiovascular fitness
- reduced pain and muscle spasm
- regaining normal movement patterns

For babies and young children with a physical disability such as cerebral palsy, hydrotherapy is acknowledged as the best, sometimes the only effective, way to deliver physiotherapy in order to reduce the physical long term effects of the disability. This reduces the need for later surgery, cuts the costs of providing access to education, and lessens costs of social care and support, representing considerable financial savings to the state over a disabled person's lifetime.

The impact in terms of pain reduction cannot be understated. Pain tends to increase muscle tightness, which causes more pain and so on. The warmth and support of the water, plus the treatment, immediately helps muscles relax and breaks this vicious cycle.

a) Published medical papers

Contrary to the hospital's repeated statement that there is '*very little proven benefit to patients*', there is a wealth of published data testifying to the efficacy of hydrotherapy for a wide range of conditions (Doig, G, 2008; Geytenbeek, J., 2008; Alison, P., 2012). In the paper from the Australian Physiotherapy Association, Geytenbeek reported:

"Evidence was documented to support aquatic physiotherapy in the management of osteoarthritis, rheumatoid arthritis, joint arthroplasty, fibromyalgia, ankylosing spondylitis, back pain, upper- and lower-limb disorders, stroke, acquired brain injury, spinal cord injury, multiple sclerosis, Guillain Barré syndrome, post-polio syndrome, adult cerebral palsy, autism, Rett syndrome, maternal-perinatal health, post-menopausal health, osteopenia, obesity, lymphoedema, chronic obstructive pulmonary disease (COPD), heart failure and sport-specific rehabilitation."

The following are simply examples of the papers reporting the efficacy of hydrotherapy.

□ **Arthritic conditions**

- ◇ osteoarthritis: Silva *et al* (2008), Waller *et al* (2014), Łyp *et al* (2016)
- ◇ rheumatoid arthritis: Al-Qubaeissy *et al* (2013), Hall *et al* (1996)
- ◇ arthroplasty Rahmann, A.E.*et al* (2009), Valtonen,A. *et al* (2010), Giaquinto *et al* (2010 a,b)
- ◇ fibromyalgia e.g. McVeigh *et al* (2008),Thomas-Carus *et al* (2009), Silva *et al* (2012)
- ◇ ankylosing spondylitis - Dundar *et al*, (2014),Fernández García, R. *et al*. (2015)

□ **Neurological conditions**

- ◇ Parkinson's disease:Alves da Rocha *et al* (2015),Zotz,T.G.G. *et al* (2013),Vivas *et al* (2011)
- ◇ spinal muscular atrophy: Salem, Y & Gropack, S.J. (2010)
- ◇ MS : Salem, Y. *et al* (2011), Marinho-Buzelli *et al* (2015)
- ◇ cerebral palsy: Blohm, D. (2011)
- ◇ stroke: Marinho-Buzelli *et al* (2015), Noh *et al* (2008)

□ **Orthopaedic/Trauma:** Fappiano *et al* (2008), Watts *et al* (2007)

□ **COPD** (Wadell *et al* (2004), de Souto-Araujo *et al* (2012), McNamara *et al* (2013)

□ **Cardiac conditions:** Caminiti *et al* (2011), Adsett *et al* (2015)

b) Other hospitals using hydrotherapy

In its justification for the closure RBH cites the need for '*all NHS acute services..... be an appropriate service for secondary care*'. By implication, and indeed in some of its statements, it would appear that RBH does not feel that hydrotherapy is a useful treatment.

However, other NHS Foundation Trusts have published differing views on their websites:

◇ **Nuffield Orthopaedic Centre (NOC)**

As well as citing the benefits of increased range of joint movement, reduced pain, muscle strengthening and increased exercise tolerance, NOC note that '*clinical hydrotherapy is increasingly seen as an important therapy in the treatment of many conditions.*'

(www.ouh.nhs.uk/physiotherapy/outpatients/hydrotherapy.aspx)

◇ **Great Ormond Street Hospital for Children (GOSH)**

GOSH notes that it is '*an ideal exercise environment for weaker children, for example those who find walking and sitting challenging*', and that water is '*an excellent medium for rehabilitation after surgery, and most importantly ... an engaging form of exercise*'.

([www.gosh.nhs.uk/parents-and-visitors/clinical-support-services/physiotherapy/ services -we-provide/hydrotherapy](http://www.gosh.nhs.uk/parents-and-visitors/clinical-support-services/physiotherapy/services-we-provide/hydrotherapy))

◇ **Chelsea and Westminster Hospital**

Their website states that '*hydrotherapy is often used to help patients achieve their goals more quickly*'.

(www.chelwest.nhs.uk/services/therapy-services/aquatic-therapy-hydrotherapy)

◇ **Heart of England**

The section on hydrotherapy points out that '*people are able to perform activities in the water that they could not do outside it*'.

(<http://therapies.heartofengland.nhs.uk/physiotherapy/outpatient-physiotherapy/treatments/aquatic-therapyhydrotherapy/>)

◇ **Poole Hospital**

Poole similarly recognises the benefits '*when patients are unable to complete land-based exercises*', mentioning the '*Hydrotherapy is accepted as an integral part of rehabilitation*', with benefits including reduction of muscle spasm, functional activity re-activation and enhanced cardio-vascular fitness.

(www.poole.nhs.uk/a-z-services/t/therapy-services/therapy-outpatients/hydrotherapy-pool.aspx)

◇ **Plymouth Hospitals (at Derriford)**

The website states that '*The benefits of water based exercise have been well recognised...*' and lists the conditions can benefit, including '*low back pain, hypermobility syndrome, ankylosing spondylitis, fibromyalgia syndrome, multiple trauma, osteoarthritis, rheumatoid arthritis, postfracture/orthopaedic surgery.*'

(www.plymouthhospitals.nhs.uk/hydrotherapy)

c) Hydrotherapy as a NHS recommended treatment

The RBH's position that there is very '*little proven clinical benefit*' to patients, is at variance with the recommended use of hydrotherapy by NHS information sites and national charities.

□ **NHS Choices**

This website is the official website of the National Health Service, with over 48 million visits per month, providing a comprehensive health information service. Its section on Physiotherapy Techniques and Approaches mentions hydrotherapy, explaining that '*the water can help relax and support the muscles and joints, while providing resistance to help you gradually strengthen.*'

(www.nhs.uk/Conditions/Physiotherapy/Pages/How-does-it-work.aspx)

□ **Arthritis Research UK**

This national charity '*invests in breakthrough treatments, the best information and vital support for everyone affected by arthritis,*' and '*...has already uncovered breakthrough treatments.*' The section on hydrotherapy states that '*scientific studies have shown that hydrotherapy can improve strength and general fitness.... [and] is beneficial regardless of how many joints are affected.*' They provide a separate leaflet describing the treatment and its benefits.

(www.arthritisresearchuk.org/arthritis-information/therapies/hydrotherapy/how-effective-is-it.aspx)

□ **NASS (National Ankylosing Spondylitis Society)**

The NASS booklet '*Looking Ahead: Best practice for the care of people with ankylosing spondylitis*' is supported by The British Society for Rheumatology and the Chartered Society of Physiotherapy, and endorsed by (BHPR) British Health Professionals in Rheumatology. Its discussion on the problem of inequalities in access to optimum care, concludes with the recommended action the '*All patients should have access to specialist physiotherapy, including hydrotherapy, and hospital or community based exercise programmes.*'

(www.nass.co.uk/download/515d4a83bbbfd/)

□ **BHPR (British Health Professionals in Rheumatology)**

In the Guidelines for Recognising Inflammatory Back Pain hydrotherapy is included as part of the secondary care pathway for ankylosing spondylitis.

(http://www.rheumatology.org.uk/includes/documents/cm_docs/2012/r/1_recognisinginflammatorybackpain.pdf)

□ **Muscular Dystrophy UK**

There is considerable amount of evidence for the benefits of hydrotherapy contained in the research document by the Muscular Dystrophy Society

(<http://www.muscular dystrophyuk.org/app/uploads/2015/12/Access-to-hydrotherapy.pdf>)

d) Veterinary use of hydrotherapy

It is ironic to say the least that hydrotherapy is **more readily available for dogs and horses in Berkshire than it is for humans**. A recent survey shows that there are no fewer than 8 hydro facilities for dogs, yet only 1 NHS pool available for humans.

4) Arguments Against Closure

a) Financial

- The financial case given is not compelling given that the pool covers all but 17% of its expenditure from income and that the costs of refurbishment are only £50,000, a sum which local charities feel would not be hard to raise from various stakeholders.
- Contrary to the RBH claims, hydrotherapy is not just a complementary therapy, for some patients it is the only effective treatment. For example, hydrotherapy is generally tolerated much better than land-based exercise by young children and those with learning difficulties, and compliance is therefore better, leading to more favourable outcomes. For patients who are unable to do land-based exercise, hydrotherapy provides the only means to effective rehabilitation, for example by avoiding secondary complications which would require additional treatment. Therefore any reduction in the service provided to these groups has the potential to disproportionately affect treatment outcomes for them, and increase the cost to the NHS in the longer term.
- There is also evidence that RBH has not been maximising income from the pool, by failing to invoice groups hiring it, and ignoring new requests for private hire. For example:
 - ◇ Arthritis Matters started paying £60 per evening for use of the pool in March 2015, but by the end of the 2015-16 financial year RBH had only invoiced for 63% of the sessions. In 2016-17 that figure stands at 21% so far. In total Arthritis Matters has not been invoiced for 55% of the sessions, representing a sum of £1800.
- Other NHS hospitals with hydrotherapy pools maximise their use by making them available for public hire during the day as well as the evening, for example:
 - ◇ At the Nuffield Orthopaedic Centre (NOC) '*Hydrotherapy is increasingly seen as an important therapy in the treatment of many conditions..... patients who are medically fit and have already attended a course of hydrotherapy can continue with a self-management programme*'. A course consists six of sessions, costing £3 per session.
(www.ouh.nhs.uk/physiotherapy/outpatients/hydrotherapy.aspx)
 - ◇ Similarly Guy's and St Thomas' Hospital NHS Foundation Trust promote 'Self-hydrotherapy' for people who have already had hydrotherapy, '*giving them independent management of their condition*'.
(www.guysandstthomas.nhs.uk/resources/patient-information/.../self-hydrotherapy.pdf)
 - ◇ Poole Hospital NHS Foundation Trust offers group sessions, and highlights that hydrotherapy benefits patients who are unable to complete land-based exercises.
(www.poole.nhs.uk/a-z-services/t/therapy-services/therapy-outpatients/hydrotherapy-pool.aspx)

- ◇ There is no doubt that the hydrotherapy pool does need refurbishment. However, following a Freedom of Information Request from Arthritis Matters, the RBH admitted that they had made no attempt to identify any alternative source of funding.
- ◇ A brief look at the monies raised by both the RBH League of Friends and the Royal Berks Charity reveals a whole host of projects, including refurbishments, that have been funded through donations and contributions. These include the refurbishment of orthopaedic waiting rooms, the purchase of ultra sound scanners and the upgrade of maternity facilities. By failing to engage with patients groups the RBH management missed the opportunity to take advantage of other sources of funding.

The RBH did not consult with any of the charities or other users prior to its decision to close the pool, thereby precluding any opportunity to find ways of raising income levels.

The hydrotherapy pool was originally funded by charitable contributions – the RBH decision to close the pool without any consultation could impact on contributions for future projects.

b) Failure to construct a business plan

In the letters informing users of the pool closure RBH cited financial reasons for their decision.

- ◇ In their response to a Freedom of Information request they acknowledged that they do not yet have definite plans for the future of the area, except '*very likely as part of a set of changes needed to increase the bed capacity*'.
- ◇ As a result they have no information about the costs of the refurbishment of the area for any future use.
- ◇ They have also stated that they have not calculated, nor it seems investigated, the costs of decommissioning the pool area, with all its pumps, and water purification units.
- ◇ In correspondence with Alok Sharma MP, the RBH has been unable to provide even the most basic information as to the costs of decommissioning the pool or what uses they have in mind for this space.

c) Procedural concerns

● Failure of due process

There has been a clear failure by the RBH to follow due process which in itself is sufficient to warrant the suspension of the planned closure. It appears from correspondence with our MPs that the closure decision was made without the involvement of the Board of Directors on the spurious reason that the sums involved were below the £750,000 threshold - in reality any major clinical decision should have been subject to full scrutiny and analysis. There is no doubt whatsoever that the Council of Governors was deliberately bypassed, despite their statutory responsibility to represent the interests of the public in these matters, and that no attempts were made to consult with patients or user groups.

◇ Role of the Governors at the RBH

The Governors role is, to publicly hold the Non-Executive Directors to account and for the services the Trust provides. Also, to represent, by law, the interests of the Trust Membership and the public. In the absence of any prior consultation the Governors have been unable to exercise effectively their duties.

The law is also specific in that, the Trust Board of Directors must have regard to the view of the Council of Governors when preparing the Trust's forward plan. In the absence of any consultation Governors have not been able to canvass the views of the Members and the public to feed back their views to the Board of Directors before the decision to close the Hydrotherapy Pool was made.

Royal Berkshire Hospital Trust Governors were informed of the closure of the Hydrotherapy Pool, with effect from 31st March 2017, by public blog on the 17th November 2016. This was written by the outgoing CEO, Jean O'Callaghan.

The rationale offered was simply that, '*The current financial climate demands that all NHS acute services be linked to a clearly definable clinical strategy and outcome, be cost effective either with appropriate funding from commissioners or self-supporting income, and be an appropriate service for secondary care*'. Prior to the announcement the Trust Governors were not consulted.

Failure to consult with service users

The NHS Act (2006) requires consultation with service users whenever a significant change in service is proposed.

The withdrawal of hydrotherapy at the RBH is a significant change for paediatric patients because it forms a large part of the physiotherapy service provided to children under five through Dingley Specialist Children's Centre.

Patients with severe neurological conditions are offered fortnightly physiotherapy sessions and weekly hydrotherapy sessions. Thus the removal of hydrotherapy would result in 67% less physiotherapy treatment time for paediatric patients.

Moreover, while it may be true that only a small proportion of RBH physiotherapy patients also access hydrotherapy, this particular fact provides no information about the effectiveness of the therapy for those patients or how it meets their needs. A treatment used by only a small number of patients may nonetheless be needed to ensure adequate healthcare for them.

Despite RBH attempting to play down the importance of hydrotherapy, closure of the pool is clearly a significant change for paediatric patients, and indeed may well be for other groups of patients as well.

Failure to examine the impact of closure on protected strands, particularly disabled people.

As a Public Sector service, RBH has a duty under the Equality Act 2014 to consider the impact of changes on protected strands. In failing to use the term '*disabled people*' and instead using '*people with chronic conditions*', the Trust has overlooked this requirement. Indeed, disabled people, including those recently hospitalised because of strokes and other neurological conditions, would be particularly adversely affected.

d) Misinformation and trust

Running costs of hydrotherapy pool

When users were informed of the closure of the pool, running costs were listed as £60,290. However, when a breakdown of those running costs was included in a Freedom of Information Request the figure quoted rose significantly to £95,600 - £105,600 - which figure do we believe?

□ **Staff ratios**

In its letter to users, RBH states that hydrotherapy had high therapist to patient ratios, quoting 'up to 3:1'. However, the staffing levels described in the reply to the Freedom of Information request consist of only two physiotherapists

□ **Under-use of the pool.**

RBH have told our MPs that the pool is under-used yet we know that they have been not only discouraging clinicians from referring patients but have also failed to maintain the facility to the standard that would allow regular usage. In addition it is proving increasingly difficult for charities to book and pay for evening sessions.

The MS Society state: *'We pay a lot for both the pool and the physiotherapists. We are billed for the pool direct from RBH. But the billing is sporadic and often wrong. The pool is also closed quite often because it too cold. We have found it very difficult to contact anyone who is in charge of both the financing and the running of the pool. Most other NHS hydrotherapy pools have a business and marketing plan. Thus making a profit. Does the RBH ?*

This is a very valuable asset to both our hospital and community.'

Peapods - a local charity supporting families of physically disabled children said:

"Despite several requests we have been unable to engage with the RBH management to secure a hire agreement for members' children needing hydrotherapy. Not only is this a denial of much needed therapy for disabled children but a missed opportunity for the hospital to generate additional income."

□ **Conflicting claims**

Despite the overwhelming medical evidence, not least on their own website, the RBH persist in claiming that there is no 'proven clinical benefit for hydrotherapy which begs the question as to why they have been offering the service for decades!

□ **Usage of the pool**

Mention has already been made above concerning the confused information given to patients about the usage of the pool and the availability of appointments - a situation which is frustrating to patients who desperately need the treatment, but which seriously erodes the trust that patients have in the hospital and its staff.

Without truth and transparency there can be no trust in the Trust.

5) Support for the Hydrotherapy Pool Campaign

- There has been strong support from the public, NHS professionals and local politicians of all parties for the hydrotherapy pool campaign. Over 3,000 people have signed the protest petition so far and the numbers are growing daily. There has been considerable interest from the local media including Reading Chronicle, Get Reading, BBC South, ITV Meridian and BBC Radio Berkshire.

http://www.readingchronicle.co.uk/news/14929332.Hospital_therapy_pool_set_to_close/

- In his excellent letter from to the new hospital chief executive Steve McManus Reading West MP Alok Sharma said:
"It is clear to me that the hospital needs to reconsider its decision to close this vital facility which provides real benefits for patients across the local area. I want the new Chief Executive to have a look at this decision with a fresh pair of eyes and I am looking forward to meeting him, together with patient and charity groups, so he understands directly from the community he hopes to serve just how important this facility is."
<http://www.aloksharma.co.uk/content/hydrotherapy-pool-closure>
- Reading East MP Rob Wilson has also met with the RBH management to register his opposition to the closure and has posted statements on his website and Facebook page including this recent update:
"Essentially, I think that the Trust has handled this situation poorly. It should now seek to engage immediately with campaigners and service-users and back away from its current position by undertaking a re-evaluation of the closure plan. With a new Chief Executive, this is the perfect opportunity to reassess."
<https://www.robwilsonmp.com/news/rob-questions-rbh-over-poorly-handled-proposal-close-hydrotherapy-pool>
- Both Labour and Conservative Councillors have been strong supporters of the campaign and have attended petitioning sessions in Broad St. and Reading Borough Council is to pass a resolution at the Council meeting later this month condemning the closure.
- Graeme Hoskin - Reading's Lead Councillor for Health and Well Being Panel:
"I oppose the loss of a hydrotherapy pool for the residents of Reading and neighbouring areas. I have heard a great deal first hand about the positive benefits of hydrotherapy for the health and wellbeing of patients, particularly those with long-term conditions. I am concerned that closure of this pool will lead to much greater costs to the NHS through poorer health outcomes than any short term saving for the hospital."
- Cllr Rachel Eden - Reading's Lead Councillor for Adult Social Care:
"I'm opposed to this closure and I'm particularly concerned that the plan to close the pool was made without consultation with people who use the pool, user groups, partners, NHS commissioners or local councils, or even the hospitals own Board of Directors or Council of Governors. I think it's very likely that that the human and financial impact caused by the closure of this would far outweigh any short term savings and that the hospital should pause this idea and move ot full public consultation as well as a proper assessment of the impact."
- Cllr Sarah Hacker - Former Mayor of Reading:
"If the hydrotherapy pool at the RBH is closed the result will be felt across Reading and Berkshire. I recently collected signatures for the petition urging that the pool be kept open. Speaking to people it was apparent that not only did people using the pool feel the benefits of hydrotherapy, but their friends and relatives witnessed the relief it gave. The pool is used to treat and manage a wide range of conditions and I know the fibromyalgia support group in Reading is very concerned. The closure of this pool could leave people facing an uncertain and more pain filled future. It must remain open."
- A number of RBH governors have been active in the campaign and intend to challenge the closure plans at the Council of Governors meeting on January 25th.
<http://www.royalberkshire.nhs.uk/meet-your-governors.htm>

The campaign has been sent a number of testimonials from patients, physiotherapists, GPs, clinicians and other NHS professionals on the proven clinical value of hydrotherapy.

6) Summary and way forward

The decision to close the hydrotherapy pool at the RBH is fundamentally flawed on many levels. The absence of a business case or any coherent costings is bad enough but the failure to involve either the Hospital's Board of Directors or the Council of Governors constitutes **a serious breach of due process** and is reason enough to immediately halt the closure plans.

Furthermore, the statements made in justification of the closure deriding the value of hydrotherapy **are at odds with readily available medical evidence**, testimonials from GPs and clinicians, patients other hospitals and clinicians, the advice from NHS Choices and even postings on the **hospital's own website**.

Hydrotherapy has a long history of delivering proven clinical benefits. It was actually first used by the ancient Greeks after battles to get soldiers fit to fight, and back on to the battle field.

Given the shortage of NHS hydrotherapy facilities in the area the consequences of the removal of this service **are particularly serious for a whole range of disabled people**, and those with chronic pain conditions including: those recovering from strokes or neuro-surgery, paediatric services such as those provided through the Dingley Specialist Children's Centre and for those over school age, conditions such as arthritis, fibromyalgia, muscular dystrophy, Parkinson's, ankylosing spondylitis, as well degenerative diseases such as Multiple Sclerosis. There are a range of medical conditions for which hydrotherapy is the only pain relieving treatment. **To remove this option for patients would cause considerable pain and hardship and undoubtedly result in more admissions and more pressure on hospital bed spaces.**

It is undoubtedly the case that hydrotherapy prevents many patients from having to attend hospital and therefore closure of the pool would more than likely end up costing the NHS far more than the current administration are looking to save. **With a rising elderly population** the demand for hydrotherapy is only going to grow which is why it is **so short sighted** to be suggesting any form of closure.

Finally, it is interesting to note that the hydrotherapy pool at Orpington Hospital was reopened in December 2016, with the help of the Friends of Orpington Hospital. The hospital's Managing Director stated: *'The new pool will help improve the experience of our neurorehabilitation patients at an important time in their recovery, and hiring the pool to local community groups will **create a valuable income for the Trust that can be reinvested into patient care.***

We urge our new RBH Chief Executive and the Council of Governors to immediately suspend the closure proposals and begin meaningful consultations with patients, clinicians, hospital governors, public representatives and user groups on the best way to deliver a cost efficient hydrotherapy service for the future.

7) Appendix and testimonials

Testimonials

"My patient had 6 weeks of hydrotherapy after Lyme disease left her with aching joints. It was so beneficial she is now back to work".

South Reading GP

I fully support your campaign to stop the closure of the hydrotherapy pool at the Royal Berkshire Hospital. I told you how it was having hydrotherapy after a complicated ankle fracture that allowed my sister to recover and get back to work (she is a teacher so her absence had a huge impact on lots of children). She said getting into the pool the first time and being able to walk without crutches and little pain gave her such a psychological boost, up until then her land based physio and exercises had been very painful and she was aware it was going to take many months to recover. She was able to join a weekly ankle group and had access at certain times to the pool for her to continue the physio on her own.

This is once again an example of closing a facility for a short term gain to hospital finances but not seeing the bigger picture and impact on individuals.

Let's hope sense prevails and the hydrotherapy pool is not closed.

Dr Julie Newsham
Senior Partner Western Elms Surgery

'I was shocked and disappointed to hear that there is planned closure of the Hydrotherapy Pool at the Royal Berkshire Hospital. As a Physiotherapist who had spent 9 years working in the NHS and 6 years working privately I'm stunned at the decision to close the hydrotherapy pool. This decision has obviously not taken into consideration the enormous benefits that the hydro pool provides to a wide variety of people in the local community..... The benefits of hydrotherapy to Neurological, Paediatric, Musculoskeletal, Elderly and Chronic pain patients are huge. Removing the use of hydrotherapy to these patients would put limits on the specificity of their treatment and may delay their rehabilitation. It is also likely to cause unnecessary worsening of chronic conditions in long term pool user. The pool allows these patients to perform activities they are unable to perform on dry land. ... People with weight bearing restrictions following injury, pain or surgery can use the water to enhance recovery by increasing range or movement and maintaining muscle strength. This is less effective and more painful when working on land, and a lot of more complex patients struggle to achieve these benefits on land. I sincerely hope..... that you reconsider this decision which would be life changing, in a negative way, for a huge amount of people in the local area.'

Physiotherapist Victoria Mynott

'I am a Tai Chi instructor and do sessions with a charity called Arthritis Matters. They are a small local charity helping those who are disadvantaged with Arthritis and other mobility problems. They offer various support mechanisms and, crucially, myself with Tai Chi and particularly the Hydro Pool. Both these activities help on a physical and psychological level and give people back control over their bodies and circumstances. With this help they are saving visits to their GP's and the hospital.'

Tai Chi tutor, Pauline Allen

'I have run our M.S Hydrotherapy group since 1998. Both at Battle Hospital and RBH. We have 35 members on our list. We run two sessions a week with six members in each session. The sessions are in six week blocks. We were all very upset at the comments made by the RBH spokeswoman that hydrotherapy is a 'complementary therapy.'

Our members use the pool as way of doing physiotherapy which they are unable to do on dry land. This is because water takes your weight and the heat (it must be at least 34 degrees) relaxes your muscles. We have members in the pool unable to walk unaided but after a few minutes in the pool are walking and doing physiotherapy.

Most of these members are rarely in patients with their MS. Surely the pool must be saving the hospital in both appointments and beds?

We have been unable to find a pool warm enough in Reading despite claims that there are numerous other pools available. The nearest is Oxford or Newbury. Too far for most of us. Without this pool our members will suffer.

Whilst I was collecting signatures in Broad St a young man came up to me and said the hydrotherapy pool had saved his leg. He had a very bad accident breaking his leg in many places. He was unable to move his leg or weight bear until one of the physios got him in the pool. After a few sessions he was able to move it again. His consultant was amazed as amputation had been mentioned. He is now back at work and supporting his family and so grateful and couldn't understand why it is to be closed.'

Diane Goodlock - MS Society

"My youngest son is starting hydrotherapy next week and he's only two years old so this could be 3 years of therapy cruelly taken away from him. He has been referred for hydrotherapy sessions on the basis of his tightening leg muscles by the physiotherapists at the Dingley Centre in Craven Rd. My eldest son had hydro sessions at the pool and he is now in Addington School. He has a hereditary spastic paraplegia type 10 and with my youngest son's symptoms it is highly likely his own genetic tests will come back with this condition.

I really hope they reconsider as hydrotherapy is the best form of therapy at present for my son and he will miss out on essential treatment if the pool closes."

Samantha Bowler - Concerned Parent

'I was so upset to hear that the Royal Berkshire Hospital hydrotherapy pool is earmarked for closure at the end of March. I have been using the pool since 2007, both as a post-op outpatient, and as a weekly therapy through the charity Arthritis Matters. I am a long term rheumatoid arthritis sufferer and as a result I am unable to take normal exercise such as running, walking, sports, gym work because my joints are too badly damaged and deformed, but the one piece of exercise I am able to do is working on muscle strength, balance, joint movement and cardio work in the warm water pool. The pain from my condition is greatly reduced whilst in the water. The only time my heart gets a good workout, and I get out of breath, is after I have done the warm up exercises like jogging, star jumps, hopping etc in the pool. It actually makes me feel 'normal', as I am unable to do anything like this on land. ...

I have also found great benefit from the specialised physio work in the pool after both my knee replacements, when I had problems with bending and straightening the new joints. The specialist knee physiotherapist recommended hydro after both operations, and it certainly helped me get back on my feet.

I am pleading with you to reconsider the decision to close the hydrotherapy pool,...hydrotherapy treatment ... is vital for both my condition and for providing me with some relief from the chronic pain of rheumatoid arthritis'

Patient HG

I was devastated to hear that the Royal Berks Hospital had taken a decision to close the hydrotherapy pool in March.

I have had rheumatoid arthritis for 40 years, and as my condition has gradually worsened I've increasingly relied on the hydrotherapy pool to maintain my muscle strength and joint flexibility, and so have been able to keep mobile and independent despite needing a hip replacement about 20 years ago. With the help of hydrotherapy at Battle Hospital, I was able to rehabilitate and regain my independence very quickly after that operation.

I recently needed a hip revision in 2015, which unfortunately had several complications due to the effects of the disease. Because of the increasing difficulties in accessing any hydrotherapy at the Royal Berks and its erratic provision, in desperation I have been referred back to the Nuffield Orthopaedic Hospital for hydrotherapy. I am now having to make the tiring journey to Oxford, made all the more difficult because I now have two back injuries as a result of the delays in obtaining suitable hydrotherapy, similar to that which I had 20 years ago.

I am really concerned that I will be only the first of many who will suffer if the hydro pool is closed. Not only will this be painful and disruptive for individual patients, it will also result in increased referrals, and potentially very expensive extra treatment.

Hydrotherapy is such a magnificent therapy - please, I urge you to reconsider this decision which will have such wide-reaching consequences for so many people.

Patient KS

References

- Al-Qubaeissy, K.Y., Fatoye, F.A., Goodwin, P.C. & Yohannes, A.M. (2013) The effectiveness of hydrotherapy in the management of rheumatoid arthritis: a systematic review.
Musculoskeletal Care **11(1)**: 3-18
- Alves da Rocha, P., McClelland, J., & Morris, M.E. (2015) Complementary physical therapies for movement disorders in Parkinson's Disease: systematic review.
Eur. J. Phys. Rehabil. **15**: 693-704
- Blohm, D. (2011) Effectiveness of aquatic interventions for children with cerebral palsy: systematic review of the current literature.
J. Aquat. Phys. Ther. **19(1)**: 19-29
- Caminiti, G., Volterrani, M., Marazzi, G., Cerrito, A., Sposato, B. & Arisi, A. (2011) Hydrotherapy added to endurance training versus endurance training alone in elderly patients with chronic heart failure: a randomized pilot study.
Int. J. Cardiol. **148(2)**: 199-203
- Doig, G. (2008) Evidence-based systematic review of the effectiveness of hydrotherapy in acute and chronic medical conditions. EvidenceBased.net, Sydney, NSW, Australia. 38p.
- Dundar, U., Solak, O., Demirdal, U.S., Subasi, V. & Evcik, D. (2014) Effect of aquatic exercise on ankylosing spondylitis: a randomized controlled trial.
Rheumatol. Int. **34(11)**: 1505-11
- Fappiano, M. & Gangaway, J.M.K. (2008) Aquatic physical therapy improves joint mobility, strength and edema in lower extremity orthopaedic injuries.
J. Aquat. Phys. Ther. **16(1)**: 10-15
- Fernández García, R., Sánchez Sánchez Lde C., López Rodríguez Mdel M. & Sánchez Granados, G. (2015) [Effects of an exercise and relaxation aquatic program in patients with spondyloarthritis: a randomized trial.]
Med. Clin. (Barc). **145(9)**: 380-4
- Geytenbeek, J. (2008) Aquatic Physiotherapy Evidence-based Guide. Australian Physiotherapy Association. 15p.
- Giaquinto, S., Ciotola, E., Dall'armi, V. & Margutti, F (2010a) Hydrotherapy after total hip arthroplasty: a follow-up study.
Arch. Gerontol.Geriat. **50(1)**: 92-5
- Giaquinto, S., Ciotola, E., Dall'armi, V. & Margutti, F (2010b) Hydrotherapy after total knee arthroplasty: a follow-up study.
Arch. Gerontol.Geriat. **51(1)**:59-63A randomized and controlled trial of hydrotherapy in rheumatoid arthritis.
Arthritis Care Res. **9(3)**: 206-15
- Hall, J., Skevington, S.M., Maddison, P.J. & Chapman, K (1996)
- Łyp, M., Kaczor, R., Cabak, A., Piotr, T., Włostowska, E., Stanisławska, I., Szypuła & Tomaszewski, W. (2016) A water rehabilitation program in patients with hip osteoarthritis before and after total hip replacement.
Med. Sci. Monit. **22**: 2635-42
- Marinho-Buzelli, A.R., Bonnyman, A.M. & Verrier, M.C. (2014) The effects of aquatic therapy on mobility of individuals with neurological diseases: a systematic review.
Clin. Rehabil. **29(8)**: 741-51
- McNamara, R.J., McKeough, Z.I., McKenzie, D.K. & Alison, J.A. (2013) Water-based exercise in COPD with physical comorbidities: a randomised controlled trial.
Eur. Respir. J. **41(6)**: 1284-91
- McVeigh, J.G., McGaughey, H., Hall, M. & Kane, P. (2008) The effectiveness of hydrotherapy in the management of fibromyalgia syndrome: a systematic review.
Rheumatol. Int. **29(2)**: 119-30
- Noh, D.K., Lim, J.Y., Shin, H.I. & Palik, N.J. (2008) The effect of aquatic therapy on postural balance and muscle strength in stroke survivors - a randomized controlled pilot trial.
Clin. Rehabil. **22(10-11)**: 966-76
- Price, A. (2012) Evidence of the effectiveness of hydrotherapy.
Lincolnshire Knowledge & Resource Service, NHS Lincolnshire, Lincoln.

- Rahmann, A.E., Brauer, S.G. & Nitz, J.C. (2009) A specific inpatient aquatic physiotherapy program improves strength after total hip or knee replacement surgery: a randomized controlled trial.
Arch. Phys. Med. Rehabil. Arch. Phys. Med. Rehabil. **90(5)**: 745-55
- Salem, Y & Gropack, S.J. (2010) Aquatic therapy for a child with type III spinal muscular atrophy: a case report.
Phys. Occup. Ther. Paediatr. **30(4)**: 313-24
- Salem, Y., Scott, A.H., Karpatkin, H., Haller, L, Kaminsky, E., Weisbrot, R. & Spatz, E. (2011) Community-based group aquatic programme for individuals with multiple sclerosis: a pilot study.
Disabil. Rehabil. **33(9)** 720-8
- Pessanha, A.P.C., Oliveira, L.M., Myamoto, S., Jones, A. & Natour, J. (2008) Hydrotherapy versus conventional land-based exercise for the management of patients with osteoarthritis of the knee: a randomized clinical trial.
Phys. Ther. **88(1)**: 12-21
- Silva, K.M., Tucano, S.J., Kümpei, C., Castro, A.A. & Porto, E.F. (2012) Effect of hydrotherapy on quality of life, functional capacity and sleep quality in patients with fibromyalgia.
Rev. Bras. Rheumatol. **52(6)**: 851-7
- de Souto Araujo, Z.T., de Miranda Silva Noqueira P.A., Cabral, E.E., de Paula Dos Santos, L., da Silva, I.S. & Ferreira, G.M. (2012) Effectiveness of low-intensity aquatic exercise on COPD: a randomized clinical trial.
Respir. Med. **106(11)**: 1535-43
- Tomas-Carus, T., Gusi, N., Häkkinen, A., Häkkinen, K., Raimundo, A. & Ortega-Alonso, A. (2009) improvements of muscle strength predicted benefits in HRQOL and postural balance in women with fibromyalgia: an 8-month randomized controlled trial.
Rheumatology **48** 1147-51
- Valtonen, A., Poyhonen, T., Sipilä, S. & Heinonen, A. (2010) Effects of aquatic resistance training on mobility limitation and lower-limb impairments after knee replacement.
Arch. Phys. Med. Rehabil. **91(6)**: 833-9
- Vivas, J., Arias, P. & Cudeiro, J. (2011) Aquatic therapy versus conventional land-based therapy for Parkinson's disease: an open-label pilot study.
Arch. Phys. Med. Rehabil. **92(8)**: 1202-10
- Wadell, K., Sundelin, G., & Henriksson-Larsen, R. (2004) High intensity physical group training in water - an effective training modality for patients with COPD.
Respir. Med. **98(5)**: 426-38
- Watts, K.E. & Gangaway, J.M.K. (2007) Evidence-based treatment of aquatic therapy in the rehabilitation of upper-extremity orthopaedic injuries.
J. Aquat. Phys. Ther. **15(1)**: 19-26
- Zotz, T.G.G., Souza, E.A., Israel, V.L. & Loureiro, A.P.C. (2013) Aquatic physical therapy for Parkinson's disease.
Adv. Parkinson's Dis. **2(4)**: 102-07

Thank you for your interest and concern



Above – campaigners from Arthritis Matters, REACH, MS Society, Berks DPAC, Berkshire MS Therapy Centre, Peapods, Fibromyalgia Action and Reading Families Forum collecting signatures in Broad St.

Below – The empty hospital building right next door to the Hydrotherapy Pool demonstrates the complete failure of the RBH management to consider other options to closure.

