

**P-05-914 Equal Access to Health Care for the Disabled, Correspondence –
Petitioner to Committee, 02.07.20**

To Whom It may Concern,

Thank you for forwarding Mr Gethings response to me about the availability of wide adjustable treatment beds and hoists in GP surgeries. I feel that the recommendation that bariatric treatment beds being available with a changing places toileting facility is a great idea.

However, I would be interested to know whether this facility would allow for a hoist to be made available? It is the lack of hoisting equipment and lack of a treatment bed that could be raised and lowered according to the needs of each disabled person that is important.

I hoped to hear Mr Gething mention the hoist and the ability to raise and lower the beds more specifically. These issues are life saving and can not be under estimated in terms of their importance.

The width of a bariatric treatment bed successfully allows for disabled people with paralysis to roll or be rolled as part of their examination and that is covered by Mr Gething's response. My question is, are mobility issues being catered for in the function of the bed and in the availability of hoisting equipment?

I am disappointed to think that this facility might only be kept for disabled and bariatric use too because I feel it could be utilised more flexibly. The facilities could be used for able bodied people most of the time and then switched to disabled or bariatric use as and when needed. In my opinion, the rigidity of this provision causes more problems for the GP surgeries than it solves but I'm open to being wrong about that.

I feel that anything other than such flexibility will cause there to be resistance in taking on such measures due to lack of space and money. I hope you will find my reflections helpful.

Kind Regards,

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