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From: Andrew Hamilton

Date: 20 October 2004

Angela Smith

**ACUTE SERVICES IN THE SOUTH WEST**

**Issue:** Concerns are emerging over key acute services in the South West. Your approval is sought to the Trust proceeding immediately with a risk assessment to assess the seriousness of the current situation and what actions need to be taken.

**Timescale:** Immediate – subject to your approval we would intend meeting with the Trust Chair and Chief Executive this week or early next week to secure action.

**Presentational Issues:** Given the sensitivities in the area over acute services, it is possible that local press and political interest may be stimulated by any action that might be seen as a precursor for the reconfiguration of services in the South West.

**Recommendation:** That you give approval to the Trust proceeding with an independent risk assessment.

**Background**

1. In February 2003, Des Browne announced that a new acute hospital for the South West would be developed on a location to the north of Enniskillen. The

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Tyrone County Hospital – which currently provides a range of acute services including 24-hour A&E, emergency medicine, emergency surgery and critical care – would be developed as a Local Hospital.

2. Our policy with regard to services affected by the changes announced by Mr Browne has been to sustain them until appropriate alternative provision is available elsewhere. This reflects Minister's stated position in relation to the rationalisation of services at Omagh –

“I will do everything I can to ensure that no acute services are withdrawn from Tyrone County Hospital – or any other hospital – until appropriate provision is available elsewhere.”

(Press Release issued 4 March 2004 following meeting with West Tyrone MLA's)

3. In practice, given the very difficult community issues which emerge around proposed change to services, our policy has generally been interpreted as a commitment to maintain the status quo until the new build associated with Developing Better Services is in place. In some specific cases however change has been implemented where patient safety issues have been such as to warrant an acceleration of proposed changes (eg withdrawal of emergency surgery services at Downpatrick).
4. For Sperrin Lakeland Trust the maintenance of acute services on its two sites at Enniskillen and Omagh until the new hospital is built presents a number of significant challenges, not least in relation to medical staffing, with resources in key specialties stretched very thinly.
5. At present the Trust has no plans for the transfer of any of the acute services currently provided at Omagh to Enniskillen prior to the opening of the new SW hospital. The Trust is trying to maintain all existing acute services on the two



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sites during the interim period. This has been the position for the last number of years. Indeed, with the co-operation of the WHSSB considerable investment has been made to sustain the current profile of services. This is entirely consistent with our policy and Minister's stated position.

### Recent Developments

6. During the course of this year the provision of a safe anaesthetic service, which is fundamental to surgical A&E and ICU services, has posed particular difficulties. Currently the Tyrone County Hospital has a complement of 5 WTE consultant anaesthetic posts, but two are currently vacant and we understand one of the remaining consultants has been offered a position at a neighbouring Trust and is likely to accept that position. Locum cover has ameliorated the position, but providing adequate cover out of hours remains particularly difficult. The Trust is managing this risk, on a day to day basis, but at considerable expense. On call rotas are also stretched at Erne Hospital and although they are more robust than at Tyrone County they are by no means ideal.
7. In addition there are current vulnerabilities associated with paediatric services at the Erne, largely because of staffing difficulties in nursing. [REDACTED]
8. Minister will also be very much aware of the Lucy Crawford case and the perceptions that that case has raised with reference to the governance arrangements in the Trust. [REDACTED]  
[REDACTED]. It is likely that this will raise clinical governance issues about the ability of smaller acute hospitals to provide the full range of support for high risk cases. These and the ongoing difficulties associated with

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anaesthetic cover and to a lesser degree surgical and paediatric services have caused an increased nervousness in the local area about the Trust's ability to sustain safe services until the new hospital opens.

9. It should be emphasised that no explicit or formal statements have been made with regard to the safety of current services.. Informally the Western Board has made its views known to us – fearing the unplanned collapse of services they would favour the immediate implementation of a plan to consolidate inpatient services on the Erne site, with a compensatory investment in day case work at Omagh – and some consultants have alluded to some concerns.
10. The Trust for its part believes the concerns are overstated. It would point to a track record in addressing clinical governance issues and various independent assessments confirm that governance arrangements at Sperrin Lakeland are no less effective than at similar Trusts elsewhere.
11. To assuage concerns however the Trust agreed with the WHSSB to take forward a wide-ranging review of its clinical governance arrangements under the direction of an independent chairperson. Terms of reference were agreed in the summer. One of the first phases of work to be taken forward by the governance review was the completion of a risk assessment to establish the continued viability of key acute services.
12. The Department fully endorsed this approach and agreed to participate in the arrangements. There were good reasons for this. It was fully aligned with the extant accountability arrangements, with the Trust opening its stewardship and governance to independent challenge. It demonstrated the commitment of the Trust to safe practice and to the open and transparent review of the steps and arrangements it had put in place to achieve this. Any resultant recommendations for change in service profiles would be seen to emerge from a comprehensive and objective assessment of the presenting risks, in turn



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facilitating public consultation on what might be perceived as unpalatable change by the local community.

13. However it has taken some time to identify an independent chair for the review. Although a suitable experienced individual has now agreed to assume this role and it is hoped that the review team will be meeting for the first time in the next few weeks, the delay in getting this far has further fed concerns about the Trusts capacity to address the issues.

### **The Current Position**

14. Sustaining local services in circumstances such as those at Omagh is about the management of risks - risks in achieving an appropriate balance between maintaining local accessibility and providing safe services, and in continuing to provide services to meet local expectations but which are fragile and susceptible to collapse.
15. There comes however a point in time when the evaluation of risk may change – when the risks of maintaining local services may be deemed to be greater than those associated with change.
16. It is not clear whether we have in fact reached that point in Sperrin Lakeland. What is clear however is that there are conflicting views. On the one hand the Trust, whilst not underestimating the difficulties, continues to believe that it can sustain services. On the other, the WHSSB believes that the services are on the brink of collapse, but fears that any formal declaration of that would accelerate implosion causing insurmountable capacity problems in the local and wider health economy and an extremely difficult political situation.

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17. Irrespective of how strongly those views are expressed, we have a duty to ensure that due regard is given to patient safety and that risks to that are appropriately identified and managed.

### Proposal

18. In light of the situation described above we feel there is no choice but to apply firm pressure to the Trust's Chair and Chief Executive to commission immediately an external independent risk assessment of key acute services at Omagh and Enniskillen. The risk assessment would be along the lines of those undertaken by Down Lisburn Trust (to inform decisions on the sustainability of inpatient maternity services and emergency surgery services at Downpatrick). The Sperrin Lakeland risk assessment would seek to identify:

- the degree to which all existing services can be maintained, over what time frame and the steps necessary to achieve this, taking account of the Trust's risk management arrangements;
- those acute services which can be safely sustained throughout the intervening period without any specific action;
- those acute services which can be safely sustained with appropriate investment in staffing and/or infrastructure;
- those acute services which are likely to be difficult or impossible to sustain with any certainty and that must therefore be consolidated;



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### Implications

19. We cannot pre-empt the outcome of the risk assessment. However we have to acknowledge that it may identify the need to consolidate certain key acute services onto the Erne site to ensure their continued safety and viability. While emergency medical services will have to be maintained at Omagh (for the capacity reasons referred to above), one potential outcome is that the risk assessment would recommend the reorganisation of surgical services, with inpatient surgery (emergency and elective) being consolidated on the Erne site, and only day case surgery continuing to be provided at Omagh.
20. Clearly an outcome of this sort would raise significant concerns with the Omagh community and politicians, particularly if movement were needed before business cases and associated funding streams for the new hospitals in Enniskillen and Omagh were approved. Confidence in the timescale over which the Trust's risk management arrangement can sustain existing services will therefore be a key issue for the risk assessment. We would certainly want to avoid the collapse of acute services at Omagh, as happened previously at South Tyrone Hospital. Such a collapse would have a major impact on public confidence in the HPSS and might make it very difficult to re-establish a sustainable model of acute services for the South West along the lines of the vision set out in DBS.
21. However, all this is speculation in advance of the completion of the risk assessment. Moreover, the Trust and the WHSSB would have to seek your formal approval before any service reconfiguration was proposed and you would have the final opportunity to satisfy yourself as to the need for and appropriateness of any proposed changes to the existing pattern of services in the South West.

### Recommendation

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22. You are asked to give approval to the Department pressing the Trust to proceed with an urgent risk assessment to assess the seriousness of the current situation and what action needs to be taken.

*Andrew Hamilton*

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