From the Rt Hon Andrew Lansley CBE MP Secretary of State for Health



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Deur Camillor Clarke

REFERRAL FROM NOTTINGHAMSHIRE COUNTY COUNCIL "THE NEWARK REVIEW"

I refer to your letters of 20 September 2011, 17 October 2011, 3 November 2011, 11 November 2011 and 12 December 2011.

Further to this series of letters, I asked the Independent Reconfiguration Panel (IRP) for its initial advice.

The Panel has now completed its initial assessment and shared its advice with me.

A copy of that advice is appended to this letter.

The advice will be published today on the Panel's website at <a href="https://www.irpanel.org.uk">www.irpanel.org.uk</a>

In order to make my decision on this matter, I have considered the concerns raised by your Committee and at the same time, have taken into account the IRP's initial advice.

## Initial advice

The Panel believes this referral is not suitable for full review. In collating its initial advice, the Panel has advised me that:

- this is the second referral on this issue by your Committee. The Panel undertook this initial assessment on the basis that new evidence had emerged for consideration subsequent to its previous initial assessment advice of 31 May 2011;
- much of the documentation presented for consideration replicates that
  put forward with the original referral of 5 April 2011. New evidence
  provided consists of correspondence from local council
  representatives and campaign group members plus correspondence
  from Sherwood Forest Hospitals NHS Foundation Trust and the
  report of the Chair of the Standing Committee (20 September 2011);
- the concerns expressed in correspondence from local council representatives and campaign group members reflect the same concerns expressed in the original referral documentation, including those about changes to admission times at Newark hospital;
- I wrote to you on 8 July 2011 expressing my hope that your Committee would continue to work with local NHS partners in the best interests of patients. As such, I understand an initial attempt to arrange a meeting between NHS bodies and local councillors suffered from a lack of adequate notification, though further meetings have since been organised;
- the planned presentation by NHS representatives to your Committee did not take place;
- the NHS remains committed to resolving the issues raised locally, including Sherwood Forest Hospitals NHS Foundation Trust, which has assured your Committee of its commitment to working closely with service users and the wider community

## Conclusion of the Panel

The Panel was clear in its advice last year which I fully endorsed, that the local NHS should engage with your Committee to address and resolve residual issues, to review arrangements for local engagement and ensure systems are in place for effective communication.



Documentation provided by the relevant parties involved suggests that limited progress has been made to date in implementing this advice.

The opportunity for detailed consideration with the local NHS at the local meeting on 20 September 2011 was missed and as a result, it is clear to me that greater commitment is required by all concerned to work together constructively for the benefit of local service users.

With many of the changes now having been in place for some time, NHS Nottinghamshire, supported by NHS East Midlands, should agree with your Committee to undertake a post-implementation review to assess progress against the stated aims of the original business case.

If, as a consequence of the review, your Committee wishes local healthcare commissioners and providers to consider further action or alternative models for the provision of care in Newark and surrounding area, it is open to them to suggest so.

As the Panel noted in its previous advice, and which was made public in July 2011, Sherwood Forest Hospitals NHS Foundation Trust are key partners in the design and delivery of local services through Newark hospital. Monitor, in its letter of 13 May 2011, is clear that no changes to the Foundation Trust's terms of authorisation were required to implement the changes and as consequence, the Foundation Trust was under no legal obligation to consult your Committee.

In this situation, it is important that NHS commissioners continue to take the lead, but the IRP is pleased to note the Foundation Trust's commitment to continue working closely with its commissioners, service users, the wider community, and its representatives to resolve what are essentially local matters.

I expect the local NHS to continue to engage with your Committee about the impact of these changes.

Based on the IRP's initial assessment of the documentation provided by both your Committee and the local NHS, I support in full the IRP's advice.

I am satisfied the IRP's advice is in the interests of the local health service and I hope that your Committee will now work with local NHS partners in the best interests of patients.

I am copying this letter to Dr Peter Barrett, Chair of the IRP and Sir Neil McKay, Chief Executive NHS Midlands and East and Jon Cook, Head of Reconfiguration, NHS Midlands and East.

ANDREW LANSLEY CBE