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The Rt Hon Andrew Burnham MP  
Secretary of State for Health  
Richmond House  
79 Whitehall  
London SW1A 2NS

5 May 2010

Dear Secretary of State

**REFERRAL TO SECRETARY OF STATE FOR HEALTH**  
**Referral from Kent County Council Health Overview and Scrutiny Committee**  
**(Women's and Children's Services at Maidstone and Tunbridge Wells NHS Trust)**

Thank you for forwarding copies of the referral letter and supporting documentation from Cllr Godfrey Horne, Chair of Kent County Council Health Overview and Scrutiny Committee (HOSC). NHS South East Coast provided initial assessment information. We requested and received supplementary information from NHS South East Coast. A submission from Maidstone Action for Services in Hospital (MASH) was also received. A list of all the documents considered in the initial assessment is at Appendix One.

The IRP has undertaken an initial assessment, in accordance with our agreed protocol for handling contested proposals for the reconfiguration of NHS services. The IRP considers each referral on its merits and its advice in this case is set out below. **It concludes that this referral is not suitable for full review.**

**Background**

The Maidstone and Tunbridge Wells NHS Trust (MTW) is currently based on three acute sites – Maidstone Hospital, the Kent and Sussex Hospital in Tunbridge Wells and Pembury Hospital. A new PFI-financed hospital is under construction at the Pembury site. Once completed, the Trust will consolidate its services on two acute sites, Maidstone and Pembury, with the first occupation of the new building scheduled to take place in January 2011.

The Trust currently provides complex and routine care for women and children at both Maidstone and Pembury. However, the plans being implemented centralise consultant-led obstetric services and inpatient care for babies and children in the new Pembury Hospital.

Concerns about the Trust's ability to sustain its services for women and children at Maidstone and Pembury date back to 2000. The proposal to create a single centre for complex women's and children's care was first considered in 2003 following consultation

with the Trust's clinicians. Formal public consultation took place in autumn 2004. The consultation document, *Excellence in care, closer to home: the future of services for women and children – a consultation document*, outlined proposals to centralise consultant-led obstetrics and non-cancer gynaecology, inpatient children's care and the special care baby unit on the new Pembury site. Midwife-led birthing centres would be provided at both Pembury and Maidstone.

A joint select committee, comprising representatives of Kent County Council, East Sussex County Council, Kent District/Borough Councils, East Sussex District/Borough Councils and the Patient and Public Involvement Forum, was formed to consider the proposals. It responded to the consultation in December 2004 commenting that "*The Committee supports the proposals for the redesign of Women and Children's services*" and making a number of further recommendations.

A joint committee of NHS boards from West Kent and East Sussex agreed the proposals for women's and children's services - including the centralisation of consultant-led obstetrics and non-cancer gynaecology, inpatient children's care and the special care baby unit at Pembury - in February 2005. Detailed plans and the business case for the new hospital, including the Women's and Children's Centre, were subsequently agreed by the Treasury and the Secretary of State for Health and building work began in 2008. The Women's and Children's Centre is scheduled to open in two phases (January and July 2011).

In November 2009, following a Councillor Call for Action at Maidstone Borough Council, the Kent County Council HOSC agreed to establish a Task and Finish Group to examine the plans for women's and children's services at MTW. The report was presented to the HOSC at its meeting of 19 February 2010 when, in view of ongoing concerns about the plans, the committee voted to refer the matter to the Secretary of State for Health.

### **Basis for referral**

At its meeting on 29 March 2010, the HOSC resolved that:

*"In noting the conclusions of the Task and Finish Group which the Health Overview and Scrutiny Committee support the weight of public concern is sufficient to refer the issue of the provision of Women's and Children's Services across the Maidstone and Tunbridge Wells NHS Trust to the Secretary of State for Health to review the decision taken by the West Kent Health Economy in 2005 – with particular emphasis on the services to be provided at the Maidstone Hospital..."*

A letter of referral was sent to the Secretary of State for Health on 24 February 2010. A further letter of 18 March 2010 to the Department of Health clarified that:

*"...the primary grounds of referral are under section 4(7) of The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 (No.3048). As my original letter made clear, there remain questions about the*

*original consultation, but the other nine main grounds which were outlined all provide support for the case that 'the proposal would not be in the interests of the health service in the area of the committee's local authority.' ..."*

Ten grounds for referral are cited – Transport; Original consultation; Lack of ongoing communication/engagement with public; Lack of ongoing communication/engagement with staff; State of Trust's readiness; Lack of integration across the Trust; Patient choice; Demographics; Health inequalities; Other IRP decisions.

## **IRP view**

With regard to the referral by the HOSC, the Panel notes that:

- The NHS proposals were supported by the HOSC, as part of a Joint Select Committee response to the consultation.
- Consequently, the proposals have been incorporated into the NHS's planning for the new hospital at Pembury
- Building work for the new hospital, based on a business case, planning and design that includes a Women's and Children's Centre to replace services at the two existing sites, commenced in 2008 and is scheduled to be operational in two phases (January and July 2011)
- The NHS has made a substantial long-term financial commitment to the PFI development at Pembury based on the agreement to the redesign of services for women and children. At this late stage, the adverse financial consequences on local health services of a change in direction are a legitimate consideration.
- The HOSC supports the conclusions of its own Task and Finish Group, including:
  - "a) With the exception of the additional provisos mentioned in this report, we support the conclusion of the 2004 Joint Select Committee*
  - b) None of these provisos would by themselves warrant a referral to the Secretary of State for Health*
  - c) However, there has been so much local public concern expressed about the implementation of the decision to reconfigure the Women's and Children's Services, that in order to reach a definitive conclusion, there remains only the option of referral to the Secretary of State for Health to obtain closure"*
- In its report, the HOSC's Task and Finish Group note that *"an alternative solution that is deliverable, workable and acceptable ...has not been forthcoming from any of the witnesses and stakeholders interviewed"*.
- Many of the issues raised in the HOSC referral, whilst of legitimate concern and interest, are about perceived weaknesses in the NHS's implementation of the agreed proposals for women's and children's services rather than the nature of the proposals themselves.
- Changes in key assumptions such as accessibility, population need and staff requirements have been cited as causes for concern. However, their impact on the proposals, or any viable alternative course of action, has not been assessed by the HOSC despite the fact that, as the IRP found in the case of population for example, data exist to inform such an assessment.

*Independent Reconfiguration Panel*

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## **Conclusion**

The proposals are in the latter stages of a long and complex implementation that involves a major PFI investment. There are legitimate anxieties and concerns about process and progress as the date for changing services gets closer. As the HOSC's Task and Finish Group advises, these issues can and should be tackled locally as implementation proceeds. The local NHS should engage fully with this process.

There remain some sections of the local community that do not accept that the proposals that have been agreed and are being implemented are in their best interests. The opportunity exists to engage these sections of the community in a realistic and informed assessment of the current position.

The IRP considers that this process would be better led by the HOSC in the first instance rather than through a full Panel review - though the latter remains a course of action in the last resort.

## **Further action**

The IRP advises that:

- The implementation of the current proposals should proceed.
- The issues identified by the Task and Finish Group should be addressed by the local NHS, overseen by the SHA.
- A local assessment, led by the HOSC and involving all stakeholders, of the impact of any changes in assumptions such as population, accessibility and staffing, on the safety, sustainability and accessibility of the proposals should be undertaken within two months.
- The assessment should take into account the lack of identified viable alternatives.

Yours sincerely



Dr Peter Barrett  
Chair, IRP

## APPENDIX ONE

### LIST OF DOCUMENTS CONSIDERED

#### **Kent County Council Health Overview and Scrutiny Committee**

- 1 Letter of referral and attachments from Cllr Godfrey Horne, Chair, Kent County Council HOSC, to Secretary of State for Health, 24 February 2010  
Attachments:
- 2 HOSC minutes of meeting 27 November 2009
- 3 Report of the Task and Finish Group considering the provision of Women's and Children's Services within Maidstone and Tunbridge Wells NHS Trust
- 4 Letter from Cllr Godfrey Horne, Chair, Kent County Council HOSC, to Department of Health, 18 March 2010
- 5 Letter from Cllr Godfrey Horne, Chair, Kent County Council HOSC, to Secretary of State for Health, 29 March 2010, attaching:
- 6 HOSC minutes of meeting 19 February 2010

#### **NHS South East Coast**

- 1 IRP template for providing initial assessment information  
Attachments:
- 2 Birth data for area 2006 - 2009
- 3 Clinical services by site 2008/09 and 2012/13
- 4 *Excellence in care, closer to home: The future of services for women and children – a consultation document*, October 2004
- 5 Appendix 1 – birth maps and graphs
- 6 Papers for Joint Board Meeting in Public to Consider the Outcome of the Public Consultation into Services for Women and Children, South West Kent PCT, 17 February 2005
- 7 Map of key sites

#### **Supplementary information requested**

- 1 Clarification from NHS South East Coast regarding schedule for transfer of services to new Pembury Hospital and assessment of the demographic impact on services of the projected growth in population

#### **Other information**

- 1 Letter and attachments from Dennis Fowle, Chair, Maidstone Action for Services in Hospital (MASH), 3 April 2010  
Attachments:
- 2 Submission
- 3 Letter to Cllr Michael Lyons, Chair, Kent County Council HOSC, 3 April 2010
- 4 Copy of Kent County Council HOSC letter of referral, 24 February 2010

- 5 Copy of letter from Dennis Fowle, Chair, MASH to Secretary of State for Health, 24 February 2010
- 6 Kent County Council HOSC minutes of meetings, 2007-2010