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**Health Scrutiny in Dacorum
Agenda**

Monday 7 November 2016 at 7.30 pm

DBC Bulbourne Room - Civic Centre

Scrutiny making a positive difference: Member led and independent, Overview & Scrutiny Committee promote service improvements, influence policy development & hold Executive to account for the benefit of the Community of Dacorum.

The Councillors listed below are requested to attend the above meeting, on the day and at the time and place stated, to consider the business set out in this agenda.

Membership

Councillor Brown
Councillor Guest (Chair)
Councillor Hicks
Councillor Maddern

Councillor Taylor
Councillor Timmis
Councillor W Wyatt-Lowe

Contributors:

New Hospital Group

For further information, please contact Jim Doyle

AGENDA

6. NEW HOSPITAL GROUP - SUBMISSION TO HERTS CC HEALTH SCRUTINY
(Pages 2 - 4)

Agenda Item 6

TO HERTFORDSHIRE COUNTY COUNCIL HEALTH SCRUTINY COMMITTEE MEMBERS For information to Dacorum Borough Councillors

4th November 2016

Dear Councillor

Acute hospital reconfiguration in West Hertfordshire

We are members of the New Hospital Campaign, recently launched and supported by the Dacorum Patients Group (DPG) and the Dacorum Hospital Action Group (DHAG). Although we are based in Dacorum our concern is for high quality provision for the whole population across the entire area of West Hertfordshire.

We are writing to express to you our grave concern about the current proposal from Your Care, Your Future (YCYF) to develop the main hospital provision at the existing site in Vicarage Road, Watford. We believe this is not sustainable and cannot meet the needs of the people of the area. We also have no confidence in the process that has taken place regarding this. Our comments below mainly relate to YCYF's report to the County Health Scrutiny meeting on 8 November 2016¹.

On page 2, the paper states: "Some stakeholders wanted us to pursue the option for a new hospital on a 'greenfield' site near junction 20 of the M25". There were indeed requests for a new hospital on a central, accessible site between the three main towns – Hemel Hempstead, St. Albans and Watford. Responding to this, the previous head of YCYF commissioned a site search from consultants Amec Foster Wheeler. This identified a long list of 19 sites which was reduced to a short 'list' of just one site, near junction 20 of the M25. It was not 'stakeholders' requesting this site: the site emerged from the YCYF-commissioned exercise. Our own view is that the site is a very reasonable choice for further consideration but from such a long list there were other sites that could and should have been included to make up a proper short list

At the bottom of page 2 and top of page 3 the paper describes the panel sessions which are regarded as "key to the process". This was a fundamentally flawed device. All of us attended at least one of these sessions either as assessor or observer. The patients who were invited were a small group of people active in local patient organisations such as ourselves. There was no real attempt to reach out to the wider public (see later). The panel sessions were short and included complex presentations based on documentation that arrived very late. Panel members were expected to rate various options against set criteria, the ratings already having been proposed, generally in a very short period of time. There is no way such a process can be regarded as robust or reliable, yet it purported to be such.

¹ Item 1a, Appendix A:

<https://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/599/Committee/12/Default.aspx>

Many aspects of the content of these sessions were highly questionable. For example one of the two clinical model options presented for assessment - the one that was quite predictably rejected - was based on a very partial and inaccurate description of a successful NHS Vanguard whole-system model elsewhere in the country. The panel on access reviewed a commissioned travel analysis which came to conclusions regarding accessibility that seem utterly incredible. The deliverability panel considered possible adverse public reactions as a negative factor only in relation to one option. The cost analysis presented to the finance panel, which concluded that the only greenfield site option being considered was more expensive than redeveloping Watford, provided far too little detail for anyone not involved with the analysis to make a proper judgment.

We have challenged both the travel and cost analyses. As a result YCYF are doing "some further detailed work" on both but only "to be sure we are right not to include this [the Amec Foster Wheeler preferred site] in the approach we take forward to the next formal phase" (top of page 3). The language makes clear the intention that this will not be a genuine reconsideration and indeed the objective of favouring the Vicarage Road site has been clear throughout this process, as some of us indicated in a detailed letter to the Chair of the HVCCG at the beginning of September, well before the process had been completed.

As mentioned earlier there has been minimal engagement with the wider public over the options being considered: there has been no "transparent and broad approach to engagement" as asserted on page 4. The only substantial exercise was an online survey which produced some 600 respondents. The results make quite clear that the public favours a new acute hospital on a centrally located greenfield site. This result has not been widely communicated by YCYF. A similar result has been obtained from feedback forms returned at well-attended public meetings that we have held this year in different locations within Dacorum.

We are also concerned that, despite what is being said, the current emphasis on acute reconfiguration is distracting attention from the wider system of care so that a fragmented and incoherent patchwork of provision will result. For example, a meeting scheduled this week to discuss the future of Hemel Hempstead Hospital was cancelled without people who had been notified of it even being informed of the cancellation until someone questioned the position. A whole-system approach is state-of-the-art in health planning as in the Vanguard programme. The lack of such an approach is evident in YCYF, despite what is said on page 1, and there is a great risk that the mantra "closer to home" will end up really meaning "further away from home".

We believe it is absolutely vital for future generations that a new hospital is provided on a centrally-located site. If large amounts of money are spent attempting to redevelop the inaccessible and highly inefficient facility that is so poorly located next door to the Watford football ground then that money will be largely poured down the drain. We do not accept that a greenfield solution must cost more than this unsustainable and thoroughly unambitious plan, which will probably result in no more than continuing to patch up a site that was said 10 years

ago to be unviable beyond 2013. We must not keep making the same mistakes. This is a golden opportunity to change direction. It is beyond belief that we might be stuck with the status quo for decades to come.

We will use our very limited resources:

- to urge the HVCCG and the WHHT to reconsider these misjudged plans
- to alert the public throughout West Hertfordshire to what is being proposed in their name
- to pursue the areas where we feel YCYF is providing misleading information and
- to propose superior solutions.

There is a petition on the government website at <https://petition.parliament.uk/petitions/169500>

We would urge the health committee of our local authorities to indicate their lack of support for the direction of travel set out in the document submitted by YCYF and to request a reconsideration.

Kind regards

Graham Cartmell
Edith Glatter
Ron Glatter
Betty Harris
Kevin Minier
Mike Moore
Gordon Yearwood