

Chairman's Office

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10 September 2019

Dear Cllr Arash Fatemian

Re: Resolution of Oxfordshire HOSC, 31st May 2019

I am writing in response to your letter of 11th June to the Oxford Health NHS Foundation Trust Board regarding the draft resolution of the Oxfordshire HOSC, 31st May 2019. The Trust Board discussed the matter at its meeting on 24th July. As you will recall, in the meanwhile I attended the HOSC meeting on 20th June to discuss this matter with you and your colleagues, and the Board was able to consider the resolution as you agreed at that meeting.

The Trust Board is absolutely clear that its decision temporarily to close the 12 inpatient beds at the City Community Hospital ward at the Fulbrook Centre from 31st May 2019 was taken on patient safety grounds and was timely and necessary on that basis. The Trust is responsible for the maintenance of safe care for its patients, and where there are insufficient staff of the appropriate level of qualification available, despite strenuous efforts to attract them on a permanent and/or temporary basis, then it is for the Trust to determine whether the correct course of action is to close services temporarily to protect patients from harm. The Trust is fully satisfied that this was a matter for it to decide, and that the decision was appropriate in the circumstances.

In this instance the Trust also took steps to mitigate the impact of the temporary closure on the availability of community hospital beds across Oxfordshire as a whole, by opening 8 beds at Witney and Abingdon, leaving a net reduction to the county of 4 beds, which is in line with the pattern of bed availability in previous years when bed numbers are increased over the winter months and reduced over the summer.

The Board will review the situation at its Board meeting on 25th September, and I am aware that HOSC has been receiving regular reports in the meanwhile about the steps being taken

by the Trust to recruit sufficient staff to enable the ward to be reopened safely. You will be receiving a further update at your meeting on 19th September.

The Board noted and endorses the shared goals and principles in the *Protocol between the Oxfordshire Joint Health Overview and Scrutiny Committee and health and wellbeing providers and commissioners serving the population of Oxfordshire*. Whilst it regrets that the Oxfordshire HOSC has come to the conclusion that the Trust disregarded established working pathways on this occasion, it believes the Protocol creates a mutual obligation on all parties to work together and to avoid 'surprises'; it reaffirms its commitment to that approach and its expectation that it will be upheld by all parties.

In relation to the process of communication on this matter the Board considered the sequence of events.

The risk of staffing levels prompting the need to consider closure of City Community Hospital was first raised as a possibility with the HOSC Senior Policy Officer in August 2018 by Dominic Hardisty, the Trust's Chief Operating Officer. Subsequently a conversation with yourself took place on 31st August. It was agreed (in a discussion shared with health and social care partner organisations across Oxfordshire) that the matter would not need to be discussed at the September 2018 HOSC, and as the risk of temporary closure was not immediate it would be appropriate to defer it until November, particularly as there was a concern about the impact of such a closure in the middle of the winter period when community hospital bed numbers are usually increased. Meanwhile Mr Hardisty undertook to use all reasonable endeavours to keep the ward open and to notify HOSC if that should not prove possible.

The HOSC Senior Policy Officer forwarded to Mr Hardisty the substantial change toolkit template which was to be completed and used for the purposes of that discussion. The template, as you will be aware, addresses circumstances where a closure or change is contemplated. In the event it proved possible to keep the ward open throughout the winter period, thanks to considerable efforts to bolster the staffing on the unit from other community hospitals. Because the anticipated risk of closure did not materialise there was no change to bring to HOSC's attention at that point.

That situation changed only in April 2019, when it became apparent to senior clinicians that new information about the departure of a number of key nursing staff meant that it would prove impossible to keep the ward staffed safely beyond the end of May. Once it had been established that course of action was unavoidable, Mr Hardisty wrote to inform HOSC on 11th May 2019. The Senior Policy Officer wrote to Mr Hardisty on 14th May, setting out concerns that, as the matter had been under discussion beforehand, it could have been anticipated, and therefore ought to be subject to consultation before the closure took place. They also asked for the ward to be kept open, using temporary staff if necessary, until the next scheduled meeting of HOSC on 20th June.

Mr Bell, the Trust's Chief Executive, replied on 16th May. He apologised if the Trust had inadvertently prompted any concern, but confirmed that the proposed closure was temporary and to be undertaken specifically on patient safety grounds, pointing out that while the matter had indeed been raised earlier, the passage of time had only occurred because it had proved possible to defer the risk of temporary closure much longer than had originally been anticipated. He also confirmed that it was not possible to keep the ward open any longer than had previously been indicated, and that temporary staff had already been deployed to keep it open to that point. He offered to discuss the matter further if that would be helpful and asked for that message to be conveyed to yourself. It was at that point, without any further discussion, that the Trust was surprised to receive notice of HOSC's motion of no confidence. The emergency HOSC meeting of 31st May then took place, following which the Board received your letter.

The Board considered the question of whether other system partners were aware of the situation in relation to staffing levels at City Community Hospitals. It noted that information about the situation was shared at a number of points as it developed, including extensive discussions in August 2018, however, given the length of time that it eventually proved possible to keep the ward open over the winter, that communication might have been further reinforced. It is satisfied that the question of whether staff from other organisations could have been used to keep the ward open was addressed, and that it was established that was not feasible. That remains the case to date in relation to the potential to draw on staff from partners to assist in reopening the ward.

The Board also noted your observation about the temporary closure of Wantage Hospital. It is aware that the future arrangements for health services in the area surrounding Wantage (including the hospital) is subject to a consultation process led by Oxfordshire CCG which has been discussed separately at HOSC.

Yours sincerely

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David Walker Chairman