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My ref:

Your ref:

Date: 14 July 2011

This matter is being dealt with by Roger Edwards	Direct line 01865 810824
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Dear Andrew

Nursing staff at Chipping Norton Hospital

At a meeting last week members of the Oxfordshire Joint Health Overview and Scrutiny Committee (HOSC) discussed the issue of the employment of nursing staff at the new Chipping Norton Hospital. As you will know, the hospital opened recently and is run by the Orders of St John (OSJ) who also manage a care home on the same site.

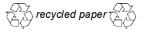
This item was on the HOSC agenda, and has been on a number of occasions recently, because in 2005 and again in 2007, the PCT stated the following with regard to the employment of nursing staff at the hospital:

- *i.* To enable staff at the Hospital to decide which choice was better for them as individuals, they would be given the option of whether to remain as NHS employees and be seconded to the Orders of St John (OSJ) for a period of three years or to transfer under TUPE to the OSJ
- *ii.* The PCT would not indicate a preference with regard to the above options
- *iii.* In the event that an NHS employed staff member was to leave during the three year period, their replacement would be placed on NHS terms and conditions for the remainder of the three years.

At the end of the three years a review would take place.

The transfer of existing staff has happened in accordance with the first two statements above and all nurses employed in the hospital chose to be employed by the NHS. However, as you know, the PCT decided that new staff employed during the three year period following the opening of the new hospital would be employed by the OSJ.

This is a matter of great concern for local people who are worried that if nurses are employed by the Orders of St John (OSJ) they would be seen as care staff and the hospital would eventually become part of the care home. Furthermore there is a strong view that, because the nurses are managed by OSJ staff, the NHS ethos could be lost and there could well be confusion around the divisions between the care home and the hospital. Plainly the skills required for the former are quite different from those needed for the latter.



Members of my Committee are also very much aware that Chipping Norton would be used as an exemplar for future Community Hospitals in Oxfordshire where NHS beds would co-exist in a Nursing Care Home and staffing arrangements would have to be ironed out. Two new hospitals are planned for 2012 in Bicester and Henley and it will be important to be assured that the best staffing solution would be developed for those.

The original agreement was a compromise between the wishes of local people and hospital staff for the hospital to continue for all time with NHS staff and those of the PCT and the OSJ to see OSJ employees staffing the hospital. The compromise would allow time for development of the hospital and to see whether the NHS/OSJ hybrid would prove to be workable. It would also ensure that, as promised new services came on line, NHS trained nurses would deliver them. The review was to consider all that had happened in the three years and lead to a final decision on whether staff should be NHS or OSJ employees.

Quite obviously, replacing NHS staff who were to leave with OSJ staff would pre-empt that decision and the very purpose of the review would be lost.

We are aware that you have been advised by the South Central Strategic Health Authority and that the SHA supports the PCT in changing its position from that originally stated. The PCT and the SHA both argue that the quality of services provided to patients would not be diminished by replacement staff being employed by the Order of St John rather than the NHS. They consider that appropriate commissioning arrangements are in place to ensure this and that the control of quality should be ensured through commissioning decisions.

We are aware also that you wrote to David Cameron in his capacity as the local MP for the Witney constituency that includes Chipping Norton. In that letter you stated that the decision around who employs staff should be made locally and was not something that you would wish to be involved with.

What you may not have known is that the HOSC had written to the SHA asking them to mediate in this matter. That could not happen once it had been made clear that the SHA supports the PCT.

You might also not be aware of the fact, as set out earlier, that the PCT had on more than one occasion given an undertaking to the HOSC, as well as local people, that all staff employed in the hospital for the three years after it opened would be NHS employees. There have been no satisfactory explanations of why those undertakings have been broken. Both the PCT and the SHA talk about the original business case but cannot explain why they gave the three year undertaking if it conflicted with the business case.

They also refer to changes that have taken place since 2007. Nobody seems very clear what those changes are except for the fact that the nurses would not now be employed by the PCT but by Oxford Health (the organisation that now provides all community health services). It is accepted that having staff employed by one organisation and managed by another could cause difficulties. However that would have been the same had the nurses been employed by the PCT as was envisaged when the original undertakings had been given. So nothing much seems really to have changed.

Members of my Committee are of course extremely disappointed that the PCT has chosen to go back on undertakings freely given and that the SHA supports them in that action. The whole basis of local consultation and transparency in decision-making is undermined once trust is lost and that has unfortunately happened in the case of Chipping Norton. I would be interested to hear your views on that.

However the purpose of this letter is not just to complain about the actions of the PCT and to go over past history. It is to suggest to you a way forward that might go some way to restore trust and provide more confidence to local people over the future.

Would you be willing to ask members of the Independent Reconfiguration Panel to visit Chipping Norton, speak to all parties involved and to come to an objective conclusion as to the best way forward for the future of Chipping Norton Hospital? The IRP is an organisation that is trusted in Oxfordshire and we are sure that their view would be accepted by all parties.

I appreciate that this is not a normal referral to you in the accepted sense of that term. It would also probably be an unusual use of the IRP. However the HOSC would be very grateful for their advice and input into this matter which has now been under consideration in one form or another for several years.

You will know that anything to do with Chipping Norton Hospital is highly sensitive. What the HOSC is asking is that the IRP should act as an honest broker in this matter; consider the issues and principles involved and try to come to some sort of judgement on the best way forward.

I look forward to your response.

Yours sincerely

Councillor Dr Peter Skolar Chairman of the Oxfordshire Joint Health Overview and Scrutiny Committee

The Oxfordshire Joint Health OSC comprises councillors from Oxfordshire's County, District and City Councils as well as co-opted members of the public

Copt to: David Cameron MP