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Janet Guy
Lay Chair
NHS Northumberland Clinical Commissioning Group
County Hall
Morpeth
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05 October 2017

Dear Janet,

Rothbury Community Hospital

Healthwatch Northumberland received the papers published about the Rothbury Community Hospital Decision Making Meeting and attended the meeting in public on 27 September 2017 to listen, first hand, to the many questions and comments made by those present in relation to the three options presented to the Joint Locality Executive Board.

This important topic was discussed at the Healthwatch Northumberland Board meeting on Tuesday 26 September 2017, with board members able to express their views and this letter includes those views and views based upon information received at the Joint Locality Executive Board meeting on 27 September.

The Healthwatch Northumberland Board accepts that there was some justification in the public criticism of the CCG for what many believe to have been a 'peremptory action' in closing, even temporarily, the 12 in-patient beds in September 2016. That said, the Board welcomes the attempts which have been made since then to engage with the wider community. The public meetings, engagement exercises and the



consultation process have enabled interested parties to convey their views in a range of ways and Healthwatch Northumberland was pleased to have been able to contribute to the process by engaging with older residents in Rothbury and by attending a range of meetings where this topic was discussed.

In the context of such engagement, the Board was surprised to learn that the Decision-Making Meeting was to be held over lunch time in Morpeth rather than in the evening in Rothbury which may have been both more convenient and more appropriate for the residents of Rothbury, particularly given the strength of feeling in the area. Furthermore, the forwarding of the papers one week before the meeting date did not give much time for interested parties to digest the contents and to prepare a response. The Board accepts that there will, no doubt, have been reasons for this but they do not appear to have been communicated widely.

Regarding the clinical aspects of issue, significant criticism has been directed at the preferred option to temporarily close the 12 beds with the rationale for this having been the declining number of in-patients at Rothbury during the preceding year. The justification to make the closure permanent appears to be that the “Healthcare professionals consider that no patients have suffered adverse health consequences during this period and the health and care system has not experienced any discernible or unmanageable increase in demand in other areas” (p. 5 of the Report). Permanent bed closure appears to be underpinned by a further statement in the Report that the GP member practices in the North locality 'supported Option 5' (p.10).

The Board feels that whilst such support, by those working with and caring for patients, for the CCG's preferred course of action has now been made public, it may have aided wider understanding of the clinical justification for bed closure if the CCG had found a way to articulate this perspective at the time of the original consultation. Such comprehensive information in an appropriate context at an early stage in a consultation exercise could have enabled respondents to be better informed and therefore to participate more meaningfully in such an engagement exercise.

The Board feels that it would also have been helpful to respondents to the consultation and other interested groups if there had been more clarity on the



issue of the number of available hospital beds and workforce issues associated bed occupancy levels.

The case for efficient use of the public purse is indisputable, particularly in these difficult times, but the public needs to be convinced that there will be genuine cost reductions at Rothbury whilst still offering an effective health and care system. Realising such demonstrable savings whilst still providing excellence of care in years to come will be essential if the perceived sacrifices by the local community can eventually be deemed to have been worthwhile.

In the context of looking to the future, Healthwatch Northumberland has a responsibility to engage with the people of Rothbury and the surrounding areas to understand the impact of any changes brought about by the decision taken to close the in-patient beds i.e. the expectation by the public of a seamless absorption of in-patient care managed in other places or by other providers. In particular, the Board feels that such engagement should focus on the old and frail, those with disabilities or mobility difficulties, and on seldom heard groups and their families and carers. It is these groups, particularly as we witness a growing and ageing population in a rural area, whom the Board believes will see the greatest impact of the CCG decision to close the beds.

The Board also believes that in order to fully understand the effects of the closure on the day to day lives of individual members of the community, there would need to be consideration of specific aspects of the following: the impact on families and carers of having to travel to Alnwick or Morpeth or even further afield, the effectiveness or otherwise of public transport and community transport provision and the impact this has on patients and visitors, real-time flexibility of visiting times beyond Rothbury, how rehabilitation and end of life care is supporting families and carers, the capacity of the system even with an extra palliative care nurse, etc.

The Board feels that any engagement undertaken may well unearth unseen effects or unintended consequences such as access to services as a result of the changes. Little is known about what impact the changes will have on areas such as GP appointments, increased admission or readmission rates to acute and other community hospitals or how the new Ambulance Standards will impact patients in Rothbury and other areas or how this will be counter-balanced by the work done so far through the Vanguard to wrap community care around the patient. Significant within this could well be lessons to be learned from the Rothbury engagement, consultation and decision making with regard to any future discussions about other



community hospitals within the county.

The board is clear on its role as the independent champion of patients, families and carers within Northumberland and it therefore has an obligation to monitor, with the public, the provision of extra services as enshrined in the proposals for Rothbury Hospital to become a Health and Well Being Centre. The probable and possible list of additional services is impressive and welcomed, but the Board expects it to be implemented with continued engagement with the public to understand what they need from any service changes and improvements and how this can best be delivered.

Finally, the Board hopes that the CCG finds its comments to be constructive but wishes to make clear that Healthwatch Northumberland will be robust in fulfilling its responsibilities in terms of monitoring patient and service user experiences of any changes and, in particular will be “watching” the following very closely to see that the CCG:

- engages effectively and at appropriate times during any change process with patients and service users in the Rothbury area
- provides evidence of how engagement has and will influence any changes brought about by the decisions taken on September 27th 2017
- undertakes meaningful evaluation of the consequences of the in-patient bed closure including social impact
- secures the investment and thereby implements the additional range of services which were identified in the Report
- tests the viability and desirability of developing appropriate services elsewhere in the County based on the precedents set in the plans for the Health and Well Being Centre
- provides a clear plan of action for all the above which includes appropriate and relevant timescales, key milestones and the flexibility to deal with issues or unintended consequences as they arise



Should the CCG wish to discuss this response further please do not hesitate to contact me. Meanwhile, Healthwatch Northumberland will be sharing this response with the SRCH Action Group. A copy of this letter will also be placed on the Healthwatch Northumberland website on 1 November 2017.

Best wishes,



David Thompson
Chair, Healthwatch Northumberland

CC Vanessa Bainbridge
Dr Alistair Blair
Stephen Young
Save Rothbury Cottage Hospital Action Group

