HOLDERNESS HEALTH ALLIANCE

South Holderness Medical Practice: Hedon Group Practice: Church View Surgery Eastgate Medical Group

Jonathan Beckerlegge
Audits and Integrated Governance Committee Chair
East Riding of Yorkshire CCG
Health House
Grange Park Lane
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Dear Mr Beckerlegge

Following the receipt of a Freedom of Information Request (FOI), the four practices making up Holderness Health Alliance are writing to you as Audit Chair to formally request you to investigate the governance surrounding the recent Urgent Care Strategy decisions taken by the Governing Body. We believe we have uncovered significant issues that raise concerns, disappointingly, that good governance procedures were not followed throughout the creation of the Urgent Care Strategy, the decision to move to consultation and the final Governing Body decision. We believe the FOI request shows that inadvertently the whole Governing Body had been subject to misinformation and bias and were not, therefore, in a position to make an independent decision. In our opinion the FOI shows that the Gunning Principles were not followed correctly throughout the process.

As you will be aware the FOI request we made was large and we have circulated what we feel are the most relevant documents. However, we do not believe that all the documents we requested through the FOI request were necessarily forwarded to us and you may feel the need to review additional documents to see how far poor governance procedures went.

In summary, we have identified the following issues from the FOI request:

1. Creation of a Draft Urgent Care Policy

From the second draft of the Urgent Care Strategy presentation at SRCC in September 2015, documents repeatedly state a preference for three Urgent Care Centres located at Beverley, Bridlington and Goole. At no point in any of these documents does it say that this needs to go out to public consultation nor that alternative Urgent Care Centre options should be considered.

There are several diagrams that repeat the suggestion that there would be three Urgent Care Centres at Beverley, Goole and Bridlington which are referred to as the "CCG spine".

2. Presentation to SRCC

The Urgent Care Strategy was presented on two occasions to the SRCC. In the papers we have received it clearly states a preference for the opening of Urgent Care Centres in

Beverley, Goole and Bridlington. Again there is no mention of public consultation. SRCC are asked on each occasion whether they support this decision.

Importantly in January 2016 we note that SRCC voted, with one vote against and two abstentions, to support this direction of travel. It is quite clear from this vote those SRCC members; membership of which includes many Governing Body members; supported the decision to open three Urgent Care Centres in Beverley, Goole and Bridlington. This vote was prior to any shortlisting appraisal or public consultation. This highlights a failure to follow Gunning Principles.

3. Presentation to Governing Bodies

We also note that the proposed Urgent Care Strategy and proposal for three Urgent Care Centres at Goole, Beverley and Bridlington was presented on several occasions to the Governing Body. We note in particular from the minutes of the Governing Body Workshop held on 20th October 2015 it is stated that:

"The proposal for the development of three Community Urgent Care Centres located on the central axis of Beverley, Bridlington and Goole and explained the intention is to standardise what centres would deliver minor injury services and GP Out of Hours.

Although not consulted on, we are now aware that Holderness will have a considerable reduction in its Out of Hours Service from later this year and the complete closure of Community and Out of Hours Services at Rosedale.

We note that in the meeting of 15th December 2015, the commissioning intention for 2016/2017 that the whole of the Governing Body received a presentation in which the commissioning intention included the opening of three Urgent Care Centres in Goole, Beverley and Bridlington. Again there was no mention of public consultation. It is quite clear from this document, which must have had input from senior leadership, that the CCG strategy was to close the Minor Injury Units at Driffield, Hornsea and Withernsea.

We note a further presentation was made to the Governing Body Workshop on 19th January 2016 and this presentation included the current provision and again the proposed changes which included Minor Injuries/Urgent Care Centres at Goole, Beverley and Bridlington. At that point and of major concern is that Rosedale is no longer shown as an Out of Hours Centre.

In addition to the Urgent Care Centre plans it is clear that the intention to close Rosedale was stated in at least two Governing Body meetings. Any closure of Rosedale as a location significantly impacts on service available to Holderness residents and has not been put forward to the public for consultation.

Having reviewed the attendees at all these Board Workshops/Strategy Meetings we have noted that all members of the Governing Body were present at at least one of the meetings. We would suggest the likely bias/conflict that had developed through these board workshops will certainly have influenced the shortlisting process and the final Governing Body decision.

4. Council of Members

We notice that the proposed Urgent Care Centre plan was presented to the Council of Members on the 25th November 2015. Again recorded in the notes was the CCG preference for the opening of three Urgent Care Centres in Beverley, Goole and Bridlington. We also note a recurrent message stated in several documents stressing that Withernsea and Hornsea are under-utilised, thus again creating a bias in the consultation process.

We also note that the Urgent Care Strategy was presented at the February Council of Members meeting. The meeting minutes highlight disagreement on what was presented that evening.

5. Enquiry Hull Daily Mail

At the Governing Body meeting on the 15th March 2016, an enquiry was made by the local press about the decision to close Withernsea, Driffield and Hornsea MIUs. This was denied at the time.

The minutes of the meeting state:

"Further to discussion at the last Council of Members Meeting, Allison Coggan, Hull Daily Mail asked for confirmation that the CCG is considering closing Hornsea Community Hospital. JH stated that as no decision had been taken a long list of options is being compiled and subsequent to an options appraisal a shortlist will be presented for public consultation in the summer".

Having reviewed the previous papers presented to SRCC, Governing Body and Council of Members prior to this date we can see no evidence of creation of a shortlist but a repeated stated preference for three Urgent Care Centres at Beverley, Bridlington and Goole.

As you will be aware, we have also asked for FOI surrounding review of the governance process by the Audit Committee of the Urgent Care Strategy and are surprised that the issues mentioned above were not investigated.

6. Shortlisting Process

We have reviewed the minutes provided of the shortlisting process and these raise some serious governance concerns and evidence of bias by decision makers. The notes of these meetings are rather brief and unclear but we believe there are a number of anomalies which require investigation.

We note the minutes of the meeting from 14th July 2016 state that the Chief Finance Officer of East Riding of Yorkshire CCG states that the CCG was advised that scenarios that could include new builds should not be excluded from public consultation. As you will be aware, it had been suggested that Rosedale could be a potential site for an Urgent Care Centre and Withernsea Hospital scored highest for community beds but both would have needed some building work. We are unsure why these were excluded following the CCG's legal advice that the new builds should be included. We can find nothing in the Governing Body minutes to suggest the Governing Body were aware of this advice.

Surrounding the criteria for shortlisting we have noticed the following issues:

- i) We have already circulated you into a letter, raising concerns as to why out of date deprivation statistics were used to score as this has a significant effect on the scoring result due to the increase in deprivation in the South East Holderness area and the improved affluence in the Goole area over the previous five years. The latest indices of Multiple Deprivation were published in September 2015 and were freely available.
- ii) It is noted when classifying where Urgent Care Centres should be one of the issues identified was co-locating with other services. In addition it is noted that community beds were not considered as their future location is still to be determined. We feel there was a serious flaw in this judgement as the sites of Out of Hours were also not determined. The way this was voted for automatically gave five points to all of

Bridlington, Beverley and Goole. Although Holderness practices have some serious concerns relating to the changes of Out of Hours from Rosedale, this service is potentially relocating to Withernsea (although on reduced hours) and this means that Withernsea is also incorrectly scored on this indicator.

The calculation used for population density is seriously flawed as it failed to identify that alternative areas of Holderness would use Urgent Care Centres in Withernsea, Hornsea or Hedon, if open reliably. It has also failed to consider that Holderness is an extremely rural location and all Urgent Care Centres suggested are remotely located for our patients to access. It is quite feasible that a good well run, well staffed Urgent Care Centre would be visited by the vast majority of residents in Holderness and this would create a similar population density to areas such as Beverley and greater than Goole.

We believe that the following issues regarding deprivation, population density and current location of other services suggest severe flaws in the process that was followed for shortlisting and prioritisation likely due to inadvertent bias.

We believe that there are errors in the Value for Money calculations due to failing to take into account the block contract nature of the Community Services Contract. Our own calculations have shown there are cheaper options that included one of Withernsea, Hornsea or Driffield than the Governing Body's decision.

7. Shortlist Validation Meeting and Comments

Unfortunately the date of this meeting is not documented on the notes we have received, however we have significant concerns that this highlighted some real governance failings which should have been brought to your immediate attention.

We would specifically like to bring to your attention the section "Community Beds – Top Rank Scenarios". In this section it is stated:

"Today's validation meeting is a sanity check and the shortlist of seven highlights - rank scenarios do not provide any scenarios that could be put forward to the public for consultation for the principle reasons being 1) the population would not want to travel to Withernsea or Bridlington and 2) the cost of providing sub-acute beds in any of those hospitals is too high".

We are deeply concerned over these comments and feel they indicate clear bias and prejudging of public opinion that people will not travel to Withernsea or Bridlington hospitals. This is a clear breach of the Gunning Principles. A similar comment that people of Withernsea or Bridlington (the largest town in East Yorkshire) would not travel to Beverley would have been an equally valid argument. This view is extremely flawed and highlights the bias that was present in meetings from at least September 2015 and remained throughout, we believe, your flawed consultation.

It is our opinion that this one meeting invalidated the whole process and again should have been brought to your immediate attention.

It is additionally noted from this meeting that a member of the scoring panel actually voiced concern in the meeting that it appeared that the results of the process agreeing criteria methodology for scoring scenarios was being put aside because the results were not what were expected. We can find no record of this despite significant governance concerns being expressed at this meeting that it was referred to the Audit Committee for review

Summary

We believe that the FOI request has shown severe flaws in the process of the Urgent Care Strategy and that there are papers demonstrating that decisions had been made as early as July 2015 to support the opening of the three Urgent Care Centres in Goole, Beverley and Bridlington.

We believe that the decision to not consult on Withernsea and Bridlington Hospitals for community beds was made by using a biased opinion that people will not travel to Withernsea or Bridlington. We believe this position was outside the remit of those shortlisting and was prejudging public consultation.

As you will be aware one of the duties of the CCG is to prevent inequalities. We believe the CCG Governing Body failed in its duty by allowing bias into their consultation process.

We have no doubt that this closure will lead to greater health inequalities including some of the most deprived populations nationally.

Although we are not as familiar with the details, we have similar concerns regarding the Bridlington and Driffield Hospitals too and that bias may mean that they no longer have access to services.

In addition a reduction in the Out of Hours services has recently been announced for the Holderness region whilst no similar reductions are planned for the rest of the East Riding. We are also concerned that there is no plan for any community nursing clinics in Rosedale going forward.

You will be aware that Holderness is an area with some of the worst performing ambulance response times in the country and there have been repeated concerns raised that Holderness does not have equivalent access to services e.g. mental health, as the rest of the East Riding enjoy.

We are concerned that the future delivery of all services at Hornsea and Withernsea Hospitals, plus Rosedale are now under threat. We understand that x-ray provision, which has already been cut, is only guaranteed for the next three months.

We understand that the new community services contract is worth £2million less than the previous contract and this includes the funding for Urgent Care Centres and community beds. We believe that the majority of this funding has been taken from the Holderness region whilst additional investment has been made to other areas of the East Riding.

We believe our friends, colleagues and all patients of Holderness deserve access to the same high quality of healthcare the rest of the East Riding enjoy. We call upon you to take immediate action to halt and review the whole process prior to irreversible damage to healthcare in our area.

We look forward to having the opportunity to discuss this with you further.

Yours sincerely

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