



**OXFORDSHIRE
COUNTY COUNCIL**

Date: 14 February 2017
Our Ref: OJHOSC/SoS/HortonMat

**Oxfordshire Joint Health Overview
and Scrutiny Committee
County Hall
New Road
Oxford
OX1 1ND**

Rt Hon Jeremy Hunt MP
Secretary of State for Health
Department of Health
Richmond House
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Dear Secretary of State,

Re: Referral of the temporary closure of consultant-led maternity services at the Horton General Hospital

On 2nd February 2017 the Oxfordshire Joint Health Overview and Scrutiny Committee (OJHOSC) unanimously agreed to refer Oxford University Hospitals Trust's (OUHT) temporary closure of consultant-led maternity services at the Horton General Hospital ('the Horton') to the Secretary of State for Health. This referral is made pursuant to Regulation 23(9) of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

Background

In 2006 the then Oxford Radcliffe Hospitals NHS Trust (ORH) proposed moving inpatient paediatric and gynaecology services, consultant-led maternity services and the Special Care Baby Unit from the Horton in Banbury to the John Radcliffe Hospital (JR) in Oxford. The Committee believed that the changes were not in the interests of people in the north of the county and referred the matter to the Secretary of State, who supported this view.

The Independent Reconfiguration Panel advised that the Trust and the Oxfordshire Primary Care Trust were to invest in, retain and develop services at the Horton, as it considered the Hospital to have an important future role in providing local care to people in north Oxfordshire and the surrounding areas.

ORH maintained consultant-led maternity services at the Horton supported by a training programme for junior doctors working in obstetrics. However, in 2012 post graduate obstetric training accreditation at the Horton was withdrawn. This was predominantly due to the low numbers of births at the Hospital, which meant limited exposure to complex cases, and the difficulties experienced in recruiting sufficient numbers of middle grade doctors.

The Trust then developed a Clinical Research Fellow programme to support consultant-led provision, but they reported that national recruitment shortages in obstetric posts led to a reduction in applications which made it unviable. The programme closed in December 2015 and a rotational middle grade rota was created to staff the obstetrics unit.



**INVESTORS
IN PEOPLE**

In September 2016 the Committee was informed that OUHT were intending to temporarily close consultant-led maternity services at the Horton from 3rd October 2016, as they were unable to adequately staff the unit in a safe and sustainable manner.

OJHOSC held a further meeting in September to scrutinise OUHT's contingency plan for continuing Maternity and Neonatal services at the Horton. This included evidence of the Trust's efforts to maintain consultant-led maternity services and a discussion about the impact of temporarily closing the obstetrics unit and the associated risks.

At the meeting the Committee agreed that the Trust had provided satisfactory reasons for invoking an urgent temporary closure of consultant-led maternity services at the Horton General Hospital without consultation. It was agreed that the matter should not be referred to the Secretary of State at this stage on the following basis:

- A reduction in consultants at the unit was imminent,
- The Trust's recruitment drive had so far failed, although the Trust had not ceased its recruitment efforts and appointees were being offered contract extensions as an incentive,
- Alternative options for staffing the unit had been considered, e.g. the rotation of doctors with the John Radcliffe (JR) in Oxford,
- The question of travel times from the Horton to the JR had been thoroughly explored and a dedicated ambulance would be available 24 hours a day at the Horton to transfer complex cases to the JR,
- A decline in the numbers of births at the Horton was explained as the result of an increase in risk factors during delivery and more people being advised to go to the JR,
- High risk patients would be advised to go to the JR before they entered labour, so there was less need to transfer complex cases during labour, reducing risk.
- The majority of outcomes from other free-standing midwife-led units in Oxfordshire were reported to be safer because of a reduced risk of medical intervention.
- Provision of extra facilities and staff at the JR would be available to cope with the additional births from the north of the county and the equipment moved there could be moved back to the Horton.
- **Assurances were given by the Trust that they planned to reopen the unit by March 2017 on the strength of an action plan to recruit more consultants.**

To monitor the situation carefully the Committee requested regular updates on the status of consultant-led maternity services at the Horton, the number of women transferred to the JR in labour, and the recruitment of obstetricians.

The Committee was also keen to establish that a decision to temporarily close consultant-led maternity services at the Horton General Hospital would not pre-determine the outcome of the Oxfordshire Health and Care Transformation (OTP) Phase 1 consultation.

Phase 1 of the OTP consultation, which launched on 16 January 2017, includes a proposal to move obstetric services, the Special Care Baby Unit and emergency gynaecology inpatient services permanently to the JR, whilst maintaining midwife-led maternity services at the Horton.

Since the summer of 2016 the Committee has heard many passionate appeals from campaign groups, residents and MPs in the north of the county for consultant-led maternity services at the Horton to continue, as this would otherwise mean a downgrading of the Hospital.

OJHOSC plans to scrutinise proposals for permanent changes to maternity services in Phase 1 of the OTP at a special meeting on 7 March 2017 and provide its formal response to the consultation thereafter.

Reason for referral

The Committee chose not to refer this matter to the Secretary of State in September having agreed a local resolution with the Trust, namely that the closure would be temporary and a recruitment plan was in place to increase staffing levels by March at the latest, if not before.

The Trust's update on performance of maternity services at the Horton, dated 23 December 2016, stated that they would not have enough experienced and skilled medical staff in post to reopen the unit in March 2017 as planned.

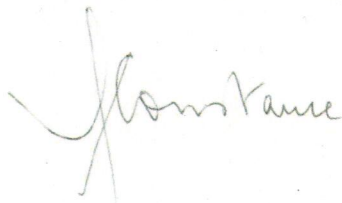
OJHOSC believes that the material grounds for not referring the matter have therefore changed, i.e. the Trust's recruitment plan has failed and the closure will now be longer than envisaged.

The Committee considers nothing further can be gained by discussions at a local level. OJHOSC has provided effective challenge to the temporary changes in provision of maternity care, but it will not agree that ongoing material service changes should take place without consultation.

Therefore, at its meeting on 2 February, the Committee resolved to refer the matter to the Secretary of State under Regulation 23(9)(b) of the 2013 Regulations and to ask that you refer the issue of provision of maternity services at the Horton General Hospital to the Independent Reconfiguration Panel.

I look forward to your response.

Yours Sincerely



Cllr Yvonne Constance OBE
Chairman Oxfordshire Joint Health Overview & Scrutiny Committee

Enc:

1. OUHT report to OJHOSC 'Contingency Plan for Maternity and Neonatal Services', September 2016
2. OUHT updates on maternity at the Horton General Hospital, 10 November, 5 December and 23 December 2016
3. OJHOSC meeting minutes, 15 September and 30 September 2016
4. Oxfordshire Health and Care Transformation Phase 1 consultation document