Questions to Health Scrutiny Sub-Committee 19th July 2011 (Item 4. Witness Session: South London Healthcare NHS Trust)

From Mrs Susan Sulis, Secretary, Community Care Protection Group

SECRET PROPOSALS FOR CHANGES OF USE &/OR CLOSURE OF ORPINGTON HOSPITAL CANADA WING.

- 1. The CCPG asked questions on this at 23.3.11 Trust Board. The answers given on 25.5.11 ignored parts (c), (d) and (e) of the question, concerning the appointment, brief and report of Management Consultants, and Public Consultation.
- (i) Will the Trust now answer these questions, and inform this Sub-Committee of its proposals?

There are no 'secret' plans regarding Orpington Hospital.

The current situation with regards to Orpington Hospital is unsatisfactory and needs to be resolved in a way which revitalises services for Orpington patients.

We are in the early stages of working with the local authority, Commissioners/GPs, the Friends of Orpington Hospital patient representatives from the Orpington community and staff representatives on deciding together the best future for these services.

The crucial starting point for these discussions is that the services currently provided at Orpington Hospital need to be available locally to Orpington patients in a way that is beneficial to patients and to the town of Orpington. There must also be continuity of service if any changes to services are recommended.

Only when these stakeholder discussions have concluded, can the Commissioners of the services decide the terms of the consultation process required.

We asked for external advice to review the Trust's clinical services and the estates that it will require to provide these services.

This review was publically announced at the time, and involved a series of stakeholder events to discuss some of the options. None of these options were decisions by the Trust. These decisions will be made carefully by the Trust's Board when Commissioning intentions for some services are clearer.

- 2. The answer included the statement "the trust will be meeting on 19th May to agree a joint position to avoid any potential for further confusion".
- (i) Why hasn't the Trust publicised the results of this meeting?

There was nothing secretive about this meeting. From this we agreed to participate in joint work with stakeholders on ensuring the best services for Orpington patients.

(ii) What is the 'joint position' agreed?

see above (i)

RESPONSES BY THE CHAIRMAN AND TRUST BOARD WHICH
DEMONSTRATE LACK OF HONESTY, EVASIVENESS, OBFUSCATION AND
MISLEADING ANSWERS TO QUESTIONS FROM MEMBERS OF THE
PUBLIC.

- 3. (i) Why does the Trust Board repeatedly fail to respond to proper questions from the public without integrity and transparency?
- (ii) Why do they ignore the requirements of the Committee on Standards in Public Life?
- (iii) Do they think they are exempt from these standards?
- (iv) If so, can they explain why?

We reject this completely, and would suggest that there are a minority of people who attend the Board meeting that use the forum to ask questions which are not of clear relevance to the issues that are being discussed at the Board

However, we do acknowledge that engagement with the public at Board meetings can always be improved, and have introduced in consultation with local LINks and people who regularly attend Board meetings a new protocol, which aims to improve the quality of questions and answers at Board meetings.

Please find attached a copy of this protocol.

From Mrs Jean Stout, Chairman, Community Care Protection Group

4. <u>DEEP VEIN THROMBOSIS RISK ASSESSMENTS</u>

What percentage of patients are being assessed in accordance with NICE guidance CG92?

The answer is 67% currently - and we are working hard to improve this