# OPEN LETTER TO THE RESIDENTS OF RUTLAND FROM THE RUTLAND HEALTH & SOCIAL CARE POLICY CONSORTIUM

Monday, October 5, 2020

### **Dear Rutland Resident**

Every household in Rutland will receive a brochure from Leicester, Leicestershire and Rutland Clinical Commissioning Groups (CCG) urging us to agree to the closure of acute and obstetric services at Leicester General Hospital, and the Birthing Centre at Melton Mowbray. It is important that you reply with your own views, but please read the following carefully before you finally decide how to reply, otherwise Rutland may lose a great deal because of a lack of public information.

### We are concerned by key proposals which could disadvantage Rutland: -

**LOSING ACCESS TO BEDS - HUGE CLOSURES ARE PLANNED.** New plans issued on 1<sup>st</sup> September propose removal of approximately 500 acute and maternity beds from Leicester General Hospital and Melton Birthing Centre. Future services and beds to replace those removed will be based at Glenfield Hospital and the Leicester Royal Infirmary (LRI). The plans admit that 100% of Rutlanders will be disadvantaged by these proposals because of reduced accessibility. Travel times will be increased, public transport and parking may be more difficult. They also say that they are planning to reduce their acute workload by 20%, so if Rutlanders go elsewhere that is helpful. This could mean going to Cambridge or Oxford for specialist treatment.

**LOSING SIGHT of RUTLAND'S NEEDS**. These plans only look two years ahead, yet were prepared over a period of seven years. However, this did not involve enough people who understand Rutland's distinct needs. There is substantial housing development and our population is growing. The proportion of elderly and the very elderly is growing much more rapidly than elsewhere reaching 35% of our population by 2035. Also the plans take no account of rural poverty.

**LOSS of NATIONAL POLICY APPLICABLE TO RUTLAND.** National and local policy is to move services closer to home and many Rutlanders can support that. CCGs know that hospital and community services are interdependent and a national requirement exists, that alternative provision must be offered before they close beds. None has been offered so far. CCGs have a duty (under S.14T of the Health and Social Care Act 2012) to reduce health inequalities for communities. They have to improve access to services and health outcomes achieved. These current proposals appear to fly in the face of these duties. They can be seen as a conscious decision to reduce services for Rutlanders.

Rutlanders need local services and beds to prevent unnecessary admissions to LRI and Glenfield as well as local beds to enable speedy discharge from major hospitals back to local services. Local services can include out-patient services such as diagnostics, dialysis, chemo, urgent care, which can all be based successfully in the community. Many Rutlanders support services focused on a hub, preferably based upon Rutland Memorial Hospital or an equivalent provision. If this were cut, it would be a serious loss to existing provision. The information that is available makes it clear that the success of the proposals on offer are dependent on undertaking more care in the community yet the current consultation is silent on community services and the future use of Rutland Memorial Hospital. Until we

understand what services will be available to us here in Rutland we are unable to support the reconfiguration of Leicester Hospitals.

**LOSS of INVOLVEMENT IN PLANNING.** This consultation document has been issued after proposals for acute and maternity services, which disadvantage Rutland, are already well advanced. However planning started in 2013 to develop a community strategy that is not yet finished. Some Rutland people were so frustrated at their lack of involvement that 100 of them took the bull by the horns in 2019 and prepared a *Rutland Health Plan*. It was received favourably by the CCG CEO and an official Rutland Health Plan was promised for January 2020. We are still waiting. The current consultation document contains proposals for developing community services for Leicester City on the vacated LGH site. There is absolutely no reason why Rutland cannot be treated in the same way. It has more to lose than any other community across Leicester, Leicestershire and Rutland if the current plans remain unmodified.

LOSS of QUALITY, CAPACITY, ACCESSIBILITY and OUR LOCAL HOSPITAL? Strong rumours continue that Rutland Memorial's future is uncertain and nothing clear has been said. If all acute and maternity beds at Leicester General and Melton are closed without local alternatives being offered in advance of a decision to close Leicester General, then Rutland could become a 'Health Desert'. It is not surprising, therefore, that people are very concerned there is an unstated hidden agenda to close Rutland Memorial as well as to take away access to acute and specialist services. The local hospital at Ashby was closed 6 years ago but the promised alternative services were still not in place at the beginning of this year and we fear Rutland could experience similar gaps in services.

#### What can we do?

**Questionnaire** Please do not agree to the closure of Leicester General until you are satisfied the proposals for some alternative services and/or compensations for losses in Rutland are acceptable. CCGs are required to demonstrate they have 'engaged' with our local community, and have listened. This is in order to propose changes shaped to meet local needs and avoid negative impacts, most particularly on the most vulnerable. Without this in place, we Rutlanders, especially the elderly and people on low incomes, will be losers.

**It is an important time to make your views known** – Our MP (Alicia Kearns), County & Parish Councillors and the Press will receive information from the CCGs, so it is important that they understand our expectations of healthcare in Rutland, please make your views known. We will be saying that we want a package of integrated health services as developed by over 100 Rutlanders in September 2019 and written up as "A Health Plan for Rutland". We will stress that we cannot accept closure of acute services until the alternatives are set out and clear costings are presented.

## What is the Rutland Health & Social Care Policy Consortium?

We are a group of local residents, knowledgeable about Health and Social Care both as consumers and professionally. We are very concerned for the future Health and Social Care provision for Rutlanders, especially as our community ages. We study National Health Policy and how it is applied locally. We are particularly worried by what we identify as repeated breaches of legal and policy requirements.

The views expressed here also reflect and present the views of a group of 100 Rutlanders who attended a consultation event in September 2019 which informed the report 'A Health Plan for Rutland'. Our thanks are due to those people for coming to the event and for their valuable input.

Our members are:-

Jennifer Fenelon (Chair), Christine Stanesby, Janet Seden, Kathy Reynolds, Judy Worthington and Miles Williamson-Noble. The core membership is advised by specialist contributors and expert consultants.

We can be contacted at <a href="mailto:rhscpc@icloud.com">rhscpc@icloud.com</a>

The 'Health Plan for Rutland' can also be obtained by emailing <u>rhscpc@icloud.com</u>