

## Decision to dissolve troubled London trust prompts anger from neighbouring clinicians

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London

Final proposals for a London NHS trust with large debts to be dissolved and its services allocated elsewhere have prompted strong opposition from local doctors and other healthcare staff from a neighbouring trust.

The final report on the South London Healthcare NHS Trust by the government appointed trust special administrator was published on 8 January,<sup>1</sup> setting out its proposals on how to deal with the trust, which has a deficit of more than £1m a week and a predicted accumulated deficit of £207m (€254m; \$332m) by the end of the current financial year.

The controversial proposals for the trust, which encompasses Queen Mary's Hospital in Sidcup, Princess Royal University Hospital near Orpington, and Queen Elizabeth Hospital in Woolwich, say that the trust does not have a viable future and should be dissolved, with services being broken up.

The new report was drawn up by Matthew Kershaw, the trust special administrator, and a team of senior doctors, nurses, and health experts and advisers.

Kershaw was appointed last July by the then health secretary, Andrew Lansley, under the regime for unsustainable NHS providers, the first time this power has been used since its introduction in 2009. The new report confirms recommendations made in a draft report published in October last year.<sup>2</sup>

One key recommendation is that Queen Elizabeth Hospital in Woolwich form a joint trust with nearby Lewisham Healthcare NHS Trust. The new organisation would have a single emergency department in Woolwich rather than Lewisham, while Lewisham's recently refurbished emergency department would be turned into an urgent care centre.

Clinicians and patients of the Lewisham trust have reacted strongly to the proposal, saying that it was unfair and dangerous to close the emergency department as well as maternity services.

Jos Bell, a spokeswoman for the Save Lewisham Hospital campaign, told the *BMJ*, "Lewisham Hospital is one of the top 40 hospitals, and £12m has just been spent on a revamped A&E [accident and emergency] department there, which only opened last May, and now they want to close it."

John O'Donohue, a consultant physician at Lewisham Hospital, told the *BMJ*, "We are dismayed at the fact that the administrator has chosen to penalise a solvent and successful trust which is completely separate. We are in surplus and are meeting our targets and in the top 40 hospital rankings. We find this extraordinary."

Since 2010, four tests have had to be applied to NHS service changes, and in preparing the report the trust special administrator applied these tests, one of which is that the changes have support from GP commissioners.

GP commissioners in local clinical commissioning groups (CCGs) were involved in the development of the report's recommendations, and support from GP commissioners for the recommendations was sought through a consultation.

In response, Lewisham CCG raised a number of concerns, mainly about a possible detrimental effect on local residents of the proposed service changes at Lewisham Hospital. However, the other five CCGs in southeast London were more supportive of the proposals, arguing that they were the right solution for securing high quality services for their populations.

O'Donohue said that the tests had not been met, adding, "Unfortunately there is an element here of divide and rule. People know that if one A&E department is slated for closure, and it's not theirs, they will breathe a sigh of relief."

"As for the whole benefit of the Health and Social Care Act in terms of putting GPs in the forefront of the commissioning process, what does that mean if the government accepts a report that has a regional bureaucrat deciding what's best for the local health economy instead of the local economy itself?"

Publishing the report, Kershaw said that his final recommendations had taken on board many comments and opinions gathered during a six week consultation. "I have said consistently that the status quo is not an option, and I believe these final, refined recommendations are the right ones, although I appreciate that some people will find them difficult to accept," he said.

The health secretary, Jeremy Hunt, will now consider the final recommendations and make his decision next month.

Brian Fisher, a GP in Lewisham and chairman of the Socialist Health Association, told the *BMJ*, "I think it will be a disaster for the population of Lewisham. It will deliver a worse, less safe service for the population. It will be more inconvenient, and probably there will be a risk to life if the changes to A&E go ahead. There's very little to recommend it."

"I'm very disappointed and very angry about what we are being offered here. We are going to do our best to make it embarrassing for the secretary of state to endorse this report."

"Lewisham was managing perfectly well, and from the GPs' point of view we would be moving from an optimistic,

incredibly good relationship with Lewisham Hospital, the local authority, and the CCG, with longstanding plans going forward, into a maelstrom of muddle.”

Louise Irvine, a GP in Lewisham and BMA council member, added her anger over the proposals, telling the *BMJ*, “I am very disappointed at the final proposals, because it means the virtual closure of our local hospital.

“There was a totally inadequate consultation period. I think this was a shoddy piece of work. The vast majority of patients in Lewisham and GPs do not even know where Queen Elizabeth Hospital in Woolwich is.”

Irvine, who also chairs the Save Lewisham Hospital campaign, added, “This is one of the top 40 hospitals in the country. It has good relationships with GPs, provides the full range of general hospital services, has got a new birthing centre . . . They’ve just spent £12m doing up the A&E, the children’s services are top notch, and the critical care unit is one of the very few to be approved for training.

“Patients will have to travel further to access care, and this will also destroy the good, collaborative work that Lewisham CCG has been doing.

“I think Jeremy Hunt might listen to the level of concern. It is almost unique to have the level of unanimity of clinical opposition that there is. There’s not a single GP in Lewisham who supports this, nor a single consultant in the hospital. That is unusual.”

- 1 NHS Office of the Trust Special Administrator. Securing sustainable NHS services: the trust special administrator’s report on South London Healthcare NHS Trust and the NHS in south east London. 8 Jan 2013. <https://www.wp.dh.gov.uk/publications/files/2013/01/TSA-VOL-1.pdf>.
- 2 Hawkes N. South London trust losing £1m a week should be broken up, says administrator. *BMJ* 2012;345:e7333.

Cite this as: *BMJ* 2013;346:f189

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