



HOUSE OF COMMONS
LONDON SW1A 0AA

Amanda Bloor
Accountable Officer
NHS Hambleton, Richmondshire & Whitby Clinical Commissioning Group
Civic Centre
Stone Cross
Northallerton
DL6 2UU

Our Ref: ZA30121

17 January 2020

A consultation on proposals for building a sustainable future for the Friarage Hospital in Northallerton

I write to formally support Option 1 as outlined in the consultation document - replacing the emergency department with a 24/7 Urgent Treatment Centre (UTC) supported by a front-of-house emergency medical model, dealing with approximately 90 per cent of urgent and emergency cases.

My primary reason for supporting this option over Option 2 – a 16-hour service closed between midnight and 8am – is the issue of public confidence in the emergency service provided and the long-term future of the Friarage Hospital.

As an MP I am acutely aware of public sensitivities around local hospitals. This is not unique to North Yorkshire, of course, but it is heightened here by the local geography and the distances many of my constituents face to access secondary care.

Option 2 may appear to have the immediate benefit of costing less to run, but in this instance I believe preserving maximum possible local access should take precedence. The period when a 16-hour UTC would be closed would be a time when travelling from more distant parts of the area served by the hospital can be most challenging – because of inclement weather and the lack of any public transport alternatives.

Adopting Option 2 would further undermine public confidence in the emergency care service and cause heightened anxiety amongst the wider population (not just those attend the UTC) that should they need the care at some point, it won't be there.

The issue of ease of recruitment to the new UTC, particularly in the medium to long term, has been raised both in the consultation narrative and, before that, in the independent report on emergency care I commissioned from the healthcare consultancy Carnall Farrar (Review of urgent temporary changes at the Friarage Hospital – June 2019)

My understanding is that in the first nine months of the UTC's operation this has not been a problem for the Trust. Carnall Farrar recommends (page 51 of main report) that the Trust develops a strategy for the retention and retraining of existing nurses and consider a national recruitment drive for emergency nurse practitioners.

Also, the Carnall Farrar report suggests that recruiting to and retaining these specialist nursing positions is easier than other nursing roles. A planned, proactive approach to recruitment should avoid the Trust finding itself in the situation it faced over staffing of the previous A&E.

Returning to my central point about public confidence, I believe it is important to place this decision over the level of emergency care in the context of what has happened at the hospital previously.

Following the downgrading of maternity and paediatric services in 2014 and the loss of mental health inpatients beds two years ago, many of my constituents are fearful of any further diminution of services at the Friarage. This is despite the service development that has also taken place in recent years.

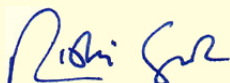
It was also extremely unfortunate that this consultation is being carried out in retrospect ie after the changes were implemented on an emergency basis in March last year. This has further undermined public confidence.

I believe this decision offers an opportunity to change the perception of the hospital's future and what has been, hitherto, the dominant narrative about it in recent years, that is the gradual withdrawal of services and leading some to suggest, misguidedly if understandably, that closure is the ultimate aim.

In the current 24/7 arrangements we have what has been described to me as a class-leading urgent treatment centre which sets a national benchmark for such a service in a rural setting like Northallerton. Simon Stevens, chief executive of the NHS, was clearly very impressed on his recent visit to the hospital. The data on the numbers of patients treated in comparison to the old A&E model are very encouraging.

The model of care has been developed in Northallerton by senior clinicians who know the hospital and the population it serves well. Local NHS management should back their vision and commit to the 24/7 option. I passionately believe that is what this community (which has been understanding about many of the unwelcome changes it has experienced at the Friarage over the years) deserves. By committing to the 24/7 option, local NHS management would boldly and clearly signal they fully support and understand their local community. This will help restore public confidence, and further build support for what is a much-loved local facility.

Kind regards,



Rishi Sunak
Member of Parliament
Richmond (Yorks)