

# Willoughby Society

FOUNDED 1962

Hon Sec. Mrs. M. F. Green

46, Main St  
Willoughby  
Rugby.  
CV 23 8 BH  
29. 10. 43.

The Chairman  
Warwickshire Health Authority

Dear Mr. Stansbie,

I write as secretary of the Willoughby Society which is a village society, having among its aims, the promotion of the interest and welfare of the people of Willoughby.

The suggestion that most hospital services could be removed from the Hospital of St. Cross in Rugby to Coventry or Nuneaton is upsetting in the extreme.

Even if it is possible to get emergency patients quickly and successfully to hospital in Coventry or Nuneaton, some concern must be shown to families and friends who need to visit. Many residents in country villages are elderly and, while they would willingly undertake to drive to Rugby, they would be appalled at the thought of coping with traffic in Coventry or Nuneaton and with the M.6. Moreover, for families without a car, there would be the prospect of first getting

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to Rugby, using an infrequent bus service, (if any) Then there would be a tortuous journey by train or bus and probably a good deal of walking too. One can only guess at the time such a visit would take but it would surely run into hours. It would also be costly.

However, the whole idea has nothing to recommend it. Such an arrangement would be far too inconvenient and completely unnecessary when Rugby has an excellent hospital which has recently been enlarged and developed at great expense.

I have written from the point of view of the villagers of Willoughby but everything that I have said applies equally to the people of Rugby. Moreover they must surely have a greater sense of pride and affection for their own hospital than we, in the outlying villages, can feel. Many Rugby people, having been taken to St. Cross in an emergency, are convinced they would have died, if they had had to travel further afield.

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For myself, I just cannot understand how all the work and planning and money-raising which has gone on at Rugby can be dismissed as ~~of~~ of no account. The idea that bigger is better does not impress me and I am ~~sure~~ sure I am not alone in this respect.

Yours sincerely,

(Mrs) M. F. Ivens.

Hon. Secretary

The Willoughby Society

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Mrs M F Ivens  
The Chairman  
Willoughby society  
46 Main Street  
Rugby  
Warickshire  
CV23 8BH

Department of Health  
Quarry House  
Quarry Hill  
Leeds LS2 7UE  
Telephone 0532 545000 ext  
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November 1993

Dear Mrs Ivens

Thank you for your letter of 29th October to Virginia Bottomley, Secretary of State for Health, about the future of St Cross Hospital in Rugby. As I am sure you can appreciate, Mrs Bottomley receives many letters every day and is unfortunately unable to answer each one personally. I have therefore been asked to reply.

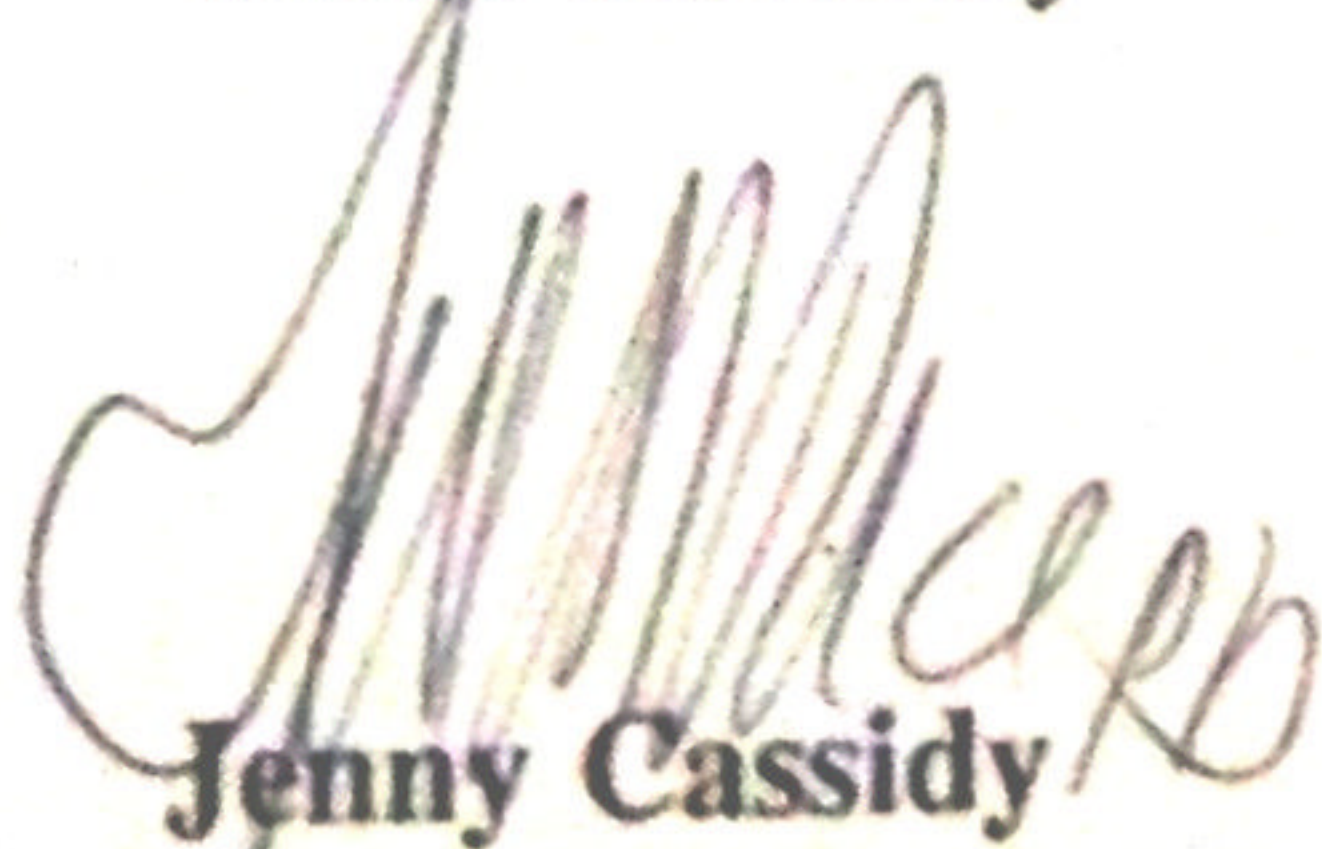
I naturally appreciate your concerns for the future of St Cross Hospital. However, I hope it will reassure you to learn that health authorities must follow a formal procedure when considering significant changes to the provision of health services. Part of the procedure involves the Health Authority, in this case Warwickshire, in public consultation on their plans.

As you are aware, Warwickshire Health Authority has recently begun its public consultation exercise on provision of acute services in the district. Health authorities must take into account all representations they receive during the public consultation period. I am, therefore, copying your letter to Mr Peter Stansbie, Chief Executive of Warwickshire HA so that he is aware of your concerns.

You may also consider contacting your local Community Health Council. It is the job of this body to represent patients and pursue complaints concerning the provision of health services in your area. They will be part of the consultation. Your local telephone directory should list the address and telephone number of your Community Health Council. Failing that, your nearest library should be able to assist you.

I hope this is helpful.

Yours sincerely



Jenny Cassidy  
Corporate Affairs Directorate



HOUSE OF COMMONS  
LONDON SW1A 0AA

JFP

JFP/VFW/  
January 1994

*Dear Mr. Owen.*

May I refer to our recent correspondence about the Hospital of St Cross and the Consultative Document issued by the Warwickshire Health Authority. You will, I know, wish to read the enclosed copy of my speech given in the House of Commons on Wednesday 15th December 1993.

Can I particularly draw your attention to the fact that I have written to all GPs who send patients to our local Hospital and indeed have quoted from a number of their letters. They were without exception all helpful and supportive.

I also refer to objections from the Warwickshire County Council, the Rugby Borough Council and the North East Warwickshire Community Health Council. I find it significant - but not surprising - that these bodies are all equally opposed to the Consultative Document.

Towards the end of my speech I stress the importance of the Accident and Emergency Department, particularly emphasising the position of St Cross relative to major roads and motorways.

In his response to me in the House the Parliamentary Under Secretary of State for Health said:

"My hon Friend has made a strong case for his constituents who wish to continue to use the hospital and that is an important factor which must play a central role in any discussion of the nature and location of services in an area. I congratulate him on having put the case so strongly."

Let me therefore conclude by again reaffirming my opposition to the Warwickshire Health Authority's Consultative Document as it relates to St Cross Hospital.

Sincerely

JAMES F PAWSEY MP

Enclosure

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Hon Sec. Mr. M. F. Lven.

The Chairman  
Warwickshire Health Authority

46, Main St  
Willoughby  
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CV 23 8BH  
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Yours sincerely,

(Mrs) M. F. Ivens.

Hon. Secretary

The Willoughby Society

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HOUSE OF COMMONS  
LONDON SW1A 0AA

JFP/SAG  
10th November 1993

Mrs M F Iven  
Willoughby Society  
46 Main Street  
Willoughby, Rugby CV23 8BH

A handwritten signature in blue ink, appearing to read 'Mrs M F Iven'.

Thank you for forwarding to me a copy of your letter addressed to Mr Peter Stansbie, Chief Executive of the Warwickshire Health Authority.

Let me say at once that I find myself in agreement with what you have to say. It is for that reason that I have already written to Mr P S Stansbie, Warwickshire Health Authority's Chief Executive and Mr E Evans, Warwickshire Family Health Services Authority's Chief Executive. I enclose the relevant copies.

You will see that in my latest letter to Mr Stansbie I ask for a meeting with him and the Chairman of the Health Authority. Also enclosed with this correspondence is a letter from me to Mr Brian Baker, Chairman of the West Midlands Regional Health Authority. I shall be meeting with him on Tuesday 16th November.

Of greater importance however, is the fact that I have already met with Dr Brian Mawhinney MP, Minister of State for Health and raised with him the possibility of St Cross Hospital losing some of its medical services. I have explained in great detail the fact that this is quite unacceptable to the people of Rugby. I also attach with this correspondence a page taken from Hansard of the 21st October which gives details of an exchange which took place in Parliament between The Rt Hon Virginia Bottomley MP, Secretary of State for Health and me.

You may certainly rely upon me to continue opposing the measures suggested in the Consultation Document produced by the Warwickshire Health and Warwickshire Family Health Services Authorities.

It is however of critical importance that you persuade your friends and neighbours to do as you have done and write to the above gentlemen, opposing the suggestion that the Hospital of St Cross be down-graded from a General to a Local Hospital. It is not enough to sign petitions, we must produce a deluge of letters so that these two gentlemen are under no misapprehensions about Rugby's feelings for its Hospital. You should if possible also attend the various events being organised by the Action Committee.

Continued . . . . .

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Finally, you may be aware that on Friday 5th November I organised a Public Meeting in the Benn Memorial Hall. Some 750 people crowded inside, with about another 4-500 outside. The meeting resolved that the Health Authority be told that no change should occur in the status of St Cross.

Sincerely



JAMES F. PAWSEY M.P.

[Mr. James Clappison]

help managers and professionals to work together with purchasers to promote high-quality care and the best clinical practice?

Mrs. Bottomley: Yes.

Mr. Derek Fatchett (Leeds, Central): Will the Secretary of State clarify a subject that was unclear from her statement? Will she give some sign as to the future employment prospects at Quarry house in Leeds for the National Health Service Management Executive? Will she dispel the rumours in Leeds that hundreds of jobs are to be lost at Quarry house? Having spent £55 million on a new building, any Government that can plan their business so badly that they create those jobs, relocate the staff and then lose jobs within a matter of six months are wholly incompetent and do not deserve to be in office.

Mrs. Bottomley: People who work in Quarry house are very concerned that the hon. Gentleman—of all people—should have been the first to undermine their arrival in Leeds. Any organisation of the size and complexity of the national health service needs a headquarters office, and any Conservative hon. Member would have welcomed all those people coming to Leeds, rather than, from the word go, making them feel unwelcome and undervalued.

As to costings, the relocations to Quarry house will bring about substantial savings. There were 25 sites all told in London, and the move has substantially reduced the number of sites, which will lead to savings of about £10 million a year once the immediate costs have been met. The people in Leeds, like the people in regions, will have discussions about how those changes affect them. They are having discussions at this moment. It is not possible to give precise figures, but we need a health service with appropriate management. We have moved on from the reforms. There are new challenges and new needs.

I urge the hon. Gentleman to take pride in Leeds as the headquarters of the national health service and not to seek every opportunity to denigrate and undermine them.

Mr. James Pawsey (Rugby and Kenilworth): The reforms that were announced by my right hon. Friend this afternoon were extensive. Will she elaborate on what she intends to do to improve accountability to the community, to Ministers and, through Ministers, to the House? It may help my right hon. Friend to know that I am thinking especially of proposals that might be put forward by health authorities to regrade or close hospitals.

Mrs. Bottomley: My hon. Friend is a champion of the services in his constituency. It is important that district health authorities, especially when they merge with FHSAs, work hard to secure the involvement and participation of local people. Many Opposition Members mentioned elected representatives on health authorities. I do not believe that that is the right way forward, any more than Nye Bevan did; I believe that the right way forward is proper communication and understanding with local authorities, and especially with the Member of Parliament. The community health council has an important role to play. If a proposal does not meet with the agreement of the community health council, it comes to Ministers for decision.

Mr. John Gunnell (Morley and Leeds, South): It is precisely because I was appointed to a health authority that I would express concern about one aspect of the structure that the right hon. Lady put forward. Will she explain how the eight people who will liaise with her will be responsible for the appointment of 540 boards? In those circumstances, how can those eight people be other than people who are acceptable to Conservative central office? Will not the changes centralise political control but fragment the strategy for health care?

Mrs. Bottomley: As I understand it, there has been little change for many years in the way in which chairmen are appointed, whatever political party has been in control. I pay a warm tribute to those people who, selflessly and with tremendous energy, have been so successful as chairmen either of NHS trusts or of DHAs or FHSAs.

The answer lies in Members' hands. If they know of people who have the dedication, energy and commitment to serve in that way on health authorities, they must submit their names.

Mr. Anthony Coombs (Wyre Forest): Is my right hon. Friend aware that the abolition of regional health authorities will be warmly welcomed in my constituency? There the Government health reforms have led to both hospitals adopting trust status, 80 per cent. of the population are now treated by GP fundholders and there is a better standard of services in acute and primary medicine than ever before.

Can she assure the House that there will be no transfer of staff, automatic or otherwise, from regional health authorities to the regional offices of the health service executive? In that way, administration in the national health service will be reduced and patient services will be improved.

Mrs. Bottomley: The new regional offices will be on the model of the zonal outposts which have been monitoring the trusts. That light approach is the one that we wish to pursue. I am delighted to hear of the successes in my hon. Friend's constituency, as he knows that, from next April, 90 per cent. of our provider units will be NHS trusts, leading to better care for patients.

Ms Tessa Jowell (Dulwich): Does the Secretary of State accept that the market created by her health reforms in London is creating chaos with the well-being and serenity of hundreds of thousands of patients who depend on London hospitals for their treatment? Will she give an assurance today to the 500 patients at the kidney unit at King's that they have nothing to fear, that their treatment at King's will continue unimpeded, and that a threat no longer hangs over the unit, which is their lifeline?

Mrs. Bottomley: I cannot give that assurance to the hon. Lady, and she knows as well as anyone why. In the past 80 years, 20 reports have said that there had to be change in London. No change is no option.

One of the great problems in London is that local people were deprived of routine district general hospital services because of the tremendous multiplication and fragmentation of specialty services. I am deeply concerned about the uncertainty that inevitably has to continue a little longer in some of the hospitals.

We have had independent reviews from research and from clinical experts and we shall take decisions in the near future as to how we can take forward health care in