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West Yorkshire
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Independent Reconfiguration Panel
6th Floor
157-197 Buckingham Palace Road
London
SW1W 9SP
2017

28th September

Dear Independent Reconfiguration Panel,

Enclosed please find a report from 999 Call for the NHS (Calderdale and Kirklees) that explains why Calderdale and Greater Huddersfield's Right Care Right Time Right Place plans for reconfiguring NHS and social care services are profoundly wrong, will damage the NHS in the area and are not in the interests of the population.

As you know, Calderdale and Kirklees Joint Health Scrutiny Committee has referred the proposals to the Secretary of State for Health.

The plans are largely un-evidenced, as even the Clinical Senate has pointed out. The hospital Trust's Full Business Case has evaded proper scrutiny by Councillors and it is deeply flawed.

We ask you to visit Calderdale and Greater Huddersfield to carry out a full review of the plans - including speaking with the full range of interested people - and tell the Secretary of State to halt them and to reconsider the government's NHS policies that are driving them.

As Professor Stephen Hawking has recently [written](#),

“There is overwhelming evidence that NHS funding and the numbers of doctors and nurses are inadequate, and it is getting worse. The NHS had a £2.4bn shortfall in funding in 2015-16, bigger than ever before. NHS spending per person [will go down](#) in 2018-19. According to the Red Cross, the NHS is [facing a humanitarian crisis](#). There is a staff recruitment crisis. The BBC reported that on 1 December 2015 there were 23,443 nursing vacancies, and a 50% increase in vacancies from 2013 to 2015. The Guardian [reported in May](#) that the number of nursing vacancies had risen further to 40,000. There are increasing numbers of doctor vacancies and increasing waiting times for GP appointments, treatment and surgery.”

This is the true strategic context and nature of the problems that need solving. Dismantling two District General Hospitals - as Calderdale and Huddersfield NHS Foundation Trust (CHFT) and both Clinical Commissioning Groups intend - is not going to solve these problems, it is just going to enable and acquiesce in the government's inadequate resourcing of the NHS.

To quote Stephen Hawking again:

“The question is whether democracy can prevail and the public can make its demands for proper funding and public provision undeniable by any government.”

We are making our demands for proper funding and resourcing of both Huddersfield and Calderdale District General Hospitals, complete with 24/7 Type 1 A&Es.

We entirely reject the NHS and social care reconfiguration proposals that the Calderdale and Kirklees Joint Health Scrutiny Committee have referred to you. As a key part of West Yorkshire and Harrogate Sustainability and Transformation Plan (STP), they are “merely the vehicle for delivering cuts to services that the government's ongoing underfunding of the NHS has made inevitable” - as Unison has described the STPs.

We urge you to tell the Secretary of State to listen to Stephen Hawking - and to us - and to properly fund and resource the NHS, so that our District General Hospitals can stay open and meet all required standards of patient care and staff terms and conditions of work.

Once that is guaranteed we can begin to look at ways of improving and modernising the NHS and social care.

There is no doubt that, as a result of the government's underfunding of the NHS and failure to come up with a decent NHS workforce plan, the NHS and social care in Calderdale and Huddersfield are fighting a losing battle to provide adequate care for patients and decent working conditions for staff.

Calderdale and Huddersfield NHS Foundation Trust's (CHFT's) Full Business Case refers to this as “the strategic context” and its summary of the Clinical Case for Change says that as things stand, the hospitals Trust can't meet national guidelines for clinical standards regarding staffing and building standards without:

“a major injection of permanent staffing and financial resources beyond that which is known to be available from government.”

In other words, if there weren't a massive Private Finance Initiative debt, a national and local NHS staff shortage and a tight fisted government, both District General Hospitals could continue, each with their own 24/7, type 1A&E.

These problems are entirely the result of government decisions to cut public spending, increase NHS privatisation with all the associated extra costs that brings, and in 2010, to cut the number of places at medical schools by 3.6% and to slash the number of places on undergraduate nursing courses by a massive 13%.

Our attached report outlines what is wrong with the “Right Care Right Time Right Place proposals” to reconfigure the NHS in Calderdale and Greater Huddersfield in line with these destructive national decisions.

Yours faithfully

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Rosemary Hedges,
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