for patient safety and justice



Rt Hon Jeremy Hunt MP Secretary of State for Health Department of Health Richmond House 79 Whitehall London SW1A 2NS

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Dear Mr Hunt

Mid Staffordshire NHS Foundation Trust Public Inquiry

This government deserves credit for holding a public inquiry, when the previous government had stubbornly refused to allow full and independent scrutiny of the huge and tragic failure by the system and certain individuals with regard to Mid Staffs. However, if the Government does not implement the recommendations from the inquiry in full the inquiry itself would not only be a massive waste of public money and wasted opportunity, but would be a betrayal of patients and the NHS. I am asking you for an assurance that you will implement the inquiry's recommendations in full, even where they run contrary to current government policy, and that you will ensure that those people and organisations most at fault for what happened at Stafford are held to account.

The decision of the Government to plough ahead with its NHS reforms, regardless of what learning comes from the public inquiry, was a serious error of judgement. At the time we, along with many others, warned that there should have been an analysis of the implications for patient safety of the proposed reforms and that the public inquiry's conclusions should be awaited. Patient safety should be the primary concern in any reforms of the NHS. Unfortunately, we now see "perfect storm" conditions for further "Staffords" to happen, with not only pressure on resources but also increased demand, fragmentation, low morale, and chaos brought about by the reorganisation. It is clear to us as a core participant, as it will be to you, that many of the inquiry's recommendations are likely to run contrary to current government policy. Sir David Nicholson admitted as much when I questioned him about it publicly.

We have become concerned at what appears to be a concerted attempt to preempt the findings of the inquiry over recent months with announcements of new policies and initiatives. For example, just to take a few:

- The Government have refused to wait for the inquiry's recommendations about creating a more open and fair culture in the NHS, or indeed to listen to patients or patients' groups. It has forced through a controversial watered-

down version of a so-called 'Duty of Candour' with patients when the government acknowledges the inquiry is likely to recommend a <u>statutory</u> duty. The support and protection of whistleblowers has been restricted to proposals merely for stronger statements of principle in the NHS Constitution.

- The Government has pushed through controversial measures which will weaken and even muzzle Healthwatch the new patients' organisation supposedly monitoring the NHS and giving a voice to patients. The inquiry has looked in depth at the system of public and patient involvement and support for complainants, and will undoubtedly have something to say about it. The Chairman heard evidence to the effect that a strong, joined up, patients' watchdog, more akin to the previous Community Health Councils was needed. Such a body may well have brought about an earlier intervention at Stafford. Instead, the Government is almost guaranteeing the failure of Healthwatch by introducing regulations fettering its ability to speak out for patients, making it dependent on local authorities for funding, thereby effectively guaranteeing fragmentation and inconsistency.
- The Government has not shown any sign of taking serious steps to make the Care Quality Commission a more robust and reliable regulator of quality and safety. It appears wedded to the 'risk based' approach which was so heavily criticised at the inquiry. The Government appears averse to regulation per se and prefers instead to rely on competition and contracting as the mechanisms for driving up quality, in spite of the lack of evidence that this approach works.
- The Government have made it clear they are resistant to the idea of setting minimum staffing levels on wards or regulating health care assistants. These are things that it seems likely that the inquiry will recommend.

It is obvious having read the inquiry chairman's and counsel to the inquiry's closing statements that the Chairman will have things to say about the issues mentioned above (and others) which are likely to sit uncomfortably with current policy.

The challenge to you now is whether you will put patients first and be prepared to implement the inquiry's recommendations in full even if this is the case. Taking the correct action will require significant changes of policy. The alternative, to side step or ignore recommendations from the most important investigation in the history of the NHS, would be a disastrous and costly error of judgement. Now is the time to show strength and courage and put patient safety before political ideology. We call upon you to commit yourself to ensuring the report's recommendations are implemented in full and where necessary, people are held to account.

We hope you will afford us the opportunity to discuss the full implications of the inquiry report with you when it is available and that you will seize this opportunity to make the NHS a better and safer service, where scandals like that at Stafford will be avoided.

Yours sincerely

Peter Walsh
Chief Executive