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19 January 2015

Dear Jeremy

Hinchingbrooke Hospital

Firstly, I thank you for your unequivocal message of support you gave for Hinchingbrooke at Health Questions last week. Following our various conversations on the future of the hospital, this public declaration was very well received by my constituents and indeed the hard working staff, for whom this period has been a very traumatic and testing one.

Clearly, the priority now for local patients is to ensure continuity of the excellent health care that we have come to expect at the hospital since Circle have taken on the contract. As I have explained to the local Clinical Commissioning Group and the NHS Trust Development Authority, it is vital that the innovation and huge improvements we have seen in Hinchingbrooke in recent times are continued under any new management arrangements, following Circle's exit, whenever that may be.

I met with the hospital's Chief Executive last Friday to discuss the CQC report. Clearly there are a number of issues to be addressed and I understand that some 70 per cent of problems have already been resolved.

For my part, like with many others, I simply cannot reconcile the negative tone of the CQC report with my own experience of the hospital. To start with, the significant and frequent constituent complaints I received before Circle's management have gone down to a trickle. When Circle took over, the roof was leaking and the place had a very dreary atmosphere. Now it is bright and welcoming, with TV's and better food for patients and a decent café for visitors. Instead of regular (annual) threats of ward closures and two threatened hospital closures, during my time as MP, there was the continuity of a long term contract.

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Instead of ongoing infection problems, there have been no MRSA infections for 2 years and only 6 hospital acquired c.difficile cases in the last year. Before Circle, Hinchingsbrooke was seen as a failing hospital and it became all but impossible to attract decent doctors and nurses. Last year, Hinchingsbrooke employed 24 new doctors. Previously patient care was mixed, but now 97 per cent say they would recommend the hospital.

The management processes of Circle have revolutionised the effectiveness of the hospital systems and empowered staff. This would include, moving decisions down to ward level and instituting a (Japanese assembly line derived) "stop the line" policy. The management policy is now led by clinicians. The hospital has been winning national awards and receiving a regular stream of visitors who want to see how it is done.

Nothing that I have seen before the CQC report would justify calling the hospital "inadequate".

Last Friday, I received the enclosed two open letters, from the Hunts Patients Congress (representing 192,000 local people) and the hospital's Medical Advisory Committee. The MAC letter was signed by 42 of the hospital's doctors, being 100 per cent of those that were able to attend the last meeting of the MAC (and with more signing up every day). Both letters address the CQC findings. The MAC letters says: "It is simply not possible to reconcile the vast reams of verified statistical data with a judgement of 'inadequate'."

I could go on in this vein, but I think that I have made the point that local doctors and patients see Hinchingsbrooke as a good, safe and popular hospital; quite the opposite of inadequate or failing.

Unfortunately, the current issues do not stop there as I have been approached by a number of national media journalists to comment on the possibility of there being some degree of bureaucratic/political collusion to financially penalise and/or downgrade the achievements of the hospital. These issues include:

- CQC inspectors and CCG staff not declaring their Party affiliations or membership of groups actively campaigning against private sector involvement in the NHS;
- Politically biased staff within the hospital using their political agenda to influence inspectors;
- The local CCG undermining the hospital financially by the use of unwarranted penalties and changing the basis for payments for hospital services.

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For my own part, I have not received any evidence of corruption, fraud or political collusion between the various NHS parties. However, it is certainly the case that the hospital has been at the receiving end of an ongoing and vicious attack by the public sector trade unions, who have perceived Hinchingsbrooke to be the “thin end of the wedge” for what they call the “privatisation of the NHS”.

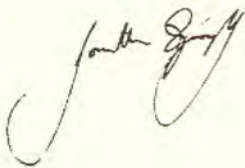
For our local hospital to have been dragged into a national public v private debate has been taken very badly in Huntingdonshire, by my constituents who simply want a decent hospital and to support it as such free from politics.

However, now that these collusion allegations are appearing regularly, not least on the front page of national media, I think that you need urgently to start an inquiry to get to the bottom of what did or did not happen. I suggest this firstly, to clear up what has happened locally, but secondly to reduce the chances that any wrongdoing is replicated elsewhere.

Even if there was not political interference in the contract, we are still left with the perplexing question as to how could such a well run and popular hospital be subject to a failing contract. Accordingly, the contract award procedure in itself, in my view, supports a full review so that lessons can be learned.

A copy of this letter goes to the local county and district councils, Shailesh Vara MP, who shares the district with me, local patient groups, and media.

Best Regards

A handwritten signature in black ink, appearing to read 'Jonathan Griffith'. The signature is written in a cursive style with a large initial 'J' and a long, sweeping underline.