

## **Oxford NHS trust makes deal to send hundreds of patients to private theatres for surgery**

Oxford Mail, 11 September 2018

HUNDREDS of NHS patients in Oxfordshire will be sent for surgery at operating theatres run by private healthcare firms this winter as hospitals desperately try to clear a backlog of patients.

A 'perfect storm' of staffing pressures, cold weather and flu outbreak last winter forced hundreds of operations in Oxfordshire to be cancelled with waiting lists for procedures including hip or knee replacements continuing to grow.

In an attempt to combat the problem, Oxford University Hospitals (OUH) has revealed plans to treat more than 500 patients over the next five months at private hospitals in Banbury and Headington, with negotiations ongoing over the possibility of more referrals.

Health campaigners say the move is 'the wrong way' to go about reducing the trust's 'atrocious' waiting times, with nearly 8,000 patients waiting longer than the target of 18 weeks in the latest available figures.

While trust chiefs have said the move will allow patients to be treated quicker, while also meaning more income for the trust, NHS campaigners have raised concerns about the increasing use of private firms to treat NHS patients.

The trust is currently finding it impossible to treat 92 per cent of patients within the supposed maximum waiting time, which is one of the NHS's key performance targets.

The latest figures show that as of June, there were more than 1,300 extra patients waiting for treatments compared to a year ago, with the number of those receiving treatment within 18 weeks falling from 89.8 per cent to 85.5 per cent.

Chairman of campaign group Keep Our NHS Public Oxfordshire branch, Bill Mckeith, said:

"Oxfordshire has an atrocious record as regards hospital waiting times. This is because of government cuts. Of course, it is good news that more patients will be treated and waiting times will (albeit temporarily) be reduced. But this is the wrong way to go about it."

Mr Mckeith added:

“All things being equal, patients and staff always lose out when a private company is involved, as profit is creamed off.”

As of June, there were 53,965 people waiting for treatment with 7,812 (14.5 per cent) of those already having waited longer than the 18-week target.

The number has risen significantly since June 2017 when there were 52,639 patients waiting for treatment - 5,365 (10.2 per cent) had then been waiting for longer than 18 weeks.

The news comes after national reports suggested that hospitals and clinical commissioning groups (CCG) had been encouraged by NHS England bosses to send patients private in order to reduce waiting lists.

The trust has denied they had received any such instructions. OUH head of communications, Matt Akid, said:

"We have strengthened our partnership with Ramsay Health Care so that the Independent Sector Treatment Centre (ISTC) on the Horton General Hospital site in Banbury, which is owned by the NHS and leased to Ramsay, will be used to carry out elective surgery in key specialties.

This initiative will initially focus on patients who are waiting for Gynaecology and Orthopaedic procedures and is due to get underway in October.

We aim to carry out almost 500 gynaecology and orthopaedic operations in total at the ISTC between October and the end of March 2019.

Patients will be operated on by OUH surgeons and support services, for example pathology for blood tests, will also be provided by OUH staff.

Ramsay will provide the facilities – including operating theatres – and nursing staff. We are also working in partnership with the Manor Hospital in Headington for this private sector facility to be used to carry out around 20 gynaecology operations per month.”

The deal was criticised by Mr Mckeith, however, who called for the ISTC to be fully brought back under the control of the public sector.

OUH has said the deal will mean more income for the trust, which is paid a set tariff by Oxfordshire CCG per procedure carried out. The payments for the extra 500 operations in this case will be split between OUH and Ramsey, with OCCG saying it has already budgeted for the ops. However, bosses have not confirmed the exact tariff costs.

Last month, the CCG, which is responsible for buying NHS healthcare for the residents of Oxfordshire revealed it had entered into a financial recovery plan after significantly overspending in just the first two months of this financial year.

A CCG spokesperson said use of the independent sector to support the NHS, particularly in winter, had been a suggestion over the last few years. The spokesman added:

“We are working closely with all our providers to reduce waiting times, and to see how we can manage patient flow in the most appropriate and timely manner. Given our challenged waiting times in some specialties we are clear that patients can exercise their own choice on finding their preferred hospital from the approved lists. To assist in reducing waiting times there is further work with the Horton Independent Treatment Centre to increase capacity in urology and orthopaedics.”

## **Oxon KONP statement on 500 privately done operations**

Oxfordshire has an atrocious record as regards hospital waiting times. This is because of government cuts. See the attached graph.

Of course, it is good news that more patients will be treated and waiting times will (albeit temporarily) be reduced.

But this is the wrong way to go about it.

The private hospital (Independent Sector Treatment Centre) at the Horton in Banbury, where the operations are due to take place, is already owned by the NHS, and leased to ‘Ramsey Health Care’. It should be taken back in house and the additional funds used to provide a public service.

Other things being equal, patients and staff always lose out when a private company is involved, as profit is creamed off.

The ‘staffing incentive scheme’ whereby nurse are paid Sunday rates for any extra weekday shifts is a sticking plaster measure in the context of a drastic lack of nurses in the county. Other measures are needed to counter this, such as an Oxford weighting on pay. The same may well be true for the new Flexible Staff Pool being introduced later this month.

Most of these problems (waiting lists and staffing shortages) is down to underfunding by central government.

Bill MacKeith

Secretary, Oxfordshire Keep Our NHS Public