Dear Secretary of State for Health and Care and the Board of the Royal Devon University Healthcare NHS Foundation Trust,

Re: Suspension of maternity services at North Devon District Hospital and the future of healthcare in North Devon

I am writing to express my deep concern about the suspension of birthing services at North Devon District Hospital and the wider implications this has for the future of healthcare provision for the people of North Devon.

The resignation of Dr Karen Davies, a highly respected consultant at North Devon District Hospital and former Medical Director of the Royal Devon University Healthcare NHS Foundation Trust, is particularly concerning. Dr Davies has stated that she stepped down because she believed the Trust had mishandled the maternity crisis. She has also said that, over a period of two years, she repeatedly warned senior leaders about staffing shortages, patient safety concerns and a poor workplace culture.

Most troubling of all is the suggestion that these warnings were not acted upon and that a proposal for additional support, which may have enabled the maternity unit to remain open, was rejected by the Board.

Births at North Devon District Hospital were suspended on 11 August, with obstetric consultants and senior midwives reportedly being informed only the day before. This raises serious questions about the planning, governance and decision-making that led to such a critical service being suspended at such short notice.

Negotiations are continuing over whether and when the service will resume. However, the consequences of a permanent loss of obstetrics would extend far beyond maternity care.

North Devon District Hospital is an essential teaching and training centre. If obstetrics were permanently lost, the hospital could also lose trainee rotations in anaesthetics, paediatrics and emergency medicine. Without these training rotations, junior doctors may no longer come to North Devon. The consequences of that could be profound for the ability of the hospital to recruit and retain the medical workforce it needs to provide other essential services.

In the longer term, the loss of these services risks creating a damaging downward spiral: fewer specialist services lead to fewer training opportunities, which lead to difficulties recruiting doctors, which in turn threaten the viability of other services. For a rural and geographically isolated population such as North Devon, this would be unacceptable.

The merger of the former Northern Devon Healthcare NHS Trust with the Royal Devon and Exeter NHS Foundation Trust was presented as an opportunity to improve healthcare for the people of North Devon. We were told that the merger would provide North Devon with greater access to Exeter's specialist consultants and expertise, with services and clinicians working together across both sites.

Instead, there is a growing perception among the people of North Devon that the merger has resulted in a gradual transfer of beds, services and expertise away from Barnstaple, while Exeter continues to grow and develop as the dominant centre.

That cannot be allowed to become the inevitable outcome of the merger.

There have been repeated national reviews of healthcare provision across Devon, and the consistent conclusion has been that North Devon cannot manage without its acute hospital and that Exeter cannot simply absorb the additional workload that would result from the loss of major services in North Devon.

These findings must not be ignored.

The people of North Devon deserve the same access to safe, timely and high-quality healthcare as people elsewhere in Devon. Geography must not become a reason for a rural population to receive a progressively reduced level of hospital provision.

We therefore need answers and accountability.

I am calling for an **independent inquiry** into the circumstances that led to the suspension of maternity services at North Devon District Hospital.

That inquiry should establish:

- What warnings were given to the Trust Board and senior executives regarding staffing, safety and workplace culture over the preceding two years?
- When were those warnings received, by whom, and what action was taken in response?
- Why were concerns raised by the Medical Director apparently not acted upon?
- Why was the proposed support package that could potentially have allowed the maternity unit to remain open rejected?
- Who made the decisions that ultimately led to the suspension of births?
- Why were obstetric consultants and senior midwives given such little notice?
- Were there opportunities to prevent the suspension that were missed?
- What responsibility do individual executives and Board members bear for the decisions that were made?
- What safeguards are now in place to ensure that serious concerns raised by senior clinicians cannot simply be ignored?

If the Board was not listening to its own Medical Director when she repeatedly warned that things were going wrong, then the public has a right to know **who was being listened to, what advice was being followed, and why**.

The inquiry should also examine the wider consequences of the merger between the former Northern Devon and Royal Devon and Exeter trusts.

We need an objective assessment of how the merger has affected healthcare provision in North Devon, including the loss or reduction of beds, services, staffing, training opportunities and specialist provision. It should also examine whether the

merger has inadvertently increased health inequalities between North and East Devon.

If the merger has contributed to a widening gap in healthcare provision, there must be a clear and properly funded plan to address those inequalities.

North Devon must not be allowed to become the poor relation within the Royal Devon system.

North Devon District Hospital is not simply another site within a larger organisation. It is the acute hospital serving a large, geographically dispersed population, many of whom face significant challenges in travelling to Exeter.

Removing major services from Barnstaple does not simply mean asking patients to travel a little further. For some patients and families, particularly those who are elderly, disabled, socially disadvantaged or without access to private transport, travelling to Exeter can create a significant barrier to receiving healthcare.

Maternity care makes this issue particularly stark. Women should not be placed in the position of having to undertake lengthy journeys during labour because a local service has not been adequately supported.

The suspension of births should therefore be treated not simply as a maternity staffing problem, but as a serious warning about the sustainability of acute healthcare in North Devon.

I urge the Secretary of State for Health and Care to intervene and ensure that the circumstances surrounding the suspension are independently investigated.

I also urge the Royal Devon University Healthcare NHS Foundation Trust to demonstrate that it is genuinely committed to providing sustainable, comprehensive acute healthcare in North Devon rather than allowing services to become progressively concentrated in Exeter.

The people of North Devon need more than assurances. We need transparency, accountability and a credible plan for the future.

We need to know what went wrong, why repeated warnings were not acted upon, who was responsible for those decisions, and what will be done to ensure that this cannot happen again.

Most importantly, we need a firm commitment that **North Devon District Hospital will remain a viable, properly staffed and properly supported acute hospital, with the range of services and training opportunities necessary to sustain it.**

The people of North Devon should not have to fight continually to protect essential NHS services that they have every right to expect.

I therefore ask that the Secretary of State and the Royal Devon University Healthcare NHS Foundation Trust give this matter their urgent attention and support

an **independent inquiry into the suspension of maternity services and the wider impact of the merger on healthcare provision and health inequalities in North Devon.**

Yours faithfully

Cllr Pru Maskell