

Secretary of State for Health  
Department of Health  
Richmond House  
79 Whitehall  
London  
SW1A 2NS

5<sup>th</sup> October 2009

Dear Secretary of State,

I am writing to you with great concern at the apparent failure of the government to monitor whether patient safety is at risk in independent sector treatment centres.

The BBC's Panorama program of 30 September uncovered shocking evidence of three men who had died as a result of gall bladder surgery and another death in North West England, all in ISTCs.

This is worrying enough, but these tragic cases cast doubt about whether the government is adequately ensuring that ISTCs are safe for patients. In an interview for the program your health minister Mike O'Brien made the astonishing claim that the government does not monitor death rates in private treatment centres in order to cut bureaucracy.

He said: "We have sought to reduce bureaucracy and that has a price. That price is that all the statistics that we previously easily got aren't necessarily flowing in at the same rate because we're spending more money on doctors and nurses than we are on the people who collect statistics."

As you will know, full statistics for ISTCs have never been made public because of the curtain of commercial confidentiality, and conversely it is not true that the NHS has stopped collecting statistics on its own death rates. Cutting bureaucracy cannot be used as an excuse for compromising safety – death rates are not an incidental statistic.

Information pertaining to ISTCs must now be made public. In the interests of safety, please publish the mortality and morbidity rates in all ISTCs, both death rates and cases where operations have gone wrong, so that a fair comparison can be made between the relative safety of ISTCs and NHS hospitals.

If Mike O'Brien is right and this information is not kept, it is essential that you launch an urgent and fully public review of safety in ISTCs.

The government remain committed to patient choice. How are patients to make an informed choice if they are unable to assess even basic safety levels when deciding whether to be treated in an ISTC?

I look forward to your reply.

Yours sincerely,

Paul Evans  
Director