



Chancellor of the Duchy of Lancaster

Al's - your papers?

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24 January 1986

Mark Addison Esq  
Private Secretary to the Prime Minister  
No 10 Downing Street  
LONDON  
SW1

~~CP~~  
Send 1 rec per 79 AQPM  
please MGA 24/1

Dear Mark,

ASPIRE

The Chancellor of the Duchy has received an invitation from ASPIRE (the Association for Spinal Injury Research Rehabilitation and Reintegration) to assist them with an appeal to large corporate donors for funds to construct a sports and rehabilitation centre at Stanmore.

Following advice from DHSS (please see further letter attached), the Chancellor has concluded that he should support the Appeal. However, I have asked to see the draft of the letter which ASPIRE would wish Mr Tebbit to sign, and we will, if necessary, propose changes to the draft to seek to make it clear that his support is given specifically to this appeal.

Although this does not fall squarely within the provisions of paragraph 79 of Questions of Procedure for Ministers, it would probably be right for you to know of how Mr Tebbit now proposes to proceed.

I am copying this letter to Elizabeth Mothersill (DHSS), to whom I am grateful for the earlier advice.

Your Sincerely,  
Andrew Lansley

ANDREW LANSLEY  
Private Secretary



**DEPARTMENT OF HEALTH & SOCIAL SECURITY**

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*From the Secretary of State for Social Services*

Andrew Lansley Esq  
Private Secretary to  
The Rt Hon Norman Tebbit MP  
Chancellor of the Duchy of Lancaster

22 January 1986

*Dear Andrew*

The Chancellor has asked whether the DHSS would see any possible difficulty if he were to accept an invitation from ASPIRE (the Association for Spinal Injuries, Research, Rehabilitation and Reintegration) to take part in their 1986 appeal to raise funds for the Sports and Rehabilitation Centre at Stanmore Spinal Injuries Unit. I hope the following background information may be helpful to him in considering his decision.

ASPIRE was set up in 1983 to help support a new 20-bedded Spinal Injuries Unit, based at the Royal National Orthopaedic Hospital (RNOH) at Stanmore. The Unit was opened in 1984 and was a centrally funded development. One of ASPIRE's principal tasks is to help raise £1 million for a rehabilitation and sports facility for the Unit; £450,000 has been raised or pledged, on our latest information.

The issue which Mr Tebbit will wish to consider has to do with the whole future of the RNOH and so the future location of the spinal unit.

The RNOH is one of the Post-Graduate Hospitals which were transferred to Bloomsbury Health Authority in 1982, during the reorganisation of the NHS. It was formerly run by its own Board of Governors. The transfer was made following a report of the London Advisory Group which recommended that the RNOH and its specialty would benefit from close association with undergraduate teaching hospitals. The transfer has never been accepted by many of those working at the RNOH, who saw it as a loss of independence. Since then the RNOH has been caught up both in the recurrent financial pressures which face Bloomsbury DHA and in the uncertainty surrounding the DHA's long term strategy.

Last year a special study set up by the DHA into orthopaedic services in Bloomsbury (including the role of the RNOH at Stanmore) concluded that significant changes should be made to allow the hospital to concentrate on its more specialist activities. The changes proposed included reductions in beds and the closure of the accident and emergency department. In December the DHA accepted most of the recommendations and agreed that the next step was to discuss them with the North East Thames Regional Health Authority. These proposals are strongly opposed at Stanmore and by local MPs, especially Hugh Dykes.

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The implications for RNOH of these latest suggestions are, of course, uncertain, but even if the RNOH remained at Stanmore proposals for change following last year's special study are inevitable and will be opposed by the consultants. Even if the local Community Health Council were to agree them, Ministers here will be involved in final decisions on changes because, while Parliamentary Under Secretary for Health, John Patten said that Ministers would call in for decision any proposed changes at Stanmore on account of the status of the hospital. ASPIRE is a charity and so cannot overtly engage in political lobbying, but it is inevitable that it will be drawn into the controversy; apart from anything else, many of the individuals involved with ASPIRE and RNOH are the same. It might be difficult for any patron or sponsor to remain neutral on this issue.

I hope this information will be useful to Mr Tebbit in making what Ministers here understand must in the circumstances be a very difficult decision.

*Yours sincerely*

*Elizabeth*

ELIZABETH MOTHERSILL  
Private Secretary

