



21 November 2025

Mrs Helen Hamill, SOAS
SOAS Press : soas.swah@gmail.com

Dear Helen and members of the SOAS Committee

Thank you for your letter of 20 November 2025. While this has been the latest in a series of letters between us, and you have declared you do not now feel you can meet the Trust, I still felt it was important to set out the Trust's position, to try to ensure that there is no misunderstanding of our intentions, and to keep open the opportunity for a two-way dialogue into the future.

First, I am sorry to hear that you are disappointed with the proposed arrangements for engagement. As I have stated previously, the Trust's intention throughout has been to establish a constructive, balanced, and transparent basis for dialogue. We recognise the strength of feeling within the community, and nothing in our correspondence would ever be intended to diminish that.

I appreciate that SOAS was content for the meeting to proceed, subject to a number of conditions that you specified, namely that the agenda was based solely on the enquiries in your letter of 28 July, and that it would be conducted through livestreaming and with the Fermanagh and Omagh District Council Chair as the meeting chair. Our position is far from a rejection of engagement, but rather was an effort to ensure that the initial meeting is structured in a way that is fair, balanced and workable for all parties.

A mutually agreed agenda is standard practice for any engagement of this nature. The items proposed by the Trust - such as patient outcomes, clinical standards, and workforce considerations - are integral information to the issues raised publicly by SOAS and are essential for an informed and transparent discussion.

Similarly, our suggestion of an independent chair for a specific engagement which required discussion on the SOAS Roadmap, was because someone who has a prior public position of endorsement on that Roadmap could not independently chair a meeting where the Roadmap was under discussion. Our suggestion was intended to

ensure impartiality and definitely not to exclude any individual or organisation. We have been very clear on this point with SOAS and the Chair of the Council, with whom we have a very good working relationship. Livestreaming is something we remain open to for future sessions, once an initial meeting has established a constructive foundation and again provides an engagement where we can begin to build a way of working at these meetings, together.

You have referenced remarks made at a recent meeting of Derry City & Strabane Council. I want to state respectfully and unequivocally that your statement is taken out of context and does not reflect my view, my approach, or the Trust's position. You will also be aware that at that meeting I acknowledged that the change in provision of emergency general surgery in the Western Trust has been difficult for local communities.

I can also reassure everyone in our communities that for the first time the emergency general surgery service, for all patients in the West, is meeting Minister Swann's revised Standards as set out in the Review of General Surgery in Northern Ireland 2022. We have no doubt that these standards, which have seen changes in training and in ways of working for our clinical teams, with more sub-specialisation, sustainable rotas, larger consultant surgeon teams which aid recruitment and retention, and enabled sub-specialisation. This has contributed to the improvement in outcomes. I am sure you will join me in acknowledging the excellent work of our Trust staff in both Acute Hospitals who have delivered these improvements together.

In this context and given the many different challenges faced by Health and Social Care in Northern Ireland, such as major gaps in Mental Health provision, Primary Care, Social Care, Hospital Flow, and resourcing pay awards, it is important to have perspective and for a measured approach to emergency general surgery, particularly given the excellent improvements made in outcomes for patients.

I recognise that SOAS has a different interpretation of the current clinical pathways. The data the Trust holds is independently validated and demonstrates improved outcomes for patients following the temporary suspension of Emergency General Surgery at SWAH. We have been committed to sharing this information openly, including at the proposed meeting with you, so that the basis for our clinical decisions can be understood and examined transparently. This is something that we will now communicate openly with a number of stakeholders and the public so there is a clear understanding of how this independent and evidenced clinical data is demonstrating improved patient safety and outcomes under the new arrangements.

We do not deny the pressures in emergency departments across Northern Ireland at present that these and which have been ongoing for some time. The Minister has spoken frequently about these regional pressures across all Hospitals which are real, serious, and recognised by the Trust, the Department of Health and the Royal College of Emergency Medicine. I have publicly apologised to any patient who has endured challenging circumstances in any of our Emergency Departments. Like all Acute Hospitals in the region, we will continue to work to overcome these pressures in the difficult months ahead. I also often talk about my sincere appreciation for our outstanding staff, whose selfless commitment to our patients remains evident even in the most demanding and pressurised situations. These system-wide challenges, however, are distinctly not connected to any concerns you refer to in relation to the patient pathways for Emergency General Surgery in the Trust and again the data clearly shows this.

You have expressed the view that the Trust has failed in its statutory duties to involve local people. I want to reassure you that this is not the case. The Trust has followed the statutory framework and legislation, having carried out a very significant consultation exercise in 2023 following the temporary change to emergency general surgery. Since then the Trust has maintained a strong engagement process, with continuous liaison with elected representatives, Strategic Development Group meetings, and ongoing staff listening sessions. As directed by Trust Board, we are now fully committed to improving the visibility of this work, have dedicated additional resources to that, and are providing a robust response mechanism to all enquiries raised and providing an open online hub for the public to view this correspondence where appropriate. This will continue in the months ahead.

I sincerely hope that SOAS will meet us at a point in the future and we would welcome an opportunity to talk to you about your Roadmap. As a major health and social care provider in the West, the Trust has not been engaged with or had a conversation with you in respect of the evidence you have and views you have presented in the Roadmap or its recommendations. Despite this the Trust has been asked on many occasions to articulate our position on this document by the media, political representatives and through other enquiries.

I recognise the importance of lived experience and public input to our work in the Trust, respect the work you have put into the document, and feel that it was important to have a discussion with you initially on the SOAS Roadmap before we could set out our position publicly. A meeting could have provided the opportunity to do that and listen to all opinions on this. As stated in our earlier correspondence, there may be a number of areas in the document where we have common interests and views, but this could only be highlighted through a two-way conversation.

Equally there are many other groups and agencies who are producing important documents relating to Health and Social Care in the area, such as that undertaken by the Fermanagh and Omagh Council through the ICRLD. As a Trust we believe that this additional evidence from engagement facilitated by other partners would be important to consider in our vision planning for the future of Health and Care in Fermanagh and West Tyrone.

The proposed alternative approach offered in my earlier letter also remains open as an option to SOAS and that would be to engage through the Fermanagh and Omagh District Council in a public, livestreamed session of the council, where both the Trust and SOAS can present information openly in a balanced forum for discussion. I'm content to do that, should SOAS wish to consider it and of course if the Fermanagh and Omagh Council are agreeable to inviting both parties to do so.

I wish to reiterate that the Trust sincerely values the views of the local community, the dedication of our South West Acute Hospital staff, and the importance of constructive and purposeful engagement on the future of health and care services in Fermanagh and West Tyrone. Our commitment to the long-term sustainability and development of SWAH remains firm and is supported by the Department of Health and the Minister.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Neil Guckian', with a stylized flourish at the end.

**NEIL GUCKIAN OBE
CHIEF EXECUTIVE**