



# Shaping a healthier future

## What the proposals mean for Hillingdon residents

**Between 2 July and 8 October 2012 NHS North West London is consulting on plans to improve NHS hospital and community services. We want to hear the views of as many people as possible about the changes proposed. This document focuses on the details of these proposals for Hillingdon residents.**

### A summary of our proposals

The National Health Service provides healthcare for more than 260,000 people in Hillingdon and has high expectations for the way patients are cared for and the services they receive. NHS staff are totally committed to delivering high-quality care, but need to have the right workforce, skills and surroundings to guarantee this for all patients all of the time.

Increasingly, a number of different factors are making it very difficult for us to provide high quality services consistently. We have a growing and ageing population which means the demand for our services is rising. Our out-of-hospital services are not operating as effectively as they should be, reflected by Hillingdon's relatively high numbers of emergency admissions and use of accident and emergency (A&E) compared to other parts of north west London and, indeed, of the UK. Overall, patients tell us that services need to improve, as patient satisfaction scores are average or below average. We need to make these improvements whilst working within an increasingly tight budget.

In response to this, our vision is to:

- **Bring more healthcare services nearer to you** so that as much healthcare as possible can be delivered as close to your home. We will invest between £12 million and £14 million over the next three years in our staff, buildings and equipment and information technology in Hillingdon
- **Centralise some hospital care** onto fewer hospital sites so that specialist clinical expertise is available more consistently, in line with guidelines set down by a number of medical royal colleges.
- Incorporate all of this into **one co-ordinated system of care** so that all the organisations and facilities involved in caring for you can deliver high-quality care and an excellent experience, as much of the time as possible.

To achieve this we have proposed to:

- Deliver more services in healthcare settings other than hospitals, closer to people's homes
- Change some services at the following hospitals – Central Middlesex, Charing Cross, Chelsea and Westminster, Ealing, Hammersmith, Hillingdon, Northwick Park, St Mary's and West Middlesex.

While most healthcare activity would remain where it is now, and all nine NW London hospitals will have local hospital services including an urgent care centre and outpatients, the changes proposed would impact on some A&E, maternity and paediatric and hyper-acute services at some hospitals in north west London.



# World-class healthcare outside of hospital

Hillingdon Clinical Commissioning Group (CCG), the organisation being led by GPs to plan healthcare services, came into existence in April 2011. The objective of the NHS is to provide the right care at the right time and at the right place for the residents of Hillingdon.

## How we plan to organise your care outside of hospital

In Hillingdon care will be delivered and managed at four levels. Hillingdon GPs will work in six new 'sub-groups' ensuring care is clinically led and consistent across GP practices.

**48** Individual Practices

GPs and primary care teams continue to be central to patient care in Hillingdon.

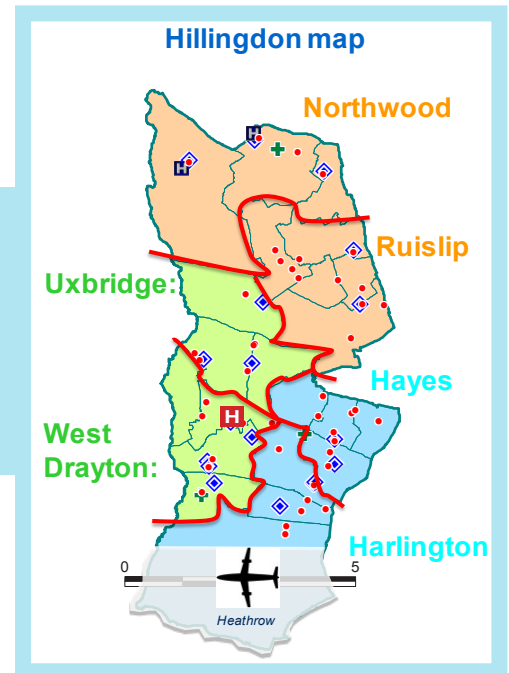
**6** Sub-Groups (NEW)

We will organise into 6 sub-groups and three localities. Providers in each of these areas will work together in a **provider network** to provide care to the patients in the appropriate setting.

**3** Localities

**1** Hillingdon-wide

Activity happens across the Borough where it makes sense clinically and financially.



## The vision of Hillingdon CCG

Hillingdon CCG's vision is to ensure that our health care system keeps patients well at home and, when patients do become unwell, provides cost-effective, evidence-based and timely care at the right place appropriate to their needs. This will mean:

- Making sure that every healthcare provider consistently delivers **high standards of care**
- **Joint working** between GPs, community and social care, hospital and consultants, with early intervention and care in the right place at the right time
- Patients having easier access to **consistently high quality primary care**
- Patients with long-term conditions who need care from different services will receive **better coordinated care** with one package of care
- Patients will be better supported when they are discharged from hospital. The care they receive will be more joined-up between the different parts of the system.

## Our development plans

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Development plans for Hillingdon's out-of-hospital services include:

- The new NHS 111 number: when you need medical help fast but it's not a 999 emergency Hillingdon residents can now call 111 for free advice, 24 hours a day, 365 days a year.
- Improving access to GPs: will mean greater use of email, text, video and telephone to get information and consultations. Patients will also have the opportunity to go to another GP to access a wider range of services.
- An increased Rapid Response Service: will provide enhanced medical care access to step-up beds and health and social care professionals. It will assess people within 4 hours
- More integrated care: especially for people most at risk of getting ill, including older people aged over 75s, people with diabetes, and those who have had three or more emergency admissions in the last year. This will ensure all the services that the patient needs are working together.
- Everyone in the system working together for people leaving hospital: will allow particularly older people to leave hospital as soon as they are medically fit. At discharge, some people require hospital, community and social services to work together and take a joint approach across health and social care. This is particularly important for older people to help them retain their independence.
- Providing more outpatient consultations in a community setting: including, for example, developing community-based pathways of care for services such as musculoskeletal (MSK).

Further details of the changes proposed for care outside of hospital can be found at [www.healthiernorthwestlondon.nhs.uk](http://www.healthiernorthwestlondon.nhs.uk)

## Hospital services

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NHS North West London is consulting on three possible options for changes to hospital services in north west London and has also stated which of the three is its preferred option.

Hillingdon Hospital is facing significant challenges over the next few years to deliver a balanced budget. This is mainly because it doesn't deliver a sufficient volume of healthcare that generates enough income to enable it to balance the books.

Under all three options Hillingdon Hospital will remain a major hospital. This means it will continue to provide a full range of high-quality clinical services for patients with urgent or complex healthcare needs, including a full A&E department (open 24 hours a day, seven days a week), with urgent surgery and medicine and an intensive care unit that can care for the most seriously ill patients. A total of £9 million has been invested in Hillingdon Hospital's A&E.

The proposed changes is likely to result in Hillingdon Hospital receiving higher volumes of the income-generating work it needs to ensure it achieves an improvement in its long-term financial position. Further investment is planned to provide the capacity that will be needed to take future increases in expected activity at the hospital.

For Hillingdon residents who use hospitals in the neighbouring boroughs, Northwick Park will also remain a major hospital, however people who use Ealing hospital may be affected.

Under options A and B Ealing hospital would be a local hospital. This type of hospital provides all the most common things people need hospitals for, such as less severe injuries and less severe urgent care, non-life threatening illnesses, care for most long-term conditions such as diabetes and asthma, and diagnostic services. Under each of these options, Ealing would see its A&E department down-graded to become an urgent care centre and its maternity unit would also close.

Under option C, Ealing hospital would be a major hospital. This means that its accident and emergency unit and its maternity units would remain broadly as they are.



## Urgent Care Centre at Hillingdon

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The Hillingdon hospital already has an Urgent Care Centre (UCC) operating 24 hours a day and this will continue under all options.

UCCs are staffed by GPs and nurses and specialise in the treatment of patients with urgent illnesses and injuries and conditions that can be seen and treated without having to stay in hospital. Clinicians at UCCs are also skilled in stabilising patients who do need to be transferred to more specialist care.

Our clinical leaders are clear that the UCC in Hillingdon should see and treat patients within four hours, be led by primary care clinicians such as GPs, be linked with other services like the new '111' non-emergency NHS number and have access to tests and specialist clinicians.

The kinds of health problems all urgent care centres are able to treat include:

- Illnesses and injuries not likely to need a stay in hospital;
- X-rays and other tests;
- Minor fractures (breaks);
- Stitching wounds;
- Draining abscesses that don't need a general anaesthetic; and
- Minor ear, nose, throat and eye infections.

Urgent care centres will see patients of all ages, including children.

Urgent care centres do not treat problems such as major burns, head injuries, strokes, sickle-cell crisis, severe shortness of breath, heart failure, overdoses and self-harm. Patients experiencing these will be transferred to the Hillingdon hospital.

Residents will continue to have access to the Minor Injuries Unit at Mount Vernon Hospital during the hours of 9am-8pm, every day of the week.



## Next steps

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We recognise the proposals we have outlined for acute and out-of-hospital care represent some major changes to how much of healthcare is currently delivered. It requires commitment from all service providers to work together to ensure its success. We need to continue to respond to the challenges we face and deliver the best sustainable healthcare for the residents of Hillingdon.

### **We would like to hear more from Hillingdon residents on our consultation proposals**

The public consultation will be running until 8 October 2012 and during this time we are encouraging as many people to give us their views.

### **Come to a consultation event**

We will be running a series of consultation events across NW London. These events are your chance to learn more, speak to the programme's clinical leaders and let us know what you think. To find out about the events near you please visit [www.healthiernorthwestlondon.nhs.uk](http://www.healthiernorthwestlondon.nhs.uk) or contact 0800 881 5209.

### **Visit us online [www.healthiernorthwestlondon.nhs.uk](http://www.healthiernorthwestlondon.nhs.uk)**

On our website you can:

- read about our proposals in full
- download the Consultation Document
- fill in the consultation response form
- understand how the changes might affect you

### **Get in touch**

- If you would like a printed copy of the full consultation document and response form or if you would like to get in touch with the Shaping a healthier future team please:
- Call 0800 881 5209
- Email [consultation@nw.london.nhs.uk](mailto:consultation@nw.london.nhs.uk)
- Write to FREEPOST SHAPING A HEALTHIER FUTURE CONSULTATION (this must be written in capitals and on one line. You will not need a stamp)
- We look forward to hearing from you.



## ANNEX A: Summary of options for hospital services

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### **Option A (preferred option)**

This option has Chelsea and Westminster Hospital, Hillingdon Hospital, Northwick Park Hospital, St Mary's Hospital and West Middlesex Hospital as major hospitals. It has Central Middlesex Hospital as a local and elective hospital and Hammersmith Hospital as a specialist hospital. Ealing Hospital and Charing Cross Hospital are proposed as local hospitals.

### **Option B**

This option has Charing Cross Hospital, Hillingdon Hospital, Northwick Park Hospital, St Mary's Hospital and West Middlesex Hospital as major hospitals. It has Central Middlesex Hospital as a local and elective hospital, and Hammersmith Hospital as a specialist hospital. Ealing Hospital and Chelsea and Westminster Hospital would be local hospitals.

### **Option C**

This option has Chelsea and Westminster Hospital, Ealing Hospital (with the stroke unit at West Middlesex Hospital moved to Ealing Hospital), Hillingdon Hospital, Northwick Park Hospital and St Mary's Hospital as the major hospitals. It has Central Middlesex Hospital and West Middlesex Hospital as a local and elective hospital and Hammersmith Hospital as a specialist hospital. Charing Cross Hospital is proposed as a local hospital.

