



Shaping a healthier future

What the proposals mean for Westminster residents

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

A summary of our proposals

We look after more than 240,000 people in Westminster and have 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 in Westminster are making it very difficult for us to provide high quality services consistently. The population is growing, and Westminster also has the second highest life expectancy in the country. This means the demand for our services is rising. The prevalence of chronic diseases, such as cancer, is higher than it has been historically and is leading to increases in emergency admissions because our out of hospital services are not operating as effectively as they should be. Patients tell us that they do not always have a positive experience of care.

In response to this, our vision is to:

- **Bring care nearer to you** so that as much as possible can be delivered close to your home. As part of our plans, within three years we will be spending between £5 million and £6 million more per year on our out-of-hospital services. By driving continuous quality improvement and innovation we will ensure we get the best value for money from this investment.
- **Centralise emergency hospital care** onto five specialist sites across NW London so that more expertise is available more of the time
- 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 outside of 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 North West 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

The objective of the NHS is to provide the right care at the right time and at the right place for the residents of Westminster. From April 2013, NHS Central London Clinical Commissioning Group (NHSL) and NHS West London Clinical Commissioning Group (WLCCG), led by local GPs, will be responsible for planning healthcare services in Westminster and ensuring local residents receive the healthcare they need.

How NHSL plans to organise your care outside of hospital

NHSL covers the majority of Westminster, with 36 member practices (approximately 120 GPs) and an ongoing responsibility and opportunity to improve the health related wellbeing of a registered patient population of approximately 188 000, as well as the wider population of local service users. NHSL GP practices work in three Health Networks, or localities, ensuring care is clinically led and consistent across GP practices.

36 Individual Practices

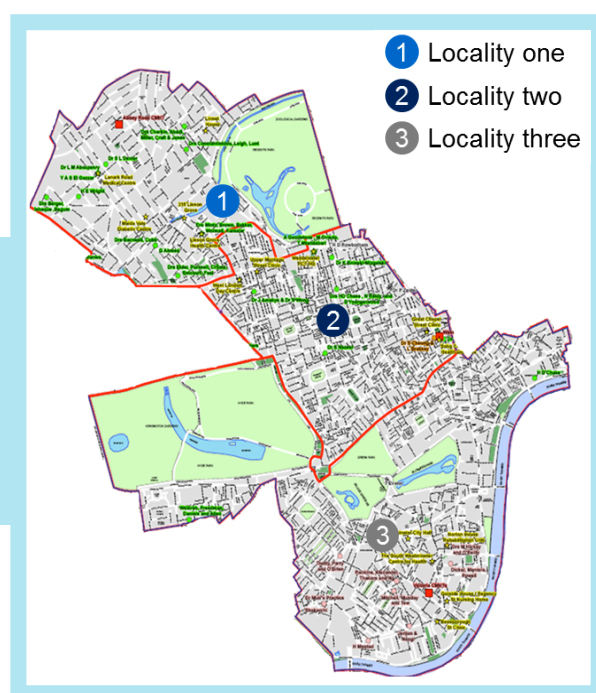
GPs and primary care teams continue to be central to patient care

3 Localities

We will organise into 3 localities where it is *appropriate* to do so. Providers will work together at this level to provide care to patients in the appropriate setting.

Central London-wide CCG

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



The vision of NHSCl

NHSCl's vision is to ensure that our healthcare 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 care provider is keeping to 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
- More consultant-led planned care will take place closer to home
- Patients with long-term conditions who need care from different services will receive better coordinated care
- Patients will be supported when they are discharged from hospital.

Our development plans

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

- The new NHS 111 number: when you need medical help fast but it's not a 999 emergency Westminster residents can now call 111 for free advice, 24 hours a day, 365 days a year.
- Improving access to GPs: this will mean extended opening hours on weekends and the ability to book appointments directly from an Urgent Care Centre (UCC) or a 111 call.
- An improved Rapid Response Service for patients in NHSCl to reduce the need for A&E admission.
- 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 an excessive number of emergency admissions in the last year.
- Wellwatch, a telephone-based system of monitoring long-term conditions to avoid hospital admission where possible.
- Everyone in the system working together for people leaving hospital: this will allow older people in particular 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 important for older people to help them retain their independence.
- Providing more outpatient consultations in a community setting: using our improved inter-practice referral system along with a centralised directory of GPs with special interests or services to refer patients within the community where possible. We are also investigating the development of additional community services.

Further details of the changes proposed for care outside of hospital can be found at www.healthiernorthwestlondon.nhs.uk



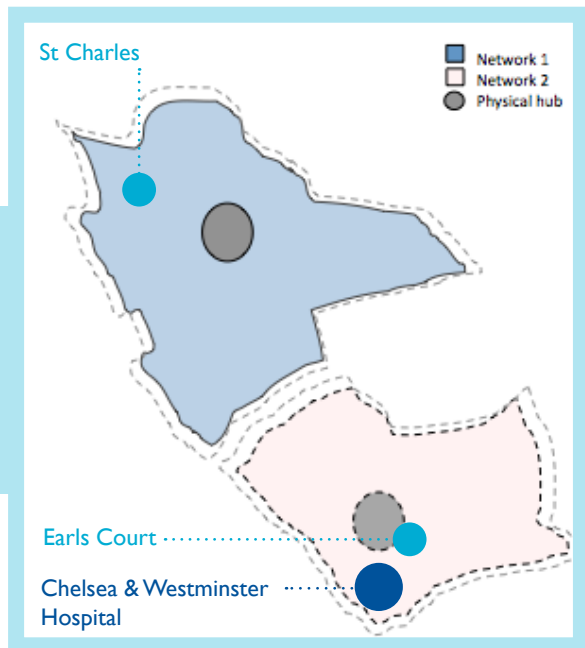
How WLCCG plans to organise your care outside of hospital

WLCCG (West London Clinical Commissioning Group) covers Queens Park and Paddington (QPP) in Westminster, and the whole of the Royal Borough of Kensington and Chelsea. WLCCG consists of 14 GP Practices in QPP and 41 GP Practices in Kensington and Chelsea. They will work in two Health Networks, ensuring care is clinically led and consistent across the networks.

55 Individual Practices

2 Localities

Consistent across WLCCG



The vision of West London CCG

West London 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 care provider is keeping to 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
- More consultant-led planned care will take place closer to home
- Patients with long-term conditions who need care from different services will receive better coordinated care
- Patients will be supported when they are discharged from hospital.

Our development plans

Development plans for WLCCG's out of hospital services include:

- The new NHS 111 number: when you need medical help fast but it's not a 999 emergency, Westminster residents can now call 111 for free advice, 24 hours a day, 365 days a year.
- Improving access to GPs: you will have easier access to GPs, for instance through extended opening hours and new channels of communication.
- A standardised referral scheme, ensuring that all patient referrals are directed to the most appropriate clinician, and only to hospital when absolutely necessary
- More community-based care, so that certain services – such as respiratory care, paediatrics and dermatology – can be treated closer to home, reducing travel/waiting times and improving the quality of services.
- Integration between social and health care workers so that people with long-term care needs – such as the elderly, or those with diabetes – receive joined-up care to prevent them going into hospital.
- A Medicines Support Service bringing health and social care together to ensure patients' needs are identified and to improve medicine management.

Further details of the changes proposed for care outside of hospital can be found at www.healthiernorthwestlondon.nhs.uk



Hospital services

See annex A for a summary of the three options for consultation.

Under options A and C

Chelsea & Westminster Hospital would remain a major hospital. This means it would 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 emergency surgery and medicine and an intensive care unit that can care for the most seriously ill patients.

Under option B

Chelsea and Westminster hospital would become a local hospital. This type of hospital provides all the most common services people need hospitals for, such as treatments for 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. In this case the Chelsea & Westminster A&E department would become an Urgent Care Centre and its maternity unit would close. St Mary's Hospital, which remains a major hospital under all three options, would become the nearest major hospital for Westminster residents, providing an A&E and all other major services.

Urgent Care Centres for Westminster

There are Urgent Care Centres currently operating at Chelsea & Westminster Hospital and St Mary's Hospital providing patients with an alternative to A&E departments.

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 UCCs 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 would be 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 people and children of any age.

It is important to note that 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. All these problems can be a sign of serious conditions that may need to be treated in a major hospital.

To find out what these changes mean for you and your journey to hospital, please visit our website, www.healthiernorthwestlondon.nhs.uk/infographic or call 0800 881 5209 for more information.



Next steps

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 Westminster.

We would like to hear more from Westminster 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 or contact 0800 881 5209.

Visit us online at 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
- 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

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.

