

North West London financial recovery plan: Frequently Asked Questions (FAQ)

How will patients be affected? Will you be engaging with patients before you make decisions?

No matter the financial challenges we face, as a clinically-led NHS body our priority will always be the safety of our patients and the quality of NHS services.

We will start by removing waste and duplication from areas that will not affect patients.

We have written to partners and stakeholders, including patient representatives to provide transparency about the areas we will be looking at. We will engage on any changes that directly impact patient care and will listen carefully as we shape our plans.

How soon will the North West London financial recovery measures begin to be introduced? Will measures be introduced with immediate effect?

Some parts of our plan involve saving money through better procurement and contracting. This work will begin immediately.

Other areas where we may be able to make savings are proposals that need to be developed further and in some cases require engagement with the public first before final decisions are made.

Do you foresee any impact on patient waiting times in relation to any aspect of these plans?

We have given a commitment that waiting lists will not grow.

Will patients have reduced access to specialist clinical expertise if fewer patients go outside NW London?

No. North West London is home to several world famous specialist hospitals, including Imperial College Hospital, The Royal Marsden Hospital and the Royal Brompton Hospital and first rate care is available here. If a patient requires specialist care 'out of sector' they will always be able to access it, and nothing in our financial recovery plans would change that.

Does your plan involve any new initiatives planned to divert people from A&E?

There is a major focus on prevention and self-care within the NHS Long-Term Plan. In North West London, we have been providing more community rapid response services to treat patients at home rather than in A&E or hospital where it is safer for patients, boosting access to a GP with evening and weekend appointments, and providing more services out of hospital. All of this work will continue as a major priority.

Will patients still have a right to choose their acute trust provider?

Yes. We are advising GPs that patients be referred to a North West London service where possible, and indeed most patients do prefer to use their local hospital. But if a patient has a strong preference for a different provider, their right to make that choice will not change.

Why is your deficit in North West London so large?

NHS organisations around the country have financial problems and in North West London we are no exception. Our plan was for a £51m deficit at the year end. Our month four position now suggests that we are risk of an additional £61m overspend. Our financial recovery plan is about taking necessary steps to bring us back in within our plan..

Are you confident that the financial recovery proposals under consideration will bring you fully back within budget?

We aim to return to our original plan, which was a £51m deficit. No matter how much or little money we have, it is always right and fair that we use the money we do have as efficiently as possible, and put resources where they will do the most good for patient care.

Is your deficit in North West London related to any unique local costs, such as previous programmes of work or outstanding contracts?

No. Our programme modelling has always shown the risks of future financial challenges and we need to take action to address this deficit immediately.