# Supplementary Committee Agenda



### Overview and Scrutiny Committee Thursday, 9th November, 2006

Place:	Council Chamber, Civic Offices, High Street, Epping
Time:	7.30 pm
Committee Secretary:	Simon Hill, Senior Democratic Services Officer email: shill@eppingforestdc.gov.uk Tel: 01992 564249

### 6.a "Fit for the Future" Review of North East London Health Services (Pages 3 - 10)

Attached is additional information for consideration under agenda item 5 ("Fit for the Future" Review of North East London Health Services). Please bring this information with you to the meeting.

This page is intentionally left blank

# Agenda Item 6a



#### Briefing 1 September 2006

### Fit for the Future

This is the first in a series of regular updates on the Fit for the Future programme currently being undertaken by the hospital, mental health and primary care trusts in outer North East London<sup>1</sup>. These organisations are working together to consider the affordable reconfiguration of health services across the area.

The programme aims to improve the quality and suitability of local health services; address local health inequalities; respond to the White Paper on care outside hospitals; maximise the benefits from the new hospital at Oldchurch Park; and achieve sustainable financial balance across the whole health economy. The programme is being undertaken within the context of the London-wide review of health strategy being conducted by NHS London<sup>2</sup>.

The programme terms of reference have been agreed by the boards of all the relevant organisations. They are currently considering a short-list of options (see over for details), which has been developed in conjunction with local partners and a representative group of local clinicians.

Local people and stakeholders will have the opportunity to give their views and contribute to the development of options for the future shape of health services. For example, the first of three workshops – held on 14<sup>th</sup> September – brought representatives of local patient groups and voluntary organisations together with NHS clinicians and managers. Participants worked through a series of options for the strategic reconfiguration of local health services and agreed relative weightings for the following set of criteria against which they will be considered:

- improving the quality of health services;
- ease of access (minimising travel times, where appropriate);
- providing sufficient and flexible physical capacity;
- providing a high standard of facilities;
- supporting a developing and motivated workforce; and
- delivering any changes as quickly as possible.

The second and third workshops will score the options against the above weighted criteria, incorporating financial information, with the ultimate aim of reaching consensus on a proposed option (or series of options). Any such options will be considered in the context of best value for public money and will be subject to formal consultation.

A series of events, including focus groups – for example, on services to be provided out of hospital – will be held across North East London. Details as to when these will take place and how to get involved will be available shortly.

Local stakeholders, including MPs and Overview & Scrutiny Committees, receive regular briefings on progress, the timetable and upcoming events. Their contribution to the programme – for example, on the design of the formal consulation – is pivotal to its success, as is that of local people.

<sup>&</sup>lt;sup>1</sup> Barking Havering and Redbridge Hospitals Trust; Whipps Cross University Hospital Trust; North East London mental Health Trust; Barking & Dagenham PCT; Havering PCT; Redbridge PCT; Waltham Forest PCT.

The strategic health authority for London, established on 1 July 2006.

This process aims to present one or more preferred options for wider formal consultation, currently scheduled for the New Year, subject to approval by NHS London. At this point, no decisions have been taken as to the relative merits of the options.

The short-list of options is outlined below.

For further information on the Fit for the Future programme and upcoming events, please contact Henrietta Joy, Director of Communications, on 020 7655 6792 or <u>Henrietta.joy@nelondon.nhs.uk</u>

#### The short-list of options

The options have been developed by focusing initially on the acute hospital services requirements and sub-options will be developed around mental health, out-of-hospital provision (including social care) and intermediate (bed-based) care. There are five options which the Clinical Reference Group has approved for inclusion on the short-list:

#### Option 1

. 1.12.06

Do minimum – Commission the new hospital at Oldchurch Park as planned, closing the existing Oldchurch and Harold Wood hospitals. This hospital will be a major acute hospital providing the full range of district general hospital services, plus tertiary services for cancer and neurosciences. Retain existing district general hospital services at King George Hospital (including the Independent Sector Treatment Centre [ISTC]) and Whipps Cross Hospital.

#### Option 2

Oldchurch Park as planned in Option 1. Whipps Cross Hospital becomes an emergency-focused hospital including A&E, maternity and paediatric services and a full range of ambulatory care services. King George Hospital becomes an elective-focused hospital with the ISTC, a midwife-led low-risk birthing centre, planned ambulatory services and a primary care-led urgent care centre for minor ailments and injuries.

#### Option 3

As for Option 2, but with the Whipps Cross Hospital and King George Hospital roles reversed and the ISTC remaining at King George.

#### Option 4

Oldchurch Park as planned in Option1. Whipps Cross Hospital as a full district general hospital service (as currently) and King George Hospital as an ambulatory care centre (including outpatients, day care, diagnostics) with primary care-led urgent care centre for minor ailments and injuries, a midwife-led birthing centre, the ISTC and intermediate care provision.

#### Option 5

As for Option 4, but with the Whipps Cross Hospital and King George Hospital roles reversed and the ISTC-remaining at King George.

The Clinical Reference Group has rejected options which:

- had full maternity and neonatal services on an elective-focused site on the grounds that they would not be able meet the necessary clinical standards;
- required all births other than low risk ones (around 70% of the total) to be cared for in one unit at Oldchurch Park – on the grounds that the unit would be too large to ensure best clinical practice.

The option for a stand-alone women's and children's hospital on the King George Hospital site was rejected on the grounds that it would be too far away from the specialist and diagnostic back-up services.



#### Fit for the Future

The Fit for the Future review currently underway across outer North East London<sup>1</sup> is looking at different ways of delivering better health and social care, closer to home and at the best value for taxpayers. The government consultation on the White Paper on care outside hospital (Our Health, Our Care, Our Say) showed that the majority of people supports moving health services closer to home. This expectation underpins the review, as does the need to bring the local health economy overall back into financial balance and to ensure that this is sustainable over the long-term. This work builds on changes which are already underway across the local NHS made possible by developments in technology, increased investment in community-based facilities, quicker treatment in hospital resulting in shorter stays and more operations being carried without the need to stay in hospital. Primary care centres are increasingly providing a range of diagnostic services, such as scans and x-rays. The following illustrate some of the ways in which local services are already being delivered in the community, tailored to patients' needs: Patients with back pain are now referred by their GP to a community-based service led by physiotherapists. Less than 3% of patients using this service in Havering, for example, go on to require hospital-based treatment: Some minor operations are being carried out in GP surgeries. In Waltham Forest, all carpal tunnel surgery (to relieve pressure on the median nerve in the wrist) now takes place in the community rather than as hospital day cases. This not only has the advantage of being more convenient for patients, but has also reduced the length of time they have to wait to be treated. Teams of different health professionals work with patients with chronic conditions, such as asthma, to help them stay well in the long-term. For example, a community matron might visit a patient with asthma after coming out of hospital, helping them to monitor the condition, understand what to do when feeling ill and when to ask for help. This might then be followed up by a visit from the pharmacist to ensure that the patient understands what medicines to take. Patients continue to receive telephone support from the team following such home visits. As described in the first briefing, a short-list of options for change are currently being considered by stakeholders against the following set of non-financial criteria: improving the quality of health services; ease of access (minimising travel times, as appropriate); . providing a sufficient and flexible physical capacity;

providing a high standard of facilities;

**Briefing 2** 

October 2006

- supporting a developing and motivated workforce; and
- delivering any changes as quickly as possible.

<sup>1</sup> Fit for the Future is being undertaken by the seven NHS organisations in outer North East London: Barking & Dagenham PCT, Havering PCT, Redbridge PCT, Waltham Forest PCT, North East London Mental Health Trust, Barking, Havering & Redbridge Hospitals NHS Trust and Whipps Cross University Hospital NHS Trust. The second of three workshops looking in detail at the five options was held on 12<sup>th</sup> October. Having agreed the relative importance of the non-financial criteria at the first workshop, participants used these to score each option. The options will then be appraised against a set of financial criteria at the third workshop in November. The final scores will help to determine the preferred option(s) for formal public consultation. These scores will be available following the third workshop.

In a wide-ranging discussion, stakeholders – including local patient groups, voluntary organisations and NHS clinicians and managers – looked, for example, at access to the right care, focusing particularly on:

- The relative impact on travelling times of each of the options and relative importance to different patients and their visitors, taking into account, for example, current and planned public transport;
- The pros and cons of access to the nearest hospital for emergency care and access to specialist care relevant to the patient's condition (for example, head injuries); and
- The increase in the number of paramedics in the ambulance service, ensuring that specialist care is now given at the scene of an incident, for example in administering clot-busting drugs in the treatment of heart attacks.

Opportunities for local people and other stakeholders to become involved in the design of future health services include a series of focus group meetings being held across the area. One such meeting, looking at the provision of care out of hospital (including social care) was held on 29<sup>th</sup> September. Participants - patients, carers, clinicians and representatives of voluntary organisations – considered factors contributing to unnecessary attendance at A&E and patient expectations of services provided outside hospital. A further event is planned to look at what local people would expect to see in an ambulatory care centre.<sup>2</sup> Similar groups are also looking at the provision of mental health care and care in hospital.

We are anxious to work with local people and other stakeholders to develop the future shape of local health services. We are happy to attend community group meetings to update you on progress and to discuss how we might work with you on any proposed changes. Please contact Wendy Natale on 020 8430 7406 or wendy.natale@wf-pct.nhs.uk if you would like to arrange a suitable date and time.

We are currently aiming to go out to formal public consultation on the preferred option(s) for change in the New Year, subject to approval by NHS London.<sup>3</sup>

The short-list of options is available on the websites of each of the PCTs and trusts involved in Fit for the Future.

For further information on the Fit for the Future programme, please contact Henrietta Joy, Director of Communications, on 020 7655 6792 or henrietta.joy@nelondon.nhs.uk

<sup>2</sup> Ambulatory care denotes any medical care delivered on an outpatient basis. <sup>3</sup> The new strategic health authority for London (established on 1<sup>st</sup> July 2006).



### SAVE OUR LOCAL HEALTH SERVICES

Save

13<sup>th</sup> October 2006

# Whipps Cross Hospital

as our

District General Hospital ~ fully functioning - fully funded ~



Public meetings to launch a community-wide campaign to defend Whipps Cross and our local community health services

### Woodford Thursday 26 October 8.00

Forum with Panel including : Dr Indira Mootoosamy BMA chair of LNG Whipps Cross consultant radiologist, Norma Dudley, AMICUS Waltham Forest health visitor, Charlotte Monro UNISON, Whipps Cross Staff Side, Dr Sanjoy Kumar Waltham Forest GP. Local

### Sir James Hawkey Hall, Broomhill Rd. Woodford Green.

### Walthamstow Thursday 2 November 7.30

Discussion and Speakers including: Dr Indira Mootoosamy BMA chair of LNG Whipps Cross consultant radiologist, Neil Gerrard MP for Walthamstow, Harry Cohen MP Leytonstone and Wanstead, Charlotte Monro UNISON Whipps Cross Staff Side, Dot Gibson National Pensioners Convention

Al Badr Hall, Lea Bridge Road Corner of Northumberland Rd, (Between Bakers arms & Markhouse Rd, part to mostly)

Meetings called on initiative of Ian Duncan Smith MP / Keep our NHS Public Waltham Forest Campaigns

# November 1<sup>st</sup> National Lobby and March NHS Together Stop Cuts Closures and Privatisation

Lobby of parliament called by the TUC, health unions and staff associations -Wednesday 1<sup>st</sup> November, Rally 12.00 Central Methodist Hall (Let your MP know you want to see them)

**March** to join the lobby called by National Pensioners Convention and supported by Keep our NHS Public and local health unions. Assemble 11.30 for 12.00 start, Forum Magnum Sq., York Rd, (Westminster Bridge end) by the river <u>www.keepournhspublic.com</u>

Walthamstow contingent meeting at Walthamstow Central tube 10.90 am – book time off now to join

Please help make this lobby as big as possible – your presence counts!



### Save Whipps Cross Hospital

The future of Whipps Cross as a district general hospital serving its local community is under threat. Government planners are seeking to reduce the number of hospitals in Outer North East London. Amongst the proposals is one to downgrade Whipps Cross to an ambulatory (walk-in) centre with some community beds. People from Waltham Forest & West Redbridge would have to travel miles through traffic to get to an accident and emergency or hospital care. Public consultation starts this January. But the fear is that with £44 million cuts now being imposed on Whipps Cross – a quarter of its total budget – its ability to function and provide the care the community needs is being crippled. Is our hospital being set up to fail?

#### Cuts put Whipps Cross on Red Alert

The hospital is facing draconian cuts to staff, wards and resources. Since three wards have closed (out of 5 planned) the hospital has been on red alert much of the time. How will it cope this winter? Yet a second ward for acutely ill older people is planned to close on December 1<sup>st</sup>. Staff cuts have already led to serious problems accessing patient notes and getting patients information to GPs. Yet 276 hospital staff face redundancy, many of these essential medical secretaries, senior skilled nurses, admin staff, and specialist trainers who ensure staff can give high standards of care and safety.

Community health services, supposed to replace hospital, care also have their budget cut and community nurses are desperately over stretched as posts are held empty.

# Private consortiums dictating our future healthcare?

Multi national corporations looking to take over sections of the NHS have controlling interests in the new Oldchurch Park PFI hospital and the Independent Treatment Centre being built at King George's. The 'fit for the future' review - commissioned by Oldchurch PFI - gives these priority for funding over everywhere else.

# Local Guardian Call:

"We are begging our readers - Get ready for the fight"

The Walthamstow Guardian editorial on Sept 21<sup>st</sup> called on readers to get stuck in before a decision has been taken – before it is too late.

"There are signals that many of the hospital's services will be moved out of borough to Oldchurch Park in Romford, with some at King George at Goodmayes – a long car journey from here and frustratingly difficult to get to by public transport......

"The real problem for us all is not that the hospital and the primary care trust have failed to live within their means, but that they have been grossly underfunded for far too long and still are.

"This is a borough where there is a great deal of poverty and a corresponding bulge in people suffering the most serious illnesses and early death.

"It needs money invested in its health services. It does not need them removed.

"You want to make sure you and your families are cared for properly and that lives are not lost needlessly through a diminution in health care.

Go along to the consultation meetings.

Get stuck in before it is too late ....

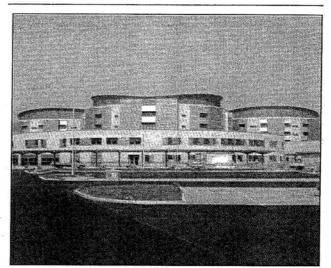
"We are begging our readers to get ready for the fight. It depends on each and every one of you"

The shape of our health care must be determined by health needs of the population not by corporate profit margins. We are already seeing milking of the NHS by business consultant 'turnaround directors' slashing services in our hospitals - paid upwards of £1,200 a day at Whipps Cross and allegedly £800 a day each to the rest of their 'team'. Huge local and national opposition is building against the Governments programme of cuts, closures and privatisation of our NHS that is sweeping the country.

Speak out now for Whipps Cross - for a fully functioning, fully funded district general hospital

Come to the public meetings, to the national march and lobby- Your M.P must be in no doubt about public feeling at this proposal. Pass this leaflet round involve your friends, family, work colleagues, write to the papers with your views.

Contact Waltham Forest Keep Our NHS Public Campaign: T Phillips 0790 576 5705, wfkeepournhspublic@hotmail.co.uk



OPTION 1: Queens Hospital could become 'major acute'.

### Setting out the options for the future of our hospitals

TALKS about the future of East London hospitals took place last week

ADVENTISER 1/11/06

Officials discussed changing the roles of Queens Hospital, King George Hospital and Whipps Cross Hospital last Friday.

The changes aim to improve the quality of health services, minimise travel times, provide hospital capacity, improve facilities and cre-ate a motivated workforce.

Speaking at the meeting in the Broadway Theatre, Barking, pro-ject director Ann Smart said: "As ject director Ann Smart said: "As technology has changed throughout the years, for the better, there has to be a change to create better health facilities in east London. "We are doing this to create the best care while keeping a close eye on public finance." Members from seven PCTs spoke about five options, which will be put forward in a public con-sultation in early 2007, these are: ■ Option 1: Turning Queens, in Romford, into a 'major acute' hos-

Romford, into a 'major acute' hos-pital while Whipps Cross and King George will continue to act as gen-

eral hospitals. Option 2 and 3: Whipps Cross ■ Option 2 and 5. Whipps Cross becomes an emergency-focused hospital with A&E, while King George becomes an elective-focused hospital, or vice versa. ■ Option 4 and 5: Whipps Cross

Hospital will continue as a full dis-King George Hospital service and King George Hospital as an ambu-latory care centre with primary care-led urgent care centre – or

care-led urgent care centre – or vice versa. The representatives were adamant that Whipps Cross Hospi-tal and King George Hospital would not be run down. Problems such as hospital debts, shortage of beds and low morale with staff would be dealt with, the meeting heard. Dr Ken Aswani, GP and chair of professional executive committee for Waltham Forest PCT, remained optimistic about the future of Whipps Cross Hospital in Leyton-stone. stone

stone. He said: "We have spoken to the local authority, MPs, councillors and the PCT, and the first thing we want is a local hospital to stay for local people." Dr Yasmin Drabu, Medical direc-tor for the Barking, Havering and Redbridge PCT, said: "This project is not about getting our hospital debts back and would have gone ahead anyway."

debts back and would have gone ahead anyway." — What do you think? Write to Matthew Stanton at the Yellow Advertiser, Acorn House, Great Oaks, Basildon, Essex, SS141AH or e-mail Waltham@YellowAd. co.uk.

Page 9

This page is intentionally left blank