


The North West London Hospitals  <small>NHS Trust</small>	Agenda Item	14
Trust Board	Paper	14/07/12
Meeting on: 30th July 2014	Board Assurance Framework Reference	5.1 and 5.2
Subject: Central Middlesex Closure of Emergency Services		
Director Responsible: Tina Benson Director of Operations	Author: Tina Benson Director of Operations	
<p>Summary: The Secretary of State for Health gave his response to the Independent Review Panel's report on <i>Shaping a healthier future</i> in October 2013. The outcomes for the Trust are that Central Middlesex Hospital, CMH, will be developed in line with the local and elective hospital models of care which include an Urgent Care Centre operating 24/7, and Northwick Park Hospital will become a one of five major acute hospitals in north west London</p> <p>Following on from the last meeting on 26th June 2014 where the board approved the move to closure at 7pm on 10th September 2014 work has continued through the weekly team meetings. This has led to a proposed model pathway for patients in sickle cell crisis which is being proposed to the patient group later today and a clear position on critical care beds at CMH.</p> <p>The closures of both Hammersmith Emergency Unit and CMH A&E have been through a rigorous assurance process with the local CCG's, (22nd and 23rd July 2014) and NHS England and the National Trust development Agency, (8th July 2014); at the time of writing the outcomes of these processes are unknown.</p> <p>An attached document does give assurance that the work will be complete in terms of Emergency Preparedness Resilience and Response and this was tested in a large North West London wide table top exercise on 22nd July 2014.</p> <p>The Trust will plan to meet internal standards to maximise available capacity at both sites prior to the closure and will utilise a command and control methodology to achieve this from 1st September 2014 until 3rd October 2014, which will then be reviewed against plan.</p> <p>In addition the public communications started 28th July 2014 and as this is so critical to the success of the project and communication update is attached.</p> <p>The activities on the critical pathway are on track to deliver by 10th September 2014.</p>		
<p>Financial Implications: Reduction of income and increased efficiency at NPH site.</p>		

Risk Issues (including legal implications, reference to Assurance Framework and Risk Register):

BAF 5.1 and 5.2 require the Trust to perform to the level of National targets which will need to be maintained through the closure. Due to a reduction of activity at CMH this will impact the achievability of the ED target especially type 1 performance.

Communication & Consultation Issues (including PPI):

Full communication with stakeholders is ongoing and the public communication campaign started on 28th July 2014.

Workforce Issues (including training and education implications):

Staff consultation has started and completes on 4th August 2014.

How this Policy/Proposal Recognises Equality Legislation:

This is covered in the Equality Impact assessment which can be found in Appendix 10 of 26th June 2014 board papers.

Has an Equality Impact Assessment been carried out on this issue or proposal?

Yes see Appendix 10 of 26th June 2014 board papers.

What impact will this have on the wider health economy, patients and the public?

The impact assessment is well described in the SaHF business case including enhanced safety and quality, the largest negative impact for patients and public is travel times and transport.

What is required of the Trust Board?

The Trust Board is asked to:

- Note the readiness to deliver a safe closure on 10th September 2014.