

# **An Independent Commission of Inquiry into the Reconfiguration of Acute Care Services in North West London**

## **Background and Purpose**

In 2012 the government consulted on proposals to make significant changes to the healthcare economy of North-West London, set out under the heading "Shaping a Healthier Future". This involved the downgrading of several hospitals across North-West London to "local" hospitals without A&E provision, closure of acute provision and reduction or downgrading of specific services. It also promised commitments to investment in capacity of out-of-hospital and community services in order to offset reductions in acute provision.

Two years into implementation of "Shaping a Healthier Future", Brent, Ealing, Hammersmith & Fulham and Hounslow Councils are keen to review its implementation; in particular, the impact of reductions to acute provision on the North West London population, the extent of progress with investment in capacity and capability of community and out-of-hospital services to meet local needs, and the extent to which demand for acute services has changed as a result of those investments.

For this reason, the four councils are seeking to establish an independent commission to review the impact of changes to the North West London health economy arising from implementation of "Shaping a Healthier Future" and assess the likely impact of planned future changes.

To that end, the Commission will carry out an independent, evidence-based evaluation of what was set out under "Shaping a Healthier Future" in terms of commitments to investments in out-of-hospital and community services, as well as proposed changes to acute services, and investigate the extent to which the proposals on which the public were consulted have been and will be delivered.

The Independent Healthcare Commission will:

1. Review the findings of previous studies relating to 'Shaping a Healthier Future' and other NHS plans for the future of healthcare services in North West London.
2. Consider evidence from stakeholders, experts in the field and other interested parties.
3. Review and report on the likely impact of the Imperial College Healthcare NHS Trust's Clinical Strategy 2014-20, and any equivalent plans from London North West Healthcare NHS Trust or its predecessors, on the residents of North West London.
4. Review the Out-of-Hospital strategy and wider plans to treat more patients in the community to see if the plans can accommodate an increase in demand as a result of reduction in acute provision.

## **Stage 1: A Review of Previous Studies**

The key documents for review are as follows:

- Shaping a Healthier Future (NHS NWL, June 2012)
- 'Shaping a Healthier Future' – an independent review - for H&F Council (Tim Rideout Ltd, August 2012)
- 'Shaping a Healthier Future' – an independent review - for Ealing Council (Tim Rideout Ltd, August 2012)
- 'Shaping a Healthier Future' consultation for NHS North West London (Ipsos MORI, November 2012)
- Advice on Shaping a Healthier Future Proposals for Changes to NHS Services in North West London (Independent Reconfiguration Panel, September 2013)
- Clinical Strategy 2014-20 (Imperial College Healthcare NHS Trust, July 2014)
- People's Inquiry into London NHS (Unite, March 2014)
- North West London Hospitals NHS Trust Quality Report (CQC, August 2014)
- Chelsea & Westminster Hospital NHS Foundation Trust Quality Report (CQC, October 2014)
- Imperial College Healthcare NHS Trust Quality Report (CQC, to be published December 2014)

## **Stage 2: A Call for Evidence**

The Commission will invite key players to a series of hearings to give evidence on the proposals for reconfiguration and alternative solutions. It is proposed that those to be invited to give oral evidence should include:

- Secretary of State for Health
- Imperial College Healthcare NHS Trust Board and Chief Executive
- North West London Healthcare NHS Trust
- General Practitioners
- Royal College of Surgeons
- Royal College of Physicians
- College of Emergency Medicine
- NHS England and/or NHS London
- London Ambulance Service
- North West London Councils
- North West London residents

In addition to considering oral evidence, the Commission will issue an open call for written evidence and this will be considered in its final deliberations. Some of those presenting written submissions may be invited to give further oral evidence at a second hearing if the Commissioners so wish.

Consultants will also be commissioned to produce modelling evidence to fill the gaps in existing evidence of the impact of planned closures and downgrading. This further evidence will be presented to the Commission for consideration.

### **Stage 3: Publication of Findings**

The Commission will publish its findings following the completion of evidence hearings and consideration of all written evidence. The findings will be presented to the sponsoring North West London Councils, Imperial College Healthcare NHS Trust, North West London Healthcare NHS Trust, all Clinical Commissioning Groups in the region, the Secretary of State for Health and the Shadow Secretary of State for Health.

### **The Commission's Brief**

These terms are drafted bearing in mind the overall remit set out by the commissioning boroughs, and a full and instructive discussion held at Hammersmith Town Hall on Saturday 10 January 2015 between the Panel and representatives from all the participating boroughs.

Given the speed with which widespread far reaching Government proposals are being implemented there is a clear and urgent requirement to focus and identify basic principles. Within these it is imperative to prioritise those areas of significance where change is either underway or imminent.

First principles of analysis entail the identification of the constituents of healthcare which are then developed on a firm evidence base.

In this instance, therefore, it is important to identify: -

1. The nature of each of the boroughs with particular regard to the citizens who form the contemporary patient constituency;
2. The current principal medical NEEDS of this community;
3. The MEANS by which these needs are presently being met;
4. Whether these are the BEST ATTAINABLE MEANS;
5. What RESOURCES are required to sustain the best attainable means;
6. The extent to which the government 2012 plan,
  - (a) in inception,
  - (b) subsequent implementation, and
  - (c) intended development in 2015,satisfies the 'best attainable means' test.