



Scrutiny Committee
26 November 2014

**Report from the Assistant Chief
Executive**

For Action

Wards Affected:
ALL

Developing Central Middlesex Hospital.

1.0 Summary

- 1.1 This covering report accompanies the paper from Brent Clinical Commissioning Group (CCG) outlining the proposals and process for deciding the new configuration of health services available from Central Middlesex Hospital.
- 1.2 Under the acute services reconfiguration set out within Shaping a Healthier Future (SaHF) agreed in 2013, Central Middlesex Hospital (CMH) has been defined as a local and elective hospital. Initial implementation of these proposals has resulted in the closure in September 2014 of the A&E unit at CMH. The remaining services due to be delivered from CMH include a 24/7 Urgent Care Centre, outpatient services, diagnostics, elective services and primary care. Further work on the SaHF structure has resulted in proposals to locate other services at CMH, in order to maximise the utilisation of the site. A Strategic Outline Case has proposed that detailed consideration be given to locating the following services at CMH:-
- An elective orthopaedic centre.
 - Mental Health inpatient facility relocated from the site at Park Royal.
 - A GP and primary care 'hub'.
 - A Genetics laboratory relocated from Northwick Park Hospital.
 - Relocation of rehabilitation beds currently at Willesden.
- 1.3 In 2014 the Strategic Outline Case was approved by the required CCG and NHS Boards and an Outline Business Case is currently being developed by Brent CCG to explore the detailed financial and service implications of the proposals for CMH.

- 1.4 As part of the development of the Business Case travel analysis, Equality Impact Assessments and a number of stakeholder consultation events have been held during 2014.
- 1.5 The report from Brent CCG sets out the findings so far in developing the business case, timings for reaching a decision and the implications for future service provision.

2.0 Recommendations

- 2.1 The committee is recommended to consider the proposals from Brent CCG for the future configuration of services at Central Middlesex Hospital and their rationale. It is also recommended to consider the implications for access to health care services for Brent residents.

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