

Report to: Brent Health Partnerships O&S Committee

Report from: The North West London Hospitals NHS Trust

Date of Meeting: 5 April 2011

RE: Better services for local children – a public consultation for Brent and Harrow.

1. Purpose of report

To update members on the reconfiguration of children's services at The North West London Hospitals NHS Trust following implementation in October 2010.

2. Background

Members will recall that Central Middlesex Hospital (CMH) used to provide an overnight children's service (based on six beds) on Rainbow ward. Following a successful public consultation in early 2010, the local NHS established two consultant led Paediatric Assessment Units (PAUs) at both Northwick Park Hospital (NPH) and Central Middlesex Hospital (CMH) and centralised the inpatient (overnight) service at NPH. The aim of the reconfiguration was to reduce unnecessary admissions and improve the links with community child health services.

The PAUs have been open since October 2010 and Rainbow ward now closes at 10pm every night.

HSC members will recall that there was no adverse media coverage during both the consultation and implementation phases. NHS partners believe that this is a result of the smooth management of the process, excellent joint working across the local NHS and widespread public support for the proposals.

3. Current position

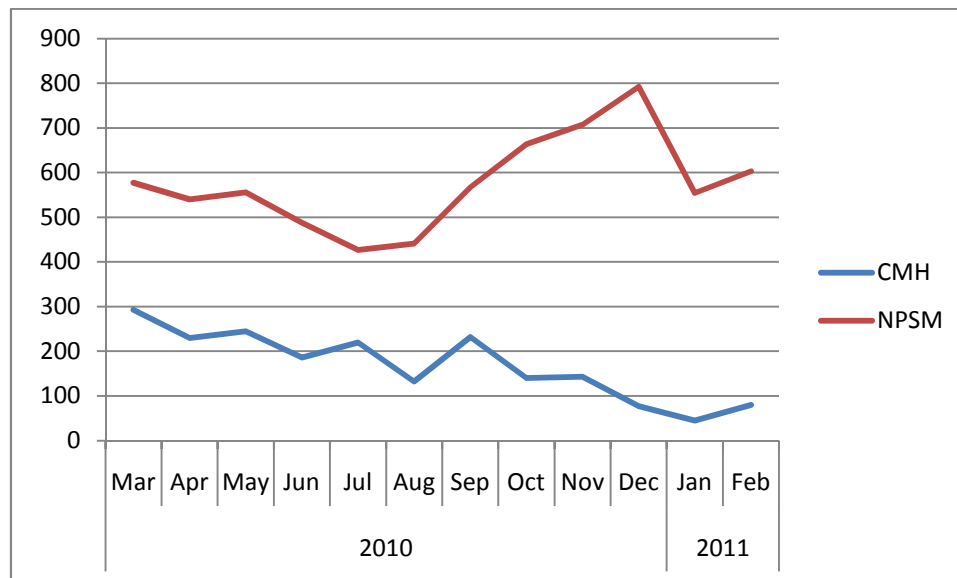
3.1 Impact on demand

The PAU at CMH has been operational since 18th October 2011. Although patients can be admitted to the PAU, overall there has been a significant reduction in the number of emergency patients admitted at CMH. This is pleasing as it corresponds with the original plan (to reduce admissions).

In the first weeks following implementation there was a corresponding growth in admissions at NPH, however the recent trend (ie January and February 2011) is downwards. This is welcome because A&E attendances have generally remained stable while adult admissions have grown (notably LAS journeys).

In other words the PAUs continue to see the same number of patients arriving via A&E but less patients are being admitted to the hospital (eg as an overnight stay).

Chart 1 **Emergency spells at CMH and NPH March 2010 – February 2011**



The chart above demonstrates that:

- The average number of children admitted has fallen from 7 per day to 3 per day (56% reduction) at CMH since October;
- The average number of children admitted at NPH has increased from 17 to 21 per day (for the same period). This represents a 29% increase although the trend is now downwards
- There has overall been a slight increase (4%) in total monthly emergency admissions (CMH and NPH) since October.

3.2 Services for children with sickle cell

Members will be aware that sickle cell disease affects 1 in 300 babies born locally. Of our 670 patients who have haemoglobinopathies, 221 are children: 184 have sickle cell disease, 19 have Thalassaemia major and 18 have other related conditions.

At consultation assurances were given that the Brent Sickle Cell Service based at CMH would not be disadvantaged by the centralisation of overnight care at NPH. This was primarily because the majority of children using the CMH service are seen and discharged on the same day and do not require transfer as an inpatient. For increased confidence a combined training programme has been established for all nursing staff to ensure necessary skills transfer.

The Trust was therefore delighted when a detailed external peer review has found that paediatric sickle cell and thalassaemia services at CMH are among the best in the country.

The review in 2010 drew attention to the committed, enthusiastic team members who offer excellent clinical care, noting that the clinical psychology input is unusually strong and done systematically - and not just 'as needed'.

It also found that patients were comprehensively informed by staff, that facilities were good (with excellent co-location of services) and that the transition of adolescents into the adult service was well managed and flexible.

4. Next steps and the new Care UK Urgent Care Centre (UCC)

Members will be aware that Care UK's UCC at Central Middlesex Hospital (CMH) will open on 28th March and operate a 24/7 GP model of care. The UCC is expected to see 75% of all children. The UCC will always have a paediatric trained nurse on (24/7). All GPs and nurses are qualified in level 3 safeguarding.

The remaining 25% of children who cannot be seen by UCC staff will be referred to the CMH PAU.

The small number of children requiring specialist paediatric care out of hours (OOH) will be transferred to Northwick Park by the Trust's internal ambulance service. Based on current activity levels it is anticipated that on average between 3-4 patients will need to be transferred to NPH each night. This is in line with forecasts included in the public consultation document¹.

St Mary's will continue to accept the rare critically unwell child who requires intensive care. These patients will be transferred by blue light (from either NPH or CMH) as per LAS' critical transfer protocol.

Finally as per the existing agreement in October 2010 the LAS will continue to take all 999 calls to Northwick Park instead of CMH. This system has been working well over the past six months.

5. Recommendations

Members are asked to note this report and the smooth implementation of the PAU at CMH.

David Cheesman
Director of Strategy
March 2011

¹ Better services for local children, January 2010