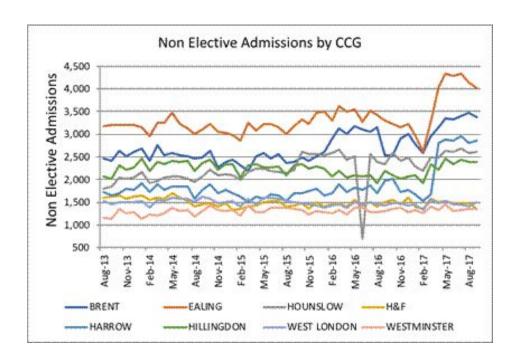


To: NHSI London and NHSE London Directors of Finance

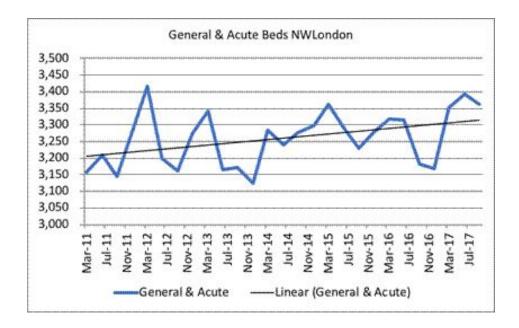
6 February 2018

We are a group of concerned North West London (NWL) residents, who have invested considerable time and effort in studying regional and local plans for healthcare services in this area. In November 2017 a letter written by NHSI/NHSE London to NHS NWL CCG Accountable Officers came into our possession. The letter asks for further evidence based assurances before committing financial resources to the SaHF ImBC SOC1. At the heart of these concerns is the lack of evidence to support an annual Non–Elective (NEL) admissions reduction of 99,000 by 2025/26.

We share these anxieties and have reviewed Monthly Activity Return data for Total NEL General & Acute Admissions by CCG from August 2013 to September 2017. The data shows a rise in NEL activity for almost all CCGs in NWL with an alarming spike in NEL admissions in the CCGs served by London North West Healthcare NHS Trust, since February 17. We have requested FOI breakdowns of these NEL admissions, but so far responses to our requests have been slow.



We do not feel there have been any achievements gained in controlling NEL activity growth and note that over time the Hospital bed number trajectory in North West London is on an upward trend.



This is against the background of Type 1 A&E performance in NW London being amongst the worst in the country. December 2017 data show Type 1 performance for Hillingdon Hospital and London North West Healthcare NHS Trust to be 57.6% and 58.7% respectively, Imperial College Healthcare NHS Trust was at 64.1 % and only Chelsea and Westminster NHS Trust got close to the target at 91.1%. However, we are aware that Chelsea and Westminster are reporting Type 3 A&E data as Type 1 data. We welcome the UK Statistics Authority's intervention in January 2018 asking for clarity over A&E statistics and would seek assurances that NHS NWL CCGs are transparent in reporting any changes made to the way in which data is collected.

The only hard data NHS NWL has presented to us on the development and success of Out Of Hospital (OOH) services is contained in a letter from Dr Mohini Parmar to Colin Standfield dated 8 September 2017 (attached). These data amount to 2,700 hospital admissions prevented in Brent in 2017, and 1,400 hospital 'admission avoidances' in Ealing in 2017. Given that NHS NWL SaHF has been trying to develop OOH services and reduce hospital admissions since 2012 it is hardly a recommendation that over five years' work has resulted in an annual reduction of just 4,100 NEL admissions.

The above evidence clearly demonstrates that the plans and changes that have been implemented thus far are failing. NEL Admissions are on the rise, Bed numbers are increasing and even the 'improved' statistics for Type 1 A&E performances are poor and on a downward trend. The NWL area requires detailed thoughts, consideration and planning of patient care provision, we implore NHSI and NHSE to vigilantly scrutinise the proposed plans keeping the above facts in mind.

It would be brave, not to say heroic, to continue the SaHF experiment and to expect a significantly different outcome from the one seen over the last 5 years.

Yours faithfully,

ESON RESEARCH TEAM

Anthony Brewer MSc DMS MIET, retired medical physicist
Eric Leach, retired businessman, editor 'Our NHS in Crisis'
Elizabeth Gaynor Lloyd, retired Solicitor
Oliver New, Chair ESON
Colin Standfield MA (Oxon), retired advertising board director and charity development officer