

21 April, 2009

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Julia Regan,
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Dear Julia

Re: The shape of things to come – developing new, high quality major trauma and stroke services for London

Thank you for your letter dated 20th March 2009, in which you requested a view from the West Middlesex University Hospital NHS Trust on the proposals for the development of major trauma and stroke services in London.

In relation to trauma, we fully support the development of major Trauma Centres in London in order to ensure that this relatively small patient group is provided with the most effective, high quality care. As a local provider of services, already working with our more specialist neighbouring hospitals, we do not envisage the designation of trauma services to have a significant impact either on the Trust or on the travelling times of our patients.

In relation to stroke services, we welcome the proposal to further develop our stroke unit and TIA services to meet the full requirements of the Healthcare for London specification for a Stroke Unit. Indeed, we have already designated a ward to stroke care to ensure all patients are provided with optimal treatment and have in place detailed plans to enable our services to continue to develop. We did not select to bid to be a Hyper Acute Stroke Unit as we believe that this specialist service is best provided in an environment where it can be supported by the full range of services provided within a large teaching hospital environment with specialist and tertiary services

In relation to the provision of Hyper Acute stroke care, our bid was submitted in partnership with Imperial who planned to provide this service from their Charing Cross site. This represented the closest unit for our local population to access. However, we are concerned that within the consultation documentation it is noted that if Imperial are successfully designated as a trauma centre, then Hyper Acute Stroke services will be relocated from Charing Cross to be adjacent to the Trauma Centre on the St Mary's site. This would not be an optimal location for our patients and under this scenario we would wish to support Chelsea and Westminster's designation in order to maintain services as locally as possible for our patients.

Clearly, the selected configuration for the Hyper Acute Stroke Units will impact on the size of Stroke Unit required at the West Middlesex. We will continue to work closely with our health care partners including acute providers and the London Ambulance Service to ensure that we have sufficient bed capacity to manage demand.

We will be responding to the Healthcare for London consultation with these views.

I hope that this response is helpful to your discussion. If you require any further information, please do not hesitate to contact me.

Kind regards

Jacqueline Docherty
Chief Executive