

## London Borough of Hammersmith and Fulham Response to Healthcare for London: Consulting the Capital

### Healthcare for London Hammersmith and Fulham

<b>Staying Healthy</b>	
<b>1a</b>	<b>Looking at the list below, which of the following changes, if any, would you like to make in the future to improve your health?</b>
	Given the issues facing Hammersmith and Fulham, we would particularly focus on Improving diet; increasing exercise; giving up smoking and reducing alcohol intake. We see addressing these as creating the conditions for people to choose healthier options.
<b>1b</b>	<b>How could the NHS in London best help you make these changes</b>
	We would like to see a greater emphasis on the NHS as a health service, promoting good health through supporting positive lifestyle choices. This would involve working with local agencies, notably local government, to use their powers and responsibilities to improve health outcomes. We believe that there needs to be a clearer focus on the role that addressing the wider determinants of health can play in improving the health of London's residents.
<b>1c</b>	<b>What else could the NHS in London do to help you stay healthy?</b>
	We believe that NHS London should work more to prevent ill health and to ensure early interventions for people at risk of ill health. It is important that the NHS in London works in partnership because it alone cannot facilitate more people to live healthier lives.
<b>2</b>	<b>I would welcome advice on staying healthy when I come into contact with a healthcare professional</b>
	We would strongly agree that when a patient comes into contact with a healthcare professional that person should be able to provide a general level of advice and support and direct patients to where further information can be accessed on staying healthy. However, we know that those most in need of healthcare are least likely to approach health services. We therefore believe that targeted health promotion activity which addresses the needs of those who are in reality least likely to approach a health care professional is fundamental and that advice on staying healthy should be available in other settings, not just those where a healthcare professional is present.

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

<b>3</b>	<b>Please give us any other comments in this section</b>
	We would like to see NHS London genuinely shifting its focus to working on public health issues and enabling partnerships between those agencies which are best placed to affect the health outcomes for individuals, specific communities and the whole population.
	<b>Maternity and newborn care</b>
<b>4</b>	<b>We are trying to balance various factors when developing proposals for maternity care in London. We would like to know what three factors are most important to you.</b>
	We believe that offering informed choice for mothers and families is the key consideration. This requires a range of interventions to be available at all stages of maternity and newborn care. We would therefore agree that being given a choice of home birth is important, but would also argue that being able to choose to give birth in other settings is equally important.
<b>5</b>	<b>To be able to give high-quality care, we need to balance the time that midwives can spend with mothers after the birth of their baby with the time taken to travel to women's homes. Which option would you prefer?</b>
	As with most healthcare interventions, there needs to be a tailored approach which means that midwives spend most of their time with those who most need their support. A more targeted approach would mean that women who are able to support themselves with minimal support would be able to do so, whilst those in need of more midwife interventions would be able to gain access to these.
<b>6</b>	<b>Please give us any other comments on the proposals in this section</b>
	<b>Children and Young People</b>
<b>7</b>	<b>The majority of care for children, including urgent care, will continue to be provided locally. We are proposing that specialist care for children will be concentrated in hospitals with specialist childcare. This may mean that they are further away from your home. To what extent do you agree or disagree with this proposal.</b>
	As a framework proposal, we would agree that there should be specialist hospitals that are able to deal with

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	<p>conditions that are unusual, that affect relatively few children in any one area and need to be dealt with by specialists in their field. However, we would wish to see what the implications of such an approach would be for specified conditions (those which would be identified as specialist for example) and so for local residents before coming to a final view.</p> <p>Accessibility for parents and families is an important factor in the child's experience of their illness and should be taken into account in any reconfiguration of services.</p>
<b>8</b>	<p><b>What, if anything, could we do to encourage more parents to <input type="checkbox"/>immunise their children</b></p> <p>We need to offer immunisation services in a range of settings, which mean that it is as easy as possible for parents to immunise their children. For example we could offer immunisations at schools where parents are regularly in attendance and where there is a regular demand. We need to ensure that we take immunisations to individuals rather than solely expecting them to come forward to services for example.</p> <p>We also need a fairly hard-hitting campaign on the risks of not immunising children to ensure that parents are seeking an informed choice.</p>
<b>9</b>	<p><b>Please give us any other comments on this section below.</b></p>
	<b>Mental Health</b>
<b>10</b>	<p><b>We established a new mental health working group including more clinical representatives. The results of this work will be published in Summer 2008. In the meantime, please give us your views on the recommendations shown in this section, to help us with the more detailed work.</b></p> <p>The recommendations included in the consultation document are inline with what we would like to see and we hope that the mental health working group will translate these into plans for local services that better meet the needs of this vulnerable group.</p>

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	<p>We are particularly keen that mental health service users are not disadvantaged in terms of employment and accommodation which can have a long-lasting contribution to their ongoing mental wellbeing. We believe promoting positive mental health on a pan London basis may be one way to address this issue in the longer term.</p> <p>We would emphasise the critical importance of people with mental health needs being able to access high quality primary and mainstream care services, as well as the full range of other services deployed in the community. There has long been neglect of the physical health needs of mental health service users and the complex interaction of physical and mental health needs should be better understood.</p>
	<b>Acute Care</b>
<b>11</b>	<b>If there was a telephone service to treat your urgent care needs, what facilities would you like it to have?</b>
	We believe that there could be room for confusion with NHS Direct and would urge caution in introducing another general telephone service for urgent care needs.
<b>12</b>	<p><b>We propose developing some hospitals to provide more specialist care to treat the urgent care needs of the following conditions. These would probably be further away from your home than your local hospital. If these proposals are adopted, the number and locations will be subject to later consultation:</b></p> <ul style="list-style-type: none"> <li>• <b>Trauma – about three hospitals in London</b></li> <li>• <b>Stroke – about seven hospitals in London providing 24/7 urgent care with other hospitals providing urgent care during the day and rehabilitation</b></li> <li>• <b>Complex emergency surgery needs – we need further work to assess the number of hospitals required.</b></li> </ul> <p><b>To what extent do you disagree with the proposals to create more specialised centres for the treatment of severe injury, stroke and complex surgery needs?</b></p>

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	<p>As a Framework, we believe that the developments outlined do have some advantages for the future, particularly in terms of patient safety and wellbeing. However, we would still wish to consider any specific proposals affecting healthcare provision in Hammersmith and Fulham very carefully in order to come to a view as whether the impact locally is to be supported or not.</p> <p>Our belief that Charing Cross Hospital could provide an excellent setting for one of the trauma centres has already been noted in our previous submission and we would continue to support this option for the hospital.</p>
	<b>Please tell us why?</b>
	The critical mass necessary to deliver excellence for those specialist conditions outlined above will only be achieved by limiting the number of locations where specialist services can be delivered. Failure to achieve targets in terms of treatment for stroke, for example, can mean life or death for individuals – and we need to find a way for people to access care this is what is important.
<b>13</b>	<b>If you agree that there should be specialist centres for the treatment of trauma, stroke and complex surgery, to what extent do you agree or disagree that ambulance staff should take seriously ill and injured patients directly to these specialist centres, even if there is another hospital nearby?</b>
	Whilst this would need to be a decision for the individual ambulance crew in any particular instance, we do agree that the principle should be as outlined above. If local services continued to be used even for patients who would benefit from specialist centres, the role of such centres would become diminished and devalued, with an impact on patient treatment.
<b>14</b>	<b>Please give us any other comments on the proposals in this section</b>
	<b>Planned Care</b>
<b>15</b>	<b>How useful, if at all, would you find it for GP surgeries to open for appointments in the evenings and at the weekend?</b>
	This is often cited by as a major issue and extending opening hours would be welcomed by local people. We

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	recognise that we would need to monitor take-up as the demand for extended opening hours is not always matched by usage.
<b>16</b>	<b>Please give us any other comments on the proposals in this section</b>
	We support the proposals to make more health services available in the community, particularly where access to health services is variable. We know that in more deprived services there is a reduced usage of secondary care services and would seek to ensure that health inequalities and inequity of access to service provision are not replicated through these proposals.
	<b>Long Term Conditions</b>
<b>17</b>	<b>Thinking about how the NHS in London is balancing the resources it spends on long-term conditions (e.g. asthma, diabetes), do you think :</b>
	<b>Options: A</b> – a greater proportion of future spending should go to help people with long-term conditions stay healthy by investing in more GPs, specialist nurses and other health professionals and the services they provide.  Whilst we support Option A above the other options, we strongly believe that supporting self management/expert patient approaches is key to reducing the harm caused by long term conditions. This may mean investment in non healthcare professionals who can support individuals to take control of their own conditions or facilitate peer support and information exchange.
<b>18</b>	<b>Please give us any other comments on the proposals in this section</b>
	<b>End of Life Care</b>
<b>19</b>	<b>Do you think new end of life service providers responsible for co-coordinating end-of-life care will result in better or worse care for patients than the current arrangement?</b>
	The key to providing enhanced end-of-life care will lie in the ethos and approach adopted by the service providers. Ensuring choice, dignity, respect and legitimacy, for example, are fundamental to improving people’s experience at the end of their life, regardless of age or condition.

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

<b>20</b>	<b>Please give us any other comments on the proposals in this section</b>
	Close working with local authorities and other partner agencies, including the voluntary sector, is essential in developing local services to deliver end of life care.
	<b>Where we could provide care</b>
<b>21</b>	<b>The proposed polyclinics would have a number of features. We would like to know what five factors are most important to you.</b>
	We believe that polyclinics should be planned and designed to meet the needs of their local population. The five factors which are most important are likely to differ for different communities, even within a borough as small as Hammersmith and Fulham. Local needs assessments should be carried out to ensure that polyclinics meet immediate local need and add value through the range of services they are able to offer.
	We would be disappointed to see a prescriptive approach to which services can be offered through polyclinics, but would encourage a localised approach which enables the selection of a wide range of services to meet local need.
<b>22</b>	<b>To what extent do you agree or disagree that almost all GP practices in London should be part of a polyclinic, either networked or same-site?</b>
	Whilst it may be important that all residents have access to the wider range of services offered by a polyclinic, this does not necessarily mean that all GPs should be part of a polyclinic. We would support a hub and spoke model where some GPs remain in and some outside the polyclinic, but where all patients have access to the wider range of facilities offered by the polyclinic.
<b>23</b>	<b>We are proposing moving the treatment of some conditions (e.g. trauma, stroke and complex surgery) to specialist hospitals and providing more outpatient care, minor procedures and tests in the community. Local hospitals would continue to provide other types of care as they do now. Which of these statements closely fits your view?</b>
	As noted above, we agree that the treatment of some conditions may be best carried out in specialist

**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	hospitals. We also note that some procedures currently available only in hospital could be offered in the community, which would be very welcomed.
<b>24</b>	<b>Please give us any other comments in this section</b>
	As we stated in our previous submission, the Council believes there is a compelling case for the enhancement of Charing Cross Hospital to become the specialist provider site for the major trauma centre for west London.
	<b>Turning the vision into reality</b>
<b>25</b>	<b>In the front of this booklet we described five principles. Now that you have seen how these principles will be applied throughout the proposals, please tell us whether you agree or disagree with each of these principles?</b>
	<p>We would broadly agree with all of the principles.</p> <p>However, we would note the requirement to consult in a meaningful manner in relation to any changes to services arising as a result of the application of the principles and notably principle 2, Localise where possible, regionalise where necessary. In our previous submission for example, we noted that “The Council recognises the need for change to maintain a world class healthcare system for London, but not at the expense of accessibility to services for the Borough’s residents. The Council believes there is a compelling case for the enhancement of Charing Cross Hospital to become the specialist provider site for the major trauma centre for west London” and this remains our position.</p>
<b>26</b>	<b>What, if any, other principles do you think there should be?</b>
	We would like to see a principle which reflects an emphasis on self-management and maximising the contribution individual patients can make to their own recovery and ongoing treatment and care. We believe this would support the provision of high quality information and an early intervention approach.
<b>27</b>	<b>To what extent do you agree with the following statements?</b>



**London Borough of Hammersmith and Fulham  
Response to Healthcare for London: Consulting the Capital**

	The Framework would appear to offer an excellent basis for improvements in both access to health services and to health outcomes. However, a recurring theme in this submission is the importance of effective implementation of the Framework and that this will require strong consultation and involvement of local residents and service providers. There will be a significant amount of detailed work required in order to take the Framework forward and without effective oversight and management there is a risk that the Framework's positive recommendations become diluted.
<b>28</b>	<b>What else could be done to improve access to health services and improve the health of deprived communities and disadvantaged groups?</b>
	It will be important that local services reflect the needs of local communities, based on sound needs assessment and the views of local residents. Ensuring effective involvement of individuals and patients – even those who are most hard to reach – in planning, managing and developing local health services will assist in both improving access to services and the health of deprived communities.
<b>29</b>	<b>Please give us any other comments on how health services in London could be improved over the next ten years</b>
	We believe that the long term vision of HealthCare for London offers a real opportunity to improve the health of Londoners over the next ten years. We urge that it be supported by adequate investment, high quality management and excellent clinical input at all stages of implementation. Equally important will be the involvement of local residents in the services which affect them so that long lasting changes meet local needs, even as these may evolve over time.