

PUBLIC QUESTION TIME

LONDON BOROUGH OF HAMMERSMITH & FULHAM

COUNCIL MEETING – 23 OCTOBER 2013

Question by: Ms Suzanna Harris

To: Cabinet Member for Community Care

QUESTION

“In their future plans for Charing Cross, has the council carried out population increase predictions, based on the number of new homes planned for the borough for the next 10 years? And for the increase in people coming to the borough daily to work ?

Have they assessed the possible numbers of people who might need treatment at an A&E in the case of a mass incident at Fulham Football Club, or the Boat Race ?
Would St Mary's and Chelsea-Westminster have the capacity required ?

Already our campaign has had a number of reports about a lack of capacity, long waiting times, and admissions to less appropriate wards because of pressure on acute beds at these hospitals.”

Answer

It is worth remembering that the “future plans” for Charing Cross Hospital are made by North West London NHS, not the Council. However, in formulating plans, North West London NHS - as the architect of those plans - used population figures that came out of the recent Census.

They also tell me that NHS England is now responsible for emergency planning across London and have very clear plans in place for dealing with major incidents.

Each hospital in London is categorised as a different type of responder. For inner North West London St.Mary's Hospital has already been categorised as the major trauma centre. This is nothing new and has been the case for some time. In other words, it is already the case that in the event of a major incident in our area, the majority of serious emergency cases would go to St Mary's Hospital.

On the issue of hospital capacity, it should also be recognised that through the Out of Hospital Strategy the local NHS and Hammersmith & Fulham Council are working to prevent unnecessary hospital admissions, and in particular preventable presentations to A&E. No resident, particularly a frail and elderly resident, wants to experience a health crisis and spend time in hospital, away from their home and family if it is preventable. Through a series of joint initiatives we intend to provide enhanced social, community and primary care services for residents which will prevent them going to hospital in the first place. The Council has long maintained that no changes to our major acute hospitals can be considered until a reduction in demand has been proven.