

## Waltham Forest Save our NHS ...the re-development of Whipps X

The Covid 19 pandemic has shown us that sufficient hospital capacity is **vital** for our community, which is why I want to speak about the re-development of Whipps X hospital now.

Pre Covid , Whipps X hospital was running at 98/99% bed occupancy, sometimes with no free beds. NICE guidance<sup>1</sup> states that once bed occupancy goes above 90%....infections , re-admissions and increased mortality are likely, thus Whipps was already an overstretched hospital.

In May 2020 Barts provided an update on the Redevelopment Plans<sup>2</sup> with 51 fewer beds for the new hospital than we have now.

The justification for this proposed bed reduction is in 2 documents:

**The Integrated Care Strategy** which aims to show how improved community services will reduce numbers of A+E attendances, emergency admissions and average length of hospital stay .

This beguiling strategy has several flaws : significantly the methodology employed to analyse the data is flawed suggesting that Waltham Forest CCG spends more on acute care and less on primary care than its comparator boroughs in North East London. However this spend is analysed only as a proportion of the WF **overall budget** . In real terms Waltham Forest CCG spends less on **both** acute, primary and all other forms of health care than its comparator boroughs because it receives less funding; it is **not** overspending on hospital care.

**The Whipps Cross Health and Care Services Strategy**<sup>3</sup> reveals a plan for the hospital to become a Centre of Excellence for the care of frail older people, with appropriate specialist surgery .This plan notes that 69% of current admissions to Whipps are people over 65 yet aims to reduce hospital admissions by 1in 8 and reduce length of hospital stay by 1.25 days . Improved hospital and community care are vital but their role in bed reduction is not evidenced; older people are more likely to have multiple conditions , people with complex conditions <sup>4</sup>stay in hospital 3.5 times longer than those with none.

The assumption of reduced admissions and length of stay are highly risky.

There is no evidence that the new plans will reduce A+E attendances , whereas there is much evidence to demonstrate that discharging patients too soon often leads to re-admission.

The Royal College of Emergency Medicine <sup>5</sup>suggests that demand reduction is difficult because there is no evidence to support the suggestion that many people turn up in A+E unnecessarily ; **they** (the RCEM) demonstrate that increased A+E attendance is intrinsically linked to population growth .

Waltham Forest Save Our NHS and 5,000 local residents who signed our petition<sup>6</sup> consider it is a great risk that Barts are planning fewer beds in the new hospital,

based on an **untested** , aspirational strategy for improved care in the community that does not take into account issues like underfunding of community resources. It does not take into account the fact that older people in hospital , take longer to treat.

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It does not take into account the local population growth .

1. <https://www.nice.org.uk/guidance/ng94/evidence/39.bed-occupancy-pdf-172397464704>
2. 'Whipps Cross : Making it Work Well into the Future' : Barts Health NHS Trust 19 May 2020
3. <https://www.bartshealth.nhs.uk/download.cfm?doc=docm93jjm4n11878>
4. Waltham Forest Integrated Care Strategy October 2019
5. Royal College of Emergency Medicine Submission to Health Select Committee 2018
- 6.

<https://www.guardian-series.co.uk/news/18257314.campaigners-fear-new-whipps-cross-fewer-beds-will-not-meet-areas-needs/>