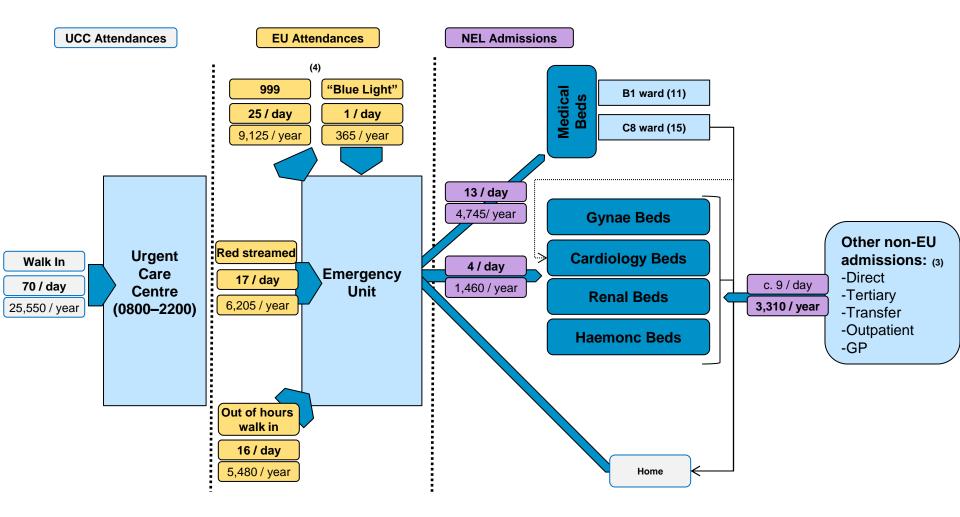
# A&E Transition Capacity Model

Additional briefing 11 September

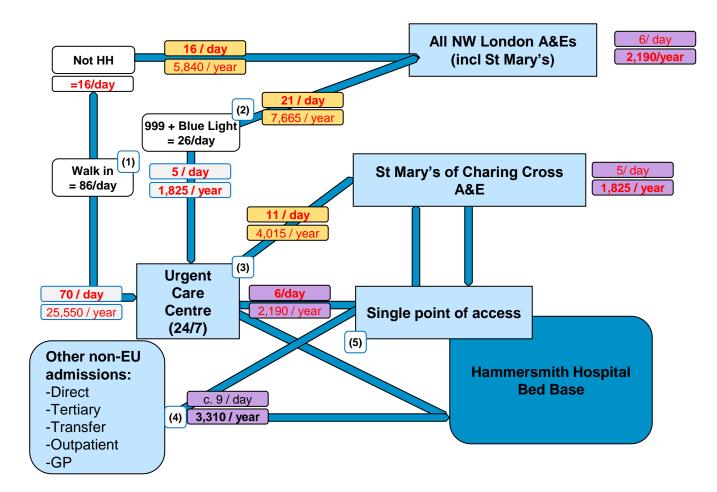
The closure of Central Middlesex and Hammersmith A&Es was based on a 'lift and shift' of <u>current</u> activity

- Capacity modelling for the closure of Central Middlesex and Hammersmith A&Es was based on current site activity levels (slides 3 and 5).
- SaHF modelled the redistribution of patient flows using the TfL travel model (7) and Trusts modelled the capacity for their sites (4 and 6)
- Contingencies were built in at site and pan-NW London levels
- Because the redistributed patient activity was relatively small, significant additional building on receiving sites was not neccesary.
- The additional capacity that was required was accomodated through small capital schemes within Trusts' delegated capital limits.
- These small schemes included:
  - Refurbishment of Carroll and Fletcher Wards for admissions to Northwick Park
  - 25 community beds at Mount Vernon Hospital
  - 14 additional acute beds at St Mary's

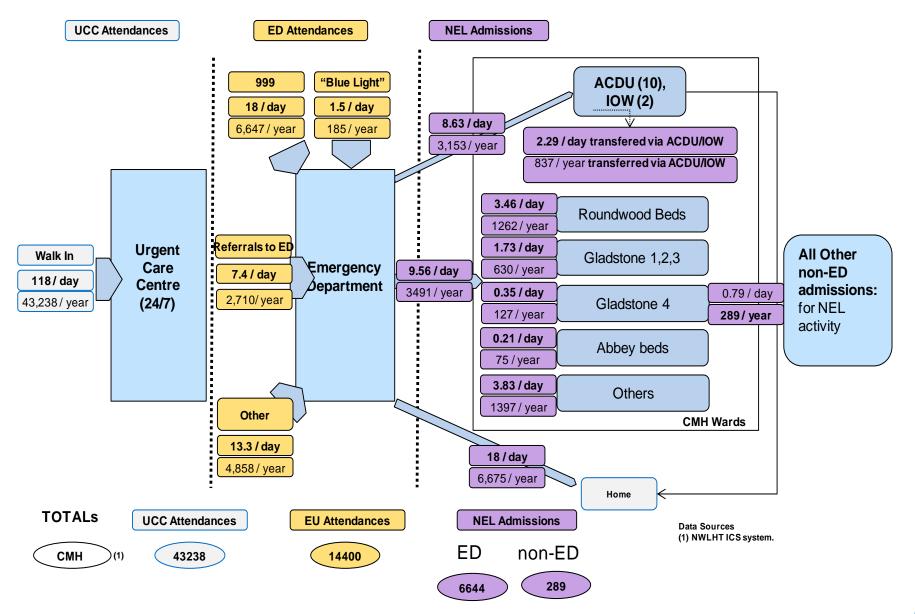
### 'Prior' clinical model at Hammersmith Hospital



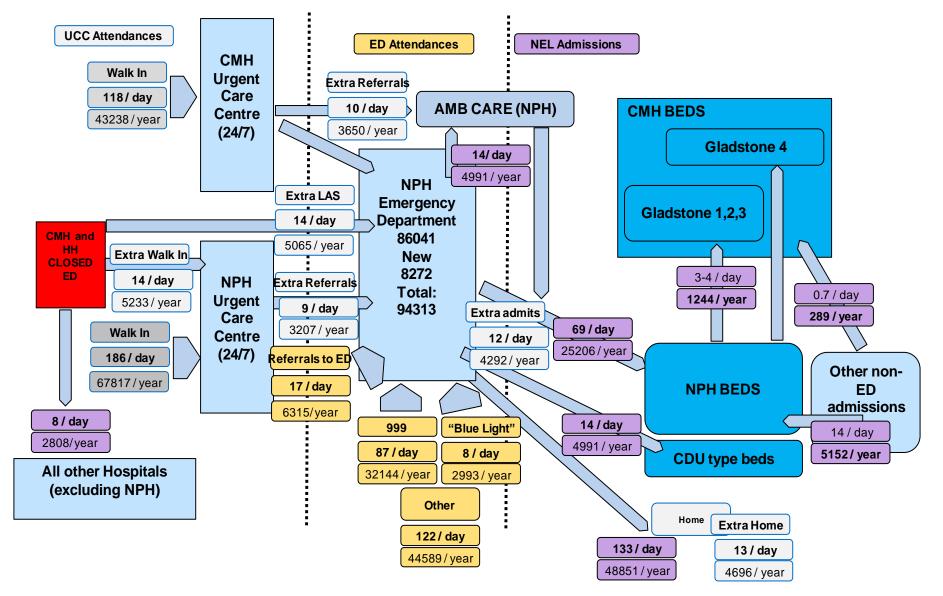
#### After clinical model at Hammersmith Hospital



#### 'Prior' clinical model at Central Middlesex Hospital



# After clinical model at Northwick Park and Central Middlesex Hospitals



## **Summary Admissions Modelling**

