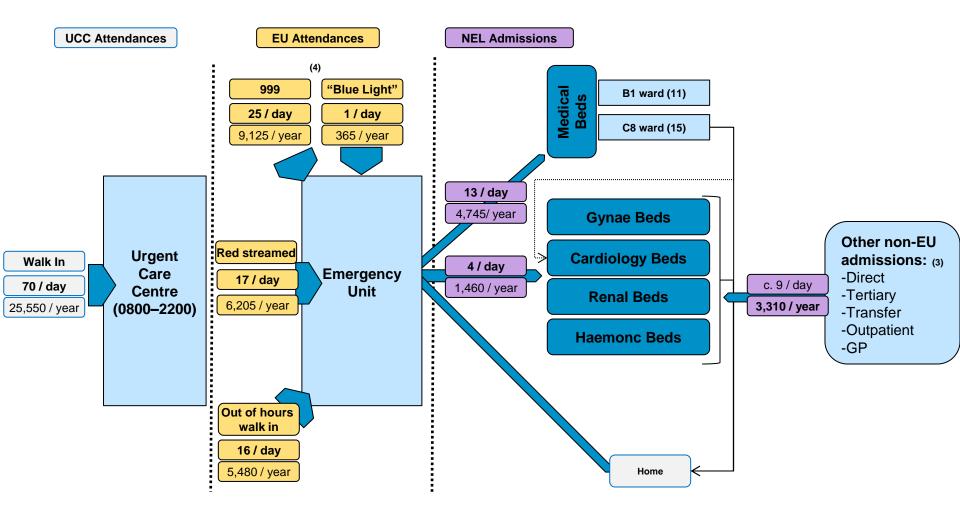
A&E Transition Capacity Model

Additional briefing 11 September

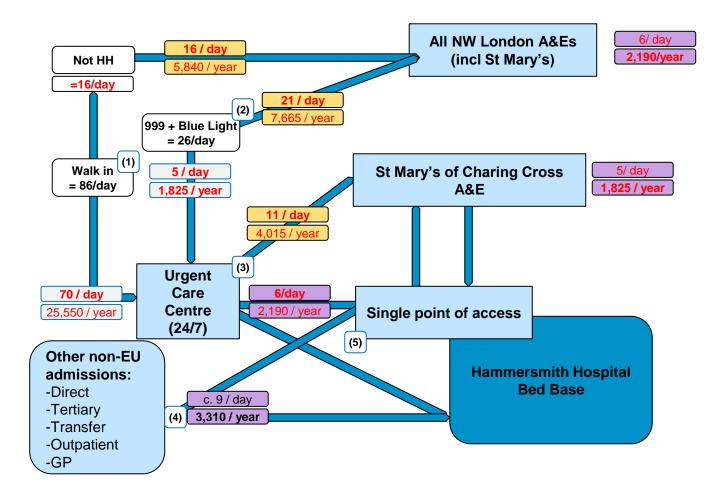
The closure of Central Middlesex and Hammersmith A&Es was based on a 'lift and shift' of <u>current</u> activity

- 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

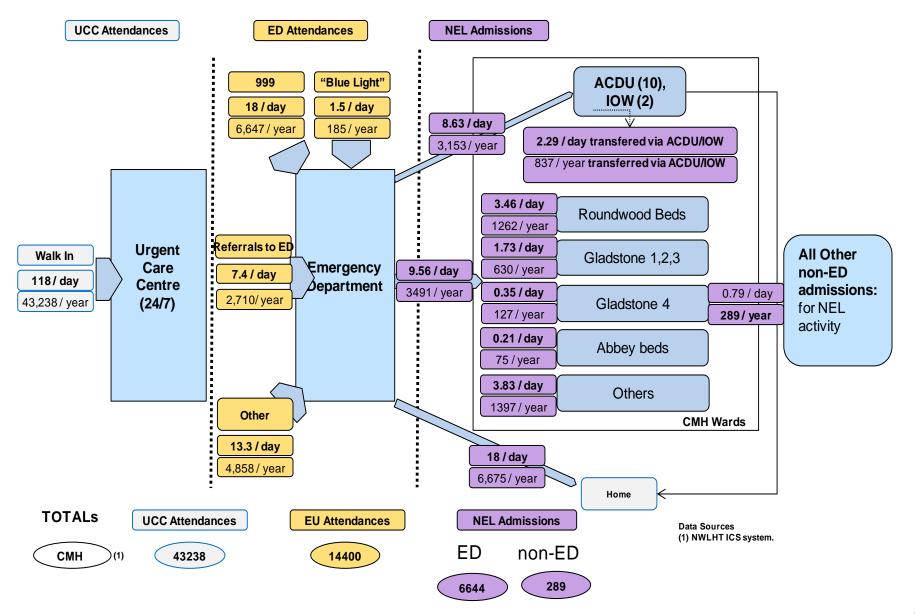
'Prior' clinical model at Hammersmith Hospital



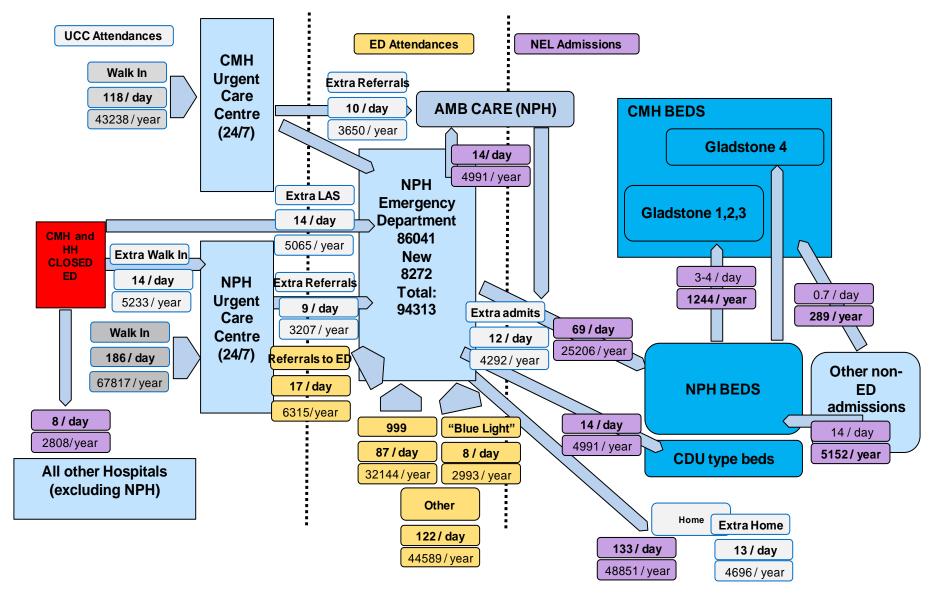
After clinical model at Hammersmith Hospital



'Prior' clinical model at Central Middlesex Hospital



After clinical model at Northwick Park and Central Middlesex Hospitals



Summary Admissions Modelling

