

Date: 19 April 2018

To - [km.stroke@nhs.net](mailto:km.stroke@nhs.net)

Dear Mr Glenn Douglas, Chief Executive, Kent and Medway Sustainability & Transformation Partnership and Mr Mike Gill, Chairman of the CCG Joint Committee,

## **KENT AND MEDWAY STROKE REVIEW**

I am writing to you as Chairman of the Our Healthier South East London Joint Health Overview and Scrutiny Committee (OHSEL JHOSC) in connection with the above review. The OHSEL JHOSC was established to scrutinise the STP in South East London and consider any proposals which affect the delivery of health services in the London Boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark. Representatives of each of these Boroughs are Members of the JHOSC.

Stroke services in South East London are already delivered through a network of Hyper Acute and Acute Stroke Units, similar to the model being proposed in the Kent and Medway Stroke review. Therefore any changes to stroke services which, resulting from your review, may see them being removed from Darent Valley Hospital (DVH) will have implications for stroke services across South East London and not just in Bexley, whose Health Scrutiny Committee are statutory consultees.

I decided therefore, as Chairman of the OHSEL JHOSC, that the issue should be considered at our most recent meeting on 12<sup>th</sup> March 2018. During the meeting concerns were raised by Members about potential increases in patient flows into SE London should stroke services be removed from DVH, particularly given that your pre-consultation business case states that Hyper Acute Stroke Units (HASUs) in SE London are already at full capacity. Specific concerns were raised about potential pressures on stroke services at the Princess Royal University Hospital (PRUH) given its proximity to Kent and also University Hospital Lewisham (UHL). This is because for many residents who would use the HASU at the PRUH, the ASU at UHL would be their local stroke unit should services not be available at DVH. All options upon which you are consulting that do not include DVH as a HASU show a significant increase in patients flowing to the PRUH.

We strongly feel that SE London residents should not be adversely affected or see their access to stroke services reduce as a result of increased patient flows from Kent. If stroke services are removed from DVH, the OHSEL JHOSC requires further clarity on the impact on acute stroke services in South East London. Assurances are sought that there is capacity to manage the projected increase in patients and if not, how this will be addressed. We think there are questions that need to be answered about where patients will be diverted should the HASU at the PRUH reach capacity, because this will have a further impact on travel times and accessibility of services, which do not appear to have been considered in your impact assessment.

Having considered the consultation options and the wider impact for SE London, the OHSEL JHOSC agreed that stroke services should be retained at DVH, particularly in light of the current pressures on the PRUH and UHL. **The OHSEL JHOSC's preferred options for stroke services in Kent and Medway are therefore options A, B and E, that include services being retained and enhanced at DVH.**

Yours sincerely,



Cllr James Hunt  
Chairman of Our Healthier South East London Joint Health Overview and Scrutiny Committee