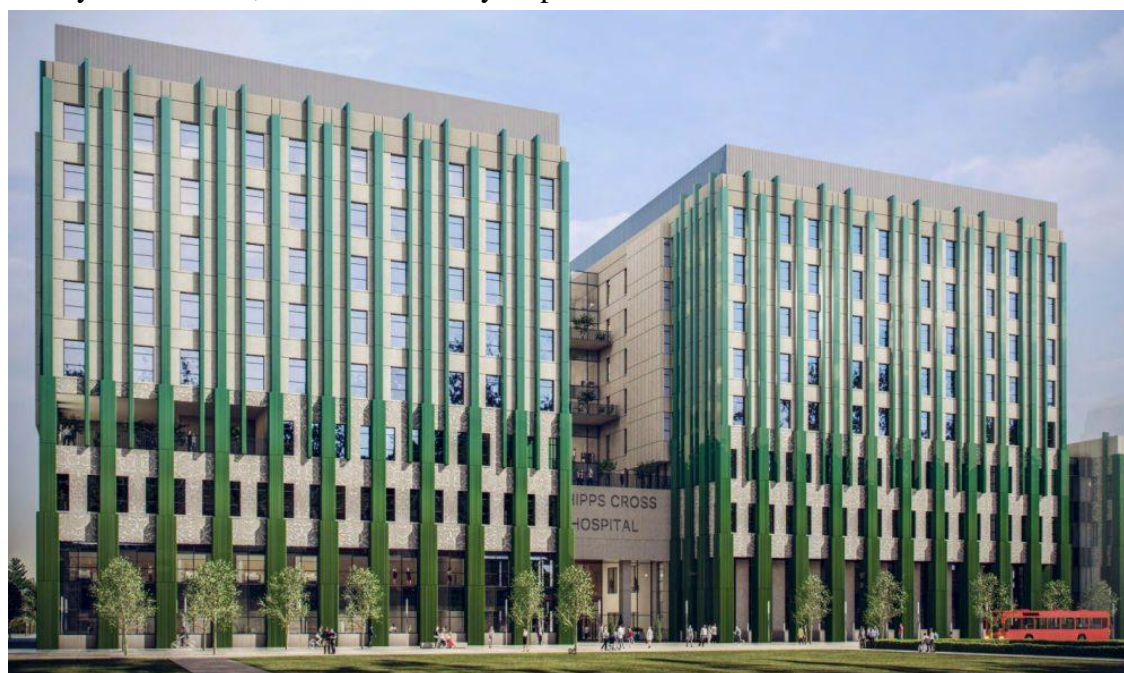


Walthamstow GP urges NHS to keep Whipps' end-of-life unit

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Current plans for the new hospital seemingly do not involve replacing the much-loved Margaret Centre

by Josh Mellor, Local Democracy Reporter



An impression of the new Whipps Cross Hospital (credit: Barts Health)

A Walthamstow GP has urged local NHS bosses not to close an “invaluable” end-of-life unit when Whipps Cross Hospital is rebuilt.

Currently, Whipps’ specialist palliative care unit The Margaret Centre is the only service of its kind available to local residents.

But [outline plans](#) for new hospital [contain no replacement for the centre](#) and the local NHS claims it has no money to move it somewhere else in the community.

Instead, the North East London NHS (NHS NEL) plans to introduce a “hybrid” model of end-of-life care – supporting dying people at home, in the community or on “designated” beds in other wards of the hospital.

Last week (17th January), Walthamstow GP Dr Kayode Oremakinde told a meeting of councillors that he was “quite surprised” when he heard about the plans, as the NHS NEL had not consulted local doctors.

He told the Whipps Cross joint health overview and scrutiny committee: “The centre provides an invaluable resource for the community, particularly for dying patients. It also provides respite care.

“For doctors like myself it’s such a wonderful place to go and to share grief. Yes, some people want to die at home and that’s their choice but there are some that need this centre.

“Please, please, please, let’s discuss it openly, [the proposals] should be coming to the local GP forum and I have not seen them.”

Public speaker Gail Penfold said the “many benefits” of the centre would outweigh any costs, claiming the public would gladly fundraise for it.

She added: “The fact is that we’re all going to die – dying in dignity in a pleasant, non-clinical environment is what we deserve.”

In the new model, the local NHS hopes to provide a simplified “single point of access” for end-of-life care, available 24 hours a day.

The hybrid model would include “designated” beds on acute wards in the new hospital, a “palliative care advisory team” supporting generalist staff, specialist beds in a nursing home and investment in existing hospices.

According to draft plans, the hybrid model would also provide “a choice of location” for dying and ensure that those who do not need to be in hospital are “receiving the right care in the best supportive environment”.

This would include a “hospice at home” model, which is already available to some Redbridge residents.

The North East London NHS also argues that staffing a small, specialist team in a new community end-of-life unit like the Margaret Centre would be “more expensive than other options”.

However, the team’s proposals note that funding and finding specialist staff for the hybrid model would be “challenging”.

The team leading the “improvement” to end-of-life services at Whipps Cross, led by NHS NEL’s director of transition for Siobhan Harper, believes that this option will “reduce the pressure on acute beds” and support all levels of need.

Responding to concerns that a decision has already been made, Harper insisted that closing the centre is not a “fait accompli” and that her team is still “learning and listening”.

She later added: “There is no agenda here around the Margaret Centre, we’re trying to do what’s right for the population.”

However, Harper did not explain why local GPs have not yet been consulted on the proposed changes. In the first stage of public engagement on end-of-life care, carried out last summer, Harper’s team hired “independent experts” to interview 19 people either living with life-limiting conditions or affected by them.

Her team also met with seven “community stakeholder groups” such as funeral directors, charities supporting people with lifelong conditions and “action groups”.

Committee deputy chair Beverley Brewer said future rounds of consultation should be “meaningful” so the community gets what it “wants and needs”. She added: “NHS managers are here to serve and deliver what their communities want. “I want to be clear that people are going to be empowered to make informed decisions as part of these consultations.”

Although the 11-bed Margaret Centre provides seven-day nursing support, it does not have other hospice services such as a seven-day doctor, 24-hour specialist care, a day hospice or a social worker. Hospices currently available to East Londoners are:

St. Joseph's in Hackney, Saint Francis in Havering and Richard House Children's Hospice in Beckton.

NHS NEL's director of unplanned care Kelvin Hankins told the committee that patients in the last six months of their life currently cost the Whipps Cross £8.9million per year in emergency hospital attendances and admissions.

Hankins added: "What we also know is that we're expecting to see growth in population and growth in percentage of people dying in acute care.

"If we make no changes, we expect to see a 13 percent growth."