

How we could do bone and joint surgery on adults



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In this Easy Read document, hard words are in **bold**. We explain what these words mean in the sentence after we have used them.



Some words are blue and underlined.

These are links that will go to another website which has more information.

Introduction



This is information from the NHS in North West London.



It is a plan for how we could do **planned bone and joint surgery** in the future.



Planned bone and joint surgery is things like hip and knee replacements that have been planned in advance of going to hospital.



4 NHS trusts in North West London have worked together to make this plan.



This information explains what the plan is and how it will work.

What we want to do



We want to have one special centre for bone and joint surgery for everyone in north west London.



The special centre will be at Central Middlesex Hospital.



It would be separate from emergency services.



This will mean that:

People will get their surgery quicker.



 Surgery will be more likely to happen when it is supposed to.



This will also mean that:

Everyone will get the best care.



 The teams of staff will be very good at their jobs.



 The centre can work in a faster way so more people can have surgery at a lower cost to the NHS.



 People will have a better experience in the centre and will recover better.



We will also then have more space in other hospitals to do other surgery.

Why we want to do this



There are 5 main reasons why we want to make this change.



1. We need to lower the time that people wait for care



COVID-19 meant people are waiting longer for bone and joint surgery.



More people are waiting for over a year for surgery than before COVID-19.



2. We need all our care to be very good all of the time



The hospitals in North West London give good care already.



But we can make it better and make sure every person gets very good care.



3. We need to make sure we listen to patients about what they need



Most patients think the care we give is good and our staff are helpful.



Patients get annoyed when they have to wait for a long time for their surgery.



Patients want to have more say over the care they get.



Patients want us to be clear and give everyone the same level of care.



4. We need to help people to have better health no matter what their background is



Making bone and joint surgery better would help older people from poorer backgrounds.



This is because they are more likely to have problems that need bone and joint surgery, like **arthritis** and back pain.

Arthritis is when someone has pain in their joints.



5. We need to be ready for the future



If we do not do anything, there will be lots more people waiting for bone and joint surgery by 2030.

Why we think Central Middlesex Hospital is the best place to have the centre



We looked at all of our hospitals to see which was the best choice.



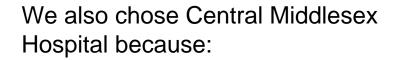
We chose to have the bone and joint surgery centre at Central Middlesex Hospital because:



 It has very good, modern buildings with space for the 41 beds we need.



 None of the other services at the hospital would have to move as there is plenty of space there.





 It is in the middle of north west London so everyone can get there in a short time.

How would services change?



Most bone and joint surgery would happen at the new centre at Central Middlesex Hospital.



If patients have no other health problems then they would go there for the surgery.



The care that patients get before and after their surgery would stay where it is now.



Their local hospital would look after all their appointments and other care.



All hospitals in north west London share a computer system that will help to keep track of everything.

The good parts and challenges of the plan



There are some good parts and some challenges of this plan.

Challenges are problems that some people could face, that we need to try and sort out.



This plan is good because:

 It will help us to give very good care to everyone.



 It will mean that we work in a more organised and quicker way.



 Patients will get their surgery faster and will get more support before and after the surgery.



This plan is good because staff will be able to get better skills and learn more about their job.



There are some challenges too:

 Some patients would have to travel further for their surgery.



 Some visitors would have to travel further to see their loved ones.



 Some staff would have to work in a different hospital or might need to work in more than one hospital.



 People with additional needs - like a learning disability or dementia would find it confusing to go to a hospital they did not know.

What do you think?



We want to know what you think of our plans.



We want to know what you think about the challenges of this plan and how we could solve them.



You can find out more by following this link to our website:

www.nwl-acute-providercollaborative.nhs.uk/keyprojects/elective-orthopaedic-centre



You can come to one of our meetings in person or online to find our more and tell us what you think.



Follow this link to find out when they are:

www.nwl-acute-provider-collaborative.nhs.uk/events

Ways to tell us what you think:



 Fill in our survey online by following this link:

www.nwl-acute-providercollaborative.nhs.uk/keyprojects/elective-orthopaedic-centreconsultation-survey



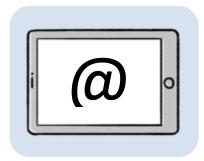
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