

Dr Jackie Applebee
Chair of Tower Hamlets BMA Division
60 Brookesley Street
London
E3 4QJ

By email to:
jackie.turner@jackieapp.demon.co.uk

17 February 2014

Dear Dr Applebee

Thank you for your letter of 15 January 2014, regarding the proposed consolidation of specialist services for five cancer pathways in north and east London and west Essex. I understand some of your members have raised concerns about the future of the major trauma centre at The Royal London Hospital, staffing and travel for patients within the Barts Health area.

The development of the proposals, as outlined in the case for change document Improving specialist cancer and cardiovascular services in north and east London and west Essex, are at an early stage and further work with clinicians and the public will inform the development of a business case.

The proposals, if approved, aim to replicate the success of major trauma centres and stroke units by ensuring the small number of cancer and cardiovascular patients who require specialised treatment receive world-class care.

The importance of The Royal London as a major trauma centre and ensuring it continues to provide high-quality acute care is recognised by all who are working on these proposals. Work is already underway to ensure any potential impacts of these proposals on other parts of the health service are fully considered and mitigated. This work will continue as the business case is developed and as part of planning for implementation.

We are committed to involving clinicians and the public in changes to health service. The initial engagement period was widely publicised with letters issued to over 540 stakeholders accompanied by a copy of the case for change and a link to information about relevant engagement events on NHS England's website. Tower Hamlets Clinical Commissioning Group (CCG) advertised the engagement to members and the public via its GP bulletin and website, and the proposals were discussed at the CCG's Governing Body meeting in public on 5 November 2013. Five staff events were held during the 38-day period with over 90 clinicians and staff attending the event at Barts Health. In addition, advertisements were

placed in 14 papers across the area and UCLPartners tweeted details of the events to 700 plus followers each time any new information was added to their website, as well as the day before and the day of the event. NHS provider trusts were encouraged to publicise the dates on their websites and via other means such as Twitter.

Overall engagement showed broad clinical and public support for the proposals and the need to improve outcomes across the area.

As commissioners, we share the aims of clinicians and other health partners of tackling the health challenges present in the unique population of east London. These proposals have potential to help improve the survival and outcomes of cancer and heart disease patients, which accounts for two-thirds of premature deaths in London. The programme is also undertaking an equalities impact assessment, which will be included as part of the business case.

As previously mentioned, work is continuing with GP partners and clinicians to understand their opinions. On 16 December 2013 Barts Health, supported by commissioners, held a meeting with clinicians who had raised some questions about the proposals. The purpose of the meeting was to get their input into a workshop to identify and explore the issues surrounding the impact of the proposed cancer changes on major trauma and acute services at the Royal London Hospital. This all-day workshop, held on 16 January 2014, involved 45 participants and was facilitated by Barts Health Medical Director, Steve Ryan, and National Clinical Director for Trauma, Chris Moran.

I understand that this proved very useful in providing an opportunity to discuss how the major trauma centre can continue its lifesaving work without compromise. Mitigation measures, to be achieved through collaborative work across organisations and sites were also discussed. The notes from this meeting are now being drawn up and I understand that a copy of these will be sent to Tower Hamlets BMA Division for your information. I also understand that additional meetings are currently being arranged to ensure all stakeholders have the chance to talk through the issues with commissioners.

We recognise there is still further work to do and believe that communication and collaboration across providers will strengthen joint working and training opportunities. Major trauma centres and stroke units already collaborate between departments and providers and we believe similar joint working arrangements with the proposed specialist cancer centres could enhance this system. We will continue to work with clinicians at Barts Health as the proposals are developed and in any planning for implementation.

If the proposals are approved we would also be establishing provider and commissioner assurance and oversight before implementation to ensure the integrity of the trauma service at The Royal London is maintained.

With regards to the points raised around travel for patients living in the Barts Health area, this is one of the areas in which work is ongoing to assess the current quality and provision of hospital travel arrangements and appropriate mitigation measures. Another key area which will be examined as part of the planning for implementation is that of safe and efficient transfer of patient records and data between hospitals and liaison with primary care.

The vision for cancer and cardiovascular care in north and east London and west Essex is to create an integrated system of care. As an essential part of this system Barts Health would remain a leading cancer care provider, particularly for colorectal, breast, uro-oncology and haemato-oncology.

I want to reassure you that these proposals are for specialist services for five types of cancer and specialist cardiovascular services only. The majority of care would continue to be provided locally and any other service changes would be subject to separate and appropriate engagement.

I trust this letter is helpful.

Yours sincerely

A handwritten signature in black ink, appearing to read 'D Nicholson', with a long horizontal flourish extending to the right.

Sir David Nicholson
Chief Executive