Breast Screening Improvements

Joint Health Overview and Scrutiny Committee
July 22nd 2014
The Vision

To create a Breast Services Centre of Excellence at King George Hospital and relocate services from the old Victoria Hospital
What We Are Asking of The JHOSC

To agree with our view, and that of the local commissioners, that a formal public consultation is not necessary
Reasons for Change

Complete the centralisation of Services
- Surgery already centralised but symptomatic and asymptomatic breast services split across two sites

Improve the environment to match clinical service
- Victoria Hospital is an old building with worsening facilities; any work to improve will create disruption to services

Improve the support facilities
- The new site provides better parking and greater access

Support financial stabilisation
- Eliminate the risk of increased rental costs
The Victoria Hospital

A building in need of modernisation

Services sited on several floors
Engaging People With Our Vision

Quality Assurance Group
- Representatives from Public Health England and NHS England
- Pleased with our designs and helped improve

Breast Service Patient Representatives
- Shared plans and had good feedback
- No concerns over closing service at The Victoria Hospital (beyond those of nostalgia)
- Will be involved in the decoration of the new unit
- Trust committed to providing space for their support group meetings
The layout of the new service

Provides all elements of the service on one level

Design of layout offers better privacy for patients
Additional information

- Only 6% of total patients undergoing an initial screen will be displaced; many of these patients come from the Brentwood area and therefore their journey is likely to be shortened (attending the Harold Wood Polyclinic, less than 4 miles from Victoria Hospital)
- Symptomatic and asymptomatic patients account for around a third of patients seen each year
- Currently, around half of these patients already go to King George Hospital (less than 4 miles from Victoria Hospital)
- New unit offer will offer diagnostic and treatment
- One Stop Shop through to completion of treatment for all women
Our Conclusions

- The proposal improves the service both in terms of facilities and accessibility
- The level of engagement we are undertaking and plan to complete post approval is sufficient enough to ensure we design and deliver the best possible service
- We believe the level of engagement we have with professional and users satisfies section 242 of National Health Service Act 2006 (amended 2007) which places a duty on Trusts to engage users and/or their representatives are involved
- We believe a formal public consultation will only serve to delay the improvement to services
What happens next?

September 2014
- Outline Business Case to BHRUT Board
- Submit to the TDA for final approval

October 2014
- Extension of Public and Patient engagement work

December 2014
- Commence construction to May 2015

July 2015
- New Unit fully operational

Note: All dates are provisional with an assumption that a formal public consultation is not required