

MOUNT VERNON CANCER CENTRE REVIEW

Report of the Head of Communications and Engagement NHS England & Improvement (East of England)

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1. Purpose of report

1.1 The report is to brief the Hertfordshire Health Scrutiny Committee on the purpose and process being taken to review the services provided at the Mount Vernon Cancer Centre.

2. Summary

2.1 The Mount Vernon Cancer Centre is run by East & North Hertfordshire NHS Trust (ENHT) and delivered from a site in north Middlesex managed by the Hillingdon Hospitals NHS Foundation Trust. It is a standalone cancer centre and primarily serves a population of over 2 million people in Hertfordshire, south Bedfordshire, North West London and Berkshire.

3. Recommendations

3.1 The Committee is asked to note the report.

3.2 The Committee to identify any future engagement it requires.

4. Background

4.1 60% of the Mount Vernon patients come from Hertfordshire and Bedfordshire, 30% from north London, and 5% from Berkshire and Buckinghamshire. Specifically for Hertfordshire, 16.75% of Mount Vernon patients are referred by ENHT and 22.27% from West Herts NHS Trust (WHHT).

4.2 The patient pathways involve 16 other hospitals and arrangements with six other NHS trusts. There is an extremely small number of patients who use the service from other parts of the country.

4.3 The Centre provides outpatient chemotherapy, nuclear medicine, brachytherapy and haematology as well as radiotherapy for these populations. There are also inpatient wards with 22 beds in total.

4.4 The Mount Vernon Review

- 4.5 NHS commissioners, hospital trusts and the Cancer Alliances in the East of England and North London are working together, with the support of Healthwatch in Hertfordshire and Hillingdon, to review the services at Mount Vernon Cancer Centre to look at how to best meet the needs of local people, and develop options that will build on the services, research and patient experience that the Centre already delivers.
- 4.6 Some of the buildings are not in a good state of repair and a number of concerns have been raised in relation to the long-term clinical sustainability of the Cancer Centre.
- 4.7 Clinical staff have put things in place to ensure that treatment is high quality and that patients are safe. The patient survey feedback shows that most patients are happy with the services they receive. However, the doctors, nurses and managers all agree that a more permanent solution urgently needs to be found to ensure the sustainability of the services in the long term.
- 4.8 As well as ageing buildings, there are limited support facilities on site. For example, there are no high dependency or intensive care beds so patients who become very poorly are sent in an emergency ambulance to Watford General Hospital.
- 4.9 This limited support at the site creates challenges for the current patient pathway. Due to this many patients receive treatment at a number of different places. As cancer treatment becomes more advanced and as demand for cancer treatment grows, this is becoming an increasing issue for patients at Mount Vernon.
- 4.10 A Programme Board was formed in May 2019 to oversee the first phase of the review – the development of options. This phase will be completed this summer with the shortlisted options being developed in more detail in the autumn prior to further patient and public engagement, or formal consultation if required, towards the end of 2019/20.

4.12 Developing the Options

- 4.12 To develop the options, the review has heard from clinical staff at Mount Vernon and from other hospitals that participate in the patient pathways. Patient and public events are being arranged and a patient survey is being commissioned to hear from patients.
- 4.13 The first stage of the review includes a detailed examination of specific services, such as radiotherapy, and a look at existing patient feedback to see what patients think is good and what does not work so well.
- 4.14 To provide an independent external view a Clinical Advisory Group made up of expert clinicians from specialised cancer centres in other regions, and

supported by members of local Healthwatch organisations, has interviewed clinicians and visited the site. It is due to feed back its findings in July.

- 4.15 Patient workshops and focus groups, and visits to patient support groups and relevant community groups will help shape the shortlist of options and the scoring criteria that will be used to identify the shortlist.