

Mount Vernon Cancer Centre Strategic Review

Stakeholder Update – October 2020

This stakeholder update follows the October meeting of the Mount Vernon Cancer Centre Strategic Review Programme Board and provides information on the latest developments in some of the key areas of work being undertaken to support the review.

For the background to the review and why changes at Mount Vernon are necessary, please visit our review website: <u>https://mvccreview.nhs.uk/</u>

Engagement Workstream

We have begun a programme of virtual events for patient, public and staff to help design future Mount Vernon Cancer Services. Details of upcoming events can be found on the 'Engagement Events' section of the review website.

The website is being redesigned next month and will have additional interactive features to enable us to hear more thoughts, questions and ideas.

Further development is also under way to create more opportunities for patient, staff and public engagement, with a focus on the involvement of those who find it difficult to engage online.

Clinical Workstream

The clinical team have looked at all of the cancer pathways at Mount Vernon to see how these could be improved in future, and patients, carers and their families are being invited to share their views at a series of pathway focus groups in the first half of November. Details of these can be found on the website <u>here</u>.

Clinicians are also continuing to evaluate the advantages and disadvantages of the two clinical models put forward by the independent review team, considering patient feedback and learning from other cancer centres to help identify which may be the best model to adopt for Mount Vernon services.

This work will continue until December when they will make a recommendation to the programme board. They will not be commenting on the location of those services, simply the optimal service model to deliver the best outcomes for the large population using the cancer centre.

Details of the models under consideration can be read in the <u>Clinical Advisory Panel</u> <u>Report</u>.

NHS England and NHS Improvement

Email: <u>england.eoesct-projects@nhs.net</u> or write to: MVCC Review, Direct Commissioning, NHS England, Charter House, Parkway, Welwyn Garden City, AL8 6JL Briefing by: Jessamy Kinghorn, Head of Partnerships and Engagement, NHS England and NHS Improvement, issued 26/10/2020

Future Estates Planning

The independent clinical review concluded that many, if not all, of the services need to be on a main hospital site that has intensive care and other facilities.

In December the programme board will agree which hospitals within the existing area that Mount Vernon patients come from will be considered. To be considered, hospitals will need to have the right clinical facilities, and good access for patients, particularly avoiding an increase in travel times.

As part of this, we are undertaking an extensive piece of work to understand travel times for patients attending Mount Vernon, and what any change to services might do to those journeys.

From January, the clinical and estates work will come together, and more extensive work will be undertaken to develop detailed proposals for any hospital sites that have met the shortlisting criteria. There is still a long process to go through and we expect we will run a public consultation on the final proposals in June next year.

Patients, carers, staff and members of the public will have opportunities to contribute to those final proposals which will be selected on the basis of criteria that patients and carers helped us develop last year.

You can view these criteria in the Stage One Engagement Report 2019

Working in partnership

We are working with all six of the healthcare systems in the area that Mount Vernon delivers cancer care to – Herts and West Essex, North West London, Bedford, Luton and Milton Keynes, North Central London, Buckinghamshire, Oxford and Berkshire West, and Frimley Health.

We are making sure we understand their population needs and challenges with regard to cancer care, future population growth and expected cancer rates, and their cancer strategies. This will help us ensure that any decisions about the future service provision of Mount Vernon Cancer Centre are joined up with local healthcare plans and firmly based in the health needs of the population it serves.

Local Cancer Alliances, clinical networks and Healthwatch organisations are also involved in helping develop our plans, and their contributions will be reviewed alongside those of patients and staff.

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Transfer of Management

Work on the transfer of the management of services to a tertiary provider is well underway. By April 2021, we anticipate that UCLH's Trust Board will be in a position to make a fully informed decision about taking on the management of the services from the following year.

In the meantime, UCLH staff are continuing to provide day-to-day support to their Mount Vernon colleagues, and are working with the team on all aspects of the review. This includes starting to explore the possibility that some patients currently being treated in central London who are from parts of North London, Hertfordshire or beyond, could in future be treated by Mount Vernon Cancer services, if the right clinical facilities were available.

Challenges

All of the options proposed for the future of Mount Vernon will require a substantial capital investment. Whilst Mount Vernon Cancer Centre is not currently on the list of hospitals receiving rebuilding funds, we know the case for Mount Vernon is very strong and we are exploring all options for accessing capital funds. We will not take proposals out to public consultation until we know we have resolved this issue.

Another challenge is ensuring we understand the future cancer needs of all the areas the cancer centre covers in order to develop the best plan for patients. It is a large catchment, extending into three of the seven NHS England regions, with the associated variations in population health and needs. We have a commitment from all our health systems to work together to arrive at the best solutions and are making good progress.

A third challenge for this programme of work is making sure we hear from a wide range of patients and carers with different experiences of Mount Vernon Cancer Centre and from different areas, especially as we cannot meet face-to-face due to Covid-19 restrictions. Patients and members of the public have taken part in online sessions this month, some of them using Zoom or Teams for the first time.

Finding the right platforms to give everyone the opportunity to make their voice heard is challenging with patient and community groups not meeting due to current restrictions, and the project team unable to talk to people in outpatients or hold face to face workshops for the same reason.

We are grateful for the support of our stakeholders in helping to ensure we hear the full range of opinions as part of this review.

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