

## **Appendix A- Summary of discussion at SEL JHOSC – Informal Meeting – 21<sup>st</sup> November 2023**

### **Reconfiguration of Children's Cancer Treatment Services**

#### **1. INTRODUCTION**

Members of the South East London Joint Health Overview and Scrutiny Committee joined a Ms Teams Call with colleagues from NHS England who are currently delivering a public consultation concerning the reconfiguration of Childrens Cancer Treatment Services. The Committee had met formally in July 2023 to be informed about and to discuss the proposal prior to the commencement of public consultation. The informal meeting held on 21<sup>st</sup> November was an opportunity to brief Members of the JHOSC about progress and feedback from the public consultation to date at the mid-point of the consultation and to seek feedback from JHOSC Members as to how NHS England could best target the remainder of their consultation and ensure they reach as many people as possible.

The meeting was attended by Members from Bexley, Lambeth, Lewisham and Southwark.

NHS England had commissioned an independent report into the consultation at its mid-point (The Consultation commenced on 26<sup>th</sup> September and will close at midnight on 18<sup>th</sup> December). The purpose of this report was to: document the consultation and communication activities that have happened to date; to review the overview response rate to the consultation and the response rate from specific stakeholder groups and geographical areas; identify gaps in representation; consider the appropriateness of planned activity to address identified gaps; provide an overview of key findings emerging from the consultation feedback; and suggest next steps to address any gaps or other issues identified.

#### **2. BACKGROUND AND CONTEXT:**

As explained at the JHOSC's previous meeting in July, the Principal Treatment Centre (PTC) for children living in Brighton and Hove, East Sussex, Kent, Medway, South London and most of Surrey is provided in partnership between the Royal Marsden NHS Foundation Trust and its site in Sutton, and St George's Hospital in Tooting. It was noted that while the service they provide is safe and of high quality, the very specialist treatment services at the Royal Marsden are not on the same site as the Children's intensive care unit at St George's Hospital. National clinical requirements for PTCs are set by NHS England and they mandate that these services must be on the same site, which is non-negotiable. The current PTC therefore does not comply and cannot comply in future and therefore the specialist cancer services provided by the Royal Marsden site need to move.

It was reiterated to Members that purpose of the consultation is to understand the impact of implementing either option for the future location of the PTC; tot test and update NHS England's plans to mitigate impacts and to understand the impact of moving conventional radiotherapy from the Royal Marsden to University College Hospital.

It was noted that there are five main reasons why the services at The Royal Marsden need to move:

- Hospital transfers of very sick children for intensive care add risks and stress
- The intensive care team is not currently able to provide face to face advice on the care of children on the cancer ward

- There is a need to improve children and families' experience when patients require intensive care and other specialist children's services
- The Principal Treatment Centres does not and cannot meet national requirements. (The current specification was approved by NHS England in 2021)
- The current PTC is excluded from giving a specific type of new treatment, (due to lack of ICU on site) and others are expected in the future.

In terms of who the changes would affect, Members were reminded that around 1400 children (aged one to 15) are under the care of the PTC. It was explained that in 2019/20, 536 children had inpatient care (and were admitted to the Royal Marsden or St George's for day care or a stay of at least one night); 1367 children had outpatient care (they came to The Royal Marsden or St George's for an appointment); 84 had intensive care (15 of whom came from The Royal Marsden) and 41 children had conventional radiotherapy at The Royal Marsden.

In terms of geography, and the number of children attending for outpatient care it was noted that in 2019/20, there were 94 children from South East London, 113 from South West London; 108 from Kent Medway; 98 children from Surrey; 46 from Brighton and Hove; and 83 from other areas.

Members were reminded of the two shortlisted options which are to relocate the PTC to either (both of which will have conventional radiotherapy services at University College Hospital:

- Evelina London Children's Hospital in Lambeth (Run by Guy's and St Thomas' NHS Foundation Trust)
- St George's Hospital in Tooting (Run by St George's University Hospitals NHS Foundation Trust)

### **3. SUPPORT WITH TRAVEL AND ACCESS**

Members of the JHOSC had previously raised queries and concern with relation to support for travel and access including car parking facilities and arrangements; Members were informed that this was also emerging as a key theme through the public consultation.

NHS England provided a further update on this; they advised that an independent travel analysis looked at journey times and found that:

- For the vast majority of people in South East London, both Evelina children's hospital and St George's hospital were very similar or faster to get to by public transport compared to the Royal Marsden's Sutton site.
- In terms of road transport, that for residents in most boroughs within South East London, a decrease in travel time would be seen for both St George's Hospital and the Evelina Children's Hospital compared to The Royal Marsden. However, residents of Bromley and Bexley would see an increase in travel time for driving on average for both potential future sites. (For University College Hospital it is a similar picture)

It was reported that there would be a range of measures to support people with increased travel including:

- Help to plan journeys to hospital

- Financial support to help with travel costs (such as the ability to reclaim ULEZ charges and congestion charges (if applicable))
- Non-emergency transport services
- Space for families to stay
- Easy arrangements at the site including dedicated parking and drop-off
- Convenient appointment times
- More care closer to homes.

It was noted that both potential providers of the future PTC have committed to developing action plans to ensure effective delivery of these measures.

#### **4. PRE-CONSULTATION ENGAGEMENT**

A summary of pre consultation engagement that was carried out between April and August 2023 was provided and it was noted that this period helped NHS England to refine and update their consultation materials, inform their consultation plan and help build their understanding of the key issues. In terms of the feedback from the SLE JHOSC at its meeting in July 2023, it was noted that Members had said they:

- Wanted to know more about parking spaces at Evelina Children's Hospital
- Wanted assurance on arrangements for supporting staff from the current service to transfer, including plans for retention, and where needed, recruitment.
- Wanted assurance as to whether both potential providers were adequately prepared to meet the 2.5 year implementation timeline of the service change.

NHSE outlined to Members how they had responded to that. In particular it was noted that:

- The interim Equality and Health Inequality Impact Assessment (EHIA) included a range of recommendations to support access to the future PTC; Evelina and St George's have both set out their commitment to the development of detailed plans to implement those recommendations. Both would like to provide dedicated parking for patients of the centre.
- Through their pre-consultation engagement and the ongoing consultation, NHSE have continued to hear from staff about the things that are important to them and are working with Trusts to encourage this. Throughout the implementation phase it was noted there will be a dedicated focus on workforce.
- Both potential providers have shared their plans for transitioning the PTC over the 2.5 year period. Once a decision is made, the implementation phase will involve work by a number of stakeholders to do detailed implementation planning for the service change.

#### **5. MID-POINT REVIEW OF CONSULTATION:**

As noted in the introduction to this note, an independent report had been commissioned by NHSE into the consultation to date at its mid-way point. The independent mid-point report had been reviewed by programme team and communication and engagement leads and has been shared with the Programme Stakeholder Group; Program Board (Including Trust, Integrated Care Board and Patient Representatives); and Overview and Scrutiny Committees. NHSE reported that following discussions with those stakeholders, they will be updating and finalising their action plan, that had been drafted in response to the mid-point review document.

Communications and Engagement activity to date:

Members were informed that communication activities to date have included:

- Letters directly to patients
- Sharing information and toolkits with partners to cascade through their networks
- Media release and media interviews
- Sharing content on social media
- Meetings to brief stakeholders about the consultation
- Proactive phone calls to organisations
- Hard copy documents in hospital departments
- Staff handing out periodically information to families, currently using the service

While in terms of engagement activities there have been:

- Community focus groups
- Play specialist sessions on wards
- Public listening events
- Community events with people representing equalities groups
- Meetings with wider clinical colleagues, MPs and OSC leads

In terms of South East London activity it was noted that NHSE have reached out to:

- Local Healthwatch organisation
- MPs
- Children and Young People Forums
- Equalities Groups

#### Uptake of Consultation to date:

In terms of all those who have responded to the consultation so far it was reported that there have been over 850 responses (survey, and face to face)

In terms of South East London, it was reported that 13% of all survey responses were from those who live or work in South East London and a further 13% of those responses are from parents and children who have direct experience of using the current service.

It was noted that NHSE were hearing most from those in South West London overall as well as those families who have no direct experience of cancer services.

In terms of those, who NHSE were hearing least from:

- Children, young people, and families currently experiencing the service.
- Staff working in the current service.
- People from ethnic minority groups; people experiencing financial difficulties/live in deprived areas; asylum seekers or those experiencing homelessness; families with poor literacy or language barriers.
- People outside London (Kent & Medway and Sussex specifically)

Members were informed that NHSE have an detailed action plan that outlines planned activities to reach the groups identified, which can be shared with JHOSC Members when ready.

#### Key themes from consultation to date:

- There have been objections to the case for change
- The challenges of traveling into central London (should the PTC relocate to Evelina)

- The challenges of travelling to the hospital (should the PTC relocate to St Georges Hospital)
- Perception that Specialist Service are lacking (Evelina)
- Evelina already has the advantage of being a specialist children's hospital
- Feedback about the quality of the existing estate (St George's hospital)
- St George's is already an established provider of very specialist children's cancer services

Recommendations from Independent mid-point review report:

NHSE should:

- Address gaps in representation from specific target groups
- Maximise reach from communications activity
- Ensure that the scope of the consultation is clearer given the objections raised with regards to the case for change.
- Help ensure comprehension of the proposals- NHSE have advised they have produced audio versions of the proposals to support accessibility, for example.
- Support people to complete the survey, particularly for specific target groups. (NHSE have spoken to learning disability organisations for example)
- Ensure focus on children and young people play specialist sessions

**6. NEXT STEPS:**

Members were reminded that the public consultation is planned to close at midnight on the 18th of December and that the consultation responses will be analysed by an external organisation and written up in a report which will be made publicly available. This will be shared with the JHOSC also.

No decision will be made until the public consultation has concluded, the feedback analysed, and all relevant data, evidence and other factors, including the consultation responses, have been carefully considered. Indicatively, NHS England are planning to take the decision on the future location of the principle treatment centre in early 2024 ( around mid March).

**7. RAISING AWARENESS OF THE CONSULTATION AND MEMBER FEEDBACK**

Members discussed and sought clarity on how they could further spread awareness of the consultation in South East London and within their respective boroughs and the following points and actions arose:

- NHS England to share with the JHOSC- a detailed breakdown by borough of respondents to consultation, and which groups have been approached by borough, to help identify gaps.
- Members to follow up with their respective Healthwatch at each Local Authority to ensure each HealthWatch is flagging the consultation on their website and through their channels. The offer to attend site visits at the hospitals in questions is also on offer to Healthwatch and the public generally.
- It was commented that each Local Authority is likely to have a cancer champion; NHS England to contact LA's about those as a possible avenue to promote the consultation. (Cllr Best is the cancer champion at Lewisham)
- NHSE to contact Lambeth about possible use of their Wellbeing Bus (which travels to different projects around the borough) to promote the consultation.

