



Imperial College Healthcare

NHS Trust

Chief executive officer: Professor Tim Orchard

The office of the chief executive
Imperial College Healthcare NHS Trust
The Bays, South Wharf Road
London W2 1NY

020 3312 5897

tim.orchard@nhs.net

Councillor Jonathan Glanz
Chair, Family and People Services Policy and Scrutiny Committee
Westminster City Council
5 Strand
London
WC2N 5HR

23 January 2019

Dear Cllr Glanz

Re: Proposal for oesophago-gastric (OG) cancer surgery

Thank you for our meeting on 8 January 2019 together with Professor Katie Urch our Trust's divisional director for surgery, cardiovascular and cancer. We agreed that I would write to you outlining the service change proposal we discussed relating to specialist oesophago-gastric (OG) cancer surgery.

Introduction

Our OG cancer service treats patients with cancers of the oesophagus and stomach. Diagnosed OG cancer patients are usually treated with surgery (with either a gastrectomy or oesophagectomy), chemotherapy or radiotherapy or sometimes a combination of all three.

The renowned OG cancer surgery service is well established with nationally outstanding outcomes and an award-winning multi-professional perioperative (the period from the day before to the first few days after surgery) programme of support and optimisation - 'PREPARE for Surgery Programme' - which has delivered a 50 per cent reduction in hospital length of stay for patients as well as improving postoperative pneumonia rates and patients' long and short-term quality of life.

OG cancer is relatively uncommon, with less than 4 per cent of all national cancer diagnoses each year. The highly specialised service at Imperial College Healthcare offers complex OG cancer surgery to an annual average total of around 50 patients (plus another 10 patients referred from across the country who have complex procedures for benign OG conditions).

There has been a national NHS England review leading to a published expert consensus statement and NHS commissioning guidelines which state individual specialist surgeons should undertake a minimum of 15 to 20 resections (surgical removal of a portion of a part of the body) per year working within centres comprising 4-6 surgeons undertaking more than 60 resections total per year. We expect that for

our Trust this would mean achieving an annual average volume of around 100 patients per year undergoing OG cancer surgery.

Proposal

Building on our existing reputation for complex OG surgery and Hepatobiliary (relating to liver, pancreatic, biliary and gall bladder disorders) (HPB) surgery we propose moving our OG cancer surgery service from St Mary's Hospital to Hammersmith Hospital.

Co-locating OG and HPB surgery at Hammersmith Hospital would combine clinical and academic excellence to ensure we maintain our specialist OG cancer surgery and create one of the largest and best performing Upper Gastrointestinal (Upper GI) units in the country.

This move would also allow for future joint working with West Hertfordshire Hospitals NHS Trust (WHHT) and the Mount Vernon Cancer Network, subject to commissioner approval, enabling the centralisation of the most complex OG cancer surgery into one highly specialised centre with the annual volume of procedures required by NHS England.

The key benefits to be gained from this proposal are:

- Protecting our excellent cancer outcomes while reducing cancellations and avoiding cancer waiting times breaches
- Meeting the strategic imperative set by NHS England's national review, commissioning standards and published expert consensus, which requires expansion of the annual volume of procedures for complex OG cancer surgery
- Decompressing the St Mary's site to improve emergency pathway flows and deliver surgical capacity
- Leveraging existing excellence in translational research and surgical innovation to expand and develop our academic capacity.

Phase one of the proposal would co-locate OG cancer surgery and HPB surgery in a new specialist surgical unit at Hammersmith Hospital. This move would allow our Trust to protect and maintain the existing specialist clinical service, reduce cancellations, avoid waiting time breaches, and expand surgical capacity. It is proposed that this happens in early 2019.

Phase two involves working with wider partners including WHHT and Mount Vernon Cancer Network to deliver implementation of whole systems change and centralisation of the most complex OG cancer surgery, which should deliver benefits including improvements in patient outcomes and sustainability. It is proposed that this happens during spring 2019.

Westminster impact

While the OG cancer surgery service is currently located at St Mary's Hospital in the borough of Westminster, there were no Westminster patients who had OG cancer and required surgery at St Mary's during 2017-18. It is estimated that this proposed service move would affect on average no more than two patients resident in the borough of Westminster per year.

Under this proposal all existing diagnostic, radiotherapy and chemotherapy pathways would remain in place across our St Mary's, Charing Cross and Hammersmith hospitals in their current configuration. So future Westminster patients suspected of oesophageal or gastric cancers would still come to St Mary's for their diagnostic tests – following OG cancer being diagnosed their surgical procedure would be at Hammersmith - with chemotherapy or radiotherapy as required at Charing Cross - and their follow up outpatient appointments then being available locally at St Mary's.

This proposal would have no impact on emergency surgical services or other general surgery on the St Mary's Hospital site.

Summary

This proposal is necessary in order to maintain our renowned specialist OG cancer surgery service and would have a very low level of impact on the patient population of Westminster. We believe the co-location of OG cancer surgery and HPB surgery in a new specialist surgical unit at Hammersmith Hospital will protect our excellent cancer outcomes and improve the experience of our patients.

We appreciate your assistance and your offer to share the contents of this letter with fellow members of the Family and People Services Policy and Scrutiny Committee.

I look forward to hearing from you and in the meantime please let me know if you require any further information.

Yours sincerely,



Professor Tim Orchard
Chief executive officer

