Brighton & Hove City Council

Health Overview & Scrutiny Committee

Agenda Item 6

Subject: Children's Cancer Services: NHS England Change Plans

Date of meeting: 12 July 2023

Report of: Executive Director, Governance, People & Resources

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Ward(s) affected: All

For general release

1. Purpose of the report and policy context

- 1.1 NHS England (NHSE) are consulting with relevant Health & Overview Scrutiny Committees, or 'HOSCs', on plans to reconfigure specialist children's cancer services for South London and South East England.
- 1.2 At a special meeting in March 2023, Brighton & Hove HOSC agreed that it considered the plans to constitute a significant variation in service (a 'SViS'), and wished to be formally consulted on these plans.
- 1.3 This report formally presents NHSE's plans to improve specialist children's cancer services, and invites HOSC to scrutinize the proposals before considering the recommendations below.

2. Recommendations

- 2.1 That Committee reviews the plans described here to reconfigure specialist children's cancer services and determines that it does not wish to make specific comments or require additional responses, as it considers that on balance the changes mooted will not be detrimental to the health of city residents; and
- 2.2 That Committee formally agrees that it does not wish to undertake further formal scrutiny of these plans, but asks officers to indicate to NHSE its desire to be kept informed of their progress.

3. Context and background information

- 3.1 NHS England (NHSE) commissions specialist health services e.g. services for relatively rare conditions that need to be delivered on a regional or a national footprint. This includes children's cancer services. All children and young people England who are diagnosed with cancer are treated in one of 13 Principal Treatment Centres (PTCs) which are responsible for coordinating and delivering care. For many city families, most cancer services will be delivered locally, at the Royal Alexandra Children's Hospital, Brighton, but the most specialist services are delivered at a PTC in London.
- 3.2 Currently in South West London, the Royal Marsden NHS Foundation Trust (RMH) and St George's University Hospitals NHS Foundation Trust (SGUH) provide a joint PTC over their two sites which covers the catchment area of Sussex, Kent & Medway, Surrey, South East London and South West London. Following the publication of a new national service specification for PTCs in November 2021, the RMH/SGUH service is not compliant with the requirement to provide a paediatric intensive care unit (PICU) on the same site as the PTC, and for joint site services this means a PICU on each site thus avoiding the need to transfer critically sick children. While the current specialist children's cancer service is high quality and safe, the Royal Marsden has confirmed that it would not be sustainable clinically or financially to provide a PICU on its Sutton site. The current service provider therefore does not meet this new requirement, and a compliant single site is needed for this service going forward.
- 3.3 NHSE has identified two potential providers for this single site PTC: either SGUH or Guy's & St Thomas' NHS Foundation Trust (at the Evelina Children's Hospital) (GSTH). NHSE will not make a final choice of provider until it has consulted with the public and stakeholders, including HOSCs, but its initial scoring identifies GSTH as the preferred option.
- 3.4 When planning to make substantial changes to services, NHS bodies are required to contact all affected HOSCs at an early stage in their planning. If HOSCs consider that the plans constitute a Substantial Variation in Services (SViS) then they have the option to be formally consulted. Where a change plan impacts multiple HOSC areas and two or more HOSCs agree that the plan is an SViS, then HOSCs are required to form a single Joint HOSC (JHOSC) for the purpose of scrutinising the change plan.
- 3.5 NHSE contacted the HOSC about its plans to reconfigure children's cancer services in 2022, and the HOSC held a special meeting in March 2023 to consider whether the plans constituted an SViS. The HOSC resolved that the plans were an SViS and the committee referred the matter to April 2023 full Council with a request that Council agree to establish a JHOSC with other interested local authorities. Council agreed this.
- 3.6 At the time of the March 2023 special HOSC meeting and of April 2023 Council, it was not clear which other local authorities in the region had determined that the NHSE plans were an SViS as not all had considered the issue. They now have, and formal scrutiny will be undertaken by Brighton & Hove City Council, by the Standing JHOSC for South East London and by the Standing JHOSC for South West London & Surrey. (Standing JHOSCs

are permanent JHOSCs established by local authorities within in a geographical footprint. They are typically instituted in places where NHS change plans regularly cross local authority boundaries, London being an obvious instance, and they enable a number of local authorities to come together quickly to scrutinise service change plans.)

- 3.7 In normal circumstances, BHCC and the standing South East London and South West London JHOSCs would have established a single JHOSC to scrutinise children's cancer plans. However, both of the standing JHOSCs have told NHSE that it would take them until at least autumn to establish a combined JHOSC, as they would need to have any decision ratified by the full Councils of their constituent local authorities. (The standing JHOSCs have no agreed process to combine to scrutinise plans that impact the entirety of South London, hence the need to refer back to their constituent members.) NHSE wants to progress its cancer plans this summer, so has agreed to consult separately with each of the standing JHOSCs and with BHCC. Although this was not what Brighton & Hove HOSC and Council initially agreed, being consulted separately has obvious advantages: e.g. the HOSC is able to consider NHSE's in terms of their impact on city residents rather than their impact on the entirety of the JHOSC area.
- 3.8 At its March 2023 special meeting, the HOSC heard from NHSE about the change plans. In general, members were assured that the changes would maintain or improve the current excellent clinical services on offer. Members were also assured that the bulk of local children's cancer treatment would continue to be provided at the Royal Alexandra Children's Hospital, Brighton (a tier of services which is <u>not</u> included in the change process, which focuses only on the most specialist services which are required to be provided at a regional tertiary centre).
- 3.9 At the March special meeting, member questioning focused particularly on:
 - Patient and family transport. Members were informed that patient
 journeys to the PTC after reconfiguration will be similar to current
 journeys, as both of the potential sites are in London as is the current
 provision. Means tested support is available for families, and both
 potential providers have well-funded charities which offer additional
 support. However, members may wish to further explore the issue of
 travel support, and facilities for overnight family stays.
 - Continuity of care. Members were told that current PTC staff would be offered employment at the new provider, but that there was no guarantee that staff would choose to transfer. Members may wish to seek further assurances around measures to ensure that there is continuity of care for families who have developed a trusting relationship with the current services.
 - Consultation and engagement. Members may wish to learn more about NHSE's plans to engage with local service users.
- 3.10 The minutes of the March 2023 special meeting are included for reference as Appendix 1 to this report. Additional information on consultation and engagement, provided by NHSE, is included as Appendix 2.

The stated aim of NHSE's reconfiguration plans is to deliver a safer service, 3.11 with both options providing a single-site specialist cancer centre with an onsite PICU. There is in any case no option to retain the current configuration as it no longer meets national service specifications. For Brighton & Hove residents, there is considered to be relatively little difference in terms of accessibility between the two options; and NHSE have provided assurances that there will be comprehensive support for travel expenses, overnight accommodation etc. with either option. NHSE have also provided assurances that they will do all they can to ensure continuity of staffing. NHSE have outlined their plans to involve local service users in the reconfiguration process. Given this, it is recommended that the HOSC agrees that it does not need to undertake additional formal scrutiny of this issue. This would not preclude the HOSC receiving informal updates, presentations to committee etc. as the reconfiguration plans progress (and NHSE have confirmed they are happy to support the HOSC in this way).

4. Analysis and consideration of alternative options

4.1 If members are not satisfied that they have received sufficient assurance about the reconfiguration plans, they can choose to continue formal scrutiny of this issue. Given reconfiguration timelines, this would require one or more special meetings to be held in summer 2023.

5. Community engagement and consultation

5.1 None directly in relation to this report, but members may wish to note NHSE consultation and engagement plans (Appendix 2).

6. Conclusion

6.1 Members are asked to consider NHSE plans to reconfigure specialist children's cancer services and to agree that no further local formal scrutiny of these plans is required.

7. Financial implications

7.1 There are no financial implications for Brighton & Hove City Council as a direct result of the recommendations of this report.

Name of finance officer consulted: David Ellis Date consulted (16/06/23):

8. Legal implications

8.1 As described in the legal implications to the last Report on this topic, HOSCs have powers to scrutinise significant NHS plans for service change (Substantial Variation in Service, or SViS). Following the decision of a previous meeting of HOSC that the changes described here did constitute a significant variation, NHSE has indicated that it will accept responses outside of a Joint Health & Overview Scrutiny Committee.

It now remains for Brighton City Council's HOSC (as the delegated body with relevant expertise) to review the changes described in accordance with its powers under the Health & Social Care Act (2001) and related legislation and to consider whether it wishes to approve the recommendations to this Report or to make some other response to the proposals.

Name of lawyer consulted: Victoria Simpson Date consulted 19.06.23

9. Equalities implications

9.1 Children with cancer have protected characteristics in terms of their age and of disabilities (as the Equality Act considers a diagnosis of cancer as a disability). Both of these have been taken into account in NHSE's planning, which is for a dedicated service for children delivered by specialist paediatric clinicians. Members may be interested to explore what measures NHSE will adopt to ensure that its consultation and engagement reaches and is accessible to all communities in the city, including for example, families where English is not the primary language. Members may also wish to seek additional assurances that there is financial support for travel and accommodation costs for families.

10. Sustainability implications

10.1 Many children's cancer services for Brighton & Hove families are delivered locally at the Royal Alex. However, the most specialist services need to be delivered on a regional basis, which does necessitate travel to London. NHSE's plans NHSE's plans will enable easier to access via public transport to either of the potential future PTC providers, compared to the Royal Marsden.

Supporting Documentation

1. Appendices

- 1. Minutes from the 15 March 2023 special HOSC meeting
- 2. Information provided by NHS England on their consultation and engagement plans