

Paper for the JHOSC meeting on 14th March 2013

Conclusion to planned change to the provision of neurosurgical services in North Central London

Submitted by:

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1.0 Summary of current position

The Joint Health Overview and Scrutiny Committee (JHOSC) approved the transfer of non-elective neurosurgical patients, intracranial neurosurgery elective inpatient work, and complex spinal work in May 2012 and the transfer of these services took place in June 2012 (phase 1). At the time of approval the committee was aware that this represented phase 1 of a 2 stage process. This paper outlines the conclusion of this process with the transfer of routine spinal surgery scheduled to move to Queen Square at the end of March 2013 (phase 2).

The transfer of services outlined in phase 1 has been a success, with patients receiving world class neurosurgical services with excellent patient outcomes on one site within the North Central London sector within a comprehensive neurosciences centre.

Routine spinal surgery remained at the Royal Free Hospital with 24/7 consultant support from Queen Square and day time junior doctor cover from the neurosurgical team at Queen Square. The out of hours support has been provided by the orthopaedic team at the Royal Free Hospital. Current elective work at Royal Free is approximately 20 cases per month equating to 240 inpatient cases per year plus related outpatient and diagnostic imaging services. The interim service at the Royal Free was a short term solution and the plan, as agreed with the JHOSC, was to transfer the remaining services to Queen Square within the same financial year.

The rationale for this two stage approach to this transfer was based on capacity restrictions at Queen Square. Additional capacity is now in place following a capital project to create 7 extra beds and improvements to the availability of day care facilities. UCLH is able to confirm that the remaining patients can now safely be accommodated on the Queen Square site.

This transfer of services was recommended to the JHOSC on the basis that the consolidation of neurosurgical services in North Central London offered significant benefits to patients including but not limited to; accelerate advances in neurosurgical practice through research, improve education to medical and nursing teams and more effective use of resources through collocation and consolidation

2.0 Next steps

The two trusts concerned are now engaged in the communication and consultation exercises required in order to conclude the transfer. Formal staff consultation will conclude on 12 March 2013. The majority of staff directly affected by the service change transferred in June 2012 as part of the phase 1 change. There are 4 members of staff on the TUPE list for transfer with phase 2.

The future arrangements for neurosurgical services will be a continuation of the current pathways for patients attending Accident and Emergency Department which have been reviewed following the implementation of phase 1. Following implementation of phase 2 the Royal Free neuroscience services will be supported by a Consultant neurosurgeon presence at the weekly neurosciences multidisciplinary meeting, a weekly imaging meeting and teaching sessions for postgraduate and undergraduate students supplemented by 24/7 phone advice.

It is planned to hold another Stakeholder event for interested patients, GP's and patient representative groups as a follow up to last year's event on the Queen Square site during the week commencing 18 March

The North Central London commissioners are supportive of this service change, which was discussed at their May 2012 Board meeting. Commissioners have been assured that the service change will not create any duplication of clinical pathways. The Clinical Commissioning Groups were sent a paper on 4 January 2013 regarding the final element of the transfer, no concerns have been raised and a paper will also go to the NCL PCT Cluster Board for their March Board meeting. The Office of Fair Trading has recently reviewed the transfer of service and has informed both Trusts that the transfer has been cleared.

The Health and Overview scrutiny committee is asked to support the conclusion of the service transfer approved in May 2012.