

MANCHESTER CITY COUNCIL REPORT FOR INFORMATION

Committee Health and Well Being Overview and Scrutiny Committee
Date 12th January 2006
Subject Breast Care and Cancer Prevention Centre
Report of Paul Featherstone, Director of Estates and Facilities
South Manchester University Hospital NHS Trust

Purpose of report

To inform the members of the Committee on progress in delivering a new build solution to relocate the current Breast Care Centre from the old Withington Hospital site to Wythenshawe Hospital.

Key Issues for Consideration

- Requirement to re-provide suitable and modern facilities
- Withington Hospital development delivery programme
- Strategic context for re-provision
- Expected health benefits
- Preferred option and expected delivery programme

Recommendations

The Committee is asked to:

- i) Note the contents of this report; and
- ii) Support the preferred solution.

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1. Introduction

Currently, the Breast Care and Prevention Services offered by South Manchester University Hospitals NHS Trust (the "Trust") are based at the Nightingale Centre on the old Withington Hospital site.

As the Committee will be aware, the transfer of services from the old Withington Hospital site has been progressed historically through a number of different business cases including the delivery of a Private Finance solution at Wythenshawe Hospital and, more recently, the Withington Community Hospital. The Breast Service is amongst the last of those services to be relocated from the old Withington Hospital site.

In this regard, therefore, and in accordance with NHS approval mechanisms, an Outline Business Case (OBC) for the development of a new Breast Care and Cancer Prevention Centre at Wythenshawe Hospital was approved by Greater Manchester Strategic Health Authority (GMSHA) in March 2005.

Subsequent to OBC approval, the Trust, in partnership with South Manchester Primary Care Trust (SMPCT) acting as lead service commissioner, has been developing the Full Business Case (FBC) for the scheme, this scheduled to be submitted to the January 2006 GMSHA Board for their approval. The FBC re-affirms the development of the Centre at Wythenshawe Hospital as the best solution.

The Committee will note that the Joint Meeting of Directors of Finance and Directors of Commissioning, made up of representatives from the Greater Manchester Primary Care Trusts, approved the scheme as articulated within the FBC at their December 2005 meeting.

2. Reasons for Change

There are a number of reasons why the existing Breast Service must be relocated from its current base:-

- The sale of the old Withington Hospital Site – South Manchester Primary Care Trust (SMPCT) are in the process of concluding the sale of the old Withington Hospital site in accordance with the development plan for the Withington area. An obvious condition of this sale is that existing clinical services must be re-provided for in modern and suitable facilities. It is anticipated that Vacant Possession will be granted to the developer of the old Withington Hospital site by December 2007.
- Split site working - Currently the Breast Surgeons operate from three sites: Withington, Wythenshawe and Christie Hospitals. This split-site working increases travelling time for medical staff but, more importantly, it causes difficulty in providing continuing care for inpatients; for instance, there are several sessions each week when there are no senior surgical staff on site at Wythenshawe.

- Patient journey - The current patient journey for Breast Services is complex and often involves the patient being involved in visiting many different areas of the Withington Hospital Site, and even visiting multiple hospital sites.
- Lack of existing space – At present the service offered at the Nightingale Centre is detrimentally affected by lack of space. This has meant that some of the Service’s clinics have been delivered in other non-suitable and non-dedicated accommodation.

Current trends anticipate a steady increase in out-patient and screening numbers of approximately 2 – 3% per annum which will create additional pressure on the already cramped facilities.

- Poor existing facilities – As a consequence of a historic lack of investment the existing Nightingale Centre does not meet modern building standards. This undermines the quality of care given to patients. For example, there is little or no quiet space for private discussions; few treatment rooms are capable of being dedicated to specific clinical activities; and there are too few treatment rooms which severely hampers patient throughput.

The existing Nightingale Centre is a 19th Century building that was converted for Breast Care Services in 1988. The building is in need of extensive repair and would require large-scale reconfiguration to bring it up to modern standards; this is estimated at circa £10m. Therefore, to bring the existing facilities up to modern standards is not considered to be a viable economic option.

- Service developments and the introduction of new techniques. - These will have significant benefits in reducing bed usage, will create additional capacity to treat patients, and also reduce the amount of cancelled operations.

3. Strategic Context

The strategic context for the re-provision of the Breast Care and Cancer Prevention Centre is set by:-

a. The NHS Plan

- Extension of the National Breast Screening Programme to include patients of 65-70 years of age;
- Introduction of two-view mammography as standard in the Breast Screening Programme;

b. The NHS Cancer Plan

- Improving treatment and reducing time for diagnosis;
- Establishing multi-disciplinary specialist teams;
- Investing in staff;

- Investing in the future with a greater emphasis on research into all forms of cancer as well as into detection and treatment methods;

c. The National Institute of Clinical Excellence

- Patient welfare, including maintenance of dignity;
- Availability of alternative diagnostic and treatment methods, such as Sentinel Node Biopsy;
- Privacy – for patient counselling, and for dignified delivery and receipt of unwelcome news and its implications;

d. The Trust Local Cancer Plan

- Development – with the Greater Manchester and Cheshire Cancer Network – of a recognised Centre of Excellence offering the best treatment and highest levels of supportive care for those with cancer and their relatives and dependents;
- Development and support of multi-disciplinary teams of specialists, working across traditional departmental or organisational boundaries to deliver the highest quality of care by the most efficient means and thus increase the likelihood of extended survival with the best quality of life;
- The achieve day surgery or 23-hour maximum in-patient stay for 50% of patients requiring surgical treatment;
- Development of close working relationships with other organisations in the local health economy, in particular those responsible for commissioning cancer treatment;

e. The Genesis Appeal

- Promotion of research into improved methods of early prevention and diagnosis of breast cancers;
- Promotion of research into new methods of breast cancer treatment;
- Promotion of research into genetic tendencies and their arrest;
- Promotion of the work of the Family History Clinic to ensure that relevant families have the best support, advice and care, as necessary;
- Raising public awareness of this form of illness and the related issues; and
- Striving for the day when breast cancer is a curable disease in all cases.

4. Health Benefits

Specific expected health benefits accruing from the re-provision of the Breast Care and Cancer Prevention Centre at Wythenshawe Hospital include:-

- One stop services for referrals

The consulting, diagnostic, reporting and counselling service will be under one roof which will facilitate a one-stop breast cancer diagnostic service. This will also help reduce and improve the patient journey.

- Improved patient environment

Studies prove that the patient environment has a great positive effect on the well-being of patients using a particular facility. The new development will provide a modern, pleasing, well designed and fit-for-purpose facility.

- Siting

The siting of the facility at Wythenshawe hospital will provide closer links to the Breast Care ward and surgery units thus allowing better use of consultants time which, in turn, will support better care for patients

- New forms of treatment

The re-provided service will help facilitate the further development and use of new forms of treatment such as Mammotome Breast Biopsy and Sentinel Node Scanning. This work is closely related to the Nuclear medicine suite at Wythenshawe Hospital.

- Close links to research centre

The incorporation of Europe's first Breast Cancer Prevention Centre within the building will give improved access to clinical expertise.

- Improved training facilities

This will improve the standard of the clinical staff and lead to better patient care.

- Reduction in clinical risk

Siting the building at Wythenshawe Hospital will reduce the distance from the Centre, where some pre-operative procedures are carried out, to the main theatres and ward accommodation thus reducing the clinical risk of transferring patients.

- Increased day case rates

A higher percentage of patients will be treated as day cases due to the imaging centre being nearer to the Wythenshawe Day Treatment Unit.

- Further reduction in time from diagnosis to treatment

Gained from the efficiencies of working in a single building.

- Improvements in clerical services and record management

The one site service will reduce the processing and transportation time for health record notes.

- Ability to respond to increased number of patients

Dedicated space and efficient use of the building will give flexibility to respond to increased number of patients.

- Reduced in-patient stay

Proximity of the centre to the in-patients area will allow close monitoring of patients in order to minimise in-patient stay.

5. Preferred Option

As stated previously, the preferred option is to provide a new Breast Care and Cancer Prevention Centre at Wythenshawe Hospital.

The Trust has engaged a professional design team and building contractor using the NHS Procure 21 process and, through a process of detailed consultation and negotiation with relevant stakeholders (including patient representatives) has produced a proposed building design that overcomes the current operational difficulties associated with the Nightingale Centre, supports the strategic context for the delivery of the service and brings about the required health benefits.

The proposed building is two storey, approximately 3000 m² in size and is expected to cost in the region of £14m, of which approximately £1.5m will be donated from the Genesis Appeal, with the remainder coming from the expected sale of the old Withington Hospital site.

Indicative floor plans of the proposed design are included at Appendix 1 to this paper for the Committee's information.

6. Delivery Programme

Subject to receiving GMSHA Board approval in January 2006 it is anticipated that construction will commence sometime during March / April 2006 with the building being operational sometime during the Summer of 2007.

APPENDIX 1

FLOOR PLANS / ARTISTS IMPRESSIONS

