

HEAD AND NECK SURGERY IN ESSEX - CONSULTATION

1 SUMMARY

- 1.1 Members are invited to respond to a formal consultation on head and neck surgery in Essex.
- 1.2 Essex Strategic Health Authority (SHA) require comments by 22 December. A copy of the full consultation paper has been placed in the Members' Library.

2 CONSULTATION DETAIL

- 2.1 This formal consultation is about two types of surgery:-
 - Ear, nose and throat (ENT)
 - Oral and maxillofacial surgery (OMFS)
- 2.2 The NHS in Essex has been reviewing its hospital services to see whether some specialist services would work better in a network. This involves more than one hospital working together as a single service, rather than each one providing the specialist service. The review has identified that head and neck surgery would work better in a network.
- 2.3 It is proposed by the SHA that four of the five hospitals in Essex should be part of a new network for ENT and OMFS. These are Southend, Basildon, Chelmsford and Harlow. Colchester already works in a network arrangement.
- 2.4 The majority of planned operations will still be undertaken at local hospitals with patients returning home the same or next day. For patients needing more complex surgery and a longer hospital stay, a specialist inpatient centre will be created at one hospital. The specialist centre will provide the hub of the network, supporting the other hospitals.
- 2.5 The specialist inpatient centre should also be the same centre as for head and neck cancer, a topic considered by Community Overview and Scrutiny Committee on 13 October 2005. In relation to head and neck surgery for cancer, the Committee considered that two Specialist Centres should be developed at Basildon and Chelmsford hospitals.
- 2.6 For emergencies, most patients would be treated at the local hospital, with only those patients needing admission transferred to the specialist inpatient centre.
- 2.7 Current outpatient clinics at each hospital will be unaffected.
- 2.8 Based on earlier informal consultations, the SHA's preference is for the specialist inpatient centre to be at Broomfield Hospital, Chelmsford (the same as its preference for specialist head and neck cancer surgery). Its reasons are:

- Broomfield could provide the right level of infrastructure and resources such as bed capacity, theatre sessions, intensive care support etc.
- It is “reasonably accessible” for patients and for serving the other hospitals.
- The ENT/OMFS centre would be close to the specialist centre for plastic surgery

2.9 The full consultation document gives estimates of planned operations (elective) at each hospital and an indication of how many of those are likely to be treated at the proposed new inpatient centre. This information is set out below.

For Planned Operations (Elective)

Hospital	Number of ENT Treatments			Number of OMFS Treatments		
	Current	Proposed Locally	Proposed in Centre	Current	Proposed Locally	Proposed in Centre
Basildon	1984	1786	198	875	744	131
Broomfield in Chelmsford	1581	1423	158	547	465	82
Southend	1468	1321	147	673	572	101
The Princess Alexandra Hospital in Harlow (PAH)	809	728	81	515	No change PAH currently has a network arrangement with London for patients in West Essex	

3 COMMENT

3.1 From the table above, it seems that a larger number of both ENT and OMFS cases to be treated at the proposed new inpatient centre originate at Basildon and Southend hospitals, rather than Broomfield or Harlow. On this basis, there may be a case for suggesting that a proposed specialist centre should be based in the south of the County at Basildon rather than at Broomfield. This would be consistent with the Community Overview & Scrutiny Committee’s response to the cancer surgery issue.

4 RECOMMENDATION

4.1 It is proposed that the Committee **RESOLVES**

That Essex Strategic Health Authority be advised that this Council wishes to see a specialist head and neck surgery inpatient centre developed at Basildon hospital, since the majority of cases likely to be treated at the centre originate in the south of the County and that this also reflects the established corridors of movement and transport patterns across the County. It also recognises the potential growth in the south of the County.

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Background Papers:-

None

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