

Mr. Vaughan Gething, Minister for Health &  
Social Services  
Dr. Frank Atherton, Chief Medical Officer for Wales  
Dr. Dai Lloyd, Chair, Health, Social Care and  
Sport Committee  
Mr. Andrew RT Davies, Shadow Health Minister

Velindre Cancer Centre  
Velindre Road  
Whitchurch  
Cardiff  
CF14 2TL

via e-mail to: [...]Redacted

13th October, 2020

Dear Mr. Gething, Dr. Atherton, Dr. Lloyd and Mr. Davies,

### **Concerns regarding stand-alone model for new Velindre Cancer Centre**

We are writing to make sure that you are aware of two recent letters, each supported by more than 30 senior members of clinical staff within Velindre, raising concerns within the Trust about the proposed 'stand-alone' clinical model for the new Velindre Cancer Centre. They were sent on behalf of a multidisciplinary group of Velindre consultants and senior nurses to the Chair, Chief Executive and Medical Director.

You may already be aware of the existence of these letters but perhaps not their content nor the diverse professional expertise of those expressing concerns. We therefore attach each of the letters.

Together with a letter from our 57 external clinical colleagues that has been referenced publicly by yourselves, there are now more than 90 senior clinicians in the region who strongly feel that the proposed 'stand-alone' model in the proposed location, away from an acute hospital site, will not be suitable for a world class, future proofed 21st century cancer centre.

We trust that this level of professional concern will be appropriately reflected in further public discussion and decision-making on an important issue that will affect the health and well-being of the population of SE Wales for decades to come.

Yours sincerely,

[...] Redacted

*[redactions to this email as received]*

**From:** address redacted

**Date:** Wednesday, 29 July 2020 at 10:58

**To:** Steve Ham, Jacinta Abraham

**Cc:** 83 addresses redacted

**Subject:** Independent external expert review of proposed new location of Velindre Cancer Centre

Dear Jaz and Steve,

Many thanks for your e-mail messages, last Friday (24<sup>th</sup> July).

As I believe you are aware, at the time of your messages, a multi-disciplinary group had been preparing a document expressing concern about the clinical case for a stand-alone location of the new Velindre Cancer Centre at Coryton, rather than co-location with an acute hospital site. The letter urged an independent, external expert review of that single aspect of the TCS process, whilst acknowledging the many strengths of other aspects. We had been collecting the final few signatures, before sending, when your messages arrived.

At that time, 38 clinicians had confirmed their wish that their signatures should be added. These included 17 consultant oncologists, 4 consultant radiologists, 3 consultants in palliative care and 14 senior nurses at Velindre.

We are keen to keep the conversation flowing, but many of the confirmed signatories are now on leave. Therefore, rather than amending the letter to take into account the points which you raised, re-circulating to all the previous signatories, and awaiting confirmation that they still wish to sign, we attach the letter, unaltered but unsigned.

This will hopefully give you the confidence that our voices are not adversarial, but indeed are those of allies who hope to work with you to build the best cancer centre possible. We believe that by understanding the strength of opinion, across the spectrum of cancer patient care in the Centre, the TCS teams and working groups will be able to focus first and foremost on addressing our pressing concern.

We hope that taking this approach will avoid additional delays and facilitate the continuation of the open dialogue and constructive engagement that we all wish to share.

With that in mind, I would be grateful if you could respond to all those copied here.

**Signature redacted**



Mr. S. Ham  
Chief Executive  
Velindre University NHS Trust

Velindre Cancer Centre  
Velindre Road  
Whitchurch  
Cardiff  
CF14 2TL

Via e-mail to: [...] Redacted

24<sup>th</sup> July 2020

Dear Steve,

**Re: the new Velindre Cancer Centre**

We wish to express our concern that recent events clearly demonstrate fundamental problems with the clinical case for the proposed location of the new Velindre Cancer Centre. We request, as a matter of urgency, a new, independent external review of this crucial aspect of the proposed model for Transforming Cancer Services (TCS) in South East Wales.

Since the inception of TCS, various new pieces of information have entered the public domain which strengthen the consensus that the best model for integrated cancer care is as a collocated cancer centre on an acute hospital site with immediate access to specialist medical, surgical, clinical imaging and interventional radiology services, and to intensive care facilities, as necessary. Direct (as opposed to virtual) input from these key care partners is becoming increasingly essential to state-of-the-art cancer care which achieves the best possible outcomes for our patients.

We believe that the currently proposed model of a stand-alone cancer hospital, remote from key professional colleagues, can not adequately meet the key requirements of the modern, world-class, comprehensive cancer centre that the population of South East Wales deserves.

Persisting with the current model risks undermining other excellent work conducted within TCS, a failure to fulfil the strategic vision set for the Centre and damage to the reputation of the Trust.

The current model will not, in our view, be sufficient to ensure the safety of important subgroups of patients treated with both current and emerging cutting-edge treatments and, additionally, does not represent the best model to deliver optimum outcomes and quality of care for a broad range of other cancer patients. Nor is it the best location for a regional approach to integrated, regional management of our sickest patients with major complications of either their disease or their treatment (Acute Oncology). This key group requires timely specialist medical and/or critical care outreach review which is not rapidly available on a separate site.

In addition, our ability to continue delivering world-leading clinical research involving increasing numbers of emerging state-of-the-art treatments will be significantly limited if we are not collocated with appropriate facilities. Systemic therapies, and innovative drug-radiotherapy, vaccine and early phase clinical research, now routinely mandate immediate access to high dependency and intensive care input. The recent coronavirus pandemic has emphasised the need for joined-up, flexible approaches to cancer care and the crucial

importance of team-work for rapid response to novel research challengers. This includes the need for proximity to fellow NHS and academic professionals from other oncological specialties and from clinical and translational researchers.

Furthermore, as a direct result of the UK Shape of Training report, there are imminent changes in the training curricula for both clinical and medical oncology, with a particular emphasis on Acute Oncology. These changes reflect the need to develop a highly skilled, adaptable workforce for safe management of the changing and occasionally severe toxicities which can result from increasing numbers of new oncology treatments. Trainees will be expected to have broad experience of integrated, multi-modality cancer care, and exposure to complex cases presenting as unscheduled care events. These UK-wide curriculum updates necessitate the development of seamless working relationships with a wide range of specialties, which collocation would allow.

Finally, in addition to the changing clinical, research and training issues outlined above, the major reconstruction of University Hospital Wales (UHW) planned by the Cardiff and Vale University Health Board (CVUHB) at the Heath Park site, offers a once-in-a-generation opportunity for an alternative vision for the location of our Cancer Centre. We strongly believe there is an urgent need to re-appraise the location of the cancer centre and to embrace the unique potential for a shared building project which would extend, rather than compromise, the excellent, innovative work already undertaken on TCS.

On this basis, we believe that the most appropriate location for the new Velindre Cancer Centre is at the Heath Park campus. Co-location with University Hospital Wales would promote the integration of Velindre's widely-admired, non-surgical oncology services with the region's other specialist oncology services and research facilities, alongside relevant acute medical services and immediately available facilities for urgent escalation of care, up to and including intensive care.

We believe that this alternative model of a single-site, comprehensive cancer centre will undoubtedly bring greater benefits to cancer patients and their families, in both the short and longer term. It will:

- ensure safety for our acutely unwell patients
- facilitate the introduction of an enhanced, regional model for Acute Oncology services.
- increase the critical mass of oncological expertise, maximising opportunities for multiprofessional interaction and shared education with specialist colleagues in surgical oncology, haemato-oncology, paediatric oncology, pathology and medical imaging
- facilitate interactions with the large cohort of clinical and non-clinical CVUHB and Cardiff University cancer researchers at Heath Park, generating genuine critical mass and thereby enhancing our reputation for world-class cancer research
- more easily meet the requirements of imminent and future changes to the training curricula of oncology trainees, attracting to Wales a broader range of top-class applicants who will be the region's future oncology consultants
- provide an enriching training opportunity for CMT and GP trainees which will more easily facilitate full staffing of our junior doctor rotas
- be more attractive in recruiting, motivating and retaining the very best medical and nonmedical oncology professionals, increasing the influx of high-calibre talent into Wales
- bolster the confidence and professional fulfilment of a substantial majority of consultants and other health care professionals who will practice at the new facilities
- maintain our credibility beyond Wales, ensuring that Velindre Cancer retains our hardearned reputation as a modern centre of excellence for cancer care and research

We are agreed that co-location with other oncological and acute services at Heath Park need not and must not invalidate the great majority of the excellent proposals contained within the package of proposals encompassed by TCS. Much of the important work already done remains entirely valid. There should be no impediment to close co-operation with our health board and primary care partners, and priority would still be afforded to treatment and care of patients as close to home as appropriate to individual circumstances.

Nor do we believe that this approach would jeopardise the autonomy of Velindre or compromise its ability to focus on the necessity of preventing, diagnosing and treating cancer.

We feel certain that, with appropriate backing from Welsh Government and NHS Wales, guarantees could be secured of organisational independence in funding and decision-making for cancer services.

Overall, we feel that a re-consideration of the best and most enduring model of cancer care for South East Wales is imperative, and that understandable concerns regarding delays to the essential up-dating and up-grading of the region's cancer services should not risk missing a one-off, time-limited opportunity to implement a truly transformative change for our region's population. It should be possible, through appropriate discussions with partners in CVUHB and around the region, to implement change rapidly, through close collaboration with willing, likeminded clinical and managerial colleagues.

We welcome the recent open-ness of medical managers within the Trust to extend discussions on these issues and their willingness to listen to an increasing body of senior clinical opinion.

This group includes, critically, the voices of consultants who have been relatively recently appointed, and of trainees who will soon be appointed, many of whom will be central to a sustainable model of excellence.

Following on from these discussions, we feel that it is essential that there should be a thorough, new review which goes beyond the Trust and the previously-constituted Clinical Advisory Group. We strongly believe that the review should involve a range of independent, expert oncological opinion from outside Wales, alongside representatives from our Health Board and primary care partners, as well as members of local communities in both Cardiff and other areas of South East Wales.

We remain committed to the ethos of patient focus, togetherness and mutual support which has been the hallmark and strength of Velindre Cancer Centre, for many years. We believe that serious re-consideration of this crucial issue will benefit from this much-envied team spirit and, ultimately, strengthen and extend it to professional colleagues with whom we desire to work more closely.

We look forward to hearing your views.

Yours sincerely,

*[...] Redacted*



Velindre Cancer Centre  
Velindre Road  
Whitchurch  
Cardiff CF14 2TL

2nd September, 2020

c/o Dr Nikki Pease  
Chair, LNC Velindre UNHS Trust

Dear Professor Mead, Mr Ham and Dr Abraham,

**Re: stand-alone model for new Velindre Cancer Centre**

Thank you for your e-mails detailing the additional processes that have been put in place to ensure the Transforming Cancer Services program and new Velindre Cancer Centre meet the needs of the population of South East Wales. Having considered these, and contributed to the discussions and working groups, concerns remain about the ability of a stand-alone cancer centre to provide a safe and effective model for world-class, 21st century patient care. These genuine and significant reservations have been expressed, in writing, both within our organisation, and by a multi-specialty, wide ranging cohort of our medical, surgical, general practice, nursing and allied health professional colleagues.

We therefore request, in the interests of openness and accountability, an independent, expert review, available for scrutiny by all stakeholders and those with public, private or personal interest. We hope it goes without saying that this would give us the reassurance that the model is sustainable and optimal for patient care, and we would of course support the outcomes of the independent expert review, regardless of our current viewpoints.

Yours sincerely,

*[...] Redacted*