

Royal Brompton and Harefield Hospitals

**Briefing Report for the Health and Social Care Select Committee
November 2025**

Elective activity

Cardiac Surgery

The total number of patients at Royal Brompton and Harefield Hospitals who have been waiting for more than a year for their cardiac surgery has decreased since the last report and all sites will meet both the 65-week wait target by 21st December 2025 and the 52-week target by 31st March 2026. Work continues to improve Theatre productivity, particularly the reduction of cancellation rates and improved scheduling processes. Any patients waiting over 6 weeks are closely monitored via our ORTUS platform. This platform remotely monitors a patient's condition and flags any deterioration to the clinical teams who then review the patient.

Cardiology

Both Harefield and Royal Brompton hospitals will achieve the target of zero patients waiting over 65 weeks by 21st December 2025 and are now working towards clearing all patients waiting 52 weeks by 31st March 2026. Within the Heart, Lung and Critical Care Clinical Group meeting the 52-week target is going to be the most challenging for Cardiology (Inherited Cardiac Conditions) and the Vascular Service, the later of which is delivered at St Thomas' hospital. During this financial year, GSTT took over the Lewisham and Greenwich NHS Trust vascular service and hence their long waiting patients. Additional outpatient, diagnostic and procedure capacity has been created to accommodate these long waiting patients and the patient pathways are currently under review.

There are currently 618 cardiology patients at Harefield Hospital and 539 patients at the Royal Brompton hospital awaiting a Cath lab procedure. The breakdown of these procedures is below:

Procedure Type	RBH	HH
Angio	94	78
Devices	96	49
Ablation	223	409
TAVI (transcatheter aortic valve insertion)	11	6
Other structural	115	76
Total	539	618

Over the last 6-9 months, Harefield Hospital has seen a significant increase in the number of patients waiting for an ablation procedure. This is due to increased referrals into the Electrophysiology (EP) Service and despite an increased number of ablation procedures being performed in the cath labs (due to efficiency gains), the waiting list continues to grow. To address this issue, HLCC is looking at this service across all hospital sites as well as reviewing the patient pathways. In addition, weekend EP cath lab lists are also being undertaken.

Diagnostics

Hospitals are measured against a DM01 standard which covers 15 diagnostic tests and 95% of all patients should receive their diagnostic test within 6 weeks of referral.

Brompton and Harefield Hospitals are performing well against this standard for most modalities. MRI and CT performance remains static on both sites with 95% of patients being seen within 6 weeks in both modalities.

Due to staffing constraints at both sites and the provision of support to the St Thomas's site, the overall DM01 performance for Echo remains a concern. The position has slightly worsened since the last report with 80% of patients having their scan within 6 weeks. With recruitment of staff into current vacancies, this position will improve and performance will return to previous levels.

The DM01 performance for sleep studies has seen an overall improvement. The Brompton site has seen a significant improvement; however, Harefield capacity remains challenging. Actions continue to be taken to improve performance. The planned trajectory is that the backlog will be significantly reduced by 31st January with Harefield will achieve compliance by the end of February 2026.

Cancer (Lung)

In April 2025 Royal Brompton and Harefield Hospitals reported that there was an overall reduction in the number of patients waiting thoracic surgery. This trend has continued over the last 7 months and there are currently 114 patients on the waiting list. Fifty of these patients have breached the 62-day target which is a 6% improvement since April 2025. Unfortunately, many of the referrals into our service are received after the 62-day target has already been breached at the patient's local hospital.

The Trust is currently focusing on reducing the diagnostic component of the patient's pathway which will further reduce the number of patients breaching the 62-day target. Currently, patients referred to us wait 3 - 4 weeks for their surgery which is significantly better than 1 year ago when patients were waiting up to 8 weeks for their surgery.

It should be noted that our outcomes for thoracic surgery remain excellent. Recent data regarding surgical outcomes indicates that Royal Brompton and Harefield Hospitals have a mortality rate of 0.32% for patients 30 days post-surgery or less, which is almost ten times more favorable than the national average of 2.80%.

This year, the thoracic surgeons across our hospital sites have also commenced robotic surgery and this is likely to increase with plans for further robots to be introduced.

Transplant Activity

In 2024/25, Harefield performed 36 heart transplants and 26 lung transplants. This was the highest number of heart transplants carried out by a transplant centre in the UK.

This year to date, Harefield Hospital has performed 26 lung transplants, 21 heart transplants and 26 mechanical circulatory support (MCS) devices. At this point in the last financial year, a total of 12 lungs and 16 heart transplants had been performed so the activity this year well exceeds that of last year.

In the summer Harefield Hospital celebrated 30 years of Mechanical Circulatory Support (MCS) and the event was marked by staff and patients.

Harefield Clinical Strategy and Future Developments

The Harefield Clinical Strategy document has been finalised and endorsed by the Board.

The vision for Harefield Hospital is:

To be international leaders in the management of advanced heart and lung disease, whether acute or non-acute, delivered at scale through the most complete repertoire of treatment modalities, supported and aligned with cutting edge science.

The ambition is utilise the space, clinical expertise and academic links to create a fully integrated life sciences campus on the Harefield hospital site in partnership with pharma and MedTech.

The next step is to prepare an implementation plan outlining the various phases of the project and to develop the necessary Estates and Workforce strategies.