

Update Paper for Hillingdon Health and Social Care Select Committee

Royal Brompton and Harefield Hospitals

March 2026

1.0 Performance

1.1 Referral to Treatment (RTT) and Long Waiting Patients

Significant progress has been made to reduce the number of patients waiting 65-weeks for treatment, with recovery plans indicating that the Trust remains on track to achieve zero 65-week waits by the end of March 2026.

The Trust is also meeting its end of year trajectory for 52 week waits with the cardiology and respiratory services being the most challenged.

The Trust is embarking on a significant programme focussing on transforming outpatient care and making improvements to the non-admitted phase of the patient's pathway. This will incorporate the national requirement to implement 'Advice and Refer' for key identified specialities by October 2026. 'Advice and Refer' will be the receiving point for all GP referrals into hospital, with the outcome being either advice being provided back to the GP as to how they should manage the patient's condition in primary care, or the referral being directed into the hospital. This is one of the national initiatives to manage future demand for hospital care and to ensure patients receive appropriate care in an appropriate setting, delivered by the most appropriate healthcare professional.

Clinically urgent elective cardiac surgery continues to represent a significant operational and safety risk. The Trust currently has approximately 868 patients waiting for elective cardiac surgery, representing 50% of the pan London waiting list. This includes a large cohort of P2 category patients that require surgery within four weeks. As outlined at previous meetings, these patients are closely monitored through the Ortus platform to ensure early identification of deteriorating symptoms which triggers a prompt clinical review.

1.2 Diagnostics (DMO1)

Diagnostic performance continues to represent an operational pressure for the Trust, with the DMO1 position remaining above the national six-week standard. Echocardiography performance is improving with the current Trust position being 18.82% against a target of 17.6%, equating to 219 patients waiting longer than six weeks. The other area of particular concern is sleep studies, which has seen a dramatic increase in referrals associated with the new weight loss injections and the fact that Obstructive Sleep Apnoea (OSA) is a key criterion for accessing these medications.

2.0 Cardiothoracic Transplant

Harefield Hospital is delighted to report that to date in 2025/26 they have undertaken 39 lung transplants with a 100% survival rate. This is an approximate 50% increase on the number of lung transplant performed the previous year. There has also been 29 heart transplants undertaken year to date.

3.0 Robotic Programme

The utilisation of robotic assisted thoracic surgery as an alternative to conventional video-assisted robotic surgery ('VATS') and open surgery for lung cancer resections has been steadily expanding worldwide. The Royal Brompton currently has a da Vinci robot, and we are awaiting delivery of a new da Vinci robot for use in Harefield Hospital.

The Royal Brompton currently offers navigational bronchoscopy with the Ion robot / cone beam CT for the diagnosis and treatment of lung cancers at an early stage of disease. Funding has recently been awarded to extend this service to Harefield Hospital along with a purpose-built facility. This will significantly improve access to early diagnostics and treatment care for lung cancer patients in NW London.

4.0 Cardiogenic Shock

The Royal Brompton, Harefield and St. Thomas' hospital have all recently been visited by the Pan-London Cardiogenic Shock Board and these visits went very well. Cardiogenic shock is a sudden, life-threatening medical emergency where the heart is so severely damaged it cannot pump enough oxygen-rich blood to meet the body's demands. This leads to rapid organs failure and is fatal in approximately 30 – 50% of cases, even with modern treatment. Despite this service not yet being fully commissioned, our hospitals deliver this highly specialised care which includes the use of mechanical devices to take over the heart's pumping action. It is hoped that a Pan-London Cardiogenic Shock Network will be soon established.

5.0 Harefield Clinical Strategy and site development

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.

This development will provide modern facilities for the delivery of highly specialised health care with particular focus on Harefield being a leading centre for heart and lung transplantation, advanced cardiac and respiratory failure support and an acute Heart Attack Centre, with a national and international referral footprint.

The clinical strategy was endorsed by the Board in November 2025, and the programme has now moved into the planning / implementation phase.