JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (YORKSHIRE & THE HUMBER)

WEDNESDAY, 10TH APRIL, 2013

PRESENT: Councillor J Illingworth in the Chair

Councillors S Ali, J Clark, C Funnell, M Gibbons, R Goldthorpe, B Hall, T Revill, B Rhodes, L Smaje and K Wilson

77 Chair’s Opening Remarks

The Chair welcomed all in attendance to the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) meeting.

78 Late Items

In accordance with his powers under Section 100B(4)(b) of the Local Government Act 1972, the Chair agreed to accept the following late information:

- NHS Commissioning Board – Board Paper – ‘The NHS Commissioning Board’s role in maintaining quality’ (Minute No. 82 refers)
- ‘Safe and Sustainable Congenital Heart Services for Children’ – joint letter to The Rt Hon David Cameron, MP, Prime Minister, from Little Hearts Matter, Children’s Heart Foundation, The Somerville Foundation, HeartLine, Downs Heart Group, Max Appeal and Tiny Tickers (Minute No. 82 refers)
- National Quality Board – ‘How to Organise and Run a Risk Summit: 2012/13’ (Minute No. 82 refers)
- NHS England – ‘Analysis pre and post suspension of Children’s Cardio thoracic surgery’ (Minute No. 82 refers)
- VLAD mortality data in relation to paediatric cardiac surgery (Minute No. 82 refers)
- Children’s Heart Surgery Fund – ‘Addressing the reasons why Children’s Heart Surgery at Leeds was suspended’. (Minute No. 83 refers)
- NHS England – ‘Safe and Sustainable’ – Statement by NHS England on the implications of the Judicial Review judgement (Minute No. 83 refers)
- Hempsons – Judgement handed down by Mrs Justice Nicola Davies on 27 March 2013, Royal Courts of Justice, in relation to Save our Surgery Ltd v Joint Committee of Primary Care Trusts (Minute No. 83 refers)
- ‘Freedom of Information – Internal Review’ – letter dated 17 January 2013 from Councillor Illingworth, Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) to Dame Ruth Carnall, Chief Executive, NHS England (Minute No. 83 refers)
The above documents were not available at the time of agenda despatch, but were subsequently made available on the Council’s website.

79 Declarations of Disclosable Pecuniary Interests

There were no declarations of disclosable pecuniary interests.

80 Apologies for Absence and Notification of Substitutes

Apologies for absence were submitted by Councillors J Bromby, D Brown, M Rooney and J Worton.

81 Minutes - 3rd December 2012

Members were advised that the minutes of the meeting held on 3 December 2012 had not yet been finalised. It was agreed to forward a copy of the minutes to Members at the earliest opportunity.

82 Children's Congenital Heart Services: Service Provision at Leeds Teaching Hospitals NHS Trust

The Head of Scrutiny and Member Development submitted a report which provided an update on service provision in relation to children’s congenital heart services at Leeds Teaching Hospitals NHS Trust.

The following information was appended to the report:

- Copy of the letter dated 21 March 2013 inviting the Chief Executive of the Children’s Heart Federation to attend the Joint Health Overview and Scrutiny Committee on 10 April 2013
- Statement by Leeds Teaching Hospitals Trust dated 27 March 2013 outlining its decision to temporarily pause children’s cardiac surgery and associated interventions following discussions with senior representatives from NHS and the Care Quality Commission earlier that day
- Copy of an email dated 28 March 2013 from the Chair of the Central Audit Database Steering Committee to the Chair of the National Institute for Clinical Outcomes Research (NICOR) Executive Committee
- Statement by the British Congenital Cardiac Association dated 1st April 2013.

The following representatives attended the meeting:

- Mike Bewick, Deputy Medical Director, NHS England
- Andy Buck, Director for West Yorkshire Area Team, NHS England
- Maggie Boyle, Chief Executive of Leeds Teaching Hospitals NHS Trust
- Stacey Hunter, Divisional General Manager of Leeds Teaching Hospitals NHS Trust
- Rod Hamilton, Compliance Manager, Care Quality Commission.
The key areas of discussion included:

- Issues accessing information and data from NHS England. Particular reference was made to the document ‘NHS England Review of Children’s Congenital Cardiac Surgery Service at Leeds Teaching Hospitals NHS Trust’. Mike Bewick, Deputy Medical Director, NHS England, advised that the document referred to was subject to final amendments and had only recently been made available for public disclosure.
- Clarification whether Children’s Congenital Heart Services at Leeds were safe. Maggie Boyle, Chief Executive of Leeds Teaching Hospitals NHS Trust, stated that Leeds was as safe as any service across the country. No major or medium risk areas had been identified, however, there were some issues associated with data and terminology which had been identified as low risk, low impact.
- Members queried whether the pause in children’s cardiac surgery was premature and whether a review of proper evidence should have been undertaken first.
- The Deputy Medical Director, NHS England, advised that there were 3 aspects to the decision:
  1) Provisional data analysis supplied by NICOR;
  2) Intelligence provided by the Children’s Heart Federation (CHF);
  3) Intelligence provided by 2 whistleblowers. One from another hospital and one internally concerned about staffing levels.
- The Deputy Medical Director, NHS England, emphasised the need to be provided with accessible, timely data, although not at the expense of quality.
- Concern that the closure had affected the credibility of Leeds and resulted in increased scrutiny.
- Andy Buck, Director for West Yorkshire, NHS England, advised that 3 Area Care Quality Commissions were being established in Yorkshire and the Humber involving a range of health representatives.
- Acknowledgment of Members’ concerns regarding the role of Healthwatch, and its involvement as part of the risk summit.
- Confirmation that the Children's Heart Foundation had expressed concerns to The Care Quality Commission (CQC). No action was taken on the basis of the information and data supplied. The CQC had every confidence in Leeds and the processes in place.
- Confirmation that issues associated with the delivery of data had been resolved internally, although there were wider governance issues that required further considerations.
- Clarification in relation to locum arrangements. 2 experienced surgeons were employed at Leeds. Due to the uncertainty surrounding the future of the service these had been identified as locum posts. Members were advised that these posts were in the process of being made permanent.
• The consequences of closing Children’s Congenital Cardiac Surgery Services at Leeds. Members were advised that there were 10 children requiring transfer to be assessed. The children were accommodated elsewhere on the basis of availability. 6 were transferred to Leicester, 2 to Newcastle, 1 to Alder Hey (Liverpool) and 1 to Birmingham. LTHT had worked closely with the regional paediatric transport service (Embrace) to ensure appropriate transfers were undertaken in a timely manner. During the closure, LTHT had provided daily reports to NHS England, the Care Quality Commission and the NHS Trust Development Authority.

RESOLVED – That the contents of the report and appendices be noted, and that members of the JHOSC would be provided with the finalised reports/information discussed at the meeting – in particular the finalised report from the external review team/risk summit, and the analysis of mortality from paediatric cardiac surgery undertaken by NICOR.

(Councillor J Clark withdrew from the meeting at 1.10pm at the conclusion of this item.)

83 Review of Children’s Congenital Heart Services in England: Judicial Review outcome and implications

The Head of Scrutiny and Member Development submitted a report which provided an update on the judicial review outcome and implications in relation to the review of children’s congenital heart services in England.

The following information was appended to the report:

- The outcome of the judicial review in relation to Save our Surgery Ltd and the Joint Committee of Primary Care Trusts
- Copy of the letter dated 15 March 2013 from the Secretary of State for Health to the Chair of the Independent Reconfiguration Panel extending the deadline for its report to 30 April 2013.

The following representatives attended the meeting:

- Andy Buck, Director for West Yorkshire Area Team, NHS England
- Stacey Hunter, Divisional General Manager of Leeds Teaching Hospitals NHS Trust
- Sharon Cheng, Director of Children’s Heart Surgery Fund / Company Secretary for Save our Surgery Ltd
- Dr Sara Matley, Trustee of Children’s Heart Surgery Fund.

The key areas of discussion included:

• Concerns about negative media coverage and the impact on parents’ confidence in the unit.
• The need for a review of organisations involved in the safe and sustainable process.
- Concern that the Chair of the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) was still awaiting a response to his letter dated 17 January 2013 to Dame Ruth Carnall (former Chief Executive of NHS England) in relation to Freedom of Information – Internal Review. Andy Buck, Director for West Yorkshire Area Team, NHS England, agreed to address this issue and report back to the Joint Health Committee (Yorkshire and the Humber).
- Confirmation that NHS England would undertake further discussions with LTHT around how to adequately address / rebuild public confidence in Children’s Congenital Heart Services at the Trust.
- The impact on ‘personnel’ at LTHT, resulting from the ongoing high public profile of the services provided by the Children’s Heart Surgery Unit at Leeds.

RESOLVED – That the contents of the report and appendices be noted.

84 Review of Children’s Congenital Heart Services in England: Implementation Update

The Head of Scrutiny and Member Development submitted a report which provided an update associated with the implementation phase of the review.

The following information was appended to the report:

- Report provided by the Programme Implementation Director that described the arrangements that had been put in place to support the planning and preparation for implementation.
- A copy of the most recent newsletter (Heartnews: February 2013).

The following representatives attended the meeting:

- Michael Wilson, Implementation Director, NHS England
- Stacey Hunter, Divisional General Manager of Leeds Teaching Hospitals NHS Trust.

It was highlighted by the Implementation Director that work currently being undertaken related to the planning and preparation for implementing the long-term solution for children’s congenital cardiac services, as some issues, such as the development of networks, needed to be addressed whatever the finally agreed solution.

It was also confirmed that, following the recent High Court ruling, NHS England was currently ‘taking stock’ of the situation.

The key points of discussion included:

- Confirmation that the Draft Implementation Programme was on hold.
- Clarification that the development of further standards for proposed ‘cardiology centres’ was being undertaken in collaboration with current units.
• The need to broaden the scope of groups involved in the implementation process, particularly in terms of avoiding perceived bias and recognising the role of key organisations, charities, lay representatives and the voluntary sector. The Implementation Director, NHS England, agreed to address these concerns and report back to the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) with a response.

• The need to align the rights and responsibilities set out in the NHS Constitution with the Implementation stage of the review.

• Recognition of National Institute for Health and Care Excellence (NICE) working methods – to help develop credibility in the longer-term.

• The robustness of NHS England’s processes in terms of appointments / membership of advisory groups/ boards.

• The need to improve public access to NHS agendas, minutes and declarations of interest. NHS England provided an assurance that the relevant information would be made available.

RESOLVED –

(a) That the contents of the report and appendices be noted

(b) That the issues raised at the meeting be used to form part of the Committee’s response to the Independent Reconfiguration Panel (IRP).

(c) That the Joint Committee receives/ considers a further update around the implementation phase of the review at a future meeting.

(The meeting was closed to the public at 3.40pm and resumed in private session. Private session concluded at 4.20pm.)