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15 August 2011

Steven Courtney  
Principal Scrutiny Advisor  
Democratic Services  
Leeds City Council  
Scrutiny Support Unit  
1<sup>st</sup> Floor (West), Civic Hall  
Leeds  
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Dear Mr Courtney

**Re: Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber)  
Children's Congenital Cardiac Service Review**

Thank you for your letter dated 1 August 2011 in relation to the above.

Following discussion with Dr Gary Savill, Clinical Director Paediatrics, and paediatric colleagues, I can confirm that Airedale NHS Foundation Trust currently receives all our cardiology/cardiac surgery services from Leeds General Infirmary. They provide us with an excellent service and we have no concerns about the safety of this service, but would be gravely concerned about the sustainability of the service should paediatric cardiac surgery be removed from Leeds. This seems to be the favoured proposal for the Safe & Sustainable document issued.

We have two main service requirements from a paediatric cardiology team. There is the emergency assessment and treatment which is largely neonatal based and there then is a more elective assessment and follow up service based in the outpatient department. Both these services are coordinated by the paediatric cardiologist at Leeds General Infirmary. I will deal with our concerns for each one in turn.

1. **Emergency Service in the Newborn Period**

There are 5 – 10 babies born each year at Airedale Hospital who have acute cardiac problems that usually present in the immediate newborn period. These are often life threatening problems and usually undiagnosed antenatally. We manage them initially but then need input from our cardiology colleagues which invariably means acute transfer to Leeds General Infirmary for assessment and often surgical treatment.

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Our understanding is that if Leeds General Infirmary is not a cardiac surgical centre, then our patients would need to be transferred to Liverpool Alder Hey Hospital. We currently have no links with that hospital at all as it is clearly 2 hours away from us. Fortunately we are aware that our transport team would carry babies to Liverpool for us, but that obviously would put enormous strain on that service for other babies within the region. We understand that they would also have to travel up to Newcastle and there would clearly be a capacity issue here.

A vital part of the safety aspect of this service is communication, especially the communication between the cardiologists and the cardiac surgeon, but also to us. Therefore, I feel the maintenance of the current service, with close liaison between all parties involved, is preferable to one where we would probably have services from 3 different hospitals all trying to communicate.

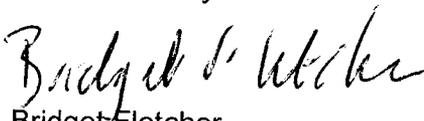
## 2. Elective Assessment and Management

We currently have a monthly outpatient clinic with a visiting cardiologist from Leeds General Infirmary. This allows us to have routine follow up for children who have had cardiac surgery in Leeds, but also quick access to assessment and follow up for medical cardiology problems. It is essential that this service is maintained so that children have ready local access for their cardiac care.

I am concerned that the potential closure of the Leeds General Infirmary cardiac surgery unit would have implications on the paediatric cardiology service there. We suspect that it would be difficult to recruit cardiologists in the future and potentially some of the current cardiologists would go to other centres to maintain their skills and interests. A reduction in consultants at Leeds General Infirmary would almost invariably mean a reduction in service to the peripheral hospitals such as Airedale Hospital. This would clearly have significant implications for our local families and their care.

In general therefore, whilst we have no safety concerns with the service from Leeds, the proposal to close the paediatric cardiac surgical services at Leeds General Infirmary would give us significant concerns about the sustainability of the paediatric cardiology service for our patients. If there has to be a reduction in paediatric cardiac surgery services in England, we at Airedale Hospital would favour option D and the maintenance of services at Leeds General Infirmary.

Yours sincerely



Bridget Fletcher  
Chief Executive

Copy Dr G Savill