

Report of the Head of Scrutiny and Member Development

Report to the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber)

Date: 19 September 2011

Subject: Proposed Reconfiguration of Children’s Congenital Heart Services in England: Questions to the Joint Committee of Primary Care Trusts (JCPCT)

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Not applicable Appendix number: Not applicable	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. The Joint Health Overview and Scrutiny Committee HOSC (Yorkshire and the Humber) forms the statutory overview and scrutiny body to consider and respond to the proposed reconfiguration of Children’s Congenital Heart Services in England – taking into account the potential impact on children and families across the region.
2. In considering the proposals set out in the *Safe and Sustainable Consultation Document: A new vision for Children’s Congenital Heart Services in England (March 2011)*, Members of the Joint HOSC have sought to consider a wide range of evidence and engage with a range of key stakeholders.
3. As part of the public consultation on the future of Children’s Congenital Heart Services in England, HOSCs have been given until 5 October 2011 to respond to the proposals.
4. In preparation for the previous meeting (2 Septmeber 2011), direct input was sought from the Joint Committee of Primary Care Trusts (JCPCT), as the appropriate decision-making body. However, the invitation to attend the meeting was declined.
5. At the meeting on 2 September 2011, the Joint HOSC resolved to provide a series of questions to the JCPCT for a written response. The questions posed are attached at

Appendix 1. Any written response will be made available to the Joint HOSC as soon as practicable.

6. Representatives from the JCPCT have again been invited to attend the meeting to present the response to the attached questions and address any further questions identified by the members of the Joint HOSC.
7. As previously agreed, concerns expressed by the Joint HOSC have been communicated to the Secretary of State for Health. In addition, Members of Parliament representing Yorkshire and the Humber have been provided with copies of all the relevant correspondence and invited to make a submission to the Joint HOSC. Copies of the relevant correspondence are attached at Appendix 2. Any written submissions will be made available to the Joint HOSC as soon as practicable.

Recommendations

8. Members are asked to consider the details associated with this report and identify/ agree any specific matters for inclusion in the Committee's report to be presented to JCPCT later in the year

Background documents

- A new vision for Children's Congenital Heart Services in England (March 2011)

Questions posed to the Joint Committee of Primary Care Trusts (JCPCT)

- (1) Why was the Leeds unit not included in all four options on the grounds of population density in the Yorkshire and the Humber region, on the same basis that the units at Birmingham, Bristol, Liverpool and the 2 London centres, which feature in all four options?
- (2) Why isn't the genuine co-location of paediatric services provided at the Leeds Children's Hospital, alongside maternity services and other co-located services and specialisms on the same site at Leeds General Infirmary given greater weighting? Such service configurations have been described as the 'gold standard' for future service provision, yet it appears not to have been given sufficient weighting in the case for Leeds.
- (3) Why isn't the "exemplar" cardiac network which has operated in the Yorkshire and Humber region since 2005 given greater weighting in the drawing up of the four options? The future network model proposed in the consultation document is again described as the 'gold standard' for the future service delivery model, yet three of the four options put forward would see the fragmentation of this unique and exemplary cardiac network.
- (4) Why doesn't the Leeds unit feature in more of the four options put forward given that all surgical centres are theoretically capable of delivering the nationally commissioned Extra Corporeal Membrane Oxygenation (ECMO) service?
- (5) Why isn't travel and access to the Leeds unit given a higher weighting given the excellent transport links to the city by motorway and road network (including access to the M1, M62 and A1(M)), the rail network (including direct access to the high speed East Coast mainline and the Transpennine rail route) and access by air via the Leeds-Bradford airport? Almost 14 million people are within a two hour travelling distance of the Leeds unit.
- (6) We are keen to understand in more detail the relative strengths and weaknesses of each surgical centre. We therefore request the detailed breakdown of the assessment scores determined by the Independent Assessment Panel, Chaired by Sir Ian Kennedy (referred to on page 82 of the consultation documents).
- (7) How has the potential impact of the proposed reconfiguration of surgical centres on families, including the additional stress, costs and travelling times, been taken into account within the review process to date?
- (8) Why have congenital cardiac services for adults been excluded from the review when, in some cases, the same surgeons undertake the surgical procedures?
- (9) We have heard that more children with congenital cardiac conditions are surviving into adulthood, which suggests an overall increase in surgical procedures (for children and adults), which is likely to be beyond the 3600 surgical procedures quoted in the consultation document:
 - (a) As such, what would be the overall impact of combining the number of adult congenital heart surgery procedures with those performed on children, i.e. how many procedures are currently undertaken by the same surgeons and what are the future projections?

- (b) How would this impact on the overall number of designated surgical centres needed to ensure a safe and sustainable service for the future?
- (c) What would be the affect on the current and projected level of procedures for each of the existing designated centres?
- (10) How has the impact on other interdependent hospital services and their potential future sustainability been taken into account within the review process to date?
- (11) The Government's Code of Practice on Consultation (published July 2008) sets out seven consultation criteria: Please outline how the recent public consultation process meets each criterion.
- (12) What specific arrangements have been put in place to consult with families in Northern Ireland?
- (13) How have ambulance services (relevant to the affected patient populations) been engaged with in the review process – particularly in relation to drawing up the projected patient flows and associated travel times?
- (14) How has the impact on training future surgeons, cardiologists and other medical/ nursing staff been factored into the review?
- (15) What are the training records of each of the current surgical centres and how have these been taken into account in drawing up the proposals?
- (16) Why have services provided in Scotland been excluded from the scope of the review, when the availability and access to such services may have a specific impact for children and families across the North of England and potentially Northern Ireland?
- (17) Please confirm whether or not a similar review around the provision of congenital heart services for children, is currently being undertaken in Scotland. Please also confirm any associated timescales and outline how the outcomes from each review will inform service delivery for the future.