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Your ref	
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Dear Sir Neil,

Re: Review of Children's Congenital Cardiac Services in England

I am writing in response to your media release published on the Safe and Sustainable website on 11 September 2012.

Firstly, I find it hard to contain my frustration and annoyance at attempts to trivialise the legitimate concerns raised by the Children's Heart Surgery Fund on behalf of children and families across Yorkshire and the Humber. I find the overall tone of the statement arrogant and potentially very misleading to those without detailed knowledge of the review and decision-making processes.

I feel your statement is disrespectful to the children and families who are relying on the Children's Heart Surgery Fund to stand up for their rights and to point out issues that the JCPCT failed to consider when these decisions were taken. I find your attempts objectionable to belittle and undermine a local charity through a media release, when the Charity is trying to support children and families across Yorkshire and the Humber.

You state that its 'hugely disappointing' that the Children's Heart Surgery Fund has instructed lawyers to launch a judicial review – although it is worth noting that no formal application has yet been lodged.

I would not disagree with the sentiment that the situation is disappointing – and one that we would all rather avoid – however I think it is regrettable that your statement only provides a partial picture and fails to provide sufficient context and recognition of the JCPCT's role and significant contribution that brings us to the current position.

In particular, I would highlight the following points:

- During the course of the review and decision-making process, the Kennedy scores have become a proxy for 'quality' and have repeatedly been quoted and relied upon in this context. Indeed, when the JCPCT took its decision on 4 July 2012 to, as you put

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it, 'ensure high quality sustainable services for the future', it used the Kennedy scores as the sole assessment of the quality of services at existing surgical centres. Therefore, given the continued significance placed on the Kennedy scores, I feel it is both disingenuous and misleading to describe the thrust of the Charity's arguments around the availability of the detailed scores as focusing on 'a narrow technical aspect' of the review and 'a very limited element of the overall process'. You have stated on several occasions that quality of service has been identified by parents and other stakeholders as the single most important factor when considering future service provision. Therefore, it seems wholly appropriate that the processes and methodology for assessing and determining 'quality' should be considered in detail.

- I also believe it is disingenuous and misleading to state that the decision-makers did not have access to the Kennedy scores, without explaining the associated context – i.e. that the decision-makers denied themselves access to such information, in an attempt to reduce the risk of legal challenge. Perhaps if the JCPCT had considered the Kennedy scores and the associated methodology more thoroughly throughout the review, this regrettable situation could have been avoided.
- To compound what I believe to have been a significant error of judgement, the JCPCT subsequently denied all stakeholders an opportunity to challenge the assessment scores during the consultation process. Despite repeated requests for details of the Kennedy scores, the JCPCT adopted a particularly entrenched position regarding access to such information – solely based on its decision not to consider the detailed scoring. I believe this resulted in a flawed consultation process and I stand by the comments made by the Joint HOSC (Yorkshire and Humber) in its initial report and formal consultation response, i.e. that such information should have been made available for public scrutiny prior to the decision on the future configuration of surgical centres.
- It is interesting that the Kennedy assessment panel did not seek to compare the services provided by surgical centres against each other. It is also interesting that the guidance included on the self assessment template clearly states that, 'The information supplied in the assessment stage of the process will not have any direct bearing on the scoring of the configuration evaluation process'. This quite clearly has not been the case, as the consultation document states that centre were '...considered in order of their assessment panel ranking.' Nonetheless, it is also interesting that, on closer examination of the Kennedy scores and restricting the comparison of current services solely against the new national standards (which could be argued would have been a fairer assessment of quality), it is clear that Leeds actually received a higher assessment score than Newcastle. However, this was never considered by the JCPCT and subsequently is not reflected in your media release.
- Given the continued importance and reliance placed on the Kennedy scores by the JCPCT, I believe it was that body's duty to assure itself regarding the validity and robustness of these scores ahead of its final decision – something that the JCPCT quite simply failed to do, despite the best efforts of some stakeholders to highlight legitimate concerns during the period of public consultation.
- Yet again, when referring to the volume of consultation response, your media release has conveniently failed to recognise the 600,000 signature petition which opposed the closure of the Leeds surgical centre. Trivialising or dismissing the

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Yorkshire and Humber petition has been a key feature of the JCPCT's approach around consultation responses. However, I should remind you that it is these individuals that the Children's Heart Surgery Fund will be seeking to represent in any forthcoming legal challenge.

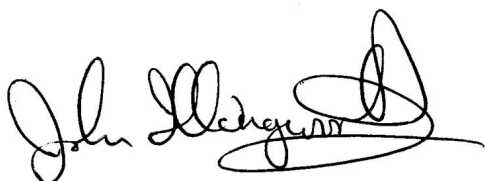
- I note the quote from the President of the Society for Cardiothoracic Surgery in Great Britain and Ireland, which states that the JCPCT's decision in July 2012 '...will improve clinical outcomes and ensure the service is sustainable.' However, as the JCPCT did not consider clinical outcomes as a measure of quality within its decision-making process, I find it hard to understand how such presumed improvements could ever be measured with any real objectivity.

Furthermore, I perhaps need not remind you that, to help ensure open and transparent decision-making, since July I have tried assiduously to discover more information about the JCPCT decision-making processes and the various groups established to support these processes. Sadly, I believe this process is still incomplete – mainly, or so it appears, due to some considerable reluctance of the JCPCT and its Secretariat to release some fairly basic and factual information that has clearly influenced the decision-making process. I am waiting to read some agendas, reports or minutes from as far back as 2008, and I am similarly waiting for full disclosure of meetings that took place earlier this year. None of this information appears to be even remotely confidential, but I fear the concept of open and transparent decision-making is yet to penetrate the senior NHS bureaucracy.

In summary, I believe that as a result of the JCPCT's unwise decision not to consider or release the Kennedy scores until after its final decision, the current threat of legal action is a product of the JCPCT's unwillingness to respond to legitimate concerns raised by a number of stakeholders during the public consultation. The consequences of the JCPCT's decisions, both in terms of considering the Kennedy scores and the configuration of surgical centres, has left some stakeholders with very limited options to ensure their concerns are objectively considered.

I am confident that any decision by the Children's Heart Surgery Fund to seek a Judicial Review of the decision will not be taken lightly and will be taken with the best interests of the children and families it represent, in mind.

Yours sincerely



Councillor John Illingworth
Chair, Joint Health Overview and Scrutiny Committee (HOSC), Yorkshire and the Humber

cc All Members of the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber)
All Members of Parliament (Yorkshire and the Humber)
All Yorkshire and Humber Local Authority Leaders
Cllr. Lisa Mulherin, Leeds City Council
The Editor, Yorkshire Evening Post
Jamie Coulson, British Broadcasting Corporation
Sharon Cheng, Charity Director, Children's Heart Surgery Fund