# Agenda Item 10



# <u>HEALTH OVERVIEW AND SCRUTINY COMMITTEE</u> <u>– 11 SEPTEMBER 2013</u>

# **REPORT OF THE CHIEF EXECUTIVE**

# **NEW REVIEW OF CONGENITAL HEART DISEASE SERVICES**

#### **Purpose**

1. The purpose of this report is to update the Committee on the current position with regard to the national review of children's congenital cardiac services and to advise members of the role that the Health Overview and Scrutiny Committee can play in the new process.

#### **Background**

- 2. A national review of Children's Congenital Heart Services was undertaken by the Joint Committee of Primary Care Trusts (JCPCTs) following a recommendation made by the Royal College of Surgeons in 2007 that there should be fewer but larger children's heart surgery centres. Accordingly, the number of national centres was to be reduced from eleven to seven.
- 3. The outcome of the National Review, announced on 4 July 2012, meant that Glenfield Hospital would not provide Children's Heart Surgery Services in the future. The outcome also meant that the ECMO Unit (total life support) was at risk of closure.
- 4. In response to this decision, the Leicester, Leicestershire and Rutland Joint Health Scrutiny Committee, on 4 September 2012, made a formal referral to the Secretary of State for Health. The referral asked him to review the decision to move Children's Congenital Heart Surgical Services and the ECMO Unit from Glenfield Hospital to Birmingham Children's Hospital on the grounds that the decision was not in the interest of the NHS locally.
- Subsequently, the Secretary of State for Health asked the Independent Reconfiguration Panel (IRP) to conduct a full review of the decision and report back to him with its findings, which were submitted on 30 April 2013. These finding were taken in to consideration by the Secretary of State in making a final decision.

- 6. In the House of Commons on Wednesday 12 June the Secretary of State announced that the Safe and Sustainable Review was to be suspended with immediate effect. The report from the IRP concluded that the outcome of the Review was based on a flawed analysis and left too many questions unanswered regarding sustainability. This was seen as a clear criticism of the Review and the recommendation of the IRP, that proposals could not go ahead in their current form, was accepted.
- 7. The Secretary of State in his statement to the House of Commons stated that the decision should not be seen as a mandate for the status quo or going back over ground already covered during the last five years. He went on to state that there was an overwhelming consensus that the current model of provision could not continue. He therefore asked NHS England to report back to him by the end of July 2013 on how it intends to proceed with the Review. Children's Congenital Heart Services will now be considered alongside a review of Adult Congenital Heart Services.
- 8. The IRP also recommended that any decision about the future of ECMO (total life support) services should be contingent on the final proposals for congenital heart services. The Secretary of State has confirmed that this issue will be fully taken into account by NHS England.

## **Current National Position**

- A report on the new review of congenital heart services was considered by the NHS England Board on 18<sup>th</sup> July. This report, attached at Appendix 1, sets out an indicative timetable for the review.
- 10. Attached at Appendix 2 is a letter from Professor Sir Malcolm Grant, Chair of NHS England's Board, to the Secretary of State for Health. The letter states that initial discussions are continuing and that a proposition will be developed for debate in the autumn. A committee of the Board has been established to give the topic the focus it needs.
- 11. NHS England publishes regular updates on the new review in a blog on its website. The latest blog, dated 23<sup>rd</sup> August, states that NHS England is developing a stakeholder engagement plan. Meetings have already been held with patient groups, including national and local charities and national and local clinicians.
- 12. NHS England is taking advice on how best to engage with local government. A balance will have to be struck between effective local engagement and considering the national dimension and the needs of all patients and services in England.

## **Local Position**

- 13. The Local Area Team of NHS England is working with University Hospitals of Leicester (UHL) to ensure that the extended period of uncertainty does not have an adverse impact on performance within the children's Cardiac Unit at Glenfield Hospital.
- 14. UHL organised a Stakeholder Briefing on 18<sup>th</sup> July which Anne Mitchell, Senior Policy and Research Officer for Health Issues, attended. At the briefing she was advised that UHL had met with NHS England. Overall feedback from the meetings, regarding the tone, contents and openness of these meetings, has been positive.
- 15. It was reported to the UHL Trust Board on 29<sup>th</sup> August that a letter to Bill McCarthy and Sir Bruce Keogh, directors at NHS England, was sent from UHL following its first meeting with NHS England on 21<sup>st</sup> June 2013. In this letter, UHL suggested that for the future the review should:-
  - Look at the lifetime care of patients, not just children and not just surgery;
  - Have no predetermination in terms of the number of centres;
  - Involve practicing clinicians and local stakeholders in describing what the IRP called a 'standards driven process' from day one;
  - Recognise that mortality in the two decades since Bristol has decreased significantly.
- 16. Other stakeholders raised similar points and it is encouraging that they have been taken on board and now form a fundamental pillar of the process. With regard to the number of centres, NHS England has advised that there is no number and it is expected that any future decisions will be driven by need and the adoption of agreed clinical standards.

#### **Implications for the Health Overview and Scrutiny Committee**

- 17. Officers will continue to monitor national developments and liaise with UHL and the Local Area Team of NHS England regarding the local position. NHS England intends to have a proposition for debate by the Autumn and the Health Overview and Scrutiny Committee will have a chance to make a formal response at that stage.
- 18. Members are asked to consider if there are any further actions that they wish the Committee to take at this stage.

#### **Background Papers**

Report to the Leicestershire, Leicester and Rutland Health Overview and Scrutiny Committee on 21 March 2011, Review of Children's Congenital Cardiac Services in England Report to the Adults, Communities and Health Overview Scrutiny Committee on 26<sup>th</sup> September 2011, Safe and Sustainable Review of Children's Congenital Heart Services in England – Report of the Public Consultation Reports to the Leicestershire, Leicester and Rutland Health Overview and Scrutiny Committee on 4 September 2012 – Letter to the Secretary of State and Paediatric Congenital Coronary Care and ECMO Units Glenfield Hospital Report to the UHL Trust Board, 29 August 2013 – Update on the new Congenital Heart Disease Review NHS England blog http://www.england.nhs.uk/category/publications/blogs/john-holden/

## **Circulation under the Local Issues Alert Procedure**

None.

## **Officers to Contact**

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## List of Appendices

Appendix A – NHS England Board Paper, 18<sup>th</sup> July 2013 Appendix B – Letter from NHS England to Secretary of State for Health, 31<sup>st</sup> July 2013