



# Services for people born with heart problems



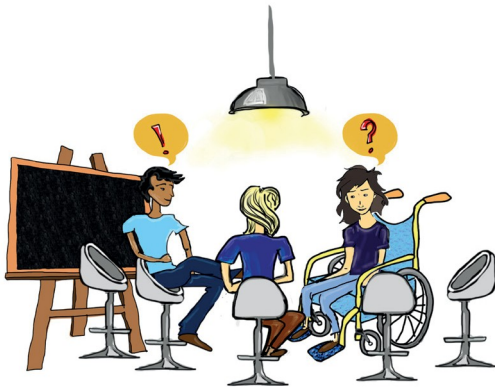
Please tell us what you think

This is an EasyRead version of:

**Proposals for CHD  
Services for Children  
and Adults**



# What is this paper about?



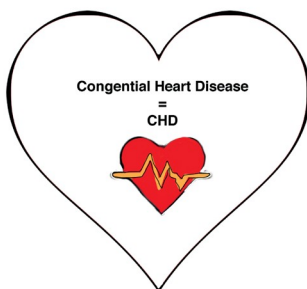
We want to **include** people in everything we do.



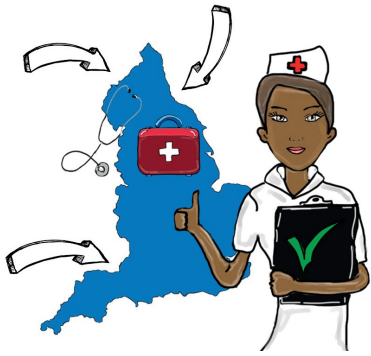
We try not to use difficult words, but when we do, we put them in **bold**.



This **EasyRead** paper is asking you what you think about proposals for services for people born with heart problems.



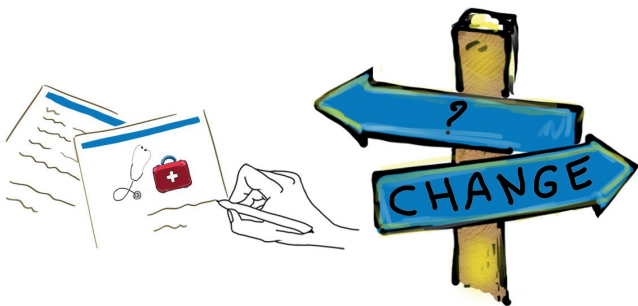
This is called **Congenital Heart Disease** or CHD for short.



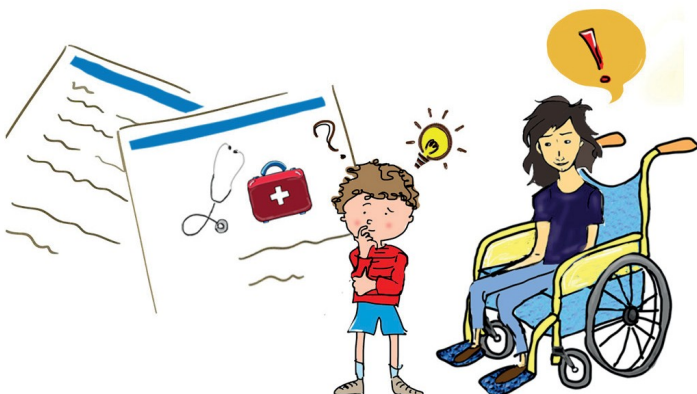
We want services to be **better** in all the areas of England.



We have written **proposals** on how services could be better.



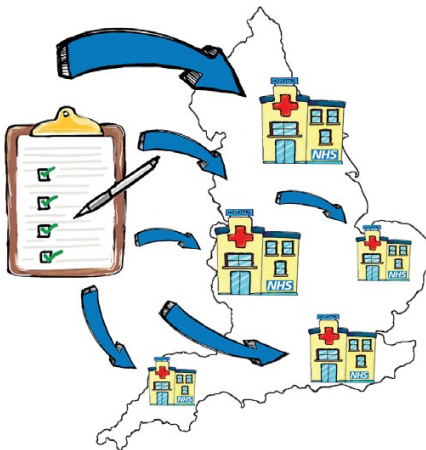
A **Proposal** is a suggestion about how something could change.



We want to know what people think about the **proposals**.

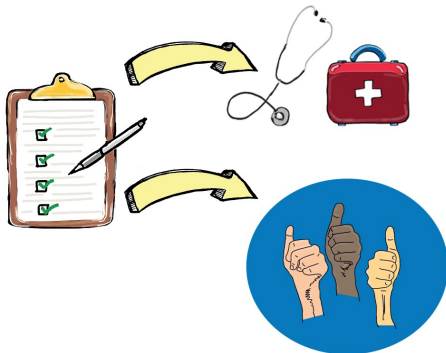


We want the services for people born with heart problems to be the **same** across England.



We have made a list of **Standards** that hospitals across England would follow.

**Standards** are rules about how a good service should be.



We want to make sure the special CHD hospitals and services follow the same **Standards**.



The Standards cover every part of your life:

From when a problem is found out before you are born



Growing up as a child  
Moving to adult services

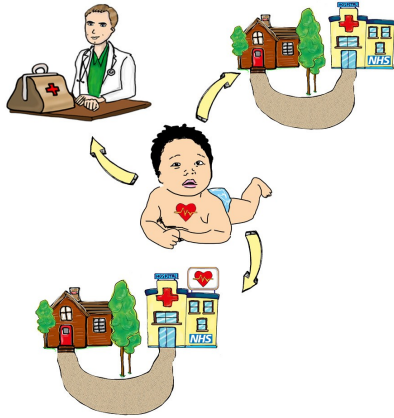


Having your own family



Care at the end of your life.

# What are the proposals?



People born with heart problems mostly go to services at:

- Their GP
- Their local hospital
- Their local special CHD hospital.

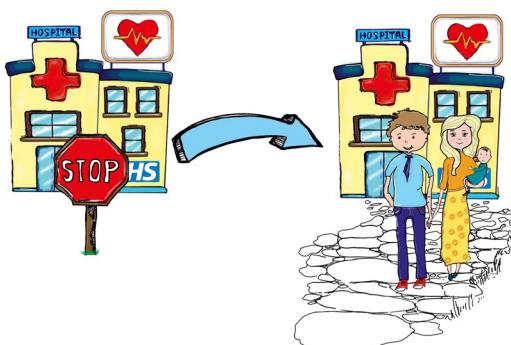
This will mostly stay the same.



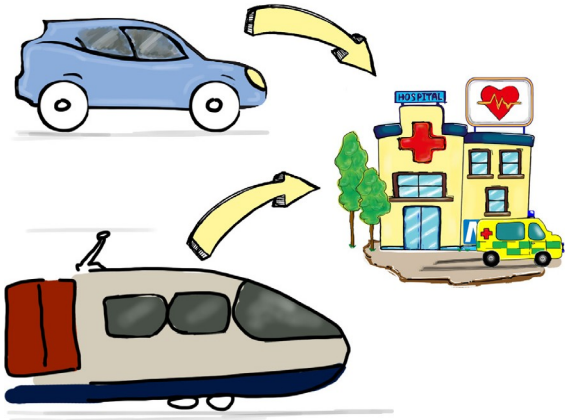
Hospitals that are following the **Standards** will do heart operations and other special procedures.



Some hospitals that do not follow the **Standards** will not do heart operations or other special procedures.



If one hospital stops doing heart operations, then a person needing a heart operation would go to another special CHD hospital instead.

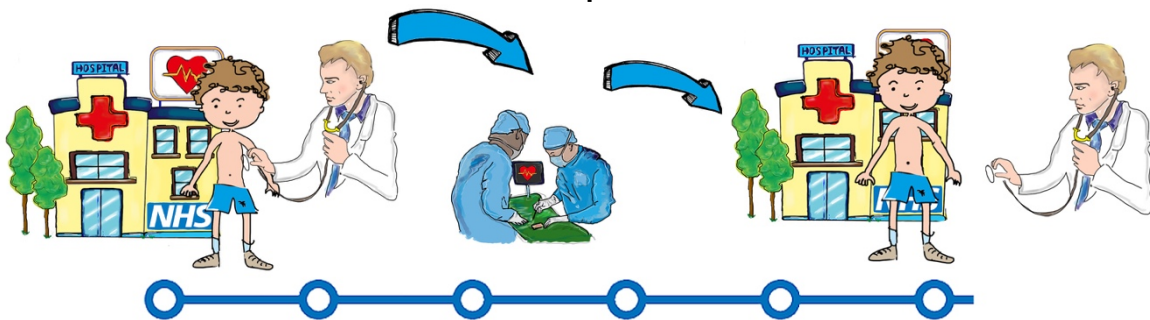


This will mean that some people whose special CHD hospital has changed will need to **travel** a bigger distance for:



Heart operations and other special procedures

One appointment **before** an operation



One appointment **after** an operation.

Other things will stay the same, things like:



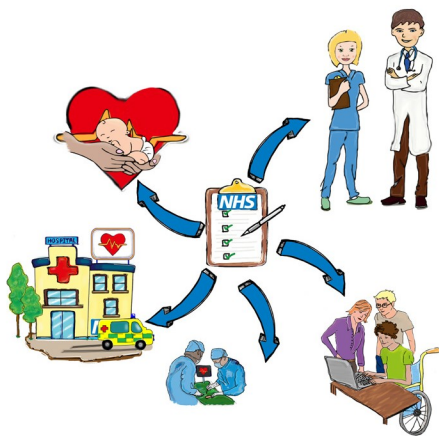
Checking your health  
Your normal care.

# Why are there changes?

We want to make sure:

People with CHD live a longer better life

We have the same good service across England.



To make these Standards we worked with:



People born with CHD



Expert CHD doctors and nurses





Special CHD hospitals



Organisations speaking up for people with CHD



Staff and others



The standards were agreed.

# What will happen at the hospitals?



Special CHD hospitals need to follow the standards.



The special CHD hospitals will need to change the way they work.



Special CHD hospitals will make sure they have enough staff when:



Staff are sick  
Staff are on holidays  
In emergencies  
And for learning.



Special CHD doctors will do more operations.



We believe everyone who needs care for CHD should be able to have the best care, where they are looked after.

# How did we think about what should happen?

We asked hospitals to improve two important things:



The number of special CHD doctors at each hospital

The number of operations each of the special CHD doctors did.

Special CHD doctors need to work in teams of 3 or more.

By 2021 special CHD doctors need to work in teams of 4 or more.



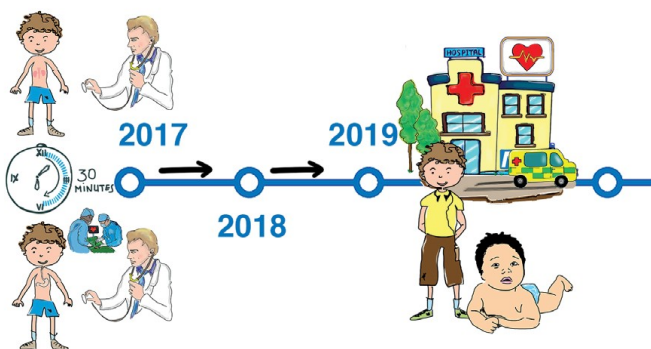
Special CHD hospitals will make sure that by 2019 other important services that you might need like:

Stomach doctors

Kidney doctors

Other special doctors

Are in the same hospitals as CHD services for children.





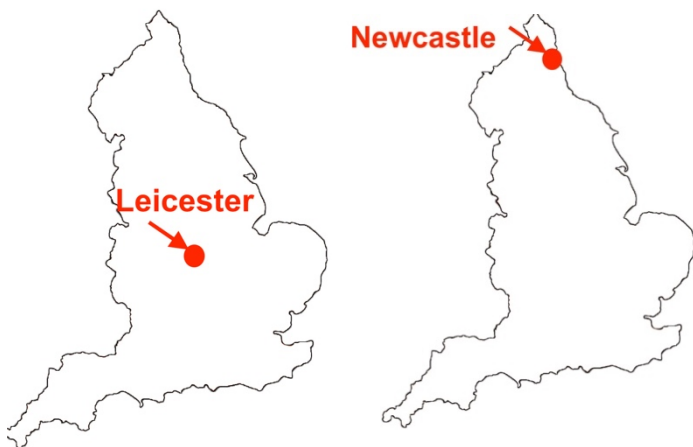
A group of people talked about each hospital. The group of people included:



People who support patients  
Hospital staff  
People who plan and check how hospitals are doing.



They saw all the hospitals had work to do to get their hospitals ready to provide the best care.

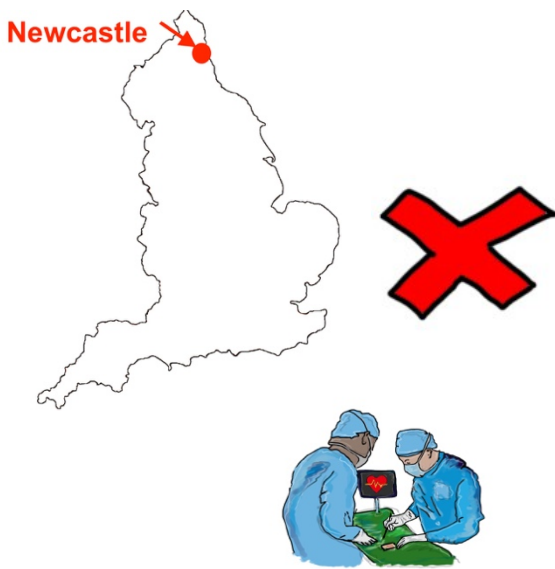


4 hospitals were not going to be ready to provide best care quickly enough.



The Hospitals were:

Leicester  
Newcastle  
Royal Brompton  
Manchester.



Newcastle Hospital was seen to not be ready.

Newcastle Hospital is one of 2 hospitals in England that do **heart transplants**.

The same special CHD doctors do transplants and other CHD operations.

If the CHD operations were stopped it would be bad for the special transplant services.

We proposed that the CHD services should stay at Newcastle Hospitals.



Things might change in the future and we will keep watching what Newcastle does.

They will keep trying to meet the Standards.



This will mean that:

Operations for adults will **stop** at Central Manchester Hospital.

Patients will probably go to Liverpool Heart and Chest Hospital.

Other treatment will probably still happen within Manchester.

This will mean that:

Operations for children and adults would **stop** at Royal Brompton and Harefield.

Patients would go to other hospitals in London.

Other treatment for adults could happen at the Royal Brompton Hospital.

This will mean that:

Operations for adults and children would stop at University Hospitals of Leicester.

Patients would go to hospitals in Birmingham or Leeds instead.

Other treatment for children and adults could happen at University Hospitals of Leicester.



# What are the good things about the proposal?



We want all hospitals to provide the same good service across England.



We want all hospitals to meet the **Standards**.



We want patients at special CHD hospitals to feel happier.



# What are the things that might be a worry if this change happened?



We talked to:  
Patients  
Families  
Hospital staff.

People were worried about the affect on hospitals.  
We listened to these worries.  
We wanted to talk to everyone so they understood what we wanted to do.



We want to hear more about how the changes might affect you or your family.



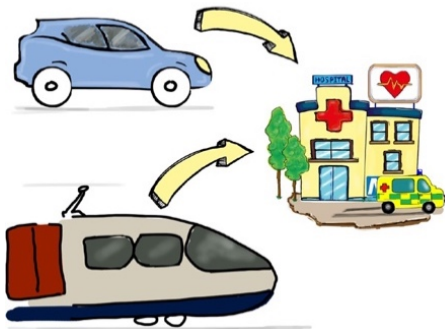
The changes will not take place until the beginning of 2018.



We know that patients are worried about where they will need to go for their CHD care in the future.



Most people will still have their care with their GP or local hospital or the special CHD hospital near their home.



The time it takes to get to hospitals for operations or special procedures might go up a little bit.

But they will be following the Standards.



Most of the time, operations for CHD are planned, so there are not many emergency operations.

# Questions



If the changes affect you, tell us what you think.

What do you think of the CHD hospitals proposal?

Do you **agree** or **disagree**?



Tell us why you think this way.



What do you think are the good things about the proposal?



Tell us what you think.



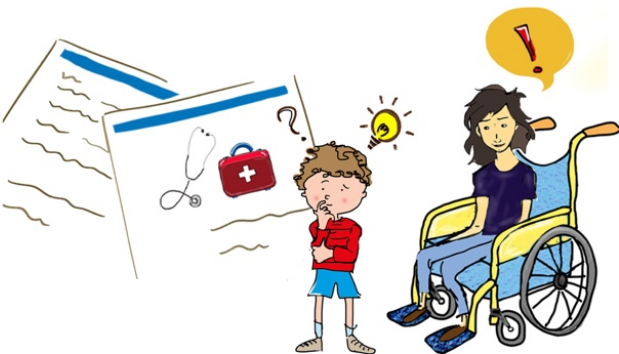
What things worry you about the proposal?

Tell us what you think.



Do you have any thoughts on the proposal?

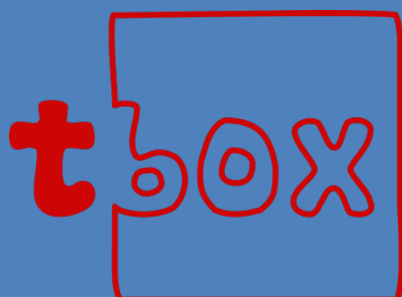
Please let us know your thoughts.



Please let us know your feelings:

Email:  
[england.congenitalheart@nhs.net](mailto:england.congenitalheart@nhs.net)

webpage:  
<https://www.engage.england.nhs.uk>



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<https://www.therapy-box.co.uk>  
+44 (0)208 7493474



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For more information or a Printed version:  
[england.congenitalheart@nhs.net](mailto:england.congenitalheart@nhs.net)