

# EXTERNAL SERVICES SCRUTINY COMMITTEE - PROPOSALS TO IMPLEMENT STANDARDS FOR CONGENITAL HEART DISEASE (CHD) SERVICES FOR CHILDREN AND ADULTS IN ENGLAND

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## Appendix A: NHS England Consultation Document

### REASON FOR ITEM

To consider and provide comment on the consultation document.

### OPTIONS OPEN TO THE COMMITTEE

Members are able to question the witnesses and seek clarification on the proposals being considered.

### Information

1. The NHS England (NHSE) consultation document, 'Proposals to implement standards for CHD services for children & adults in England' (Appendix A), was first published on 9 February 2017 and the deadline for the submission of responses was 17 July 2017.
2. Members of the Committee discussed the proposals at the External Services Scrutiny Committee meeting held on 11 July 2017 where they were able to question representatives from the Royal Brompton and Harefield NHS Foundation Trust. At that meeting, concern was expressed that there appeared to be no justifiable reason for NHSE's proposal to stop commissioning congenital heart disease (CHD) services from Royal Brompton and Harefield NHS Foundation Trust (RBH). As such, Members requested that a representative from NHSE be invited to attend a meeting with the External Services Scrutiny Committee to establish the reasoning behind the proposals and to enable them to pose questions about the proposals.
3. The closure of RBH CHD services would impact on Hillingdon Hospital patients, especially those using the maternity services, and Members may wish to question representatives from NHSE about any action that will be taken to mitigate this impact if the proposals are implemented. For example, the foetal echo service at Hillingdon Hospital would be withdrawn and the training provided for Hillingdon Hospital staff by RBH would also be damaged, resulting in a loss of expertise in respiratory issues. Furthermore, Hillingdon would lose the transitional care services for cardiac patients.
4. The following concerns have also been raised:
  - a. If the RBH Paediatric Intensive Care Unit (PICU) closes, will there be sufficient capital investment available to bolster the service in other hospitals to cope with the resultant increase in demand?
  - b. Is the exercise was more about the cost of care rather than the quality of care?
  - c. If the proposals go ahead, it is unlikely that RBH staff will just move to a different Trust as many of these staff have been recruited from around the world. As such,

is it likely that they will return to their country of origin and the UK will lose this expertise completely?

- d. Although RBH does not have an in-house gastroenterologist, this service is contracted with the Chelsea and Westminster Hospital NHS Foundation Trust which is located next to the Royal Brompton Hospital. To date, Members have been advised that this arrangement has worked seamlessly. If the response time is within certain parameters, to what extent would this arrangement differ from having an in-house specialist?
  - e. The guiding principle of NHSE's work is that 'patients come first'. To this end, the transition from children's service to adult services has been included in the standards. Given that RBH provides services to children and adults, to what extent would the proposal to withdraw children's CHD services from RBH support this standard?
5. This meeting will provide Members with the opportunity to question witnesses on the proposals, to seek clarity and to raise any concerns.