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Date: 4th July 2017

Rt Hon Jeremy Hunt MP
Secretary of State for Health
Department of Health
Richmond House
79 Whitehall
London
SW1A 2NS

Dear Secretary of State,

Re: NHS England's Proposals for Congenital Heart Disease (CHD) Services

We are writing on behalf of the Leicestershire, Leicester & Rutland Joint Health Scrutiny Committee, which combines Members from Leicester City Council, Leicestershire County Council and Rutland County Council's Health Scrutiny Committees, to express our deep concerns regarding the consultation process for the review of congenital heart services being undertaken by NHS England.

Our concerns relating to a lack of transparency and openness have been shared by the members of the public who have made representations at our Committee meetings. There are Freedom of Information requests which have not been responded to in time and questions asked at previous public meetings which have not been answered. We have been advised by NHS England that a 'Frequently Asked Questions' document has been published on its website but this has not been easy to find and the people putting questions forward were not aware of it. NHS England has acknowledged failures in responding to Freedom of Information requests. We are clear that this falls below the standard of openness and transparency that we would expect in such an important and high-profile consultation, the outcomes of which could have a significant impact on the lives of a large number of vulnerable patients and their families.

NHS England sent representatives to our Committee meetings, but the answers given at those meetings have often not been satisfactory. We still do not understand why the East Midlands Congenital Heart Centre cannot be supported by NHS England in terms of

directing patient flow, we have received no clear justification for the inequity in treatment between the East Midlands Congenital Heart Centre and other centres, in particular Newcastle.

We believe that it is essential that the time-frame for change is clearly communicated as part of the consultation process and consider this to be relevant information to support people in making a response. However, even at this late stage in the consultation process, NHS England is unable to tell us when the final decision will be made. We feel that this represents a lack of planning on behalf of NHS England and raises further concerns about the long period of uncertainty which the East Midlands Congenital Heart Centre has faced. This cannot be considered to be acceptable practice.

Notwithstanding the lack of information and clarity outlined above, we have endeavoured to respond to the consultation and have tried to engage with the process as best we can. We had a number of meetings and considered numerous documentations of NHS England's review of CHD Services, as there are direct impacts to residents in our constituencies; given the proposals include decommissioning of Level 1 CHD Services at University Hospitals Leicester NHS Trust's Glenfield Hospital.

You will recall we made an official referral to you during the original safe and sustainable review and you subsequently set up the Independent Reconfiguration Panel (IRP) which made a number of recommendations about the way the review was being conducted and as such NHS England revised their plans. Unfortunately, we do not believe their revised consultation still fulfils obligations set out in the IRP recommendations and we have a number of concerns about the proposals.

We have submitted our official response to the consultation but would like to advise that if NHS England does not reconsider their proposals to decommission Level 1 CHD Services from Glenfield Hospital, we will in accordance with Regulation 30 of the Local Authority (Public Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 seek to refer the proposal to you.

The East Midlands Congenital Heart Centre at Glenfield Hospital is one of the highest performing centres in the country for CHD Services in terms of quality of care and was recently rated outstanding in a Care Quality Commission inspection. NHS England have publicly stated at one of our meetings that they are not specifically looking to close any centres but are recommissioning services that are good, this therefore clearly contradicts why a centre rated as outstanding is being earmarked for closure. This also is defied by the concentration of NHS England on one specific standard (B10) that requires each surgeon completing 125 surgeries per year, with 4 surgeons per NHS Trust, as the only real reason given for proposals to decommission services from Glenfield hospital as they are not currently achieving that standard.

University Hospitals Leicester NHS Trust is not the only Trust that performs Level 1 services that isn't meeting that standard. However, other trusts in this position are being given extra time as part of the proposals to meet the standard. Newcastle in particular is being granted an indefinite amount of time to reach the target which shows a significant inequality in approach.

Our Committee has grave concerns regarding the lack of scientific research and evidence base supporting the B10 (L1) standard of 125 operations which NHS England states is the

amount needed to provide a resilient service, instead it has been explained to us by NHS England that the standard is based on the opinion of a few professionals. We are not clear who these professionals are and whether they have any conflicts of interest which should prevent them from being involved in decision making in this area. Given the lack of robust evidence, we are not clear why this standard is being given such high weighting. It could be argued that it is an activity target rather than a standard, particularly as a centre which does not have quite the volume of activity required is delivering excellent care and outcomes. NHS England again demonstrates an inconsistent approach as the application of this standard is being implemented with immediate effect looking retrospectively, rather than three years from when the standard was introduced in July 2015.

University Hospitals Leicester NHS Trust has put forward a growth plan to NHS England in May which has clear and robust plans to meet the target standard specified in standard B10 (L1) and demonstrated that they have already begun to put this plan into place. We understand that NHS England has been considering the growth plan since it was submitted approximately two months ago but that no formal response has been made. We do not understand the reasons for this, given that NHS England has accepted growth from Newcastle and Southampton who do not appear to be making any change to their catchment areas. Glenfield Hospital is intending to change its catchment area and has already begun to make the necessary links. In our view, this gives additional strength to the growth plan for the East Midlands Congenital Heart Centre.

There is also concern that decommissioning services in Leicester would result in an entire region not having CHD surgical services; this would be the only region not to have them and would leave a large geographical gap across the country. This is again shows the inequality of NHS England's proposals. There is a lack of understanding of the effect on patients and their families and the increased tension and financial impact of having to travel, likely to have the biggest impact on the most vulnerable in our communities.

In our response we raise concerns about how the public has been engaged with during the consultation. Public meetings have had restrictions on the number of people that could attend and scrutiny committees have been incorrectly identified as public meetings. Whilst they are held in public, they are not an open forum for questions from members of the public. Many patients and parents have approached us feeling that NHS England has set out to defend its proposals as through there is a pre-determined decision, rather than listen to some really important concerns and respond, with an open mind, to questions that have been raised. It is people and patients that are affected most by this so it is disappointing that NHS England hasn't put them at the heart of the proposals and they feel ignored.

We have a number of other concerns which we have listed as part of our representation as part of the consultation exercise which we would urge you to consider, and have attached a copy for your information.

We hope that our concerns are given serious consideration and that you are made fully aware of the impact these proposals will have and the unjust way in which they are presented as part of the consultation. We would urge you to recognise the greater quality of life for people that access some of these services and the impact this will have on them if we have to consider decommissioning services. We also would urge the Government to drop this review and not to waste any further money on it as the quality of care provided by these services is exceptional. The time and money would be better spent to help the trusts

involved utilise resources and reconsider adjusting catchment areas to ensure all trusts meet the required capacity.

We have chosen to bring this to your attention at this stage so that you can halt this flawed consultation process and ensure that the interests of people across the country, especially in the East Midlands region are protected. We want to make clear that should NHS England not drop these proposals to decommission Level 1 CHD Services at the East Midlands Congenital Heart Centre in Glenfield Hospital we will formally refer this matter to you. This whole process has been unjust and lacks any substantial scientific evidence and clearly is not in the best interests of the very patients these services are here to protect and care for.

We look forward to hearing from you soon.

Yours Sincerely



Councillor Elly Cutkelvin
Chair, Leicestershire, Leicester & Rutland
Joint Health Scrutiny Committee



Councillor Lee Breckon
Vice Chair, Leicestershire, Leicester &
Rutland Joint Health Scrutiny Committee