

## Consultation and Service Configuration Update

### Summary

The Committee are requested to consider and note the update on the various consultations that are ongoing and will be of interest to Members.

### Detail

#### National Specialised Commissioning - Review of Paediatric Cardiac Surgery Services

1. Members have previously been advised of the review of children's heart surgery which is being undertaken by the National Specialised Commissioning Group.
2. The review is being undertaken due to the following concerns:
  - not all centres can provide safe 24/7 cover
  - surgical expertise is spread too thinly across centres
  - risk of occasional practice around some complex procedures
  - risk that smaller centres may lead to less favourable outcomes for patients
  - smaller centres will experience recruitment difficulties; robust succession planning will be difficult, increasing the risk of unplanned and sudden closures of some centres.
3. The nearest unit currently providing children's heart surgery is the Freeman Hospital in Newcastle.
4. It is understood that proposals for change will be published in the autumn and a period of public consultation will take place between October and January 2011. It is considered likely that the review will recommend a reduction in the number of providers. Should an overview and scrutiny consider that the proposals represent a substantial change, discussions would need to be held in order to set up the required joint committee.
5. Attached at **Appendix 1** is a document setting out the case for change, and a briefing note at **Appendix 2** sets out recent progress.

### Our Vision, Our Future

6. This programme is being led by the North East Strategic Health Authority. It is designed to implement the ten-year strategy (2008-2018) to improve the 'health system' in the north east. It is based on the knowledge that although north east NHS services are ranked amongst the best in the country, the

actual health of the population is rated amongst the worst areas. In addition it is considered that too much reliance is placed on the use of hospital facilities by the population, and that this takes up resources that could be used to prevent poor health in the first place. The SHA also aims to improve efficiency, patient experience, and to reduce variations in the quality of services provided.

7. The work is being led by nine Clinical Innovation Teams covering the following areas: Maternity and Newborn Care, Child Health, Staying Healthy, Planned Care, Long Term Conditions, Learning Disability, Acute Care, Mental Health, and End of Life Care.
8. Each CIT is making recommendations for improvement as their work develops, and some of these are being implemented as they arise. By the autumn the full list of improvement areas should be available. Some of these may require a re-configuration of services, but this will be considered in due course when further information is available.
9. Part of the work on the End of Life CIT involved a consultation last autumn on a proposed 'Charter for a Good Death'. An updated charter has been completed and this is attached at **Appendix 3**.

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