

TRUST BOARD 3 NOVEMBER 2016

# Update on the New Congenital Heart Review Process

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Trust Board paper F

## Executive Summary

### Context

This paper provides the Trust Board with an update on the Congenital Heart Disease (CHD) Review, the key actions for immediate attention, and associated risks.

### Questions

1. What has happened in the EMCHC campaign since the last Trust Board update
2. What is the planned over the next month?
3. What are the risks to the campaign?

### Conclusion

#### 4. Activity over the last month

- 4.1. Formal response to the letter from NHS England following their visit to Glenfield was submitted on the 13<sup>th</sup> October.
- 4.2. A Parliamentary debate was held on the 19<sup>th</sup> October to discuss the impact of decommissioning congenital heart surgery at Glenfield.
- 4.3. New website went live on the 19<sup>th</sup> October
- 4.4. We have received a positive reaction to our initial Network development discussions from a key Network Hospital.

#### 5. The two key requests for information from NHSE are;

- 5.1. Re submission of our self-assessment of compliance to the standards by the 7<sup>th</sup> November.
- 5.2. Completion of an impact assessment of the decommissioning of CHD surgery at UHL by the 7<sup>th</sup> November.

#### 6. Other campaign activity for the next month

- 6.1. There is a public demonstration planned for the 29<sup>th</sup> October in Leicester.
- 6.2. BBC Inside Out (East Midlands) programme are showing a short documentary on EMCHC on the 31<sup>st</sup> October 2016.
- 6.3. A Children's Hospital Network engagement strategy will be reviewed by the EMCHC Task Group and will be included as part of our formal plan to achieve the 500 case load required by the standards by 2021.

- 6.4. Attendance at specialist paediatric services network meetings to ensure the network is updated on the campaign and to rally network support.
- 6.5. Ward 30 official opening is on the 2<sup>nd</sup> December. The ward will be opened by Ms Liz Kendal MP and Ms Nicky Morgan MP.

## **7. Campaign risks**

- 7.1. The revised self-assessment submission is still subject to review by the assessing panel; the outcome of which will determine the next steps in the process.

For Reference

1. The following **objectives** were considered when preparing this report:

- Safe, high quality, patient centred healthcare [Yes]
- Effective, integrated emergency care [Yes]
- Consistently meeting national access standards [Yes]
- Integrated care in partnership with others [Yes]
- Enhanced delivery in research, innovation & ed' [Yes]
- A caring, professional, engaged workforce [Yes]
- Clinically sustainable services with excellent facilities [Yes]
- Financially sustainable NHS organisation [Yes]
- Enabled by excellent IM&T [Not applicable]

2. This matter relates to the following **governance** initiatives:

- a. Organisational Risk Register [Yes]

**If YES please give details of risk ID, risk title and current / target risk ratings.**

Datix Risk ID	Operational Risk Title(s) – add new line for each operational risk	Current Rating	Target Rating	CMG
2940	There is a risk that paediatric cardiac surgery will cease to be commissioned in Leicester with consequences for intensive care and other specialist paediatric services	15	0	Women’s and Children

**If NO, why not? E.g. Current Risk Rating is LOW**

- b. Board Assurance Framework [Yes /No /Not applicable]

**If YES please give details of risk No., risk title and current / target risk ratings.**

Principal Risk	Principal Risk Title	Current Rating	Target Rating
No.	There is a risk ...		

- 3. Related **Patient and Public Involvement** actions taken, or to be taken
- 4. Results of any **Equality Impact Assessment**, relating to this matter:
- 5. Scheduled date for the **next paper** on this topic: December
- 6. Executive Summaries should not exceed **1 page**. [My paper does not comply]
- 7. Papers should not exceed **7 pages**. [My paper does comply]

## Update Paper on New Congenital Heart Disease Review

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### 1. Context:

- 1.1. This paper provides the Trust Board with an update on the Congenital Heart Disease (CHD) Review, the key actions for immediate attention, and associated risks.

### 2. Questions:

- 2.1. What has happened in the EMCHC campaign since the last Trust Board update?
- 2.2. What is planned over the next month?
- 2.3. What are the risks to the campaign?

### 3. What has happened in the EMCHC campaign since the last Trust Board?

- 3.1. **13<sup>th</sup> October** – Our response to the letter received from NHSE on the 27<sup>th</sup> September was sent to Will Huxter
- 3.2. **14<sup>th</sup> October** - Both the original letter and our response were shared in the weekly CEO briefing.
- 3.3. **14<sup>th</sup> October** - the Trust received a request (by letter) outlining the key areas of non-compliance identified in the first review of the Trust's self-assessment submission. We have now been requested to re submit our self-assessment by the **7<sup>th</sup> November**. This will be assessed by the same reviewing panel as previously, and the outcome will be published prior to the public consultation. Whilst we feel we have demonstrated our compliance to all the co-location standards, we need to present a strong plan to address the shortfall in caseload against the required 500 cases.
- 3.4. **19<sup>th</sup> October** – Liz Kendall MP led a parliamentary debate on the proposed decommissioning of congenital cardiac surgery at Glenfield. The debate received good media coverage and was attended by the majority of the MPs from the East Midlands and Phillip Dunne – Minister of State for Health. Ms Kendall has a formal meeting with Mr Dunne in November to follow on from the debate. You can [read the full transcript of the debate](#) or [watch the video of the debate](#) on the EMCHC website. The information provided to Liz was subsequently shared with all East Midlands MPs.
- 3.5. **19<sup>th</sup> October** – NHS England announce that the National reviews into children's specialised services have been accelerated. As such a review into PICU, ECMO, surgery and transport which would normally take two years to complete will be aligned to the timetable for the CHD public consultation, to ensure the outcome can inform the decision for congenital heart surgery. No information has yet been published as to the individuals who will be involved in the reviews and we will be seeking to ensure there is appropriate balance and participation.
- 3.6. **19<sup>th</sup> October** – the EMCHC website was re-launched with much improved architecture and imagery.

- 3.7. **21st October** – Health Service Journal magazine published an article relating to EMCHC and the number of patients being referred out of area.
- 3.8. **21<sup>st</sup> October** – NHSE sent details of their assumptions in respect to patient travel times should the decommissioning go ahead, and requested that the Trust complete a full impact assessment before the 7<sup>th</sup> November. This is a considerable amount of work and our ability to meet this request in time will be discussed by the EMCHC Task Group on Friday 28<sup>th</sup> October. If required an extension will be requested.
- 3.9. **25<sup>th</sup> October** – Dr Aidan Bolger met a Senior Obstetrician from a Network Hospital with regard to our Network engagement strategy. Initial feedback is very positive and Aidan Bolger will continue to develop this relationship and keep the Trust Board updated.
- 3.10. **29<sup>th</sup> October** – a demonstration against the closure of EMCHC will take place in Leicester organised by the charity groups and trade unions. Whilst this is not an UHL event, Aidan Bolger, Head of Service for EMCHC, will speak afterwards.
- 3.11. **31<sup>st</sup> October** – BBC Inside Out will air their short documentary on the EMCHC campaign; this was filmed during the initial few weeks of the campaign and will show the preparation for the NHSE visit on the 16<sup>th</sup> September.

#### **4. Activity planned over the next month;**

- 4.1. The advertisement in relation to the second Consultant Cardiac Surgeon substantive post is live until early November and interviews are planned in November. Depending on notice periods the appointed surgeon will be substantive within three months.
- 4.2. A Children's Hospital Network engagement plan is being finalised and will be reviewed by the EMCHC task group in the 29<sup>th</sup> October. This plan presents a wider network engagement strategy from the whole Children's Hospital that focuses on ensuring the population of East Midlands have access to specialised services, and includes the relationships with referrers for congenital cardiac disease. This will strengthen our response to how we will achieve requirement 2.1 – standard B10 (L1) and deliver the 500 caseload by 2021.
- 4.3. Network meetings for specialised services will be attended and updates on the campaign will be provided. It is essential we keep our wider stakeholders up to date on progress and rally support.
- 4.4. We need to submit our revised self-assessment of our ability to meet the key time sensitive standards by November 7<sup>th</sup>. This will require a plan that includes the recruitment of a fourth cardiac surgeon to meet the anticipated growth of cases by 2021.
- 4.5. We have requested clarification on the interpretation of the gastroenterology and nephrology standards ahead of the submission, to ensure our submission is aligned.
- 4.6. The work needed to complete the impact assessment which was received on the 19<sup>th</sup> October and is due for submission on the 7<sup>th</sup> November This is being reviewed and an assessment of our ability to meet the submission deadline is being reviewed by the task group on Friday 28<sup>th</sup> October. Any need to request an extension this will be agreed at that meeting.
- 4.7. The formal opening of the new extension to Ward 30 at Glenfield Hospital is planned for the 2<sup>nd</sup> December. It will be opened by Ms Liz Kendall MP and Ms Nicky Morgan MP.

**5. The key issues and risks associated with this;**

5.1. The revised self-assessment submission is still subject to review by the assessing panel, the outcome of which will determine the next steps in the process

**6. The Trust Board are asked to;**

6.1. Note the content of the paper

6.2. Provide comments and guidance of any areas deemed appropriate