A review of the reviews: where are we now and where next?

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17th September 2016
Dr Stephen Bolsin
Consultant Anaesthetist, Bristol, 1989-95
Bristol Public Inquiry: Surgical outcomes 1984-95

13% higher mortality
Timeline of Reviews

1998
- Bristol Inquiry
  - 198 recommendations
  - 2 surgeons
  - 40-50 open heart ops

2001
- Munro Report
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2012
- Dobson
- Milburn
- Smith

University Hospitals of Leicester NHS Trust

East Midlands Congenital Heart Centre
SAFE AND SUSTAINABLE

Review of Children’s Congenital Cardiac Services in England: July 2012

Decision Making Business Case
1. Predetermining the wrong result: an unjustified, illogical and inconsistent rescoring process

Consultation Document

Rescoring applied

Decision Making Business Case

“New” options introduced to DMBC

E, F, J and K all included in Consultation Document but rejected
Bigger is better...or is it?
Bigger is better...or is it?

Wasn’t supported by international data
An average Unit has a 1 in 40 chance of being in the 'Alert' area, and 1 in 1000 chance of 'Alarm' area.
Independent analysis (Brian Jarman)
## What is quality?

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<th>Leadership and Strategic Vision</th>
<th>Criteria</th>
<th>Sub-criteria</th>
<th>Brief description</th>
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<td>Organisation's main aims etc</td>
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<td>Opportunities for innovative working</td>
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<td>How the team learns, develops and grows</td>
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Or national data...
No logic to the network configuration
Faulty account of population growth

Age 0-4 percentage increase in population 2010-2025
It was predetermined

- BCH cede Hereford and Worcester to Bristol p146
- Evelina cede Redhill (Surrey) to Southampton p146
- GOSH cede Guildford to Southampton p145

No negotiations were had to see if any other configuration worked
It wasn’t inclusive enough

Paediatric surgery

Paediatric interventions
EP
Imaging
Non-cardiac surgery
All ACHD
Obstetric cardiology
ECMO
It was dishonest

BN (Brighton) – It is proposed that all populations of this postcode are allocated to the London network save for the West of this postcode representing Chichester.

HH (Hemel Hempsted) counter intuitive to expect patients to travel from Hemel Hempsted to Southampton, it is proposed to allocate most of the HH postcode to London, and the remainder (in the west) to the Southampton / Oxford network.
## DMBC

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<th>Postcode area</th>
<th>Activity per centre Option B</th>
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In truth, the Southampton network attracts at least 64 less patients than published i.e. 364 cases
The findings were challenged and over turned through the courts by appeal to the Secretary of State.
Another review had failed to deliver top down change... (that involved closing centres)

...but did this matter?
Quality improvement: regulation and governance

Institutional

Commission for Health Improvement
NICE
National Patient Safety Agency
National Clinical Assessment Authority
National Service Frameworks
NHS Leadership Centre
NHS Modernisation Agency
Clinical Reference Groups
PALS
Care Quality Commission
Commissioning for Quality and Innovation (CQIN)
Healthwatch
Acts of Parliament

Individual

Professional Standards Authority
Council for the Regulation of Healthcare Professionals
Medical Education Standards Board
HEE
Annual appraisal
CPD
Revalidation
Nursing and Midwifery Council
Closer to home

We’ve had a Children’s Hospital for some time (1890)

Cardiac surgery since 1969
One of the first female cardiac surgeons in the UK

UK’s first ECMO programme

First ASD device closure in the UK 1995

First catheter delivered aortic valve in the UK 2007
EMCHC PICU

- brand new facility opened in May 2012
- dedicated to cardiac and ECMO patients
- capacity for >400 cases per year
New parent’s accommodation at Glenfield, opened February 2016

- adjacent to PICU and cardiology ward
- exclusive use for parents of children using the cardiac service
- 9 twin rooms with shared kitchen and bathrooms
EMCHC Reconfiguration 2016: ward, outpatients, offices, parents’ accommodation
New vascular surgery and interventional radiology department Glenfield Hospital: 2017
Institute of Advanced Cardiac Imaging 2017
Leicester Children’s Hospital 2018-19
Quality improvement: consolidation

Cardiff to Bristol 1999

Edinburgh to Glasgow 2001

Harefield to Royal Brompton 2001

Oxford to Southampton 2010

Belfast to Dublin 2016
Quality improvement: audit

NCHDA

- 1977 SCTS: voluntary
- 2000 NCHDA: obligatory
- 2003 ACHD
- 2007 public access website
- 2013 PRAiS
- Surgery and cath intervention
- Independent data validation
- >60K surgeries, >40K caths
- 1 of only 3 worldwide

PICANet

- 2002
- Leicester, Leeds, Sheffield
- UK and Ireland
- Consecutive PICU admissions
- Quality improvement agenda
- Research
- HQIP funded (NCA)
Quality improvement: networks of regional life time care

East Midlands Clinical Networks
Fetal Cardiology Network

Paediatric Cardiology Network

Obstetric Cardiology Network

ACHD Network

Related Networks and Services
• Trent Perinatal Network
• Central Newborn Network
• CenTre Neonatal Transport Service
• East Midlands PIC Transport Service
• EMEESY Paediatric Renal Network
• Cancer
• Mental Health
• Health Education England for the EM
The result of these advancements?

...and complexity has increased

Aylin et al BMJ 2004;329:825
“There is a fundamental difference between the circumstances revealed by the Bristol Public Inquiry...and the situation now”

The work of the National Congenital Heart Disease Audit “should ensure that such a situation would now not go undetected”.

June 2016
Timeline of Reviews

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  - 2 surgeons
  - 40-50 open heart ops

2001
- Munro Report
  - Standards
  - 300 unit ops
  - “participate in”

2003
- Safe & Sustainable
  - 4 surgeons
  - 400 ops

2012
- IRP
  - 4 surgeons

2013
- New CHD Review
  - 4 surgeons
  - 500 ops

- Dobson
- Milburn
- Smith
- Hunt
1st April 2013

New Congenital Heart Disease Review

A standards based approach
Develop standards

Agree standards

Assess against standards

Close centres that don’t comply
The knotty issues...

Number of operations
4 surgeons, 125 operations/yr

Co-location
Non-negotiable
You could predict that the following are in trouble

Royal Brompton – no co-location

Leicester– no co-location, won’t reach the surgical activity standard

Newcastle - no co-location, won’t reach the surgical activity standard

Manchester - won’t reach the surgical activity standard, wrong city
The following are in trouble and will be decommissioned

Royal Brompton – no co-location

Leicester– no co-location, won’t reach the surgical activity standard

Manchester - won’t reach the surgical activity standard, wrong city

Newcastle - no co-location, won’t reach the surgical activity standard but do undertake transplant therefore no current plans to decommission
Potential knock on effects...

- **2500** PIC bed days
- **1000** Neonatal & paediatric cardiac inpatient days per year
- **1000** Fetal cardiac outpatient appointments per year
- **474** Paediatric & Neonatal ECMO bed days
- **400** Cardiac catheter procedures per year
- **375** Congenital Cardiac Surgeries
- **40** Mobile ECMO transports
- **12** Specialist Services

Regional decline of Education, training & Research

Limitation of complexity of other procedures
Leicester Children’s Hospital 2018-19
Paediatric Cardiac Patient Flow

*Activity Analysis Update, NHSE, 2014*
Proposed solution for this region

NICOR data 2014-16: 502 operations per year
Leicester...

...will meet the full co-location standard by 2019

...could meet the activity standard by 2021 with a modest change to patient referral within the region
Where next?

“No decision has been made”

“Pre-consultation phase” Sept-Dec 2016

Public consultation Dec 2016 - Jan 2017

Full reviews of ECMO, PICU, Paediatric surgery, transport

Decision by “summer” 2017
Where next?