



A lifetime of specialist care

**PRESS RELEASE**

**8 July 2016**

**\*\*Embargoed until 00:01 Friday 8 July 2016\*\***

**Statement in response to NHS England announcement on congenital heart disease services**

Robert Craig, chief operating officer at Royal Brompton & Harefield NHS Foundation Trust, said:

“We find NHS England’s stated intention extraordinary. We are, however, reassured to see that the idea of removing congenital heart disease services from Royal Brompton is ‘subject to consultation with relevant Trusts and, if appropriate, the wider public’. We fail to see how any logical review of the facts will come to the same conclusion as this panel.

“While we understand the motivation of commissioners to show progress is being made with congenital heart disease services, threatening to withdraw services from one of the largest and most successful centres in the country seems an absurd approach.

“Teams at Royal Brompton Hospital carried out more congenital heart disease (CHD) procedures last year than any other centre in the country<sup>1</sup>. For the past ten years, our experts have undertaken over 500 congenital surgical operations each year (paediatric and adult) and during this time our results have met or exceeded all the standards defined by the regulators. Since 2009 we have consistently been one of the five best-performing centres in terms of mortality rates.

“We are very concerned about where alternative capacity in other hospitals could be found if this ill-conceived proposal were to proceed and are surprised that this information has not been made available already.

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<sup>1</sup>According to the national NICOR database

“Royal Brompton Hospital meets all current standards, with well-developed plans in place to meet the new standards introduced this year. Indeed, in the announcement of the panel’s intentions, the description of a high-performing unit offered by Clare Marx, president of the Royal College of Surgeons, describes Royal Brompton well:

*“Units need to be the right size to enable surgical teams to be familiar and skilled in all conditions, treating these patients on a regular basis to maintain their experience and expertise. It’s absolutely critical that teams are sufficiently staffed to provide secure on-call rotas, disseminate new techniques, and train the next generation of specialists.”*

“We are rightfully proud of the ground-breaking work of our congenital heart disease teams; many of our experts have achieved international recognition for their contribution to the field and are responsible for training large numbers of clinical staff, in the UK and abroad. Many thousands of patients have benefited from their innovative treatment and research and we have a duty to ensure they continue to experience ‘a lifetime of specialist care’.

“The process by which this decision has been made and announced has been deeply disappointing. In February the Trust submitted a self-assessment report on its CHD services, and added supplementary information at NHSE’s request in April. Having had no feedback from NHSE commissioners since then, our chief executive received a phone call on 30 June, followed up by a letter which stated that commissioners were ‘minded’ to stop commissioning specialist congenital heart disease services from the Trust. The letter requested additional evidence to support our position which we were given three working days to supply.

“After submitting detailed information late on 5 July, we were astonished to learn at lunchtime on 6 July that the final decision was being ‘communicated out to trusts’ that same day, giving little or no time for the panel to have reviewed the supplementary details. We were not surprised therefore to learn at 7.23pm that evening that there had been no change to the original decision.

“The consequences of this decision, should it be implemented, would be far-reaching and would affect not only congenital heart disease services for adults and children but also paediatric intensive care: if paediatric cardiac services were moved from Royal Brompton, our paediatric intensive care unit would no longer be viable

because of the drop in volume of patients needing such expertise<sup>2</sup>. In turn this would adversely affect our specialist respiratory services, many of which cannot be delivered without the back-up of a specialist intensive care service. Some adult services such as the nationally-designated pulmonary hypertension service would also be adversely affected because of their inextricable links with congenital heart disease services.

“It is a source of deep regret that once again, our patients and staff are faced with a period of uncertainty and anxiety. Of one thing they can be sure, we will be working closely with NHS England to ensure that full and frank discussions take place to determine what is behind this irrational and reckless announcement and to achieve our shared objective of high-quality services for patients with congenital heart disease.”

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**Notes to editors:**

- **Previous congenital heart disease reviews**  
In February 2011 a proposed re-configuration of the NHS recommended that children’s heart services at Royal Brompton Hospital were discontinued. Legal challenges followed and then in June 2013 the Secretary of State for Health, Jeremy Hunt, suspended the review - Safe and Sustainable - following publication of a report by the Independent Review Panel.
- **Royal Brompton & Harefield NHS Foundation Trust** is a national and international specialist heart and lung centre based in Chelsea, London and Harefield, Middlesex. The Trust helps patients from all age groups who have heart and lung problems and is the country’s largest centre for the treatment of adult congenital heart disease.  
[www.rbht.nhs.uk](http://www.rbht.nhs.uk)

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<sup>2</sup> There is currently a national shortage of PICU beds.