Dean Sullivan
Chair
Paediatric Congenital Heart Services Working Group
Health and Social Care Board
12-22 Linenhall Street
Belfast
BT2 8BS

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Dear Dean

As Commissioner for Children and Young People it is my principal aim, as set out in legislation, to promote and safeguard the rights and best interests of children and young people across Northern Ireland. I welcome the opportunity to respond to the current consultation on the future commissioning of Paediatric Cardiac Surgery and Interventional Cardiology but would note that this submission is not intended to be comprehensive and instead highlights key concerns.

It is important to firstly recognise the obligation placed on government and statutory agencies to ensure that children and young people have access to care and treatment which will enable them to fully enjoy their rights under the United Nations Convention on the Rights of the Child. This includes the article 6 right to life, survival and development to the maximum extent possible and the article 24 right to enjoy the highest attainable standard of health as outlined in the Convention.

In considering the current consultation it is important that children across Northern Ireland should have access to care and treatment that protects their rights, welfare and best interests. It is of paramount concern that they are afforded safe, high quality and accessible care and it is also important that the Department and Board properly plan, resource and secure health services and provision on a long term basis.

While I acknowledge the work that has been undertaken by the Board and the Public Health Agency on behalf of the Department in commissioning the Review Panel led by Sir Ian Kennedy, establishing the Working Group and undertaking the public consultation following this, I must note concerns regarding the overall review and consultation process. These include the rapid timescale during which information relating to Northern Ireland was gathered by the Review Panel and the recent review
requested by the United Kingdom Government into the Kennedy standards which themselves form a substantive basis of this current consultation.

It is important that the Board and Department acknowledge the impact of this on confidence in the consultation process and ensure that the outworking of the ongoing review in England and Wales is properly considered. I would also note that the basis of any review and consultation process in Northern Ireland must properly take account of and reflect the geographical, demographic and healthcare needs of the jurisdiction. Examples of this include Northern Ireland’s small population size and land border with the Republic of Ireland.

While I am not providing detailed comment on the options contained with the consultation document, I would highlight the need to recognise that service safety and service sustainability should not be understood as representing the same underpinning principle or assessment criteria for the provision of care and treatment. For instance, while sustainability of services on a United Kingdom basis may be strengthened by locating care and treatment in a smaller number of larger centres based in England this may negatively impact on the safety of services for children and young people in Northern Ireland who would be located beyond the recommended travel specifications, particularly due to concerns regarding the unreliability of air transport. Indeed, while recognising the interdependence of all the assessment criteria set out in the consultation document it must be noted that the principle of a safe service cannot be considered in isolation from providing an accessible service, particularly in regard to access for emergency and urgent procedures and criteria weighting should reflect this.

In considering those proposed options which include a decision to cease cardiac surgery and interventional cardiology in Northern Ireland I would draw attention to the impact of this on reducing professional skill and expertise in these areas including in relation to the provision of associated paediatric care and treatment for children across both regional and local healthcare settings. It is important to also note the impact this would have on the organisation and delivery of related areas of care including maternity and neonatal services and adolescent and adult cardiology.

Further to this, the Board and Department should consider the implications of this review and consultation process not only in relation to paediatric cardiac care but also in regard to the provision of other treatment in areas which represent ‘small volume’ healthcare services. This reinforces the need to ensure that any review of provision and service specification reflects the needs of the population in Northern Ireland.
In recognising Northern Ireland’s land border with the Republic of Ireland and the established cross-border relationship regarding paediatric cardiology it is of particular importance that the potential of an all-island proposal is fully considered, with provision for highly specialist care being accessed in centres in other parts of the United Kingdom where this is appropriate. Such a proposal should properly explore establishing a joint care network with surgical and interventional services still retained in Northern Ireland to respond to the concerns noted above. In addition to this, issues regarding the capacity and resourcing of an all-island network must be addressed and care should be taken to ensure appropriate regulation and inspection arrangements, which include the provision of comparable data, are in place.

Finally, in acknowledging the specialist nature of care and treatment in this area it is of particular concern that the consultation reflects on the considered opinion of medical and professional staff engaged in delivering care and treatment for Northern Ireland children as well as taking account of the voices of children, young people and families themselves.

Please do not hesitate to contact my office if you require any further information.

Yours sincerely

Patricia Lewsley-Mooney
Commissioner