

*From the Rt Hon Andrew Lansley CBE MP
Secretary of State for Health*



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15 JUN 2012

A handwritten signature in black ink, appearing to read 'Dear Mary,'.

**REFERRAL FROM THE ROYAL BOROUGH OF KENSINGTON
AND CHELSEA'S HEALTH, ENVIRONMENTAL HEALTH AND
ADULT SOCIAL CARE SCRUTINY COMMITTEE "SAFE AND
SUSTAINABLE REVIEW OF CHILDREN'S CONGENITAL
HEART SERVICES"**

Further to your referral letter of 27 March 2012, I asked the Independent Reconfiguration Panel (IRP) for its initial advice.

The Panel has now completed its initial assessment and shared its advice with me.

A copy of their advice is appended to this letter.

That advice will be published on the Panel's website today at www.irpanel.org.uk

In order to make my decision on this matter, I have considered the concerns raised by your Committee and have taken into account the IRP's advice.

IRP advice

Essentially, the Panel has concluded that this referral is not suitable for full review.

In bringing together its advice, the Panel has advised me that:

- while it appears that the absence of a national Joint Health Overview and Scrutiny Committee may have complicated lines of communication, it is clear to the IRP that the Safe and Sustainable team made a considerable effort to explain the proposals, the reasoning behind them and the means by which options for consultation were formulated. This is evident from extensive activity in the pre-consultation engagement phase, during the consultation itself and from work commissioned as a result of feedback from the consultation (most notably the expert panel chaired by Adrian Pollitt);
- the consultation has been the subject of JR, which, ultimately the Court of Appeal found to have been a lawful process. The Court commented that “the decision to constitute the Pollitt panel was an appropriate response to representations made by the Royal Brompton and serves to demonstrate the manner in which the process of consultation can and should work”; and
- the Panel concurs with the view that appropriate steps were, and are continuing to be taken to address concerns raised during the consultation, such as those about respiratory services at the Royal Brompton. Engagement work on this issue is continuing with all interested parties invited to contribute to a report that will be submitted to the JCPCT in June 2012. With the JCPCT decision making meeting scheduled to take place on 4 July 2012, the opportunity exists to consider what, if any, impact the withdrawal of paediatric cardiac surgery from the Royal Brompton would have on the provision of paediatric respiratory services at the hospital. Depending on the nature of that impact, the JCPCT will also have the opportunity to consider what, if any, further engagement work is required in the context of its decision.

Conclusion

As you will appreciate, each referral as you might expect is considered on its own merits.

The Safe and Sustainable Review is a hugely important issue for many people.

Given its importance, on 22 June 2011, it was announced that an independent panel of national and international experts, chaired by Adrian Pollitt had been appointed to advise the JCPCT on the potential impact of children's congenital heart proposals on other services at the Royal Brompton.

I have noted that the report of the independent panel on the relationship of interdependencies at the Royal Brompton published last September states that "although there would be an impact on the range of activity at the hospital, the panel concluded that paediatric respiratory services would remain viable at the Royal Brompton site, in the absence of an on site paediatric intensive care unit".

Having considered all the evidence presented to me, I support in full the initial advice from the Panel.

Further, I appreciate we are at a juncture whereby no final decision has been made with regard to the preferred options under the Safe and Sustainable Review.

I note the Panel has said that with the JCPCT decision-making meeting scheduled to take place on 4 July 2012, the opportunity exists to consider what, if any, impact the withdrawal of paediatric cardiac surgery from the Royal Brompton would have on the provision of paediatric respiratory services at the hospital.

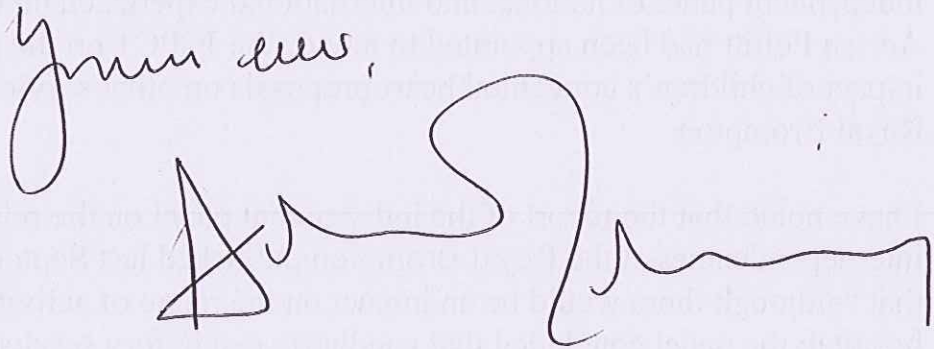
Indeed, the Panel also advises the JCPCT will also have the opportunity to consider what, if any, further engagement work is required in the context of its decision scheduled for early July 2012.

I wholeheartedly support this approach.

The Panel believes the Safe and Sustainable team made considerable effort to explain the proposals underpinning the case for change and the rationale behind it.

In view of this, I believe the review team have acted appropriately in articulating the case for service change during the early engagement stage and during public consultation.

I am copying this letter to Dr Peter Barrett, Chair of the IRP, Dame Ruth Carnall, Chief Executive, NHS London, Sir Neil McKay, Chair of the Joint Committee of Primary Care Trusts and Teresa Moss, Director of the National Specialised Commissioning Team.

Yours sincerely,


ANDREW LANSLEY CBE