

year, the number of out-patients attendance's etc (workload or volume data) and information on the cost of providing these services. This was collated by myself in May 1984 and submitted to the SWRHA. This data collection involved liaison with clinicians to understand the service and to identify the costs relevant to those under the age of 1 year only. This required identification of the length of inpatient stay, average operating time etc. Estimated data for 1984/85, as well as actual for 1983/84 was needed.

9. Each of the subsequent years a request was received from the Department of Health and Social Security for data on the previous year's actual patient volume, current year estimate and future year estimate with an analysis of cost data. All data was submitted through the SWRHA. These submissions included a request for additional funding to meet the cost of expanding services (this is covered in more detail below in response to Issue A7). In particular, in August 1985 a request was made to cover the revenue cost of the planned installation of new diagnostic equipment at the Bristol Royal Hospital for Sick Children (BRHSC).
10. The Bristol service was visited by the Department of Health and later the NHS Executive supra regional service representatives on a number of occasions.
11. Bristol and Weston HA also provided paediatric cardiac surgery and cardiology services to South Wales. However, the level of service provision was increasing annually and the Welsh Office wanted to provide a service in Cardiff. In 1987/88 there were discussions with the Welsh Office about providing Paediatric Cardiac Surgery which did result, because of delays in reaching agreement, in the sending

of letters to each Health Authority, stating that services would be restricted if funding for children over 1 year old was not provided. This was because children over 1 year old were not within the Supra Regional remit and were therefore the responsibility of the Health Authorities, whereas, those under 1 year old were the responsibility of the Welsh Office/DHSS. The SWRHA was present at the majority of the meetings and kept informed of discussions. The Welsh Office did, I recall, fund some additional workload as an interim measure with a view to setting up a service in Cardiff.

12. During the period 1983, to date the B&WHA and subsequently UBHT continued to hold outpatient clinics in South Wales and to undertake surgery in Bristol for referrals from South Wales.
13. In November 1990 we were informed, along with the rest of the National Health Service that the NHS Management Executive would henceforth hold the funds for the Supra Regional Service centrally from 1991/92 and costing data was requested. An outline contract, in line with all other service contracts, was prepared by the NHSE.
14. The Supra Regional Service for neonatal and infant cardiac surgery service was de-designated across the board with effect from 31 March 1994. This had nothing to do with performance; it was an administrative measure. The practical effect was that funding was no longer channelled centrally from the NHS Executive, but was transferred to the individual Health Authorities where the patients resided. For all the trusts involved, it simply meant that the funding for this service would