

## Discussion

The position of the smaller units was last reviewed in 1990 when the Advisory Group decided that it was not possible to dedesignate any of them. Attention was then addressed to those units identified by the Society of Cardiothoracic Surgeons, namely Bristol, Newcastle, Guy's and Harefield.

Since then the problems at Newcastle have been overcome and, in the RCS working party's league tables, moved from 9th place in 1990 to 6th in 1991. The position of Bristol must still be considered uncertain given the expansion of the NICS service in Cardiff. On the league table of activity, Bristol moved from 7th place in 1989 to 8th in 1990 and 9th in 1991. Harefield has consistently been at the bottom of the league but has performed very respectably in terms of having a comparable mortality rate to those other units performing a similar casemix of similar operations. The position at Harefields is made more complex as it receives referrals from other supra regionally designated neonatal and infant cardiac surgical units. Guy's throughput of cardiac surgery has always been on the low side although they have been very much in the lead in interventional cardiological management of some of these infants.

Removing designation from units based solely upon their level of activity is, therefore an option which has already been considered and rejected by the Advisory Group. It would also not necessarily reduce the number of units overall providing the NICS service.

The difficulty facing the Group is the continued designation of the service against the background where it does not seem possible to bring about a rationalisation of the service within the 6/8 units envisaged at the February 1992 meeting. Were members to accept the RCS Working Party recommendations there would be 9 designated units plus the unit in Wales as a minimum. Members may also consider it unlikely that the units at Oxford, Harefield and Guy's would now stop operating in this area.

## Conclusion

Members are invited to consider and comment upon the papers from the RCS working group and Professor Tynan.