

IN CONFIDENCE - NOT FOR DISCLOSURE OR PUBLICATION

SRS(90)6

NEONATAL AND INFANT CARDIAC SURGERY

1. At the February meeting of the Advisory Group, officials were invited to visit the units referred to in the reports of the Royal College of Surgeons and the Society of Cardio-Thoracic Surgeons, and to prepare a paper setting out the options for the future arrangements for these services.

2. At present there are nine designated centres, one of which is a centre formed from two units working jointly. In addition there is a functioning unit which has applied for designation and the Advisory Group is presently considering that application.

3. Of the designated centres three were singled out in the recent reports, as requiring review. The centres in question were Bristol, Newcastle, and the Harefield part of the joint Harefield/Brompton centre. The question of the number of centres required for the London area has been raised on a number of occasions, particularly by the London Health Planning Consortium. Officials therefore set out to visit the following centres; Bristol; Newcastle; Harefield; Brompton; and Guys.

Bristol

4. Officials visited the Bristol unit and met with the cardiologists, cardiac surgeons, nursing staff, and management. The centre had had considerable difficulty in getting the service started. Although the service remains split between two sites there has been considerable capital development in the wards at the BRI and in the diagnostic facilities in the cardiology department of the Children's' hospital. The referral of patients has increased and the centre appeared to be on a much stronger base. There is however a threat to Bristol in the future WHICH arises from the decision by the Welsh Office to establish a neonatal and infant cardiac surgical service in Cardiff. When such a unit is established it will reduce the number of patients referred to Bristol from Wales. Further, a proportion of the patients who could be referred to Bristol in fact go to the Brompton hospital, and it is likely that this referral will continue. Therefore although officials found the Bristol centre to be soundly based and giving every sign that the centre would be a viable designated unit, and despite the fact that geographical spread of the designated centres is desirable, there remains a question mark over the centre's long-term viability in supra regional terms.

But encourage pro tem - Protect it