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Joint briefing from the Oxford Radcliffe Hospitals NHS Trust and Southampton University Hospitals NHS Trust

In the last year, Southampton and Oxford have been developing the South of England Congenital Heart Network. The network is a joint collaboration, led by the surgical centre in Southampton with the full support of both hospitals.

It has the benefit of including one of the country's leading centres for children's heart surgery in Southampton and an outstanding children's cardiology centre at the John Radcliffe Hospital in Oxford. Both of these centres have the expertise and facilities to provide a wide range of care and treatment for patients with congenital heart problems, including their other complex needs, from birth through to adulthood.

For over a year, this network has been working well for patients and clinical teams. In the last year over 100 children who would have had surgery in Oxford, had their operations in Southampton

The collaboration means that Oxford' interventional team has been working in Southampton, enabling Oxford patients to experience continuity of care that would otherwise not have been possible.

Oxford and Southampton are leading the way in creating a network that can provide access to vital services over a large geographical area. The *Safe and Sustainable* review of children's heart surgery services is seeking to close up to four surgical centres and this kind of network arrangement is precisely the kind of model Safe and Sustainable is aspiring to achieve at the centres that remain open.

Southampton and Oxford provide specialist children's heart services for 23 district general hospitals covering a geographical area that stretches from Northamptonshire in the north to Cornwall in the south west. Over 15,000 children attend outpatient appointments for their congenital heart condition at the two hospitals each year.

The South of England Congenital Heart Network is the first demonstration anywhere in the country in which two leading teaching hospitals are working together to merge their tertiary congenital heart units in the context of the Safe and Sustainable principles.

Creating a network of this kind sounds very easy on paper but it is challenging to achieve in practice.

It depends on strong collaborative rather than competitive relationships, based on mutual respect and trust and a genuine desire to provide the best possible care for patients and families. It also requires the confidence and trust of patients and the support of the district general hospitals that are the referral centres.

Oxford and Southampton are ahead of the game. The sensible choice is to ensure the Southampton-Oxford network continues to develop and flourish. It is an example of a model which will keep services as local as possible so that patients only have to travel to another centre when absolutely necessary.

Nick Archer, consultant paediatric cardiologist, at Oxford, said: "This consultation is about services for children with congenital heart disease but in fact this affects a much broader range of services and the access patients need to a wide range of care.

"It includes care over a whole lifetime – from the unborn to adults who have heart problems, children who have sudden unexpected disease and children with a number of other problems for whom cardiac care becomes a vital part of their management.

"Preserving these services locally is important not just for children who have congenital heart conditions; it is important to provide support for other children's services and for children with a wide variety of other conditions.

"The best environment for the provision of children's heart services is one in which foeto-maternal, other children's services and adult cardiac services are all situated. The Oxford and Southampton Hospitals can both provide this co-location which is rarely matched in other centres."

Dr James Gnanapragasam, lead paediatric cardiologist at Southampton University Hospitals NHS Trust said: "The network we have developed with Oxford is robust, long-lasting and based on a genuine desire from both hospitals to provide excellent care for families in the south of England. We are really proud of the excellent working relationships that have developed between the two centres and it is now clear that we can provide the surgical service from Southampton for these patients with a continuation of the very high quality for which we are known."

Oxford therefore supports *Option B*, the option that includes Southampton University Hospitals, as the option to go forward following this review.

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