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Peter Skolar

Thank you for your letter of 28 October about the national review of paediatric cardiac surgery services, the overall aim of which is to ensure that these services are fit for the future. The review process is complex but has been carefully designed to provide opportunities for the public to feed in their views and to keep the public informed as work moves on before reaching the stage of formal public consultation, which is scheduled early in 2011.

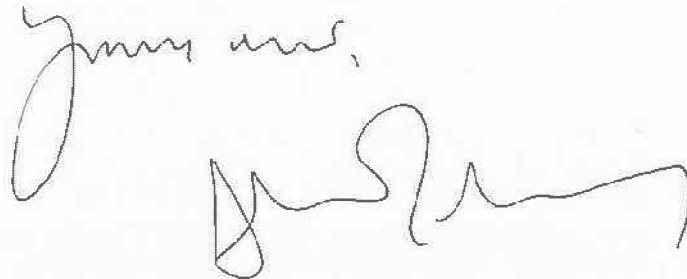
My understanding of the next key stages of the review process is as follows: early in 2011, the Joint Committee of Primary Care Trusts (JCPCT) meet to agree their recommendations, which, as indicated by Sir Neil McKay in his letter of 14 October, may exclude an option with paediatric cardiac surgery at the John Radcliffe Hospital. At this time, the service configuration options, the future service standards and the future service model will all be subject to formal public consultation for around three to four months. A final decision would only be taken once the results of the public consultation have been considered by the JCPCT.

The national review team is currently working through the process of developing the preferred options for consultation and is minded to recommend to the JCPCT that the eventual options for reconfiguration that are put out for public consultation in 2011 do not include the paediatric cardiac surgery service at the John Radcliffe Hospital. Sir Neil therefore felt that the emerging potential recommendations should be shared with the Oxford Radcliffe Hospitals NHS Trust and local scrutiny committees in the interests of transparency and openness with local stakeholders in advance of the JCPCT meeting in the new year when recommendations on options for future services are due to be agreed.

Being excluded from the options would not preclude the Board of the Oxford Radcliffe Hospitals NHS Trust - nor local scrutiny committees and local people - from submitting their views about the future of the service provided by John Radcliffe Hospital. I hope my explanation of the process explains the apparent contradiction in the letter you have received from Sir Neil.

I am confident that the consultation will be meaningful. The national review has recently been commended for its transparency, inclusiveness and effective stakeholder engagement by an independent Office of Government Commerce 'Gateway' review. I also understand that the national review team has recently written to all Health Overview Scrutiny Committees in England (HOSCs) asking them to advise on how they can be best consulted, taking into account local circumstances. I believe that this demonstrates a genuine attempt by the NHS to consult effectively and openly with HOSCs. I would encourage you and local colleagues to make best use of the early dialogue that has been offered.

I have been keeping in close touch with the progress of this review and recognise that this is a significant issue for you locally. However, I am convinced that we must take action now if we are to safeguard services in the future.

A handwritten signature in black ink, appearing to read 'Andrew Lansley', written in a cursive style.

ANDREW LANSLEY CBE