



BRITISH CONGENITAL CARDIAC ASSOCIATION

21 December 2016

Dear BCCA member,

I am writing to update you on events of 2016 and decisions reached at the AGM in November. It has been a somewhat turbulent year for many of you following on the announcement in July of the Commissioners intent with regard to future commissioning of congenital cardiac surgical services.

Since then there has been little further action. Michael Wilson, programme director for NCHDR (New Congenital Heart Disease Review) informed me just prior to the BCCA AGM that a period of public consultation would commence early in 2017 aiming to conclude by springtime. This will allow anyone to express their opinions and concerns at the potential impact of the proposal by the commissioners on those units under threat and equally those units which would have to increase activity to care for displaced patients and their families.

At the AGM several members expressed their concern that the “Standards” were not being applied equally over all units and instead were being interpreted to achieve pre-conceived objectives. A motion was moved that BCCA should commission a survey of members to investigate if this view was shared by the wider membership and if there was still general support among members for the overall aim of the NCHDR.

My personal view was that such a survey would be unlikely to alter much as units were likely to vote according to the position of strength. A similar survey was conducted in 2008 and showed a 2/3 majority in favour of the process which at the time was “Safe and Sustainable”. BCCA have always expressed support for the standards and I expressed concern at the AGM that any alteration in that position would weaken our position as the voice of congenital cardiac services. The motion to conduct a survey was carried by a show of hands at the AGM.

Since then I have received a letter from those who moved the motion stating that on reflection they realise that the survey is likely to be unhelpful for the reasons I outlined above. Instead they have drafted a letter expressing concerns about the impact of the proposed closures on services, patient care and research. Thus it has been decided not to go ahead with a survey as proposed.

BCCA cannot intervene on behalf of any individual unit but can support representations to NHSE, NCHDR and the public consultation process where there is clear failure to interpret or implement the standards fairly. When the public consultation process begins it will be open to all so that is obviously where opinions should be directed. In the interim BCCA will pass on the recent letter to NCHDR expressing support for the concerns outlined.

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Secondly as many will know BCCA is in the process of changing its status to that of a CIO (Charitable Incorporated Organisation). BCCA represents members in the Republic of Ireland and the question arises should this be reflected in the name. A suggestion is BICCA (British and Irish Congenital Cardiac Association). Unfortunately the domain name that goes with that has been taken and other possibilities are either cumbersome or also taken. It looks as though our domain name will still be BCCA-based but the name will include Ireland. I welcome views of members on this and any suggestions that might offer an easy solution. I am keen to include Ireland in the Brexit era.

Finally may I take this opportunity to wish you all a Happy Christmas and a healthy and prosperous New Year.

Yours sincerely

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