

NHS Foundation Trust

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Dear Colleague

I am writing to provide you with information ahead of an inquest into the death of a child who died following cardiac surgery at the Bristol Royal Hospital for Children in spring 2012. The inquest into the death of Sean Turner will commence on Monday 13 January and is currently scheduled to take place over a period of two weeks. The Trust has been working closely with the Coroner to provide all the information required for the inquest to establish the factors which caused Sean's death.

I anticipate that the inquests may attract local and regional media coverage and, as such, I wanted to provide you with up to date assurances regarding the safety and quality of paediatric cardiac surgery services in the Bristol Children's Hospital.

Like all paediatric cardiac units in England, the service's outcomes have and continue to be exposed to considerable review and scrutiny both from within and, importantly, independently through external bodies including the National Institute for Cardiovascular Outcomes Research (NICOR). All of these reviews indicate that Bristol's services are safe and delivering good outcomes for children.

NHS England recently commissioned a review of mortality rates at the ten children's heart centres operating in England and found UH Bristol to be providing a safe service with good outcomes. The review did recommended further investigation into three units based on their outcomes but Bristol Children's Hospital was <u>not</u> one of them.

The most recent national monitoring of quality and safety in NHS Trusts and Foundation Trusts, the CQC's Intelligent Monitoring Report, also confirms UH Bristol to have the lowest possible risk profile (band 6), which is independent confirmation of the strong safety profile of the Trust across both adult and children's services – UH Bristol was one of just 37 Trusts nationally to be afforded this rating.

We are aware that the experience of children and families during their time with us is as important as the excellent clinical results we strive for. The Trust continually seeks feedback from families of their experiences of care at the Bristol Children's Hospital in order to continually improve the service we offer; in a recent survey of parents of children cared for on our specialist paediatric cardiac ward (Ward 32), 99% described their experience as good, very good or excellent.



We are proud that our service continues to develop and the Trust has learnt much from recent events, including the Care Quality Commission's views on the areas where they considered further improvement was warranted. We have worked hard to ensure that all staff understand the importance of truly excellent communication with families, and work together at all times for the benefit of the families they are caring for.

With the support of our commissioners we have now established a dedicated High Dependency Unit (HDU) within Ward 32 which ensures there is additional staff available to support children and their families when they are at their most vulnerable.

As mentioned, I anticipate media interest in the inquest and we are preparing for this; our priority will be to ensure that we maintain the confidence of the families who rely upon us and we will be providing additional support and information to them throughout this period. This will include a telephone contact point for them to access at any time during the inquest alongside enhanced support from our cardiac liaison nurses for those parents who have children in the hospital through this period.

As you would expect, the Trust will not be offering public comment on the inquest proceedings, although media coverage is likely to continue throughout; if you have any questions arising from the inquest coverage or this letter, then please email <u>paediatriccardiacservices@uhbristol.nhs.uk</u> and we ensure a prompt response.

Yours faithfully,

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Robert Woolley Chief Executive

