

APPENDIX 1

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7th February 2011

TO: All Health Overview and Scrutiny Committee Chairs and Officers
Cheshire and Merseyside Area -

Cllr Wendy Johnson, Warrington Council
Cllr Joe Pearson, St Helens Council
Cllr N D Ash, Wigan Council
Cllr Bob Swann, Knowsley Council
Cllr Ellen Cargill, Halton Council
Cllr Anthony Hill and Cllr Paul Larkin, Sefton Council
Cllr Roz Gladden, Liverpool Council
Cllr Moira McLaughlin, Wirral Council
Cllr Andrew Thwaite, Cheshire East Council
Cllr Andrew Dawson, Cheshire West & Chester

Dear Councillor Cargill,

RE: Cheshire and Merseyside Vascular Service Review – Engagement with Health Overview and Scrutiny Committees

As you may be aware, the NHS in Cheshire and Merseyside is considering how it could improve the organisation of vascular services. Vascular services are for people with disorders of the arteries and veins. These include narrowing or widening of arteries, blocked vessels and varicose veins, but not diseases of the heart and vessels in the chest. I enclose a document which explains what we propose and why.

There is mounting evidence that patients who have their vascular operations in hospitals that do a large numbers of these procedures have fewer complications and lower death rates. We are currently engaging with the public and other stakeholders about the way we propose to change services in Cheshire and Merseyside. We want to achieve a balance between continuing to have more routine vascular services available locally and centralising major vascular operations to get the best outcomes for patients. The hospital consultants who deliver the service are fully supportive of the changes and we have worked closely with them.

We have organised a meeting for NHS stakeholders and there will be a public meeting on 10 February, to which you have been invited. We are also attending a joint meeting with several Merseyside oversight and scrutiny committees. Once this process is complete, we will specify the quality standards that arterial centres will need to deliver and the appropriate number of such centres in Cheshire and Merseyside. We expect to complete this work in May 2011.

The engagement we are now having provides a valuable opportunity to learn more about stakeholders' reactions to these changes. The main purpose of the change is to improve safety by ensuring that patients

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only have higher risk arterial surgery at sites able to achieve the best results. The change in the service is limited; as you will see from the document, for many patients using vascular services there will be no change, and for others the change is confined to where their admission takes place, with the rest of their care as it is now. For these reasons, we are coming to the view that this does not represent a substantive change of service and so a formal consultation process is unlikely to be required, but this is of course a matter for you to determine.

So that we can plan the rest of the process, I would be grateful for your views on whether a formal consultation process is required, by 28 February 2011.

Yours sincerely

Paul Brickwood

Yours sincerely



**PAUL BRICKWOOD
DIRECTOR OF FINANCE & COMMISSIONING, NHS KNOWSLEY
AND SENIOR PROJECT OFFICER, VASCULAR REVIEW, CHESHIRE AND MERSEYSIDE**

Enc: Consultation document