Education, Children & Young People Scrutiny Panel's visit to Southampton General Hospital on 17 February.

Present
Councillor James Williams
Lynne Stagg
Margaret Adair
Andy Fraser

Alison Ayres, Director of communications and public engagement Ian McIntosh, Director of Paediatric Intensive Care Tony Salmon, Paediatric Consultant.

The Panel visited Heartbeat House, the Paediatric Intensive Care Unit, the Paediatric, the paediatric cardiac ward and one of the laboratories.

Patients are diagnosed and stabilised in their local hospital from as far afield as the Channel Islands, Oxford, Worthing and Plymouth. Once they are stabilised staff from SGH collect them. The paediatricians at Queen Alexandra Hospital are very good at diagnosing conditions.

The Paediatric Unit treated 900 patients last year and 350 of whom had cardiac conditions. Most were very young. The majority of patients require several interventions or operations during their lifetime. Between 16 and 18 years old the patient can enter the adult ward. Those with cardiac problems tend to be less developed emotionally, so the children's ward is more appropriate.

The Kennedy Report rated the management of paediatric cardiac services as exemplary.

The Paediatric Intensive Care unit, the Adult Intensive Care and the Cardiac care share some equipment e.g. haemofiltration devices but each has specialist staff.

Heartbeat House.

Wessex Heart Beat opened Heartbeat House in 1992 at a cost of £4m. This was partly sponsored by the Ronald McDonald charity. The accommodation for families with children in the ICU is within the hospital.

There are two sections to the house: one for families with children staying with them and those without. The main house has 25 bedrooms - some with twin beds or three beds. A key deposit of £20 is paid at the start of their stay. Each family has a cupboard in the kitchen and can cook.

Paediatric Cardiac Intensive Care Unit.

There are 14 spaces but there is funding for 13. In November 2010 it increased from 11. Each bed has one static nurse to monitor the child and one mobile nurse to assist. There is capacity to expand the unit. On the day of the visit, 5 out of 11 beds were being used for cardiac patients and another 3 arriving later that day.

The unit has a very good reputation with great outcomes (the lowest mortality rate in the country for mixed ICUs). It has never been investigated for poor performance. It has a very low turnover rate (1 person out of 100 left in the last year). It is a very popular hospital to work in. It serves 13 hospitals.

1959 the first heart transplant was carried out in Africa.

Ocean Ward (Paediatric Cardiac Ward).

This is situated very close to the adult ward so the transition to adult services is easier. 50% of child patients may need further interventions in adulthood. From the age of 11 patients are more involved in their own care.

The Reef Room is primarily for teenagers and has games consoles, dongles for laptops, computers, small kitchen area, TV, sofa and a snooker table.

Oyster Bay is a high care unit for patients coming out of ICU. It has 4 beds and there are no restrictions on visitors.

Shell Bay is a 4 bed nursery area. The emphasis is on helping parents care for their babies.

After discharge, parents return with their children for a follow-up visit.

There is also a kitchen and a guiet room.

A young adult ward will be built in about 18 months time.

There is a school on G level where staff can arrange for school work to be sent to patients and examinations can be taken there.

Laboratory.

Interventions are carried out here during which a surgeon is on site. Patients can choose whether to have a local or a general anaesthetic.

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