



From Edward Argar MP Minister of State for Health

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Our Reference: PFD-1196556

Ms Rachel Galloway
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5^{nt} March 2020

Dens Mo Galloway,

Thank you for your letter of 5 November 2019 to Matt Hancock about the death of Mr Stuart Clarke. I am replying as Minister with responsibility for elective care and I am grateful for the additional time in which to do so.

Firstly, I would like to extend my deepest sympathies to Mr Clarke's family and loved ones. I understand how distressing it is to lose a loved one and concerns about the timeliness of the medical treatment Mr Clarke received must be particularly upsetting. We must do all we can to learn from Mr Clarke's death to make improvements and prevent future deaths.

You issued your report to NHS England and NHS Improvement and the National Institute for Health and Care Excellence (NICE). You will therefore be aware from their responses that existing NICE guidance on chronic heart failure¹, issued in 2018, does not specify a time in which patients with chronic heart failure thought to be caused by heart valve disease should be seen by a specialist. The timing of any intervention is a matter of clinical judgement and services should be arranged to support the provision of timely and appropriate clinical care.

I note that NICE is currently developing a clinical guideline on heart valve disease in adults and the guideline is expected to cover investigation and management of the condition, as well as indications for the referral of patients from primary to specialist care. I understand that the matters of concern in your report about the circumstances of Mr Clarke's treatment journey will be made known to those developing the guideline.

The provision of Transcatheter Aortic Valve Implantation (TAVI) services in Greater Manchester is a matter for the relevant NHS acute trust, with oversight from NHS England as the commissioner of specialised services. It is for the NHS in Greater Manchester to

¹ https://www.nice_org.uk/guidance/ng106

work with NHS England to ensure that services meet the healthcare needs of patients with heart valve disease.

I am advised that the Manchester University NHS Foundation Trust, which is the only NHS trust in Greater Manchester to provide TAVI, is looking at how it can improve processes to support quicker diagnosis and treatment for patients with suspected heart valve disease. In addition, the Greater Manchester Cardiac Network is looking at what more can be done to support GPs across Greater Manchester to identify and refer patients with heart problems in good time to the right heart specialist centre.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

EDWARD ARGAR MP