

St George's University Hospitals NHS Foundation Trust

Cardiac Surgery

Risk-based Review (senior leads conversation)



Quality Review report

13 May 2019

Final report

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Quality Review details

Training programme	Cardiac Surgery
Background to review	<p>The department has been subject to ongoing monitoring by NHS Improvement, the Care Quality Commission, the General Medical Council, Clinical Commissioning Groups and Health Education England. This was triggered by consecutive mortality alerts from NICOR and concerns around the culture in the cardiac surgery department relating to a group of consultant surgeons, the consequent suspension of two consultants and the transfer of the high-risk cardiac surgery service to other Trust facilities. This impacted on postgraduate medical training and resulted in the decision to temporarily suspend cardiac surgery training posts.</p> <p>The purpose of this follow up Risk-based Review (senior leads conversation) was to assess the steps the Trust had taken to address the issues around the culture within the Department and to help coordinate discussions around the appropriate timeframe for the return of the cardiac surgery trainees into the department.</p>
HEE quality review team	<p>Professor Geeta Menon Postgraduate Dean Health Education England (South London)</p> <p>Mr John Brecknell Head of School for Surgery</p> <p>Samara Morgan Principal Education QA Programme Manager General Medical Council</p> <p>Paul Smollen Deputy Head of Quality, Patient Safety and Commissioning Health Education England (London)</p> <p>Bindiya Dhanak Learning Environment Quality Coordinator Quality, Patient Safety & Commissioning Team</p>

Trust attendees	<p>The review team met with a number of the senior management within the department including:</p> <ul style="list-style-type: none"> - Medical Director - Associate Medical Director for Cardiac Surgery - Associate Director for Medical Education - Divisional Chair for Vascular Surgery
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Conversation details

GMC Theme	Summary of discussions	Action to be taken? Y/N
1	<p>Trust Presentation</p> <p>The review team congratulated the Associate Medical Director for Cardiac Surgery (AMDCS) on their recent permanent appointment at the Trust. The Medical Director (MD) informed the review team that the Trust were in the process of re-advertising the Director of Medical Education (DME) role, it was noted that the role had been offered to a consultant within the Trust who had declined. The review team heard that in the interim each division had oversight by an Associate DME (ADME).</p> <p>The AMDCS notified the review team that the department had trust grade doctors in higher trainee level roles who had been brought in to cover the vacant posts due to the suspension of training and that they were performing well. It was noted that the case levels had not changed since the previous educational lead conversation (ELC) that took place in February 2019 with roughly 60 cases a month. It was noted that capacity had decreased and the department were operating on ten theatre slots a week in comparison to previously operating on 14 theatre slots a week.</p>	
2	<p>Department update</p> <p>The review team heard from the AMDCS that the multidisciplinary team (MDT) was functioning well and was reported that no patient is operated on unless this was agreed at the MDT. It was reported that the overall culture and departmental governance had improved and was described to the review team as good with an established mortality meeting and care group meeting in place. The review team heard that there had been three fatalities had occurred since the last educational lead conversation (ELC) in February 2019.</p> <p>When asked about the work that had been undertaken by the behavioural psychologist in addressing the issues around bullying within the department, the review team heard that the behavioural psychologist had come in to access the department and had produced a report which had been shared with the AMDCS. The review team heard that they were in the diagnostic phase of the process and the AMDCS highlighted that the report had not identified any worrying issues that hadn't been identified before.</p> <p>When asked about the review carried out by Julia Hollywood in 2018, the MD informed the review team that the Trust had decided that this report did not help to address any cultural issues within the department and decided to take no further action or publish the report.</p>	

	<p>When asked about the cardiothoracic surgery network in South London, the AMDCS informed the review team that a meeting had been arranged for the following week with Guy's and St Thomas' NHS Foundation Trust (GSTT) and Kings College Hospital NHS Foundation Trust (KCH) to discuss collaborative working opportunities.</p>	
3	<p>Investigation into post-operative deaths</p> <p>The MD gave an update with regards to the review which had been commissioned by NHSI to look into all the post-operative deaths within the past five years to assess how many of these could have potentially been avoided. It was reported that the total number of patient deaths was 201 and that each death was being looked into individually . The MD noted that the panel for the review had been meeting regularly and was under the impression that the process would be finished in July 2019. The review team heard that the chair of the panel and the NHSI representative would be attending the Trust Board meeting in June 2019 to present an interim update to the Trust in a private meeting.</p> <p>The MD was able to report to the review team that the initial work that had been conducted had identified cases where they had felt the quality of care was below what was expected. It was noted that whilst the report would be formed as constructive as possible, it was heard by the review team that the final report would inevitably be available within the public domain in September 2019. Whilst the Trust anticipated that this would be a difficult time, the MD felt that with good culture and leadership in a department that was functioning safely, if trainees returned in October 2019, they would go through this period without feeling particularly negative.</p>	
4	<p>Resumption of training</p> <p>The review team heard that the previously mentioned reduction in the number of cases would benefit more junior trainees as this would allow a valuable training experience for them alongside consultants and trust grade doctors. It was felt by the Trust that the returning trainees ST1-3 would have exposure to a varied case mix and a high amount of theatre experience. It was heard by the review team that there was high consultant presence and support for the junior trainees, when they returned to post, from the mature trust grade doctors. The review team also heard that there was a consultant of the week and ward rounds twice a day.</p> <p>Whilst the Trust felt that it was in a position to have junior trainees return from October 2019 onwards, the review team felt that with the Mortality review report expected to be published in September 2019, this would leave the junior trainees in a vulnerable position with regards to the media exposure this would have and the trainees would better benefit from returning in April 2020.</p>	

Next steps

Conclusion

Following this Senior Leads Conversation on 13 May 2019 and further consultation at the Quality Summit with representation from NHS England, NHS Improvement, Care Quality Commission and the GMC on 20 May 2019, HEE will be extending the period of suspension for an additional six months to cover the period 02 October 2019 to 31 March 2020.

In terms of the next steps, HEE would like to undertake a follow-up Senior Leads Conversation (SLC) with the relevant Trust leads during November 2019 to further assess progress against the action plan and determine whether Cardiac Surgery could reassume training status. We would appreciate your support in ensuring that these SLCs are scheduled as a matter of priority. HEE remain committed to working with the Trust to improve the Cardiac Surgery learning environment and St George's University Hospital to minimise the length of time this temporary suspension will be in place.

Requirements / Recommendations

Mandatory Requirements			
Req. Ref No.	Requirement	Required Actions / Evidence	GMC Req. No.
	N/A		

Recommendations			
Rec. Ref No.	Recommendation	Recommended Actions	GMC Req. No.
	N/A		

Other Actions (including actions to be taken by Health Education England)	
Requirement	Responsibility
N/A	

Signed	
By the HEE Review Lead on behalf of the Quality Review Team:	Professor Geeta Menon, Postgraduate Dean, Health Education England
Date:	1 August 2019

What happens next?

We will add any requirements or recommendations generated during this review to your LEP master action plan. These actions will be monitored via our usual action planning process. An initial response will be due within two weeks of receipt of this summary report.