



GIG
CYMRU
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WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	29 March 2022		Agenda Item	5.1
Report Title	Progress report on the review of cardiac services improvement plan			
Report Author	Dr Richard Evans			
Report Sponsor	Dr Richard Evans			
Presented by	Dr Richard Evans			
Freedom of Information	Open			
Purpose of the Report	<ul style="list-style-type: none"> To update the Quality and Safety Committee on the Getting it Right First Time (GIRFT) report on the Cardiac Surgery service at Swansea Bay UHB. To give assurance on the range of actions taken, the improvement plan in progress, and key deliverables. 			
Key Issues	<ul style="list-style-type: none"> The GIRFT report noted that overall mortality from cardiac surgery was consistent with the UK national average. Concerns were expressed about mortality from mitral valve surgery, several quality indicators, and clinical pathway/process issues. An improvement plan has been developed in conjunction with WHSSC and agreed. WHSSC have de-escalated the service to Stage 3. The Royal College of Surgeons have confirmed that they will undertake a review of the service in March 2022 The report, actions taken to date, and the improvement plan have been shared with key stakeholders. 			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> NOTE the report NOTE the progress made <p><u>Items for information will not be allocated time for consideration within the Board/Committee meeting.</u></p>			

PROGRESS REPORT ON ACTIONS TAKEN IN RESPONSE TO GIRFT REPORT ON CARDIAC SURGERY

1. INTRODUCTION

Cardiac surgical services in Wales are commissioned by the Welsh Health Specialised Services Committee (WHSSC) and are undertaken at two centres: the University Hospital of Wales in Cardiff and Morriston Hospital in Swansea Bay UHB (SBUHB).

2. BACKGROUND

WHSSC commissioned Getting it Right First Time (GIRFT) to review both services in Wales due to a concern about health boards meeting their commissioned figures for procedures undertaken. GIRFT presented their findings to SBUHB at the end of June 2021. The GIRFT team:

- Observed that Morriston is a small cardiac unit (29th of 31 centres in England and Wales) and performs the second-lowest number of aortovascular procedures per year in England and Wales
- Reported that the overall outcome (mortality) of cardiac surgery is consistent with the average for England and Wales
- Raised specific concerns and made recommendations about our outlier status in four aspects - quality metrics, mitral valve surgery outcomes, patient pathway and process issues (bed occupancy, length of stay and waiting times), and aortovascular surgery (a pan-Wales issue).
- Quality metrics: there were higher observed rates of Deep Sternal Wound Infection; return to theatre following surgery (for all cause and for bleeding); post-operative neurological dysfunction; post-operative renal dysfunction; and a higher than expected mortality for mitral valve surgery.

Outcomes and quality measures for all cardiac services in the UK are collated and published through the annual National Adult Cardiac Surgery Audit (NACSA). This national audit, which publishes data for three consecutive years, is undertaken through data submitted from each surgical centre through the National Institute for Cardiovascular Outcomes research (NICOR). Some of the data presented by GIRFT differs from the outcomes for the Morriston unit that are presented in the NACSA audit and the reasons for these differences are being explored further.

Actions taken

Immediate actions taken

GIRFT recommended that all surgery should only be undertaken by consultants and that all mitral valve surgery should only be undertaken by the two mitral valve specialists. These recommendations were put in place immediately by the Executive Medical Director.

Executive oversight

The Executive Medical Director has convened a Gold command to oversee the development of a comprehensive action plan. A Silver command structure has been established in the Morriston Service Group, comprising clinical and managerial leads from the Service Group and cardiac surgical service.

An action plan has been developed in conjunction with WHSSC to ensure that the identified actions address the issues raised in a timely way (Appendix 1).

WHSSC have formally de-escalated the service to Stage 3.

Support from the Royal College of Surgeons and Society for Cardiothoracic Surgery

The Executive Medical Director has also discussed the report with the President of the Society of Cardiothoracic Surgery and with the Royal College of Surgeons (RCS), and has commissioned an Invited Review of the service, with the aim of advising on best practice in relation to quality governance and an aspiration for continuous service improvement; and to undertake a casenote review of the patients who died following mitral valve surgery.

RCS have confirmed the date of the visit for 28-30th March 2022.

Communication

The report and the action plan has been shared with Welsh Government, Healthcare Inspectorate Wales (HIW), Audit Wales, and the Ombudsman. Executive colleagues in other health boards (Hywel Dda, Powys, Cwm Taf Morgannwg, Cardiff and Vale) have also been informed.

The Health Board has contacted the families of the patients who died following mitral valve surgery to inform them that further investigation into their deaths will be taking place and to offer the opportunity to discuss the care of their relative.

A report was presented to the Health Board on 7th October 2021, at which the Board approved the approach and action plan, and for the Quality and Safety Committee to have oversight of the implementation of the improvement plan.

3. GOVERNANCE AND RISK ISSUES

The immediate actions put in place on GIRFT and WHSSC's recommendations are aimed to mitigate risk in mitral valve surgery.

Regular 6-weekly escalation meetings have been arranged so that WHSSC can be assured of the timely actions being taken.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications following receipt of the report.

5. RECOMMENDATION

The Quality & Safety Committee is asked to note the report, and to approve the actions being taken as described in the improvement plan.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
The GIRFT report highlights concerns regarding quality, safety and patient experience. The actions being taken will address these comprehensively.		
Financial Implications		
No direct financial implications following receipt of the report.		
Legal Implications (including equality and diversity assessment)		
Currently not thought to be any legal implications		
Staffing Implications		
No direct implications following receipt of the report.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
None		
Report History	Previous verbal update to Board In-Committee 29/07/2021 Report to Quality & Safety In-Committee 24/08/2021 Report to Health Board 07/10/2021 Report to Quality and Safety Committee 26/10/2021 Report to Quality and Safety Committee 23/11/2021 Report to Quality and Safety Committee 21/12/2021	
Appendices	Cardiac Surgery Action Plan – March 2022	