



Medical Leader	<input type="checkbox"/>
Medical Expert	•
Communicator	•
Advocate	
Scholar	•
Professional	
Collaborator	
Manager	

## Obstetrician With Complications

2014 Day 1 – Q2 (Compulsory)

You are the Director Medical Services of a tertiary public hospital which provides tertiary and quaternary level obstetrics and gynecology services.

Your Chief Executive receives a letter from the Head of Obstetrics and Gynecology advising that he has serious concerns regarding the operative outcomes of one of the Obstetricians and Gynecologists who works both at your hospital and also at the co-located private hospital. Included in the letter is a copy of a letter from one of his colleagues from the private hospital reporting that the consultant of concern has recently performed 2 hysterectomy cases, both complicated by ureteric injury. There are no further details of the cases provided and the Head of Department is unable to provide you with any further information.

You have not heard of any complaints regarding this consultant for work performed at your public hospital.

When you talk to nursing staff in the public hospital department it becomes obvious that there is little in the way of clinical governance structures and processes. Members of the nursing staff also state that registrars are intimidated by the approach of consultant staff in the department to any review of clinical incidents and it is very much a 'blame' culture in response to clinical errors. You know that the department for a long time has had difficulty in recruiting registrars despite having a large department and clinical load and the college is closely examining their accreditation for registrar training.

**The Chief Executive asks for you to investigate the concerns and provide him with a report. How will you manage this situation?**

## Censor's Notes

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Issues to raise and manage:

1. Clinical governance - knowledge
2. Management of a concern or complaint about a clinician - Procedural fairness and natural justice, who else to engage and assist in process? – knowledge and skill
3. Seek identification of cases/issues within your hospital to review – audit, data comparison with peers (LOS, unplanned returns to theatre, theatre schedule and overruns, consultation with other specialties, clinical indicators and benchmarking data)
4. Review clinical records if possible and ensure immediate risk issues are well managed – raise issue of confidentiality and difficulty in seeking information regarding performance at the private hospital - again PF and NJ)
5. Review complaints and incident data
6. Seek assistance of DoN to set up review team – interview nurses and registrars
7. Review Clinical Governance system in department and consider overall structure – multidisciplinary, morbidity and mortality meetings, incident monitoring management and reporting, RCAs, appropriate committee structures, credentialing processes, review of appointment and timing
8. Accreditation reports from the college Competency of head of department – performance reviews of staff in the department, record keeping and schedule of reviews
9. Cultural issues and impact on performance i.e. Addressing culture of the department
10. Policy and process for Investigation into clinician e.g. review committee? audit of public hospital work, assessment of competency, referral to Medical Board