



tel :2871 8844

fax: 2580 7071

e-mail: hkccm@hkam.hk

Administrative Medicine Part II Fellowship Examination 2009

Q5 You are the newly appointed HCE of a large Hong Kong regional hospital. As you are driving to the hospital one morning, you receive a phone call from an orthopaedic surgeon who informs you that a patient admitted under his team has died overnight. The patient, aged 82, was himself a former LegCo member and is the father of a prominent member of the local community. He had been admitted 5 days previously suffering from low back pain and had a history of significant cardiovascular disease and recent surgery for venous insufficiency in his left leg. The patient had died suddenly and unexpectedly the previous night, whilst awaiting planned investigations to determine the cause of his back pain. The death has been reported to the coroner's office. The surgeon tells you that the family is angry and that he himself is just on his way to perform an elective surgical list in another hospital within the same cluster, where he has regular sessional service commitments. He suggests that it is your responsibility to manage the situation.

The General Manager (Nursing) of the hospital has previously advised you that she has had issues in the past with this surgeon's performance with particular reference to his attitude to nursing staff, supervision of junior doctors and lack/ late attendance during service hours.

You can hear "call waiting" signal on your phone and when you take this call it is a reporter from one of the local papers asking for your comments on the death of the former LegCo member.

Your hospital has a robust clinical governance programme in place and has recently started a staff training programme on Open Disclosure. Neither you nor the orthopaedic surgeon has yet attended one of these training sessions.

Describe your immediate response to this situation and what further subsequent actions you would take in response to this event.



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Q5 Possible Supplementary Questions

For Examiner

1. Impairment-- there is some informal information that this surgeon may be taking drugs which affect his performance. How would this change your approach?
2. Clinical Governance-- during your review of the patient's medical records you note that there has been a progressive drop in BP since admission. The drop was sufficiently significant that on the evening prior to his death he had met the mandatory criteria for the staff to call the recently formed Medical Emergency Team (MET). There is no record of this occurring. What would you do in response to this finding?



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Q5 Key Points

Immediate response

Communication

- early operational debriefing of relevant staff for a clear picture of events leading up to the patient's death and subsequent communications with family members
- respective roles of line management and Patient Relations Officer, Media Relations Officer
- early meeting and information exchange with family members, including bereavement support, commitment to open disclosure, natural justice and procedural fairness, possible medicolegal implications (coroner's case). Identify key concerns with commitment to follow up and feedback
- management 'up' -- other senior staff and hospital governing bodies
- media management and line to take ? press release/ press briefing required
- commitment to risk management, ? need for RCA and subsequent application of relevant recommendations
- commitment to care of the elderly
- evidence based management of diseases

Risk management

- Identification of high risk scenario for response and management
- assess medico-legal implications and subsequent appropriate actions
- management of orthopaedic team and other patients/ relatives' concerns
- brief relevant senior management (cluster and head office) and organization's media reps
- media-- medical and political
- local community



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Medical manager

- existing clinical governance -- performance management, recent safety inquiries with recommendations ? relevance to this case ? recent RCAs ? credentialling issues
- manpower and funding issues
- rostering, supervision, seniority ? HR issues
- conflict resolution needed?

Subsequent Response

- F/U on risk management/ RCA-- feedback to family
- Review of hospital incident management
- Review of staff and team performance-- including management of possible impaired colleagues/ team conflicts
- Health Advocate-- ethical and effective care of elderly