



## **Administrative Medicine Part II Fellowship Examination 2010**

Q2 You are the Service Director of Clinical Services at a large and very profitable private hospital with flagship cardiac services. You have been in post for about 12 months and have taken up the challenge of establishing clinical governance structures and processes (these were at a rather rudimentary stage of development on your arrival). You work for a Chief Executive Officer who is renowned for his ability to attract high-flyer surgeons to the hospital and his connections to politicians.

You have noticed with concern a trend in the quality data from cardiac surgery – high rates of complications and unexpected returns to theatre. You mentioned this to the Chief Executive Officer on one occasion. His response was initially one of shock – these two surgeons alone helped the hospital generate a major profit in the last financial year. He quickly reassured you that these surgeons came with the strongest international reputation and he was very confident in their abilities.

Initially reassured, you have however also noted with concern unexpected deaths occurring over time for both surgeons at a much higher rate than you would have expected.

Your secretary interrupts your musings to advise that a reporter from the tabloid press is on the telephone line. Curious, you take the call. The reporter wants to discuss the anonymous allegation that patients are dying because of the actions of these surgeons and that management has been covering for them because they produce tremendous profits for the hospital.

What do you do?



## Administrative Medicine Part II Fellowship Examination 2010

### Q2 Key Points

For Examiner

#### Issues

Media management

Investigating adverse events or undesirable clinical outcome

Clinical governance structures

#### Plan to address them

Immediate

Short term

Long term

#### This question covers the following CANMEDS Domains:

1. Medical expert:
  - a. Clinical issues
2. Communicator
  - a. Dealing with the media
  - b. Reporting – who to brief, in what order and what to say
3. Professional
  - a. Personal and organisational ethics – recognises tension inherent in divergence and can articulate an approach to dealing with
  - b. Managing self in ambiguous environment
4. Health advocate
5. Manager
  - a. Clinical governance systems
  - b. Managing immediate crisis
  - c. Reporting serious safety and quality issues
  - d. Handling politically and personally sensitive issues