INDEPENDENT SCRUTINY PANEL FOR CARDIAC SURGICAL SERVICES AT ST GEORGE'S UNIVERSITY HOSPITAL FOUNDATION TRUST ("THE TRUST")

1 Purpose

To scrutinise the Trust's response to the reviews undertaken in respect of the cardiac surgical services at St George's NHS Foundation Trust, to advise the Trust to ensure that the actions taken are appropriate and that implementation of recommendations is effective.

2 Background

A series of reviews and correspondence from experts¹ have identified that there are longstanding issues with the cardiac surgical services at the Trust. The Trust has asked, and NHS Improvement has agreed, to set up an independent panel (the "Panel") to advise, challenge and support the Trust's actions in addressing those issues and related work force challenges in a comprehensive and appropriate manner, with a view to ensuring the quality and safety of those services. The Panel will also report back to NHS Improvement on its work.

3 Duties

- 3.1 The Panel's duties will be to use their specialist knowledge and experience to:
 - 3.1.1 scrutinise and challenge the Trust Board's proposed actions in relation to its cardiac surgical services and related workforce challenges with a view to ensuring they deliver the required improvements to the cardiac surgical unit, including considering whether the Trust's proposed action regarding the following matters are sufficient and appropriate:
 - 3.1.1.1 implementing the recommendations from the report by Dr Bewick;
 - 3.1.1.2 responding to, and implementing the recommendations from the forthcoming report by Julia Hollywood;
 - 3.1.1.3 co-operating with and responding to the external review commissioned by NHS Improvement of all patients who died following cardiac surgery between 2013 and 2017; and
 - 3.1.1.4 the making of key decisions about the overall management of the cardiac unit, including in relation to staffing;
 - 3.1.2 to provide advice and support to the Chief Executive and Trust Board, and be a "critical friend", in relation to their planned actions (including mitigating identified risks) for improving cardiac surgical services;
- 3.2 The Panel will:

¹ Including the review by Dr Bewick and two alerts from the National Institute for Cardiovascular Outcomes Research (NICOR).

- 3.2.1 agree with NHS Improvement its proposals for the work to be carried out by the Panel in exercise of the duties specified in paragraph 3.1, at such times, and in a manner, to be agreed with NHS Improvement; and
- 3.2.2 report back to NHS Improvement (via its Chair) on its work in a manner to be agreed with NHS Improvement, including identifying any areas of concern, with a view to assisting NHS Improvement's continued oversight of the Trust.
- 3.3 The Panel will make recommendations and provide advice, however the Trust's Board will remain responsible and accountable for decision making at the Trust, including determining what actions to take in relation to its cardiac surgical services.
- 3.4 The Panel is not intended to replace the Trust's own professional advisers.

4 Membership

- 4.1 The Panel will be chaired by an experienced NHS leader and will consist of the following additional experts:
 - 4.1.1 senior doctor with extensive experience as a Medical Director;
 - 4.1.2 experienced cardiologist;
 - 4.1.3 experienced cardiothoracic surgeon;
 - 4.1.4 experienced nurse; and
 - 4.1.5 experts in Human resources and employment matters in the NHS.
- 4.2 The Chair may nominate one of the members of the Panel to be Vice Chair.
- 4.3 The Chair may add additional members to the Panel, with the agreement of NHS Improvement.
- 4.4 Each of the Panel members will be responsible for declaring to the Panel, NHS Improvement and the Trust any conflicts, or potential conflicts, of interest that arise or may arise. Any such conflicts will be addressed in a manner that is mutually satisfactory to the Panel, NHS Improvement and the Trust.
- 4.5 The Panel may call upon experts to advise it, with the agreement of NHS Improvement.

5 Duration

- 5.1 The Panel's work will continue until such date as NHS Improvement may, following consultation with the Chair and the Trust, determine, up to a maximum period of nine months (unless exceptional circumstances apply).
- 5.2 The frequency and format of meetings will be agreed between the Panel and NHS Improvement.

6 Support

6.1 Secretarial support for the Panel will be provided by NHS Improvement.